ILLINOIS HEALTH FACILITIES AND SERVICES REVIEW BOARD
DISCONTINUATION APPLICATION FOR EXEMPTION

SECTION I. IDENTIFICATION, GENERAL INFORMATION, AND CERTIFICATION

Facility/Project Identification

Facility Name: Rush Oak Park Hospital
Street Address: 520 South Maple Avenue
City and Zip Code: Oak Park, IL 60304
County: Cook Health Service Area 7 Health Planning Area: A-06

Applicant(s) [Provide for each applicant (refer to Part 1130.220)]

Exact Legal Name: Rush Oak Park Hospital, Inc.
Street Address: 520 South Maple Avenue
City and Zip Code: Oak Park, IL 60304
Name of Registered Agent: Carl Bergetz
Registered Agent Street Address: 1700 West Van Buren Street, Suite 301
Registered Agent City and Zip Code: Chicago, IL 60612
Name of Chief Executive Officer: Bruce Elegant
CEO Street Address: 520 South Maple Avenue
CEO City and Zip Code: Oak Park, Il 60304
CEO Telephone Number: (708) 660-6660

Type of Ownership of Applicants

☒ Non-profit Corporation ☐ Partnership
☐ For-profit Corporation ☐ Governmental
☐ Limited Liability Company ☐ Sole Proprietorship ☐
Other

- Corporations and limited liability companies must provide an **Illinois certificate of good standing.**
- Partnerships must provide the name of the state in which they are organized and the name and address of each partner specifying whether each is a general or limited partner.

APPEND DOCUMENTATION AS <u>ATTACHMENT 1</u> IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

Primary Contact [Person to receive ALL correspondence or inquiries]

Name: Robert S. Spadoni
Title: Vice President and Chief Operating Officer
Company Name: Rush Oak Park Hospital
Address: 520 South Maple, Oak Park, IL 60304
Telephone Number: (708) 660-6660
E-mail Address: Robert_Spadoni@rush.edu
Fax Number: (708) 660-6658

ILLINOIS HEALTH FACILITIES AND SERVICES REVIEW BOARD
DISCONTINUATION APPLICATION FOR EXEMPTION

SECTION I. IDENTIFICATION, GENERAL INFORMATION, AND CERTIFICATION

Facility/Project Identification

Facility Name: Rush Oak Park Hospital
Street Address: 520 South Maple Avenue
City and Zip Code: Oak Park, IL 60304
County: Cook Health Service Area 7 Health Planning Area: A-06

Applicant(s) [Provide for each applicant (refer to Part 1130.220)]

Exact Legal Name: Rush University System for Health
Street Address: 1725 West Harrison Street, Suite 364
City and Zip Code: Chicago, Illinois 60612
Name of Registered Agent: Carl Bergetz
Registered Agent Street Address: 1700 West Van Buren Street, Suite 301
Registered Agent City and Zip Code: Chicago, IL 60612
Name of Chief Executive Officer: K. Ranga Rama Krishnan, MB Chb
CEO Street Address: 1725 West Harrison Street, Suite 364
CEO City and Zip Code: Chicago, IL 60612
CEO Telephone Number: (312) 942-6886

Type of Ownership of Applicants

☒ Non-profit Corporation
☐ For-profit Corporation
☐ Limited Liability Company
☐ Partnership
☐ Governmental
☐ Sole Proprietorship
☐ Other

- Corporations and limited liability companies must provide an **Illinois certificate of good standing.**
- Partnerships must provide the name of the state in which they are organized and the name and address of each partner specifying whether each is a general or limited partner.

APPEND DOCUMENTATION AS <u>ATTACHMENT 1</u> IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

Primary Contact [Person to receive ALL correspondence or inquiries]

Name: Katherine B. Fishbein
Title: Assistant General Counsel
Company Name: Rush University Medical Center
Address: 1700 West Van Buren Street, Suite 301 Chicago, IL 60612
Telephone Number: 312-942-6886
E-mail Address: katherine_fishbein@rush.edu
Fax Number: 312-942-4233

ILLINOIS HEALTH FACILITIES AND SERVICES REVIEW BOARD
DISCONTINUATION APPLICATION FOR EXEMPTION

SECTION I. IDENTIFICATION, GENERAL INFORMATION, AND CERTIFICATION

Facility/Project Identification

Facility Name: Rush Oak Park Hospital
Street Address: 520 South Maple Avenue
City and Zip Code: Oak Park, IL 60304
County: Cook Health Service Area 7 Health Planning Area: A-06

Applicant(s) [Provide for each applicant (refer to Part 1130.220)]

Exact Legal Name: Rush University Medical Center
Street Address: 1725 West Harrison Street, Suite 364
City and Zip Code: Chicago, Illinois 60612
Name of Registered Agent: Carl Bergetz
Registered Agent Street Address: 1700 West Van Buren Street, Suite 301
Registered Agent City and Zip Code: Chicago, IL 60612
Name of Chief Executive Officer: Dr. Omar Lateef
CEO Street Address: 1725 West Harrison Street, Suite 364
CEO City and Zip Code: Chicago, IL 60612
CEO Telephone Number: (312) 942-6886

Type of Ownership of Applicants

☒ Non-profit Corporation ☐ Partnership
☐ For-profit Corporation ☐ Governmental
☐ Limited Liability Company ☐ Sole Proprietorship ☐
Other

- Corporations and limited liability companies must provide an **Illinois certificate of good standing.**
- Partnerships must provide the name of the state in which they are organized and the name and address of each partner specifying whether each is a general or limited partner.

APPEND DOCUMENTATION AS <u>ATTACHMENT 1</u> IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

Primary Contact [Person to receive ALL correspondence or inquiries]

Name: Katherine B. Fishbein
Title: Assistant General Counsel
Company Name: Rush University Medical Center
Address: 1700 West Van Buren Street, Suite 301 Chicago, IL 60612
Telephone Number: 312-942-6886
E-mail Address: katherine_fishbein@rush.edu
Fax Number: 312-942-4233

Additional Contact [Person who is also authorized to discuss the application for exemption]

Name: Juan Morado Jr. and Mark J. Silberman
Title: Partner
Company Name: Benesch, Friedlander, Coplan & Aronoff LLP
Address: 71 South Wacker Drive, Suite 16th Floor, Chicago, IL 60606
Telephone Number: 312-212-4949
E-mail Address: JMorado@beneschlaw.com; MSilberman@beneschlaw.com
Fax Number: 312-767-9192

Post Exemption Contact

[Person to receive all correspondence subsequent to exemption issuance-**THIS PERSON MUST BE EMPLOYED BY THE LICENSED HEALTH CARE FACILITY AS DEFINED AT 20 ILCS 3960]**

Name: Robert S. Spadoni
Title: Vice-President and Chief Operating Officer
Company Name: Rush Oak Park Hospital
Address: 520 South Maple, Oak Park, Illinois 60304
Telephone Number: 708-660-6660
E-mail Address: Robert_Spadoni@rush.edu
Fax Number: 708-660-4026

Site Ownership

[Provide this information for each applicable site]

Exact Legal Name of Site Owner: Rush Oak Park Hospital, Inc.
Address of Site Owner: 520 South Maple, Oak Park, Illinois 60304
Street Address or Legal Description of the Site: **Proof of ownership or control of the site is to be provided as Attachment 2. Examples of proof of ownership are property tax statements, tax assessor's documentation, deed, notarized statement of the corporation attesting to ownership, an option to lease, a letter of intent to lease, or a lease**.
APPEND DOCUMENTATION AS <u>ATTACHMENT 2,</u> IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

Operating Identity/Licensee

[Provide this information for each applicable facility and insert after this page.]

Exact Legal Name: Rush Oak Park Hospital, Inc.
Address: 520 South Maple Avenue, Oak Park, Illinois 60304
☒ Non-profit Corporation ☐ Partnership ☐ For-profit Corporation ☐ Governmental ☐ Limited Liability Company ☐ Sole Proprietorship ☐ Other o Corporations and limited liability companies must provide an Illinois Certificate of Good Standing. o Partnerships must provide the name of the state in which organized and the name and address of each partner specifying whether each is a general or limited partner. o **Persons with 5 percent or greater interest in the licensee must be identified with the % of ownership.**
APPEND DOCUMENTATION AS <u>ATTACHMENT 3</u>, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

Organizational Relationships

Provide (for each applicant) an organizational chart containing the name and relationship of any person or entity who is related (as defined in Part 1130.140). If the related person or entity is participating in the development or funding of the project, describe the interest and the amount and type of any financial contribution.
APPEND DOCUMENTATION AS <u>ATTACHMENT 4,</u> IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

Narrative Description

In the space below, provide a brief narrative description of the project. Explain **WHAT** is to be done in **State Board defined terms**, **NOT WHY** it is being done. If the project site does NOT have a street address, include a legal description of the site. Include the rationale regarding the project's classification as substantive or non-substantive.

The applicants propose the discontinuation of the 36-bed Skilled Nursing Care inpatient unit at the Rush Oak Park Hospital. The facility is located at 520 South Maple Avenue, Oak Park, Illinois 60304. Since the proposed project involves the discontinuation of the Skilled Nursing category of service within an existing healthcare facility it is classified as substantive.

Project Status and Completion Schedules

Outstanding Permits: Does the facility have any projects for which the State Board issued a permit that is not complete? Yes X No __. If yes, indicate the projects by project number and whether the project will be complete when the exemption that is the subject of this application is complete.

Rush University Medical Center Ambulatory Care Building, Chicago (Permit #18-023)

- The project will not be complete when the exemption that is the subject of this application is complete.

Anticipated exemption completion date (refer to Part 1130.570): September 22, 2020 or immediately after approval if before or after that date.

State Agency Submittals [Section 1130.620(c)]

Are the following submittals up to date as applicable:

☒ Cancer Registry
☒ APORS
☒ All formal document requests such as IDPH Questionnaires and Annual Bed Reports been submitted
☒ All reports regarding outstanding permits
Failure to be up to date with these requirements will result in the Application being deemed incomplete.

CERTIFICATION

The Application must be signed by the authorized representatives of the applicant entity. Authorized representatives are:

- in the case of a corporation, any two of its officers or members of its Board of Directors;
- in the case of a limited liability company, any two of its managers or members (or the sole manager or member when two or more managers or members do not exist);
- in the case of a partnership, two of its general partners (or the sole general partner, when two or more general partners do not exist);
- in the case of estates and trusts, two of its beneficiaries (or the sole beneficiary when two or more beneficiaries do not exist); and
- in the case of a sole proprietor, the individual that is the proprietor.

This Application is filed on the behalf of Rush Oak Park Hospital, Inc.

in accordance with the requirements and procedures of the Illinois Health Facilities Planning Act. The undersigned certifies that he or she has the authority to execute and file this Application on behalf of the applicant entity. The undersigned further certifies that the data and information provided herein, and appended hereto, are complete and correct to the best of his or her knowledge and belief. The undersigned also certifies that the fee required for this application is sent herewith or will be paid upon request.

SIGNATURE

Bruce Elegant
PRINTED NAME

President and Chief Executive Officer
PRINTED TITLE

Notarization:
Subscribed and sworn to before me
this 19th day of August

Signature of Notary

Seal

CHERISE BROWN
Official Seal
Notary Public - State of Illinois
My Commission Expires May 6, 2023

SIGNATURE

Robert Spadoni
PRINTED NAME

Vice-President and Chief Operations Officer
PRINTED TITLE

Notarization:
Subscribed and sworn to before me
this 19th day of August

Signature of Notary

Seal

CHERISE BROWN
Official Seal
Notary Public - State of Illinois
My Commission Expires May 6, 2023

*Insert the EXACT legal name of the applicant

CERTIFICATION

The Application must be signed by the authorized representatives of the applicant entity. Authorized representatives are:

- in the case of a corporation, any two of its officers or members of its Board of Directors;
- in the case of a limited liability company, any two of its managers or members (or the sole manager or member when two or more managers or members do not exist);
- in the case of a partnership, two of its general partners (or the sole general partner, when two or more general partners do not exist);
- in the case of estates and trusts, two of its beneficiaries (or the sole beneficiary when two or more beneficiaries do not exist); and
- in the case of a sole proprietor, the individual that is the proprietor.

This Application is filed on the behalf of Rush University System for Health

in accordance with the requirements and procedures of the Illinois Health Facilities Planning Act. The undersigned certifies that he or she has the authority to execute and file this Application on behalf of the applicant entity. The undersigned further certifies that the data and information provided herein, and appended hereto, are complete and correct to the best of his or her knowledge and belief. The undersigned also certifies that the fee required for this application is sent herewith or will be paid upon request.

SIGNATURE

K. Ranga Rama Krishnan, MB Chb
PRINTED NAME

Chief Executive Officer
PRINTED TITLE

Notarization:
Subscribed and sworn to before me
this 20 day of August 2020

Signature of Notary

Seal

"OFFICIAL SEAL"
Velia Zavala
Notary Public, State of Illinois
My Commission Expires October 5, 2022

SIGNATURE

Carl Bergetz, JD
PRINTED NAME

Chief Legal Officer
PRINTED TITLE

Notarization:
Subscribed and sworn to before me
this 20 day of August 2020

Signature of Notary

Seal

"OFFICIAL SEAL"
Velia Zavala
Notary Public, State of Illinois
My Commission Expires October 5, 2022

*Insert the EXACT legal name of the applicant

CERTIFICATION

The Application must be signed by the authorized representatives of the applicant entity. Authorized representatives are:

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- in the case of a limited liability company, any two of its managers or members (or the sole manager or member when two or more managers or members do not exist);
- in the case of a partnership, two of its general partners (or the sole general partner, when two or more general partners do not exist);
- in the case of estates and trusts, two of its beneficiaries (or the sole beneficiary when two or more beneficiaries do not exist); and
- in the case of a sole proprietor, the individual that is the proprietor.

This Application is filed on the behalf of Rush University Medical Center

In accordance with the requirements and procedures of the Illinois Health Facilities Planning Act. The undersigned certifies that he or she has the authority to execute and file this Application on behalf of the applicant entity. The undersigned further certifies that the data and information provided herein, and appended hereto, are complete and correct to the best of his or her knowledge and belief. The undersigned also certifies that the fee required for this application is sent herewith or will be paid upon request.

SIGNATURE

Dr. Omar Lateef
PRINTED NAME

President and Chief Executive Officer
PRINTED TITLE

Notarization:
Subscribed and sworn to before me
this 20 day of August 2020

Signature of Notary

Seal

"OFFICIAL SEAL"
Velia Zavala
Notary Public, State of Illinois
My Commission Expires October 5, 2022

SIGNATURE

Carl Bergetz, JD
PRINTED NAME

Senior VP, Legal Affairs and General Counsel
PRINTED TITLE

Notarization:
Subscribed and sworn to before me
this 20 day of August 2020

Signature of Notary

Seal

"OFFICIAL SEAL"
Velia Zavala
Notary Public, State of Illinois
My Commission Expires October 5, 2022

*Insert the EXACT legal name of the applicant

SECTION II. DISCONTINUATION

Type of Discontinuation

☒ Discontinuation of a single category of service

Criterion 1130.525 and 1110.290 - Discontinuation

READ THE REVIEW CRITERION and provide the following information:

GENERAL INFORMATION REQUIREMENTS

1. Identify the category of service and the number of beds, if any, that are to be discontinued.
2. Identify all of the other clinical services that are to be discontinued.
3. Provide the anticipated date of discontinuation for each identified service.
4. Provide the anticipated use of the physical plant and equipment after the discontinuation occurs.
5. Provide attestation that the facility provided the required notice of the category of service closure to local media that the health care facility would routinely notify about facility events. The supporting documentation shall include a copy of the notice, the name of the local media outlet, the date the notice was given, and the result of the notice, e.g., number of times broadcasted, written, or published. Only notice that is given to a local television station, local radio station, or local newspaper will be accepted.

APPEND DOCUMENTATION AS ATTACHMENT 5, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

REASONS FOR DISCONTINUATION

The applicant shall state the reasons for the discontinuation and provide data that verifies the need for the proposed action. See criterion 1110.130(b) for examples.

APPEND DOCUMENTATION AS ATTACHMENT 6, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

IMPACT ON ACCESS

1. Document whether or not the discontinuation will have an adverse effect upon access to care for residents of the facility's market area.

2. Provide copies of notification letters sent to other resources or health care facilities that provide the same services as those proposed for discontinuation. The notification letter must include at least the anticipated date of discontinuation and the total number of patients that received care or the number of treatments provided during the latest 24 months.

APPEND DOCUMENTATION AS ATTACHMENT 7, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

SECTION III. BACKGROUND

READ THE REVIEW CRITERION and provide the following required information:

BACKGROUND OF APPLICANT

1. A listing of all health care facilities owned or operated by the applicant, including licensing, and certification if applicable.

2. A certified listing of any adverse action taken against any facility owned and/or operated by the applicant during the three years prior to the filing of the application.

3. Authorization permitting HFSRB and DPH access to any documents necessary to verify the information submitted, including, but not limited to: official records of DPH 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 such authorization shall constitute an abandonment or withdrawal of the application without any further action by HFSRB.**

4. If, during a given calendar year, an applicant submits more than one application for permit or exemption, the documentation provided with the prior applications may be utilized to fulfill the information requirements of this criterion. In such instances, the applicant shall attest that the information was previously provided, cite the project number of the prior application, and certify that no changes have occurred regarding the information that has been previously provided. The applicant is able to submit amendments to previously submitted information, as needed, to update and/or clarify data.

APPEND DOCUMENTATION AS ATTACHMENT 8, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM. EACH ITEM (1-4) MUST BE IDENTIFIED IN ATTACHMENT 8.

SECTION IV. SAFETY NET IMPACT STATEMENT

SAFETY NET IMPACT STATEMENT that describes all of the following must be submitted for ALL PROJECTS TO DISCONTINUE A CATEGORY OF SERVICE [20 ILCS 3960/5.4]:

1. The project's material impact, if any, on essential safety net services in the community, to the extent that it is feasible for an applicant to have such knowledge.

2. The project's impact on the ability of another provider or health care system to cross-subsidize safety net services, if reasonably known to the applicant.

3. How the discontinuation of a service might impact the remaining safety net providers in a given community, if reasonably known by the applicant.

Safety Net Impact Statements shall also include all of the following:

1. For the 3 fiscal years prior to the application, a certification describing the amount of charity care provided by the applicant. The amount calculated by hospital applicants shall be in accordance with the reporting requirements for charity care reporting in the Illinois Community Benefits Act. Non-hospital applicants shall report charity care, at cost, in accordance with an appropriate methodology specified by the Board.

2. For the 3 fiscal years prior to the application, a certification of the amount of care provided to Medicaid patients. Hospital and non-hospital applicants shall provide Medicaid information in a manner consistent with the information reported each year to the Illinois Department of Public Health regarding "Inpatients and Outpatients Served by Payor Source" and "Inpatient and Outpatient Net Revenue by Payor Source" as required by the Board under Section 13 of this Act and published in the Annual Hospital Profile.

3. Any information the applicant believes is directly relevant to safety net services, including information regarding teaching, research, and any other service.

A table in the following format must be provided as part of Attachment 9.

Note: Below is the Safety Net Information for Rush Oak Park Hospital. Information for all other healthcare facilities owned by the applicants are found in Attachment 9.

Safety Net Information per PA 96-0031			
CHARITY CARE			
Charity (# of patients)	**FY16**	**FY17**	**FY18**
Inpatient	56	61	45
Outpatient	4,220	3,495	3,602
Total	**4,276**	**3,556**	**3,647**
Charity (cost In dollars)	**FY16**	**FY17**	**FY18**
Inpatient	$532,021	$493,013	$611,142
Outpatient	$2,231,885	$2,303,877	$2,214,229
Total	**$2,763,906**	**$2,796,890**	**$2,825,371**
MEDICAID			
Medicaid (# of patients)	**FY16**	**FY17**	**FY18**
Inpatient	637	658	615
Outpatient	20,898	20,965	22,922

Total	21,535	21,623	23,537
Medicaid (revenue)	**FY 16**	**FY17**	**FY18**
Inpatient	$8,228,461	$8,858,872	$6,870,809
Outpatient	$8,346,140	$9,843,207	$10,675,377
Total	**$16,574,601**	**$18,702,079**	**$17,546,186**

APPEND DOCUMENTATION AS ATTACHMENT 9, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

SECTION V. CHARITY CARE INFORMATION

1. All applicants and co-applicants shall indicate the amount of charity care for the latest three **audited** fiscal years, the cost of charity care and the ratio of that charity care cost to net patient revenue.

2. If the applicant owns or operates one or more facilities, the reporting shall be for each individual facility located in Illinois. If charity care costs are reported on a consolidated basis, the applicant shall provide documentation as to the cost of charity care; the ratio of that charity care to the net patient revenue for the consolidated financial statement; the allocation of charity care costs; and the ratio of charity care cost to net patient revenue for the facility under review.

3. If the applicant is not an existing facility, it shall submit the facility's projected patient mix by payer source, anticipated charity care expense and projected ratio of charity care to net patient revenue by the end of its second year of operation.

Charity care" means care provided by a health care facility for which the provider does not expect to receive payment from the patient or a third-party payer (20 ILCS 3960/3). Charity Care must be provided at cost.

A table in the following format must be provided for all facilities as part of Attachment 10.

Note: Below is the Charity Care for Rush Oak Park Hospital. Information for all other healthcare facilities owned by the applicants are found in Attachment 10.

CHARITY CARE			
	FY16	**FY17**	**FY18**
Net Patient Revenue	**$131,232,631**	**$137,305,456**	**$141,947,443**
Amount of Charity Care (charges)	$11,366,142	$11,893,094	$12,231,044
Cost of Charity Care	$2,763,906	$2,796,890	$2,825,371

APPEND DOCUMENTATION AS ATTACHMENT 10, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

After paginating the entire completed application indicate, in the chart below, the page numbers for the included attachments:

INDEX OF ATTACHMENTS

ATTACHMENT NO.		PAGES
1	Applicant Identification including Certificate of Good Standing	18-20
2	Site Ownership	21
3	Persons with 5 percent or greater interest in the licensee must be identified with the % of ownership.	22-24
4	Organizational Relationships (Organizational Chart) Certificate of Good Standing Etc.	25
5	Discontinuation General Information Requirements	26-28
6	Reasons for Discontinuation	29-37
7	Impact on Access	38-125
8	Background of the Applicant	126-133
9	Safety Net Impact Statement	134-140
10	Charity Care Information	141-143

Attachment 1
Certificate of Good Standing- Rush University System for Health

File Number 5852-111-6

STATE OF ILLINOIS
OFFICE OF
THE SECRETARY OF STATE

To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

RUSH SYSTEM FOR HEALTH, A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON SEPTEMBER 22, 1995, ADOPTED THE ASSUMED NAME RUSH UNIVERSITY SYSTEM FOR HEALTH ON JANUARY 29, 2019, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE GENERAL NOT FOR PROFIT CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.

In Testimony Whereof, *I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this* 10TH *day of* AUGUST *A.D.* 2020 .

Authentication #: 2022304144 verifiable until 08/10/2021
Authenticate at: http://www.cyberdriveillinois.com

Jesse White
SECRETARY OF STATE

Attachment 1
Certificate of Good Standing- Rush University Medical Center

File Number 0200-214-1

STATE OF ILLINOIS
OFFICE OF
THE SECRETARY OF STATE

To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

RUSH UNIVERSITY MEDICAL CENTER, A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON JULY 21, 1883, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE GENERAL NOT FOR PROFIT CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.

In Testimony Whereof, *I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this* 10TH *day of* AUGUST *A.D.* 2020 .

Jesse White

SECRETARY OF STATE

Authentication #: 202304146 verifiable until 08/10/2021
Authenticate at: http://www.cyberdriveillinois.com

Attachment 1
Certificate of Good Standing- Rush Oak Park Hospital

File Number 0987-432-1

STATE OF ILLINOIS
OFFICE OF
THE SECRETARY OF STATE

To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

RUSH OAK PARK HOSPITAL, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON MARCH 27, 1906, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE GENERAL NOT FOR PROFIT CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.

In Testimony Whereof, *I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this* 14TH *day of* AUGUST *A.D.* 2020 .

Authentication #: 2022702542 verifiable until 08/14/2021
Authenticate at: http://www.cyberdriveillinois.com

Jesse White
SECRETARY OF STATE

Attachment 2
Site Attestation Letter
Rush Oak Park Hospital

Rush Oak Park Hospital
520 South Maple Avenue
Oak Park, IL 60304-1097

Tel: 708.383.9300
Fax: 708.660.6658
www.roph.org

RUSH

August 19, 2020

Courtney Avery
Board Administrator
Illinois Health Facilities and Service Review Board
525 West Jefferson Street, 2nd Floor
Springfield, Illinois 62761

Re: Attestation of Site Ownership

Dear Ms. Avery,

As representative of Rush Oak Park Hospital, Inc., I, Robert Spadoni, hereby attest that the site of Rush Oak Park Hospital, located at 520 South Maple Avenue, Oak Park, Illinois 60304 is owned by Rush Oak Park Hospital, Inc.

Furthermore, I attest that the Rush Oak Park Hospital, located at 520 South Maple Avenue, Oak Park, Illinois 60304, is not located in a flood zone.

Sincerely,

Robert Spadoni
Vice President and Chief Operating Officer
Rush Oak Park Hospital

Subscribed and sworn to before me this

19TH day of August, 2020.

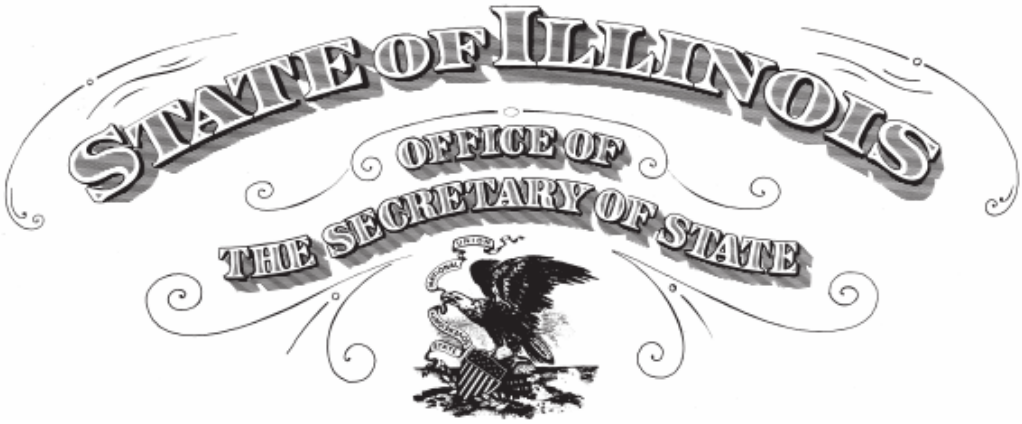
Notary Public

Seal

CHERISE BROWN
Official Seal
Notary Public - State of Illinois
My Commission Expires May 6, 2023

Attachment 3
Certificate of Good Standing- Rush University System for Health

File Number 5852-111-6



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

RUSH SYSTEM FOR HEALTH, A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON SEPTEMBER 22, 1995, ADOPTED THE ASSUMED NAME RUSH UNIVERSITY SYSTEM FOR HEALTH ON JANUARY 29, 2019, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE GENERAL NOT FOR PROFIT CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.

In Testimony Whereof, *I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this* 10TH *day of* AUGUST *A.D.* 2020 .

Authentication #: 2022304144 verifiable until 08/10/2021
Authenticate at: http://www.cyberdriveillinois.com

Jesse White
SECRETARY OF STATE

Attachment 3
Certificate of Good Standing- Rush University Medical Center

File Number 0200-214-1

STATE OF ILLINOIS
OFFICE OF
THE SECRETARY OF STATE

To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

RUSH UNIVERSITY MEDICAL CENTER, A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON JULY 21, 1883, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE GENERAL NOT FOR PROFIT CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.

In Testimony Whereof, *I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this* 10TH *day of* AUGUST *A.D.* 2020 .

Authentication #: 2022304146 verifiable until 08/10/2021
Authenticate at: http://www.cyberdriveillinois.com

Jesse White
SECRETARY OF STATE

Attachment 3
Certificate of Good Standing- Rush Oak Park Hospital

File Number 0987-432-1

STATE OF ILLINOIS
OFFICE OF
THE SECRETARY OF STATE

To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

RUSH OAK PARK HOSPITAL, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON MARCH 27, 1906, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE GENERAL NOT FOR PROFIT CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.

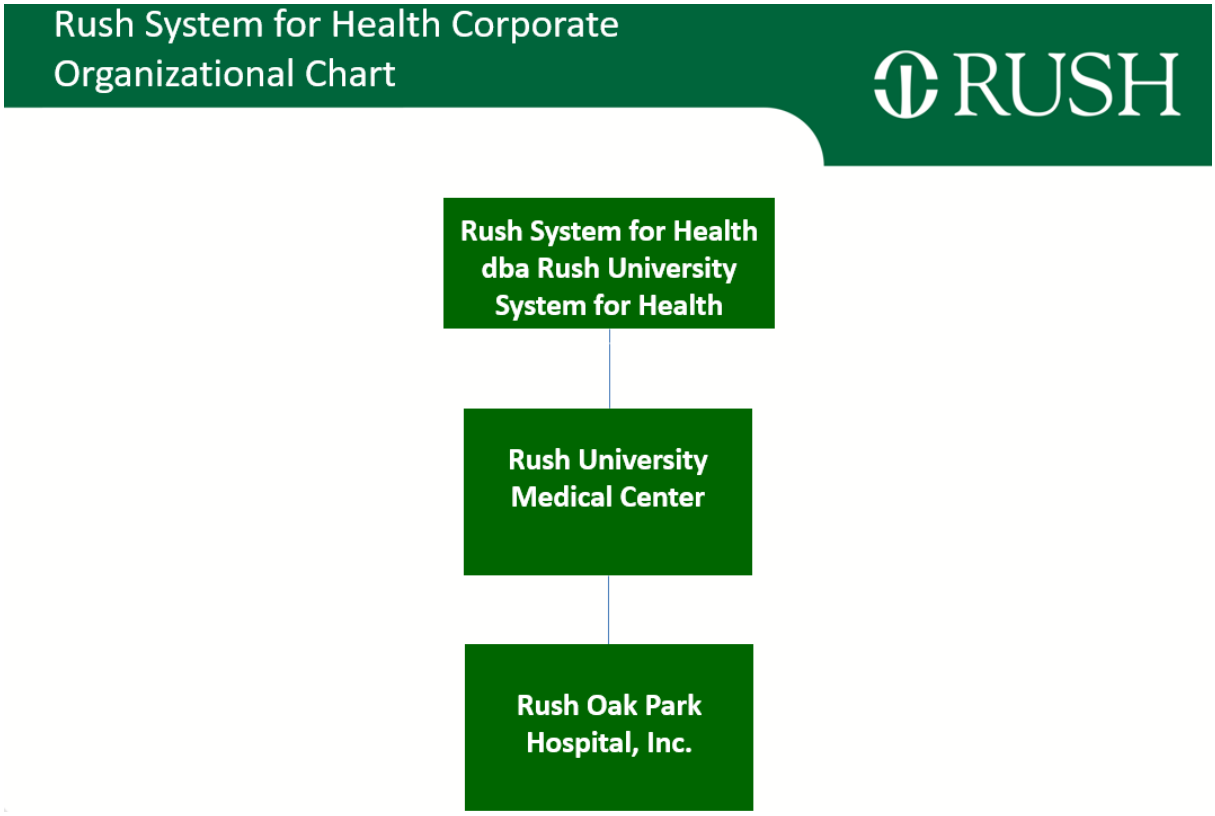
In Testimony Whereof, *I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this* 14TH *day of* AUGUST *A.D.* 2020 .

Jesse White

SECRETARY OF STATE

Authentication #: 2022702542 verifiable until 08/14/2021
Authenticate at: http://www.cyberdriveillinois.com

Attachment 4
Organizational Chart



Attachment 5
Criterion 1130.525 and 1110.290
Discontinuation of a Category of Service

The applicant proposes to discontinue the skilled nursing category of service currently offered in its 36-bed unit at the Rush Oak Park Hospital. There will be no other clinical services that are to be discontinued related to this project.

The applicant proposes to discontinue the category of service by September 22, 2020 or, immediately following the approval of this application. Pursuant to the Illinois Health Facilities Planning Act (20 ILCS 3960/5(c)) the applicant proposes to re-allocate 20 of the 36 beds that are being discontinued under this application to Medical Surgical beds. This would result in a total of 16 beds being removed from the overall bed inventory of the facility. The unit is located on the fourth floor of the facility and the physical space occupied by the skilled nursing unit will be utilized to house the re-allocated Medical Surgical beds. The re-allocation of the beds will not require any significant construction and the applicant understands its obligation to submit plans for approval for the proposed re-allocation to the Illinois Department of Public Health Division of Life Safety and Construction and will take the steps necessary to subsequently request review by the IDPH Licensure division. Upon successful licensure of the re-allocated beds, the applicant will provide notice to the HFSRB when the beds are placed in operation.

The medical records of skilled nursing patients are maintained in an electronic health records information system that Rush Oak Park Hospital utilizes. The records will be maintained in compliance with all applicable State and Federal laws pertaining to medical record storage, including the Illinois Hospital Licensing Act (210 ILCS 85/6.17) which generally requires licensed hospitals to preserve medical records for not less than 10 years.

Included with this application is an attestation that the facility provided the required notice of the category of service closure to local media that the health care facility would routinely notify about facility events. A copy of that notice is included.

Attachment 5
Attestation of Notice Compliance

Rush Oak Park Hospital
520 South Maple Avenue
Oak Park, IL 60304-1097

Tel: 708.383.9300
Fax: 708.660.6658
www.roph.org

RUSH

August 19, 2020

Courtney Avery
Board Administrator
Illinois Health Facilities and Service Review Board
525 West Jefferson Street, 2nd Floor
Springfield, Illinois 62761

Re: Attestation of Notice Compliance

Dear Ms. Avery,

As representative of Rush Oak Park Hospital, Inc., I, Robert Spadoni, hereby attest that the facility provided the required notice of the skilled nursing unit category of service closure to local media that routinely notifies the public about hospital events. A copy of the notice is included in the Certificate of Exemption application.

Sincerely,

Robert Spadoni
Vice President and Chief Operating Officer
Rush Oak Park Hospital

Subscribed and sworn to before me this
19TH day of August, 2020.

Notary Public

Seal

CHERISE BROWN
Official Seal
Notary Public—State of Illinois
My Commission Expires May 6, 2023

13672930 v1

Attachment 5
Copy of Notice Provided to Local News Outlets

The Applicants will publish the notice below in the Chicago Tribune, a local newspaper that routinely notifies the public about facility events. The notice below is scheduled to be published a single time in the classified ad section of the newspaper on Thursday, August 27, 2020. The Chicago Tribune has a daily print circulation of 448,930 and an online presence. The Chicago Tribune is a newspaper of general circulation throughout the Cook County and surrounding areas, and is a newspaper as defined by 715 ILCS 5/5.

"Rush Oak Park Hospital has filed a Certificate of Exemption application with the Illinois Health Facilities and Services Review Board to discontinue a 36 bed inpatient skilled nursing unit at the hospital located at 520 South Maple, Oak Park, Illinois 60304 in the third quarter of 2020 with anticipated closure date by September 22, 2020. The hospital will work with referring physicians to ensure patients have time to make arrangements for their care. If you are or have been a patient at Rush Oak Park Hospital or have question about obtaining your medical records, please call (708) 662-4002."

Attachment 6- Reason for Discontinuation

There has been and continues to be an insufficient patient volume to justify the unit from both a healthcare perspective and continued operation of the category of service is not economically feasible. These factors, combined with the availability of skilled nursing care in the greater healthcare community, las led to the application to discontinue the inpatient skilled nursing line of service at the Rush Oak Park Hospital.

Skilled nursing units in acute care hospitals are becoming increasingly rare in the health service area (and throughout the state) because of the availability of robust stand-alone skilled nursing facility options. The result is the remaining units are consistently under-utilized. The utilization data clearly reflects this to be evident at Rush Oak Park Hospital. The graph below which shows the historical utilization data of the unit since 2015 thorough 2018 (the most recently available published utilization data). Utilization at the facility has steadily declined and has not risen above 42% between 2015 and 2018. There is no reason to believe these trends will change. The utilization for 2019 continued to reflect a decline in utilization with a projected utilization of 39.4%, and year to date in 2020 utilization of the unit was at 35.5%, well below the state's target utilization rate.

Utilization by Year of Skilled Nursing Category of Service

	2015	2016	2017	2018
Rush Oak Park Hospital	38.90%	42.70%	40.10%	41.60%

Additionally, the applicant cites the significant financial impact of maintaining the under-utilized unit. Rush Oak Park Hospital's review of patients treated in the unit during fiscal year 2019 revealed that 94% of the cases were unable to cover the direct costs associated with the care provided to those patients. With only 6% of direct costs covered, this has led to a significant loss for the facility and makes continued operation of the unit unsustainable.

It is axiomatic to the Certificate of Need process to focus on better utilization of existing facilities to maximize the stability of healthcare delivery. Given the existence of available quality alternative services within the Health Service Area and the ability for Rush Oak Park Hospital to better utilize these beds to the benefit of the healthcare community, this project makes sense from a healthcare delivery perspective and will, ultimately, improve access to care within the community by providing additional stability to existing skilled nursing facilities and allowing better utilization of necessary services at Rusk Oak Park Hospital.

Hospital Profile - CY 2015 | Rush Oak Park Hospital | Oak Park | Page 1

Ownership, Management and General Information

ADMINISTRATOR NAME:	BRUCE ELEGANT
ADMINSTRATOR PHONE	708-660-6660
OWNERSHIP:	RUSH UNIVERSITY MEDICAL CENTER
OPERATOR:	RUSH UNIVERSITY MEDICAL CENTER
MANAGEMENT:	Not for Profit Corporation (Not Church-R
CERTIFICATION:	(Not Answered)
FACILITY DESIGNATION:	General Hospital
ADDRESS	520 South Maple Street **CITY:** Oak Park **COUNTY:** Suburban Cook County

Patients by Race

White	50.6%
Black	45.1%
American Indian	0.2%
Asian	1.0%
Hawaiian/ Pacific	0.1%
Unknown	3.0%

Patients by Ethnicity

Hispanic or Latino:	6.8%
Not Hispanic or Latino:	93.1%
Unknown:	0.0%

IDPH Number:	1750
HPA	A-06
HSA	7

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2015	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	151	73	73	3,168	14,082	1,133	4.8	41.7	27.6	57.1
0-14 Years				*1*	*2*					
15-44 Years				*488*	*1,712*					
45-64 Years				*1,011*	*4,404*					
65-74 Years				*659*	*2,911*					
75 Years +				*1,009*	*5,053*					
Pediatric	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Intensive Care	14	14	14	1,178	2,838	23	2.4	7.8	56.0	56.0
Direct Admission				*953*	*2,257*					
Transfers				*225*	*581*					
Obstetric/Gynecology	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Maternity				*0*	*0*					
Clean Gynecology				*0*	*0*					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	36	22	22	393	5,107	0	13.0	14.0	38.9	63.6
Swing Beds			0	0	0		0.0	0.0		
Acute Mental Illness	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Rehabilitation	36	10	10	92	1,039	0	11.3	2.8	7.9	28.5
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	**237**			**4,606**	**23,066**	**1,156**	**5.3**	**66.4**	**28.0**	

(Includes ICU Direct Admissions Only)

Inpatients and Outpatients Served by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Charity Care	Totals
Inpatients	**63.0%**	**15.1%**	**0.0%**	**20.2%**	**0.9%**	**0.8%**	
	2901	694	2	929	43	37	**4,606**
Outpatients	**34.0%**	**19.4%**	**0.1%**	**40.7%**	**2.0%**	**3.8%**	
	34313	19635	96	41072	2012	3876	**101,004**

Financial Year Reported: 7/1/2014 *to* 6/30/2015

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Totals	Charity Care Expense
Inpatient Revenue ($)	**56.0%**	**16.3%**	**0.1%**	**27.3%**	**0.4%**	**100.0%**	
	24,969,259	7,266,924	32,094	12,154,773	157,459	44,580,509	365,991
Outpatient Revenue ($)	**21.3%**	**10.0%**	**0.1%**	**67.8%**	**0.8%**	**100.0%**	
	16,807,384	7,876,351	89,937	53,485,423	658,907	78,918,002	2,162,258

Total Charity Care Expense
2,528,249

Total Charity Care as % of Net Revenue
2.0%

Birthing Data

Number of Total Births:	0
Number of Live Births:	0
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	0
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	0
CSections Performed:	0

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	0	0	0
Patient Days	0	0	0
Total Newborn Patient Days			**0**

Laboratory Studies

Inpatient Studies	110,962
Outpatient Studies	219,680
Studies Performed Under Contract	83,727

Organ Transplantation

Kidney:	0
Heart:	0
Lung:	0
Heart/Lung:	0
Pancreas:	0
Liver:	0
Total:	**0**

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	0	0	0	0	0	0	0	0	0	0.0	0.0
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	8	8	482	2055	1013	1260	2273	2.1	0.6
Gastroenterology	0	0	0	0	0	0	0	0	0	0.0	0.0
Neurology	0	0	0	0	0	0	0	0	0	0.0	0.0
OB/Gynecology	0	0	0	0	10	32	23	33	56	2.3	1.0
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	0	0	0	375	0	438	438	0.0	1.2
Orthopedic	0	0	0	0	336	2008	892	3255	4147	2.7	1.6
Otolaryngology	0	0	0	0	1	0	2	0	2	2.0	0.0
Plastic Surgery	0	0	0	0	0	0	0	0	0	0.0	0.0
Podiatry	0	0	0	0	35	291	56	377	433	1.6	1.3
Thoracic	0	0	0	0	3	0	8	0	8	2.7	0.0
Urology	0	0	1	1	58	44	69	47	116	1.2	1.1
Totals	**0**	**0**	**9**	**9**	**925**	**4805**	**2063**	**5410**	**7473**	**2.2**	**1.1**

SURGICAL RECOVERY STATIONS Stage 1 Recovery Stations 10 Stage 2 Recovery Stations 26

Dedicated and Non-Dedicated Procedure Room Utilzation

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	3	3	645	2872	323	1436	1759	0.5	0.5
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	0	0	0	0	0	0	0	0.0	0.0
Cystoscopy	0	0	0	0	0	0	0	0	0	0.0	0.0
Multipurpose Non-Dedicated Rooms											
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center	No
Level of Trauma Service	**Level 1** / **Level 2**
	(Not Answered) / Not Answered
Operating Rooms Dedicated for Trauma Care	0
Number of Trauma Visits:	0
Patients Admitted from Trauma	0
Emergency Service Type:	Basic
Number of Emergency Room Stations	17
Persons Treated by Emergency Services:	32,480
Patients Admitted from Emergency:	3,564
Total ED Visits (Emergency+Trauma):	**32,480**

Free-Standing Emergency Center

Beds in Free-Standing Centers	0
Patient Visits in Free-Standing Centers	0
Hospital Admissions from Free-Standing Center	0

Outpatient Service Data

Total Outpatient Visits	**120,301**
Outpatient Visits at the Hospital/ Campus:	120,301
Outpatient Visits Offsite/off campus	0

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	**1**
Cath Labs used for Angiography procedures	1
Dedicated Diagnostic Catheterization Lab	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	**587**
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	316
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	231
EP Catheterizations (15+)	40

Cardiac Surgery Data

Total Cardiac Surgery Cases:	**0**
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	0
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	0

Diagnostic/Interventional Equipment	Owned	Contract	Examinations: Inpatient	Examinations: Outpt	Examinations: Contract	Therapeutic Equipment	Owned	Contract	Therapies/ Treatments
General Radiography/Fluoroscopy	9	0	6,152	20,215	0	*Lithotripsy*	0	0	0
Nuclear Medicine	2	0	328	727	0	*Linear Accelerator*	1	0	3,626
Mammography	2	0	0	6,702	0	Image Guided Rad Therapy			635
Ultrasound	4	0	1,534	4,928	0	Intensity Modulated Rad Thrpy			2,065
Angiography	1	0				High Dose Brachytherapy	0	0	0
Diagnostic Angiography			205	318	0	*Proton Beam Therapy*	0	0	0
Interventional Angiography			399	480	0	*Gamma Knife*	0	0	0
Positron Emission Tomography (PET)	0	0	0	0	0	*Cyber knife*	0	0	0
Computerized Axial Tomography (CAT)	2	0	2,353	7,437	0				
Magnetic Resonance Imaging	0	1	0	0	2,048				

Source: 2015 Annual Hospital Questionnaire, Illinois Department of Public Health, Health Systems Development.

Hospital Profile - CY 2016 **Rush Oak Park Hospital** **Oak Park** Page 1

Ownership, Management and General Information

ADMINISTRATOR NAME:	Bruce Elegant
ADMINSTRATOR PHONE:	(708) 660-6660
OWNERSHIP:	Rush University Medical Center
OPERATOR:	Rush University Medical Center
MANAGEMENT:	Not for Profit Corporation (Not Church-R
CERTIFICATION:	(Not Answered)
FACILITY DESIGNATION:	General Hospital
ADDRESS	520 South Maple Street CITY: Oak Park COUNTY: Suburban Cook County

Patients by Race

White	49.5%
Black	45.0%
American Indian	0.1%
Asian	0.6%
Hawaiian/ Pacific	0.1%
Unknown	4.7%

Patients by Ethnicity

Hispanic or Latino:	7.4%
Not Hispanic or Latino:	92.6%
Unknown:	0.0%

IDPH Number:	1750
HPA	A-06
HSA	7

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2016	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	151	73	73	3,171	13,792	1,533	4.8	41.9	27.7	57.4
0-14 Years				*0*	*0*					
15-44 Years				*499*	*1,638*					
45-64 Years				*998*	*4,025*					
65-74 Years				*679*	*3,100*					
75 Years +				*995*	*5,029*					
Pediatric	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Intensive Care	14	14	14	1,146	2,651	27	2.3	7.3	52.3	52.3
Direct Admission				*908*	*2,120*					
Transfers - Not included in Facility Admissions				*238*	*531*					
Obstetric/Gynecology	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Maternity				*0*	*0*					
Clean Gynecology				*0*	*0*					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	36	22	22	384	5,620	0	14.6	15.4	42.7	69.8
Swing Beds			0	0	0		0.0	0.0		
Total AMI	0			0	0	0	0.0	0.0	0.0	
Adolescent AMI		0	0	0	0	0	0.0	0.0		0.0
Adult AMI		0	0	0	0	0	0.0	0.0		0.0
Rehabilitation	36	10	6	61	724	0	11.9	2.0	5.5	19.8
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	**237**			**4,524**	**22,787**	**1,560**	**5.4**	**66.5**	**28.1**	

Inpatients and Outpatients Served by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Charity Care	Totals
Inpatients	62.6%	14.1%	0.0%	21.1%	0.9%	1.2%	
	2834	637	0	955	42	56	**4,524**
Outpatients	34.1%	19.4%	0.1%	40.7%	1.9%	3.9%	
	36730	20898	97	43796	1996	4220	**107,737**

Financial Year Reported: 7/1/2015 *to* 6/30/2016

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Totals	Charity Care Expense
Inpatient Revenue ($)	58.4%	18.0%	0.0%	23.6%	0.0%	100.0%	
	26,651,045	8,228,461	5,892	10,747,323	0	45,632,721	532,021
Outpatient Revenue ($)	21.6%	9.8%	0.1%	67.8%	0.8%	100.0%	
	18,495,487	8,346,140	65,481	58,017,666	675,136	85,599,910	2,231,885

Total Charity Care Expense 2,763,906

Total Charity Care as % of Net Revenue 2.1%

Birthing Data

Number of Total Births:	0
Number of Live Births:	0
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	0
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	0
CSections Performed:	0

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	0	0	0
Patient Days	0	0	0
Total Newborn Patient Days			0

Laboratory Studies

Inpatient Studies	103,215
Outpatient Studies	237,705
Studies Performed Under Contract	87,478

Organ Transplantation

Kidney:	
Heart:	
Lung:	
Heart/Lung:	
Pancreas:	
Liver:	
Total:	

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	0	0	0	0	1	0	3	0	3	3.0	0.0
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	9	9	442	2070	876	1363	2239	2.0	0.7
Gastroenterology	0	0	0	0	0	0	0	0	0	0.0	0.0
Neurology	0	0	0	0	0	0	0	0	0	0.0	0.0
OB/Gynecology	0	0	0	0	2	25	6	28	34	3.0	1.1
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	0	0	0	306	0	337	337	0.0	1.1
Orthopedic	0	0	0	0	328	2170	827	3212	4039	2.5	1.5
Otolaryngology	0	0	0	0	0	4	0	4	4	0.0	1.0
Plastic Surgery	0	0	0	0	0	0	0	0	0	0.0	0.0
Podiatry	0	0	0	0	44	298	70	405	475	1.6	1.4
Thoracic	0	0	0	0	2	0	5	0	5	2.5	0.0
Urology	0	0	0	0	52	70	57	72	129	1.1	1.0
Totals	**0**	**0**	**9**	**9**	**871**	**4943**	**1844**	**5421**	**7265**	**2.1**	**1.1**

SURGICAL RECOVERY STATIONS	Stage 1 Recovery Stations	10	Stage 2 Recovery Stations	26

Dedicated and Non-Dedicated Procedure Room Utilization

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	3	3	441	2925	221	1462	1683	0.5	0.5
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	0	0	0	0	0	0	0	0.0	0.0
Cystoscopy	0	0	0	0	0	0	0	0	0	0.0	0.0
Multipurpose Non-Dedicated Rooms											
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center		No
Level of Trauma Service	Level 1	Level 2
	(Not Answered)	Not Answered
Operating Rooms Dedicated for Trauma Care		0
Number of Trauma Visits:		0
Patients Admitted from Trauma		0
Emergency Service Type:		Basic
Number of Emergency Room Stations		17
Persons Treated by Emergency Services:		38,119
Patients Admitted from Emergency:		3,825
Total ED Visits (Emergency+Trauma):		**38,119**

Free-Standing Emergency Center

Beds in Free-Standing Centers	
Patient Visits in Free-Standing Centers	
Hospital Admissions from Free-Standing Center	

Outpatient Service Data

Total Outpatient Visits	**130,622**
Outpatient Visits at the Hospital/ Campus:	130,622
Outpatient Visits Offsite/off campus	0

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	**2**
Cath Labs used for Angiography procedures	2
Dedicated Diagnostic Catheterization Labs	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	**586**
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	375
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	196
EP Catheterizations (15+)	15

Cardiac Surgery Data

Total Cardiac Surgery Cases:	**0**
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	0
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	0

Diagnostic/Interventional Equipment	Owned	Contract	Examinations Inpatient	Examinations Outpt	Examinations Contract	Therapeutic Equipment	Owned	Contract	Therapies/ Treatments
General Radiography/Fluoroscopy	5	0	5,911	21,637	0	*Lithotripsy*	0	0	0
Nuclear Medicine	2	0	261	719	0	*Linear Accelerator*	1	0	3,321
Mammography	2	0	0	5,991	0	Image Guided Rad Therapy			2,417
Ultrasound	3	0	1,396	6,043	0	Intensity Modulated Rad Thrpy			1,498
Angiography	2	0				High Dose Brachytherapy	0	0	0
Diagnostic Angiography			144	451	0	*Proton Beam Therapy*	0	0	0
Interventional Angiography			489	528	0	*Gamma Knife*	0	0	0
Positron Emission Tomography (PET)	0	0	0	0	0	*Cyber knife*	0	0	0
Computerized Axial Tomography (CAT)	2	0	2,531	8,619	0				
Magnetic Resonance Imaging	1	0	454	1,788	0				

Source: 2016 Annual Hospital Questionnaire, Illinois Department of Public Health, Health Systems Development.

Hospital Profile - CY 2017 **Rush Oak Park Hospital, Inc.** **Oak Park**

Ownership, Management and General Information

ADMINISTRATOR NAME:	Bruce Elegant
ADMINSTRATOR PHONE	708 660-6663
OWNERSHIP:	Rush University Medical Center
OPERATOR:	Rush University Medical Center
MANAGEMENT:	Not for Profit Corporation
CERTIFICATION:	
FACILITY DESIGNATION:	General Hospital
ADDRESS	520 S Maple Avenue **CITY:** Oak Park **COUNTY:** Suburban Cook County

Patients by Race

White	47.3%
Black	44.9%
American Indian	0.0%
Asian	0.8%
Hawaiian/ Pacific	0.2%
Unknown	6.8%

Patients by Ethnicity

Hispanic or Latino:	8.2%
Not Hispanic or Latino:	91.7%
Unknown:	0.2%

IDPH Number:	1750
HPA	A-06
HSA	7

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2017	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	151	73	69	3,494	12,393	1,227	3.9	37.3	24.7	51.1
0-14 Years				*0*	*0*					
15-44 Years				*557*	*1,616*					
45-64 Years				*1,071*	*3,407*					
65-74 Years				*768*	*2,857*					
75 Years +				*1,098*	*4,513*					
Pediatric	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Intensive Care	14	14	14	914	2,596	31	2.9	7.2	51.4	51.4
Direct Admission				*738*	*2,109*					
Transfers				*176*	*487*					
Obstetric/Gynecology	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Maternity				*0*	*0*					
Clean Gynecology				*0*	*0*					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	36	21	21	355	5,266	0	14.8	14.4	40.1	68.7
Swing Beds			0	0	0		0.0	0.0		
Total AMI	0			0	0	0	0.0	0.0	0.0	
Adolescent AMI		0	0	0	0	0	0.0	0.0		0.0
Adult AMI		0	0	0	0	0	0.0	0.0		0.0
Rehabilitation	36	10	6	60	878	0	14.6	2.4	6.7	24.1
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	**237**			**4,647**	**21,133**	**1,258**	**4.8**	**61.3**	**25.9**	

(Includes ICU Direct Admissions Only)

Inpatients and Outpatients Served by Payor Source

	Medicare	*Medicaid*	*Other Public*	*Private Insurance*	*Private Pay*	*Charity Care*	*Totals*
Inpatients	**61.9%**	**14.2%**	**0.1%**	**21.9%**	**0.7%**	**1.3%**	
	2876	658	3	1016	33	61	**4,647**
Outpatients	**32.6%**	**18.3%**	**0.1%**	**44.4%**	**1.5%**	**3.1%**	
	37268	20965	69	50823	1766	3495	**114,386**

Financial Year Reported: 7/1/2016 *to* 6/30/2017

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	*Medicaid*	*Other Public*	*Private Insurance*	*Private Pay*	*Totals*	*Charity Care Expense*
Inpatient Revenue ($)	**51.0%**	**18.0%**	**0.0%**	**30.9%**	**0.1%**	**100.0%**	
	25,034,529	8,858,872	8,597	15,174,840	38,710	49,115,548	493,013
Outpatient Revenue ($)	**21.5%**	**11.2%**	**0.0%**	**67.1%**	**0.2%**	**100.0%**	
	18,937,227	9,843,207	40,042	59,204,476	164,956	88,189,908	2,303,877

Total Charity Care Expense
2,796,890

Total Charity Care as % of Net Revenue
2.0%

Birthing Data

Number of Total Births:	0
Number of Live Births:	0
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	0
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	0
CSections Performed:	0

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	0	0	0
Patient Days	0	0	0
Total Newborn Patient Days			**0**

Laboratory Studies

Inpatient Studies	105,227
Outpatient Studies	257,566
Studies Performed Under Contract	97,677

Organ Transplantation

Kidney:	0
Heart:	0
Lung:	0
Heart/Lung:	0
Pancreas:	0
Liver:	0
Total:	**0**

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	0	0	0	0	11	37	24	35	59	2.2	0.9
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	9	9	350	2241	642	1521	2163	1.8	0.7
Gastroenterology	0	0	0	0	0	0	0	0	0	0.0	0.0
Neurology	0	0	0	0	0	0	0	0	0	0.0	0.0
OB/Gynecology	0	0	0	0	1	78	6	82	88	6.0	1.1
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	0	0	0	343	0	370	370	0.0	1.1
Orthopedic	0	0	0	0	326	2061	850	3072	3922	2.6	1.5
Otolaryngology	0	0	0	0	3	91	4	116	120	1.3	1.3
Plastic Surgery	0	0	0	0	0	0	0	0	0	0.0	0.0
Podiatry	0	0	0	0	23	260	75	363	438	3.3	1.4
Thoracic	0	0	0	0	0	0	0	0	0	0.0	0.0
Urology	0	0	0	0	42	42	60	39	99	1.4	0.9
Totals	**0**	**0**	**9**	**9**	**756**	**5153**	**1661**	**5598**	**7259**	**2.2**	**1.1**

SURGICAL RECOVERY STATIONS — Stage 1 Recovery Stations: 10 — Stage 2 Recovery Stations: 26

Dedicated and Non-Dedicated Procedure Room Utilization

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	3	3	413	2977	206	1489	1695	0.5	0.5
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	0	0	0	0	0	0	0	0.0	0.0
Cystoscopy	0	0	0	0	0	0	0	0	0	0.0	0.0
Multipurpose Non-Dedicated Rooms											
					0	0	0	0	0	0.0	0.0
					0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center		No
Level of Trauma Service	Level 1	Level 2
Operating Rooms Dedicated for Trauma Care		0
Number of Trauma Visits:		0
Patients Admitted from Trauma		0
Emergency Service Type:		Comprehensive
Number of Emergency Room Stations		16
Persons Treated by Emergency Services:		36,958
Patients Admitted from Emergency:		3,767
Total ED Visits (Emergency+Trauma):		**36,958**

Free-Standing Emergency Center

Beds in Free-Standing Centers	0
Patient Visits in Free-Standing Centers	0
Hospital Admissions from Free-Standing Center	0

Outpatient Service Data

Total Outpatient Visits	**114,386**
Outpatient Visits at the Hospital/ Campus:	114,386
Outpatient Visits Offsite/off campus	0

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	**2**
Cath Labs used for Angiography procedures	2
Dedicated Diagnostic Catheterization Lab	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	**281**
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	183
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	68
EP Catheterizations (15+)	30

Cardiac Surgery Data

Total Cardiac Surgery Cases:	**0**
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	0
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	0

Diagnostic/Interventional Equipment	Owned	Contract	Examinations: Inpatient	Examinations: Outpt	Examinations: Contract	Therapeutic Equipment	Owned	Contract	Therapies/ Treatments
General Radiography/Fluoroscopy	5	0	5,633	22,378	0	*Lithotripsy*	0	0	0
Nuclear Medicine	2	0	222	867	0	*Linear Accelerator*	1	0	3,526
Mammography	4	0	0	11,619	0	Image Guided Rad Therapy			940
Ultrasound	3	0	1,359	6,689	0	Intensity Modulated Rad Thrpy			1,810
Angiography	2	0				High Dose Brachytherapy	0	0	0
Diagnostic Angiography			86	203	0	*Proton Beam Therapy*	0	0	0
Interventional Angiography			259	213	0	*Gamma Knife*	0	0	0
Positron Emission Tomography (PET)	0	0	0	0	0	*Cyber knife*	0	0	0
Computerized Axial Tomography (CAT)	2	0	2,668	9,089	0				
Magnetic Resonance Imaging	1	0	455	2,929	0				

Source: 2017 Annual Hospital Questionnaire, Illinois Department of Public Health, Health Systems Development.

Hospital Profile - CY 2018 **Rush Oak Park Hospital, Inc.** **Oak Park**

Ownership, Management and General Information

ADMINISTRATOR NAME:	Bruce Elegant
ADMINSTRATOR PHONE:	708-660-6663
OWNERSHIP:	Rush University Medical Center
OPERATOR:	Rush University Medical Center
MANAGEMENT:	Not for Profit Corporation
CERTIFICATION:	
FACILITY DESIGNATION:	General Hospital
ADDRESS	520 S. Maple Avenue **CITY:** Oak Park **COUNTY:** Suburban Cook County

Patients by Race

White	46.5%
Black	44.9%
American Indian	0.3%
Asian	0.8%
Hawaiian/ Pacific	0.1%
Unknown	7.4%

Patients by Ethnicity

Hispanic or Latino:	8.3%
Not Hispanic or Latino:	91.6%
Unknown:	0.1%

IDPH Number:	1750
HPA	A-06
HSA	7

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2018	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	151	73	73	3,356	11,963	1,216	3.9	36.1	23.9	49.5
0-14 Years				*0*	*0*					
15-44 Years				*476*	*1,442*					
45-64 Years				*1,034*	*3,644*					
65-74 Years				*761*	*2,703*					
75 Years +				*1,085*	*4,174*					
Pediatric	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Intensive Care	14	14	14	902	2,392	29	2.7	6.6	47.4	47.4
Direct Admission				*736*	*2,009*					
Transfers				*166*	*383*					
Obstetric/Gynecology	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Maternity				*0*	*0*					
Clean Gynecology				*0*	*0*					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	36	21	20	360	5,460	0	15.2	15.0	41.6	71.2
Swing Beds			0	0	0		0.0	0.0		
Total AMI	0			0	0	0	0.0	0.0	0.0	
Adolescent AMI		0	0	0	0	0	0.0	0.0		0.0
Adult AMI		0	0	0	0	0	0.0	0.0		0.0
Rehabilitation	0	10	10	18	298	0	16.6	0.8	0.0	8.2
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	**201**			**4,470**	**20,113**	**1,245**	**4.8**	**58.5**	**29.1**	

(Includes ICU Direct Admissions Only)

Inpatients and Outpatients Served by Payor Source

	Medicare	*Medicaid*	*Other Public*	*Private Insurance*	*Private Pay*	*Charity Care*	*Totals*
Inpatients	**63.9%**	**13.8%**	**0.0%**	**20.0%**	**1.3%**	**1.0%**	
	2856	615	0	895	59	45	**4,470**
Outpatients	**30.8%**	**18.4%**	**0.1%**	**45.8%**	**2.0%**	**2.9%**	
	38384	22922	74	57057	2549	3602	**124,588**

Financial Year Reported: 7/1/2017 to 6/30/2018

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	*Medicaid*	*Other Public*	*Private Insurance*	*Private Pay*	*Totals*	*Charity Care Expense*
Inpatient Revenue ($)	**59.9%**	**15.9%**	**0.0%**	**24.3%**	**-0.2%**	**100.0%**	
	25,857,529	6,870,809	13,749	10,491,266	-80,479	43,152,874	611,142
Outpatient Revenue ($)	**22.1%**	**10.8%**	**0.1%**	**66.5%**	**0.6%**	**100.0%**	
	21,824,468	10,675,377	49,843	65,673,495	598,386	98,821,569	2,214,229

Total Charity Care Expense 2,825,371

Total Charity Care as % of Net Revenue 2.0%

Birthing Data

Number of Total Births:	0
Number of Live Births:	0
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	0
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	0
CSections Performed:	0

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	0	0	0
Patient Days	0	0	0
Total Newborn Patient Days			**0**

Laboratory Studies

Inpatient Studies	101,317
Outpatient Studies	289,579
Studies Performed Under Contract	110,520

Organ Transplantation

Kidney:	0
Heart:	0
Lung:	0
Heart/Lung:	0
Pancreas:	0
Liver:	0
Total:	**0**

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	0	0	0	0	10	1	3	1	4	0.3	1.0
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	9	9	400	2672	715	1778	2493	1.8	0.7
Gastroenterology	0	0	0	0	0	0	0	0	0	0.0	0.0
Neurology	0	0	0	0	0	0	0	0	0	0.0	0.0
OB/Gynecology	0	0	0	0	0	60	0	61	61	0.0	1.0
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	0	0	0	308	0	323	323	0.0	1.0
Orthopedic	0	0	0	0	259	1972	630	2887	3517	2.4	1.5
Otolaryngology	0	0	0	0	4	173	7	229	236	1.8	1.3
Plastic Surgery	0	0	0	0	2	15	13	71	84	6.5	4.7
Podiatry	0	0	0	0	47	271	72	363	435	1.5	1.3
Thoracic	0	0	0	0	35	90	65	90	155	1.9	1.0
Urology	0	0	0	0	39	34	41	38	79	1.1	1.1
Totals	**0**	**0**	**9**	**9**	**796**	**5596**	**1546**	**5841**	**7387**	**1.9**	**1.0**

SURGICAL RECOVERY STATIONS	Stage 1 Recovery Stations	10	Stage 2 Recovery Stations	26

Dedicated and Non-Dedicated Procedure Room Utilzation

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	3	3	403	3259	202	1725	1927	0.5	0.5
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	0	0	0	0	0	0	0	0.0	0.0
Cystoscopy	0	0	0	0	0	0	0	0	0	0.0	0.0
Multipurpose Non-Dedicated Rooms											
					0	0	0	0	0	0.0	0.0
					0	0	0	0	0	0.0	0.0
					0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center		No
Level of Trauma Service	**Level 1**	**Level 2**
Operating Rooms Dedicated for Trauma Care		0
Number of Trauma Visits:		0
Patients Admitted from Trauma		0
Emergency Service Type:		Comprehensive
Number of Emergency Room Stations		16
Persons Treated by Emergency Services:		37,696
Patients Admitted from Emergency:		3,733
Total ED Visits (Emergency+Trauma):		**37,696**

Free-Standing Emergency Center

Beds in Free-Standing Centers	0
Patient Visits in Free-Standing Centers	0
Hospital Admissions from Free-Standing Center	0

Outpatient Service Data

Total Outpatient Visits	**124,588**
Outpatient Visits at the Hospital/ Campus:	124,588
Outpatient Visits Offsite/off campus	0

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	**2**
Cath Labs used for Angiography procedures	2
Dedicated Diagnostic Catheterization Labs	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	**280**
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	197
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	55
EP Catheterizations (15+)	28

Cardiac Surgery Data

Total Cardiac Surgery Cases:	**0**
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	0
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	0

Diagnostic/Interventional Equipment			Examinations			Therapeutic Equipment			Therapies/ Treatments
	Owned	*Contract*	*Inpatient*	*Outpt*	*Contract*		*Owned*	*Contract*	
General Radiography/Fluoroscopy	5	0	5,450	21,533	0	*Lithotripsy*	0	0	0
Nuclear Medicine	2	0	215	935	0	*Linear Accelerator*	1	0	4,400
Mammography	2	0	0	7,314	0	Image Guided Rad Therapy			1,023
Ultrasound	3	0	1,457	7,868	0	Intensity Modulated Rad Thrpy			2,386
Angiography	2	0				High Dose Brachytherapy	0	0	0
Diagnostic Angiography			68	76	0	*Proton Beam Therapy*	0	0	0
Interventional Angiography			101	99	0	*Gamma Knife*	0	0	0
Positron Emission Tomography (PET)	0	0	0	0	0	*Cyber knife*	0	0	0
Computerized Axial Tomography (CAT)	2	0	3,050	10,605	0				
Magnetic Resonance Imaging	1	0	466	3,325	0				

Source: 2018 Annual Hospital Questionnaire, Illinois Department of Public Health, Health Systems Development.

Attachment 7
Impact on Access

The discontinuation of the skilled nursing category of service at Rush Oak Park Hospital will not have an adverse effect upon access to care for residents of the facility's market area. Given Rush Oak Park Hospital's location in a densely population region of the state, there are ample skilled nursing options both in the HSA and within the market area. There are three other hospital based skilled nursing units similar to Rush Oak Park Hospital, four other hospital based units in the Market Area, and 195 free standing skilled nursing facilities in the HSA. All of the hospital based skilled nursing units are operating below state target utilization for the category. Thus, capacity exists within the marketplace to accommodate any gap in care created by the discontinuation and this discontinuation will actually provide stability to those remaining facilities by shifting the patient population to those existing providers.

Rush Oak Park Hospital is located in Health Service Area ("HSA") 7 in Oak Park, Illinois. Under 77 Illinois Admin. Code Section 1100.510(d)(1) the market area is 10 miles surrounding the facility. Within the market area, the following hospitals operate skilled nursing units:

- Gottlieb Memorial Hospital operates a 34-bed skilled nursing unit;
- Community First Medical Center operates a 66-bed skilled nursing unit;
- Presence Saint Elizabeth Hospital operates a 28-bed skilled nursing unit;
- Presence Saint Joseph Hospital operates a 26-bed skilled nursing unit;
- MacNeal Hospital operates a 25-bed skilled nursing unit;
- Swedish Covenant Hospital operates a 37-skilled nursing unit; and
- West Suburban Medical Center operates a 50-bed skilled nursing unit.

As reflected in the table below, the skilled nursing units at each hospital in HSA 1 and within the Market area are all operating below state target utilization for the category of service. The utilization rare for nursing care in the entirety (including hospital based units and free standing facilities) of HSA 7 was 67.2% in 2018. Given the 195 freestanding skilled nursing facilities in the HSA, Rush Oak Park Hospital maintains a preferred network of skilled nursing providers. Communications between Rush Oak Park Hospital and these facilities are streamlined and the medical doctors and nurse practitioners are part of the Rush network, which is a single healthcare system. This coordination of patient care allows for better transitions from hospital to skilled nursing. We have enclosed a list of Rush preferred providers that met certain performance thresholds based on metrics submitted to Rush that measure quality of care delivered by the provider, efficiency, communication with other care providers, and patient experience. Of the 62 preferred providers, 5 of the facilities have Rush affiliated Medical Directors. However, this list is not exclusive and patients still have the ability to choose from the 133 other freestanding skilled nursing facilities not included in the list.

Utilization by Year of Hospitals in Market Area and HSA 1

	2015	2016	2017	2018
Gottlieb Memorial Hospital	76.1	76.4	73.5	73.5
Community First Medical Center	58.9	55.6	61.3	51.3
Presence Saint Elizabeth Hospital	78.1	83.1	80.1	73.9
Presence Saint Joseph Hospital	64.4	78.4	78.6	75.0
MacNeal Hospital*	0	0	0	71.4
Swedish Covenant Hospital	42.1	43.9	44.1	38.7
West Suburban Medical Center	57.6	54	52.8	45.8

**MacNeal Hospital has a 25 skilled nursing unit at the hospital that were originally approved as under the Alternative Health Care Delivery Act (210 ILCS 3) as a Sub-Acute Care Hospital model in Permit #94-080. Upon approval of E-001-18, the HFSRB re-categorized the beds as Long-Term Care, as a result no utilization data is available for the beds*

Attachment 7
Utilization Reports for Healthcare Facilities in HSA and Market Area

Hospital Profile - CY 2015 | Presence Saint Joseph Hospital Chicago | Chicago | Page 1

Ownership, Management and General Information

ADMINISTRATOR NAME:	Roberta Luskin-Hawk
ADMINSTRATOR PHONE	773-665-3972
OWNERSHIP:	Presence Saint Joseph Hospital
OPERATOR:	Presence Saint Joseph Hospital
MANAGEMENT:	Church-Related
CERTIFICATION:	(Not Answered)
FACILITY DESIGNATION:	General Hospital
ADDRESS	2900 North Lake Shore Drive **CITY:** Chicago **COUNTY:** Suburban Cook (Chicago)

Patients by Race

White	56.9%
Black	19.2%
American Indian	0.1%
Asian	5.0%
Hawaiian/ Pacific	0.2%
Unknown	18.6%

Patients by Ethnicity

Hispanic or Latino:	7.7%
Not Hispanic or Latino:	90.1%
Unknown:	2.2%

IDPH Number:	5983
HPA	A-01
HSA	6

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2015	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	208	166	118	6,632	31,592	4,085	5.4	97.7	47.0	58.9
0-14 Years				*0*	*0*					
15-44 Years				*1,498*	*8,400*					
45-64 Years				*2,012*	*10,195*					
65-74 Years				*1,191*	*5,036*					
75 Years +				*1,931*	*7,961*					
Pediatric	11	7	5	118	355	87	3.7	1.2	11.0	17.3
Intensive Care	21	19	19	1,090	3,471	12	3.2	9.5	45.4	50.2
Direct Admission				*845*	*2,644*					
Transfers				*245*	*827*					
Obstetric/Gynecology	23	20	20	1,571	3,701	79	2.4	10.4	45.0	51.8
Maternity				*1,349*	*3,110*					
Clean Gynecology				*222*	*591*					
Neonatal	15	15	13	187	1,518	0	8.1	4.2	27.7	27.7
Long Term Care	26	25	25	719	6,113	0	8.5	16.7	64.4	67.0
Swing Beds			0	0	0		0.0	0.0		
Acute Mental Illness	34	34	34	1,575	8,654	0	5.5	23.7	69.7	69.7
Rehabilitation	23	23	11	188	2,004	0	10.7	5.5	23.9	23.9
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	**361**			**11,835**	**57,408**	**4,263**	**5.2**	**169.0**	**46.8**	

(Includes ICU Direct Admissions Only)

Inpatients and Outpatients Served by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Charity Care	Totals
Inpatients	**42.2%**	**6.6%**	**0.0%**	**43.4%**	**1.0%**	**6.7%**	
	4993	786	0	5140	123	794	**11,836**
Outpatients	**29.1%**	**5.5%**	**0.0%**	**61.0%**	**2.2%**	**2.2%**	
	34082	6397	0	71402	2556	2531	**116,968**

Financial Year Reported: 1/1/2015 *to* 12/31/2015

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Totals	Charity Care Expense
Inpatient Revenue ($)	**37.0%**	**7.1%**	**0.0%**	**55.5%**	**0.4%**	**100.0%**	
	48,607,103	9,300,603	0	72,801,956	563,476	131,273,138	1,437,204
Outpatient Revenue ($)	**45.2%**	**13.2%**	**0.0%**	**33.3%**	**8.3%**	**100.0%**	
	32,614,256	9,517,719	0	23,997,306	5,954,774	72,084,055	1,691,249

Total Charity Care Expense
3,128,453

Total Charity Care as % of Net Revenue
1.5%

Birthing Data

Number of Total Births:	1,393
Number of Live Births:	1,388
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	1
Labor-Delivery-Recovery-Postpartum Rooms:	17
C-Section Rooms:	2
CSections Performed:	495

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	0	0	0
Patient Days	2,241	556	2,188
Total Newborn Patient Days			**4,985**

Laboratory Studies

Inpatient Studies	352,774
Outpatient Studies	144,149
Studies Performed Under Contract	4,677

Organ Transplantation

Kidney:	0
Heart:	0
Lung:	0
Heart/Lung:	0
Pancreas:	0
Liver:	0
Total:	**0**

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	0	0	1	1	206	168	696	218	914	3.4	1.3
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	4	6	10	637	1127	1325	1462	2787	2.1	1.3
Gastroenterology	0	0	0	0	0	1	0	1	1	0.0	1.0
Neurology	0	0	0	0	54	49	154	103	257	2.9	2.1
OB/Gynecology	0	0	0	0	110	486	356	825	1181	3.2	1.7
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	0	0	4	968	6	795	801	1.5	0.8
Orthopedic	0	0	0	0	360	979	815	1355	2170	2.3	1.4
Otolaryngology	0	0	0	0	9	491	8	461	469	0.9	0.9
Plastic Surgery	0	0	0	0	29	324	113	1150	1263	3.9	3.5
Podiatry	0	0	0	0	45	334	75	504	579	1.7	1.5
Thoracic	0	0	0	0	31	9	74	13	87	2.4	1.4
Urology	0	0	0	0	102	273	192	311	503	1.9	1.1
Totals	**0**	**4**	**7**	**11**	**1587**	**5209**	**3814**	**7198**	**11012**	**2.4**	**1.4**

SURGICAL RECOVERY STATIONS Stage 1 Recovery Stations 47 Stage 2 Recovery Stations 37

Dedicated and Non-Dedicated Procedure Room Utilization

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	4	1	5	777	3529	703	2713	3416	0.9	0.8
Laser Eye Procedures	0	0	1	1	2	129	4	229	233	2.0	1.8
Pain Management	0	0	0	0	0	0	0	0	0	0.0	0.0
Cystoscopy	0	0	1	1	66	204	63	204	267	1.0	1.0
Multipurpose Non-Dedicated Rooms											
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center	No
Level of Trauma Service	**Level 1** (Not Answered) **Level 2** Not Answered
Operating Rooms Dedicated for Trauma Care	0
Number of Trauma Visits:	1
Patients Admitted from Trauma	0
Emergency Service Type:	Comprehensive
Number of Emergency Room Stations	22
Persons Treated by Emergency Services:	20,385
Patients Admitted from Emergency:	6,861
Total ED Visits (Emergency+Trauma):	**20,386**

Free-Standing Emergency Center

Beds in Free-Standing Centers	0
Patient Visits in Free-Standing Centers	0
Hospital Admissions from Free-Standing Center	0

Outpatient Service Data

Total Outpatient Visits	**116,968**
Outpatient Visits at the Hospital/ Campus:	116,968
Outpatient Visits Offsite/off campus	0

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	**2**
Cath Labs used for Angiography procedures	0
Dedicated Diagnostic Catheterization Lab	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	**895**
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	501
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	264
EP Catheterizations (15+)	130

Cardiac Surgery Data

Total Cardiac Surgery Cases:	**83**
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	83
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	64

Diagnostic/Interventional Equipment

	Owned	Contract	Examinations Inpatient	Outpt	Contract
General Radiography/Fluoroscopy	17	0	1,167	18,557	0
Nuclear Medicine	3	0	359	1,433	0
Mammography	3	0	3	8,221	0
Ultrasound	7	0	2,858	10,417	0
Angiography	0	0			
Diagnostic Angiography			0	0	0
Interventional Angiography			0	0	0

Therapeutic Equipment

	Owned	Contract	Therapies/ Treatments
Lithotripsy	0	0	0
Linear Accelerator	1	0	2,103
Image Guided Rad Therapy			1,155
Intensity Modulated Rad Thrpy			837
High Dose Brachytherapy	1	0	22
Proton Beam Therapy	0	0	0
Gamma Knife	0	0	0

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	0	0	1	1	134	146	406	179	585	3.0	1.2
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	5	5	653	1130	1318	1377	2695	2.0	1.2
Gastroenterology	0	0	0	0	0	0	0	0	0	0.0	0.0
Neurology	0	0	5	5	61	38	163	65	228	2.7	1.7
OB/Gynecology	0	0	5	5	110	522	334	852	1186	3.0	1.6
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	1	1	2	1116	2	828	830	1.0	0.7
Orthopedic	0	0	5	5	411	948	1006	1321	2327	2.4	1.4
Otolaryngology	0	0	5	5	3	473	2	493	495	0.7	1.0
Plastic Surgery	0	0	5	5	32	339	178	1155	1333	5.6	3.4
Podiatry	0	0	5	5	43	345	67	555	622	1.6	1.6
Thoracic	0	0	5	5	29	6	68	6	74	2.3	1.0
Urology	0	0	1	1	115	255	195	292	487	1.7	1.1
Totals	**0**	**0**	**43**	**43**	**1593**	**5318**	**3739**	**7123**	**10862**	**2.3**	**1.3**

SURGICAL RECOVERY STATIONS Stage 1 Recovery Stations 47 Stage 2 Recovery Stations 37

Dedicated and Non-Dedicated Procedure Room Utilization

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	0	0	0	0	0	0	0	0.0	0.0
Laser Eye Procedures	0	0	1	1	0	0	0	0	0	0.0	0.0
Pain Management	0	0	1	1	84	166	35	96	131	0.4	0.6
Cystoscopy	0	0	1	1	83	185	104	140	244	1.3	0.8

Multipurpose Non-Dedicated Rooms

0	0	0	0	0	0	0	0	0	0.0	0.0
0	0	0	0	0	0	0	0	0	0.0	0.0
0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center	No
Level of Trauma Service	**Level 1** (Not Answered) **Level 2** Not Answered
Operating Rooms Dedicated for Trauma Care	0
Number of Trauma Visits:	0
Patients Admitted from Trauma	0
Emergency Service Type:	Comprehensive
Number of Emergency Room Stations	22
Persons Treated by Emergency Services:	21,209
Patients Admitted from Emergency:	5,256
Total ED Visits (Emergency+Trauma):	**21,209**

Free-Standing Emergency Center

Beds in Free-Standing Centers	
Patient Visits in Free-Standing Centers	
Hospital Admissions from Free-Standing Center	

Outpatient Service Data

Total Outpatient Visits	**107,809**
Outpatient Visits at the Hospital/ Campus:	107,809
Outpatient Visits Offsite/off campus	0

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	**2**
Cath Labs used for Angiography procedures	0
Dedicated Diagnostic Catheterization Labs	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	**578**
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	236
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	221
EP Catheterizations (15+)	121

Cardiac Surgery Data

Total Cardiac Surgery Cases:	**46**
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	46
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	41

Diagnostic/Interventional Equipment	Owned	Contract	Examinations Inpatient	Outpt	Contract	Therapeutic Equipment	Owned	Contract	Therapies/ Treatments
General Radiography/Fluoroscopy	17	0	12,138	18,765	0	*Lithotripsy*	0	0	0
Nuclear Medicine	3	0	335	772	0	*Linear Accelerator*	1	0	3,748
Mammography	2	0	0	8,021	0	Image Guided Rad Therapy			1,913
Ultrasound	5	0	2,620	10,337	0	Intensity Modulated Rad Thrpy			1,148
Angiography	0	0				High Dose Brachytherapy	0	0	0
Diagnostic Angiography			0	0	0	*Proton Beam Therapy*	0	0	0
Interventional Angiography			0	0	0	*Gamma Knife*	0	0	0
Positron Emission Tomography (PET)	1	0	0	452	0	*Cyber knife*	0	0	0
Computerized Axial Tomography (CAT)	3	0	3,747	6,671	0				
Magnetic Resonance Imaging	2	0	1,470	3,883	0				

Hospital Profile - CY 2017 **Presence Saint Joseph Hospital - Chicago** **Chicago**

Ownership, Management and General Information

ADMINISTRATOR NAME:	James Leon Robinson
ADMINSTRATOR PHONE	773-665-3972
OWNERSHIP:	Presence Chicago Hospitals Network
OPERATOR:	Presence Chicago Hospitals Network
MANAGEMENT:	Church-Related
CERTIFICATION:	
FACILITY DESIGNATION:	General Hospital
ADDRESS	2900 North Lake Shore Drive CITY: Chicago COUNTY: Suburban Cook (Chicago)

Patients by Race

White	59.8%
Black	18.9%
American Indian	0.1%
Asian	4.9%
Hawaiian/ Pacific	0.1%
Unknown	16.3%

Patients by Ethnicity

Hispanic or Latino:	#Div/0!
Not Hispanic or Latino:	#Div/0!
Unknown:	#Div/0!

IDPH Number:	5983
HPA	A-01
HSA	6

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2017	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	208	192	142	7,666	39,047	4,376	5.7	119.0	57.2	62.0
0-14 Years				*0*	*0*					
15-44 Years				*2,188*	*12,227*					
45-64 Years				*2,419*	*12,510*					
65-74 Years				*1,218*	*5,575*					
75 Years +				*1,841*	*8,735*					
Pediatric	11	10	4	99	302	39	3.4	0.9	8.5	9.3
Intensive Care	21	19	15	1,076	3,142	26	2.9	8.7	41.3	45.7
Direct Admission				*835*	*2,170*					
Transfers				*241*	*972*					
Obstetric/Gynecology	23	23	19	1,272	3,303	150	2.7	9.5	41.1	41.1
Maternity				*1,227*	*3,219*					
Clean Gynecology				*45*	*84*					
Neonatal	15	15	14	211	2,100	0	10.0	5.8	38.4	38.4
Long Term Care	26	26	26	608	7,462	0	12.3	20.4	78.6	78.6
Swing Beds			0	0	0		0.0	0.0		
Total AMI	34			1,491	8,149	0	5.5	22.3	65.7	
Adolescent AMI		0	0	0	0	0	0.0	0.0		0.0
Adult AMI		34	34	1,491	8,149	0	5.5	22.3		65.7
Rehabilitation	23	10	0	154	1,825	0	11.9	5.0	21.7	50.0
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	**361**			**12,336**	**65,330**	**4,591**	**5.7**	**191.6**	**53.1**	

(Includes ICU Direct Admissions Only)

Inpatients and Outpatients Served by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Charity Care	Totals
Inpatients	31.2%	3.5%	0.0%	63.9%	1.1%	0.3%	
	3846	427	0	7888	133	42	**12,336**
Outpatients	30.7%	13.2%	0.0%	53.0%	2.5%	0.6%	
	24502	10536	0	42327	1970	452	**79,787**

Financial Year Reported: 1/1/2017 *to* 12/31/2017

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Totals	Charity Care Expense
Inpatient Revenue ($)	9.6%	24.1%	0.0%	63.4%	2.9%	100.0%	
	13,281,737	33,379,547	0	87,709,407	3,968,097	138,338,788	354,365
Outpatient Revenue ($)	9.6%	24.1%	0.0%	63.4%	2.9%	100.0%	
	7,373,401	18,530,768	0	48,692,174	2,202,903	76,799,246	454,772

Total Charity Care Expense 809,137

Total Charity Care as % of Net Revenue 0.4%

Birthing Data

Number of Total Births:	1,196
Number of Live Births:	1,190
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	1
Labor-Delivery-Recovery-Postpartum Rooms:	17
C-Section Rooms:	2
CSections Performed:	225

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	0	0	0
Patient Days	1,769	208	2,875

Total Newborn Patient Days **4,852**

Laboratory Studies

Inpatient Studies	326,352
Outpatient Studies	183,043
Studies Performed Under Contract	0

Organ Transplantation

Kidney:	0
Heart:	0
Lung:	0
Heart/Lung:	0
Pancreas:	0
Liver:	0
Total:	**0**

Hospital Profile - CY 2016 **Presence Saint Joseph Hospital - Chicago** **Chicago**

Ownership, Management and General Information

ADMINISTRATOR NAME:	Martin Judd
ADMINSTRATOR PHONE:	312-770-2115
OWNERSHIP:	Presence Chicago Hospitals Network
OPERATOR:	Presence Chicago Hospitals Network
MANAGEMENT:	Church-Related
CERTIFICATION:	(Not Answered)
FACILITY DESIGNATION:	General Hospital
ADDRESS	2900 North Lake Shore Drive **CITY:** Chicago **COUNTY:** Suburban Cook (Chicago)

Patients by Race

White	58.8%
Black	18.7%
American Indian	0.1%
Asian	4.9%
Hawaiian/ Pacific	0.1%
Unknown	17.5%

Patients by Ethnicity

Hispanic or Latino:	5.3%
Not Hispanic or Latino:	92.0%
Unknown:	2.8%

IDPH Number:	5983
HPA	A-01
HSA	6

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2016	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	208	166	143	7,202	36,755	4,482	5.7	112.7	54.2	67.9
0-14 Years				*0*	*0*					
15-44 Years				*2,062*	*10,790*					
45-64 Years				*2,299*	*12,440*					
65-74 Years				*1,077*	*5,005*					
75 Years +				*1,764*	*8,520*					
Pediatric	11	7	4	123	333	75	3.3	1.1	10.1	15.9
Intensive Care	21	19	17	1,079	2,909	15	2.7	8.0	38.0	42.0
Direct Admission				*881*	*2,266*					
Transfers - Not included in Facility Admissions				*198*	*643*					
Obstetric/Gynecology	23	20	19	1,416	3,626	69	2.6	10.1	43.9	50.5
Maternity				*1,332*	*3,378*					
Clean Gynecology				*84*	*248*					
Neonatal	15	15	12	175	1,972	0	11.3	5.4	35.9	35.9
Long Term Care	26	25	21	572	7,463	0	13.0	20.4	78.4	81.6
Swing Beds			0	0	0		0.0	0.0		
Total AMI	34			1,367	8,080	0	5.9	22.1	64.9	
Adolescent AMI		0	0	0	0	0	0.0	0.0		0.0
Adult AMI		34	33	1,367	8,080	0	5.9	22.1		64.9
Rehabilitation	23	23	10	183	2,137	0	11.7	5.8	25.4	25.4
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	**361**			**11,919**	**63,275**	**4,641**	**5.7**	**185.6**	**51.4**	

Inpatients and Outpatients Served by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Charity Care	Totals
Inpatients	35.8%	3.9%	0.0%	52.8%	1.4%	6.1%	
	4271	464	0	6293	168	723	**11,919**
Outpatients	30.0%	2.8%	0.0%	60.7%	2.4%	4.1%	
	32332	3000	0	65433	2599	4445	**107,809**

Financial Year Reported: 1/1/2016 *to* 12/31/2016

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Totals	Charity Care Expense
Inpatient Revenue ($)	23.5%	9.9%	0.0%	63.2%	3.3%	100.0%	
	48,781,371	20,516,947	0	131,083,808	6,918,270	207,300,396	727,799
Outpatient Revenue ($)	23.5%	9.9%	0.0%	63.2%	3.3%	100.0%	
	18,033,995	7,584,914	0	48,460,400	2,557,617	76,636,926	1,520,340

Total Charity Care Expense 2,248,139

Total Charity Care as % of Net Revenue 0.8%

Birthing Data

Number of Total Births:	1,337
Number of Live Births:	1,332
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	1
Labor-Delivery-Recovery-Postpartum Rooms:	17
C-Section Rooms:	2
CSections Performed:	497

Newborn Nursery Utilization

	Level I	Level II	Level III+
Beds	0	0	0
Patient Days	2,116	417	2,322
Total Newborn Patient Days			**4,855**

Laboratory Studies

Inpatient Studies	332,061
Outpatient Studies	151,830
Studies Performed Under Contract	4,890

Organ Transplantation

Kidney:	
Heart:	
Lung:	
Heart/Lung:	
Pancreas:	
Liver:	
Total:	

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	0	0	1	1	144	145	286	37	323	2.0	0.3
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	5	5	594	1087	1484	1578	3062	2.5	1.5
Gastroenterology	0	0	0	0	0	0	0	0	0	0.0	0.0
Neurology	0	0	5	5	66	45	183	81	264	2.8	1.8
OB/Gynecology	0	0	5	5	112	515	349	902	1251	3.1	1.8
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	1	1	8	1080	16	748	764	2.0	0.7
Orthopedic	0	0	5	5	444	868	1096	1160	2256	2.5	1.3
Otolaryngology	0	0	5	5	8	368	7	448	455	0.9	1.2
Plastic Surgery	0	0	5	5	23	371	102	1286	1388	4.4	3.5
Podiatry	0	0	5	5	27	328	51	511	562	1.9	1.6
Thoracic	0	0	5	5	35	9	85	9	94	2.4	1.0
Urology	0	0	1	1	107	278	175	299	474	1.6	1.1
Totals	**0**	**0**	**43**	**43**	**1568**	**5094**	**3834**	**7059**	**10893**	**2.4**	**1.4**

SURGICAL RECOVERY STATIONS Stage 1 Recovery Stations 47 Stage 2 Recovery Stations 37

Dedicated and Non-Dedicated Procedure Room Utilzation

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	0	0	0	0	0	0	0	0.0	0.0
Laser Eye Procedures	0	0	1	1	0	0	0	0	0	0.0	0.0
Pain Management	0	0	1	1	204	1246	86	549	635	0.4	0.4
Cystoscopy	0	0	1	1	52	156	80	268	348	1.5	1.7
Multipurpose Non-Dedicated Rooms											
					0	0	0	0	0	0.0	0.0
					0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center		No
Level of Trauma Service	**Level 1**	**Level 2**
Operating Rooms Dedicated for Trauma Care		0
Number of Trauma Visits:		0
Patients Admitted from Trauma		0
Emergency Service Type:		Comprehensive
Number of Emergency Room Stations		22
Persons Treated by Emergency Services:		21,916
Patients Admitted from Emergency:		6,043
Total ED Visits (Emergency+Trauma):		**21,916**

Free-Standing Emergency Center

Beds in Free-Standing Centers	0
Patient Visits in Free-Standing Centers	0
Hospital Admissions from Free-Standing Center	0

Outpatient Service Data

Total Outpatient Visits	**79,787**
Outpatient Visits at the Hospital/ Campus:	79,787
Outpatient Visits Offsite/off campus	0

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	**2**
Cath Labs used for Angiography procedures	0
Dedicated Diagnostic Catheterization Lab	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	**701**
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	286
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	268
EP Catheterizations (15+)	147

Cardiac Surgery Data

Total Cardiac Surgery Cases:	**46**
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	46
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	25

Diagnostic/Interventional Equipment	Owned	Contract	Examinations Inpatient	Outpt	Contract	Therapeutic Equipment	Owned	Contract	Therapies/ Treatments
General Radiography/Fluoroscopy	17	0	11,870	18,265	0	*Lithotripsy*	0	0	0
Nuclear Medicine	3	0	289	719	0	*Linear Accelerator*	1	0	3,596
Mammography	2	0	0	8,152	0	Image Guided Rad Therapy			3,275
Ultrasound	5	0	2,598	10,995	0	Intensity Modulated Rad Thrpy			1,264
Angiography	0	0				High Dose Brachytherapy	1	0	72
Diagnostic Angiography			0	0	0	*Proton Beam Therapy*	1	0	44
Interventional Angiography			0	0	0	*Gamma Knife*	0	0	0
Positron Emission Tomography (PET)	1	0	0	439	0	*Cyber knife*	0	0	0
Computerized Axial Tomography (CAT)	3	0	3,744	6,966	0				
Magnetic Resonance Imaging	2	0	1,622	3,786	0				

Hospital Profile - CY 2018 **Presence Saint Joseph Hospital - Chicago** **Chicago**

Ownership, Management and General Information

ADMINISTRATOR NAME:	John Baird
ADMINSTRATOR PHONE:	773-665-3000
OWNERSHIP:	Presence Chicago Hospitals Network
OPERATOR:	Presence Chicago Hospitals Network
MANAGEMENT:	Church-Related
CERTIFICATION:	
FACILITY DESIGNATION:	General Hospital
ADDRESS	2900 North Lake Shore Drive CITY: Chicago COUNTY: Suburban Cook (Chicago)

Patients by Race

White	58.1%
Black	17.3%
American Indian	0.2%
Asian	6.3%
Hawaiian/ Pacific	0.1%
Unknown	18.1%

Patients by Ethnicity

Hispanic or Latino:	0.0%
Not Hispanic or Latino:	81.9%
Unknown:	18.1%

IDPH Number:	5983
HPA	A-01
HSA	6

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2018	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	208	192	124	7,330	35,177	3,679	5.3	106.5	51.2	55.4
0-14 Years				*0*	*0*					
15-44 Years				*2,160*	*11,459*					
45-64 Years				*2,281*	*11,379*					
65-74 Years				*1,133*	*4,776*					
75 Years +				*1,756*	*7,563*					
Pediatric	11	10	0	62	251	19	4.4	0.7	6.7	7.4
Intensive Care	21	19	15	957	2,635	23	2.8	7.3	34.7	38.3
Direct Admission				*736*	*1,894*					
Transfers				*221*	*741*					
Obstetric/Gynecology	23	23	17	883	2,275	88	2.7	6.5	28.1	28.1
Maternity				*824*	*2,161*					
Clean Gynecology				*59*	*114*					
Neonatal	15	15	15	176	1,730	0	9.8	4.7	31.6	31.6
Long Term Care	26	26	0	598	7,118	0	11.9	19.5	75.0	75.0
Swing Beds			0	0	0		0.0	0.0		
Total AMI	34			1,011	5,174	0	5.1	14.2	41.7	
Adolescent AMI		0	0	0	0	0	0.0	0.0		0.0
Adult AMI		34	34	1,011	5,174	0	5.1	14.2		41.7
Rehabilitation	23	10	9	95	1,389	0	14.6	3.8	16.5	38.1
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	**361**			**10,891**	**55,749**	**3,809**	**5.5**	**163.2**	**45.2**	

(Includes ICU Direct Admissions Only)

Inpatients and Outpatients Served by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Charity Care	Totals
Inpatients	28.2%	7.2%	0.0%	63.1%	0.0%	1.5%	
	3075	786	0	6868	0	162	**10,891**
Outpatients	30.7%	11.4%	0.0%	53.3%	2.8%	1.9%	
	23701	8778	0	41107	2127	1483	**77,196**

Financial Year Reported: 1/1/2018 *to* 6/30/2018

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Totals	Charity Care Expense
Inpatient Revenue ($)	40.0%	17.7%	1.1%	40.9%	0.4%	100.0%	
	29,036,933	12,825,377	810,476	29,724,989	267,004	72,664,779	694,953
Outpatient Revenue ($)	21.8%	4.8%	2.7%	69.1%	1.6%	100.0%	
	6,999,788	1,523,620	876,149	22,172,268	502,268	32,074,093	819,303

Total Charity Care Expense **1,514,256**

Total Charity Care as % of Net Revenue **1.4%**

Birthing Data

Number of Total Births:	1,043
Number of Live Births:	1,039
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	0
Labor-Delivery-Recovery-Postpartum Rooms:	13
C-Section Rooms:	2
CSections Performed:	411

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	0	0	0
Patient Days	1,685	88	2,520
Total Newborn Patient Days			**4,293**

Laboratory Studies

Inpatient Studies	304,217
Outpatient Studies	179,055
Studies Performed Under Contract	0

Organ Transplantation

Kidney:	0
Heart:	0
Lung:	0
Heart/Lung:	0
Pancreas:	0
Liver:	0
Total:	**0**

Hospital Profile – CY 2018 **Presence Saint Joseph Hospital - Chicago** **Chicago**

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	0	0	1	1	121	193	403	245	648	3.3	1.3
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	11	11	479	1011	1133	1360	2493	2.4	1.3
Gastroenterology	0	0	0	0	0	0	0	0	0	0.0	0.0
Neurology	0	0	0	0	69	42	187	76	263	2.7	1.8
OB/Gynecology	0	0	0	0	117	465	374	742	1116	3.2	1.6
Oral/Maxillofacial	0	0	0	0	0	1	0	1	1	0.0	1.0
Ophthalmology	0	0	0	0	3	1134	4	769	773	1.3	0.7
Orthopedic	0	0	0	0	433	713	1040	972	2012	2.4	1.4
Otolaryngology	0	0	0	0	9	164	13	232	245	1.4	1.4
Plastic Surgery	0	0	0	0	35	309	201	1072	1273	5.7	3.5
Podiatry	0	0	0	0	38	265	62	404	466	1.6	1.5
Thoracic	0	0	0	0	21	6	47	5	52	2.2	0.8
Urology	0	0	1	1	88	231	150	260	410	1.7	1.1
Totals	**0**	**0**	**13**	**13**	**1413**	**4534**	**3614**	**6138**	**9752**	**2.6**	**1.4**

SURGICAL RECOVERY STATIONS Stage 1 Recovery Stations 12 Stage 2 Recovery Stations 51

Dedicated and Non-Dedicated Procedure Room Utilization

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	4	4	535	3191	799	2800	3599	1.5	0.9
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	1	1	16	1344	8	542	550	0.5	0.4
Cystoscopy	0	0	1	1	120	326	108	300	408	0.9	0.9
Multipurpose Non-Dedicated Rooms											
					0	0	0	0	0	0.0	0.0
					0	0	0	0	0	0.0	0.0
					0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center		No
Level of Trauma Service	Level 1	Level 2
Operating Rooms Dedicated for Trauma Care		0
Number of Trauma Visits:		0
Patients Admitted from Trauma		0
Emergency Service Type:		Comprehensive
Number of Emergency Room Stations		14
Persons Treated by Emergency Services:		20,871
Patients Admitted from Emergency:		5,310
Total ED Visits (Emergency+Trauma):		**20,871**

Free-Standing Emergency Center

Beds in Free-Standing Centers	0
Patient Visits in Free-Standing Centers	0
Hospital Admissions from Free-Standing Center	0

Outpatient Service Data

Total Outpatient Visits	**77,196**
Outpatient Visits at the Hospital/ Campus:	77,196
Outpatient Visits Offsite/off campus	0

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	**2**
Cath Labs used for Angiography procedures	0
Dedicated Diagnostic Catheterization Labs	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	**732**
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	298
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	282
EP Catheterizations (15+)	152

Cardiac Surgery Data

Total Cardiac Surgery Cases:	**42**
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	42
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	32

Diagnostic/Interventional Equipment	Owned	Contract	Examinations Inpatient	Outpt	Contract
General Radiography/Fluoroscopy	5	0	9,939	17,320	0
Nuclear Medicine	2	0	240	1,874	0
Mammography	2	0	2	14,587	0
Ultrasound	5	0	2,039	10,668	0
Angiography	0	0			
Diagnostic Angiography			0	0	0
Interventional Angiography			0	0	0
Positron Emission Tomography (PET)	1	0	5	404	0
Computerized Axial Tomography (CAT)	2	0	3,249	6,920	0
Magnetic Resonance Imaging	2	0	1,120	3,554	0

Therapeutic Equipment	Owned	Contract	Therapies/ Treatments
Lithotripsy	0	0	0
Linear Accelerator	1	0	2,653
Image Guided Rad Therapy			2,541
Intensity Modulated Rad Thrpy			902
High Dose Brachytherapy	1	0	96
Proton Beam Therapy	0	0	47
Gamma Knife	0	0	0
Cyber knife	0	0	0

Source: 2018 Annual Hospital Questionnaire, Illinois Department of Public Health, Health Systems Development.

Hospital Profile - CY 2015 | Gottlieb Memorial Hospital | Melrose Park | Page 1

Ownership, Management and General Information

ADMINISTRATOR NAME:	Lori Price
ADMINSTRATOR PHONE	708-450-4949
OWNERSHIP:	Gottlieb Memorial Hospital
OPERATOR:	Gottlieb Memorial Hospital
MANAGEMENT:	Not for Profit Corporation (Not Church-R
CERTIFICATION:	(Not Answered)
FACILITY DESIGNATION:	General Hospital
ADDRESS	701 West North Avenue **CITY:** Melrose Park **COUNTY:** Suburban Cook County

Patients by Race

White	75.6%
Black	17.7%
American Indian	0.1%
Asian	1.5%
Hawaiian/ Pacific	0.2%
Unknown	5.0%

Patients by Ethnicity

Hispanic or Latino:	23.3%
Not Hispanic or Latino:	74.9%
Unknown:	1.7%

IDPH Number:	5793
HPA	A-06
HSA	7

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2015	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	154	93	79	7,373	25,793	2,152	3.8	76.6	49.7	82.3
0-14 Years				*0*	*0*					
15-44 Years				*1,357*	*2,900*					
45-64 Years				*2,315*	*7,384*					
65-74 Years				*1,443*	*5,772*					
75 Years +				*2,258*	*9,737*					
Pediatric	4	4	1	33	39	27	2.0	0.2	4.5	4.5
Intensive Care	24	19	12	938	2,775	11	3.0	7.6	31.8	40.2
Direct Admission				*361*	*1,560*					
Transfers				*577*	*1,215*					
Obstetric/Gynecology	27	13	10	930	1,934	32	2.1	5.4	19.9	41.4
Maternity				*889*	*1,870*					
Clean Gynecology				*41*	*64*					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	34	32	29	511	9,441	0	18.5	25.9	76.1	80.8
Swing Beds			0	0	0		0.0	0.0		
Acute Mental Illness	12	12	10	225	3,267	11	14.6	9.0	74.8	74.8
Rehabilitation	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	**255**			**9,433**	**43,249**	**2,233**	**4.8**	**124.6**	**48.9**	

(Includes ICU Direct Admissions Only)

Inpatients and Outpatients Served by Payor Source

	Medicare	*Medicaid*	*Other Public*	*Private Insurance*	*Private Pay*	*Charity Care*	*Totals*
Inpatients	**49.6%**	**19.9%**	**0.4%**	**26.4%**	**2.9%**	**0.8%**	
	4678	1875	38	2492	277	73	**9,433**
Outpatients	**26.8%**	**24.5%**	**1.6%**	**40.9%**	**5.5%**	**0.7%**	
	11060	10135	645	16885	2261	304	**41,290**

Financial Year Reported: 7/1/2014 *to* 6/30/2015

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	*Medicaid*	*Other Public*	*Private Insurance*	*Private Pay*	*Totals*	*Charity Care Expense*
Inpatient Revenue ($)	**53.1%**	**23.4%**	**1.3%**	**20.7%**	**1.5%**	**100.0%**	
	28,233,390	12,430,946	692,982	11,014,981	785,410	53,157,709	1,386,932
Outpatient Revenue ($)	**40.2%**	**22.1%**	**1.1%**	**36.0%**	**0.7%**	**100.0%**	
	24,420,791	13,414,454	688,843	21,870,440	417,827	60,812,355	1,134,763

Total Charity Care Expense
2,521,695

Total Charity Care as % of Net Revenue
2.2%

Birthing Data

Number of Total Births:	805
Number of Live Births:	799
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	6
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	1
CSections Performed:	267

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	12	2	0
Patient Days	1,668	247	0

Total Newborn Patient Days: **1,915**

Laboratory Studies

Inpatient Studies	230,485
Outpatient Studies	126,502
Studies Performed Under Contract	19,491

Organ Transplantation

Kidney:	0
Heart:	0
Lung:	0
Heart/Lung:	0
Pancreas:	0
Liver:	0
Total:	**0**

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	2	0	0	2	75	0	565	0	565	7.5	0.0
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	6	6	530	737	1188	1411	2599	2.2	1.9
Gastroenterology	0	0	0	0	0	0	0	0	0	0.0	0.0
Neurology	0	0	0	0	36	22	126	74	200	3.5	3.4
OB/Gynecology	0	0	0	0	106	299	299	480	779	2.8	1.6
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	0	0	1	756	1	602	603	1.0	0.8
Orthopedic	0	0	0	0	621	1060	1948	2280	4228	3.1	2.2
Otolaryngology	0	0	0	0	17	109	23	182	205	1.4	1.7
Plastic Surgery	0	0	0	0	3	112	13	227	240	4.3	2.0
Podiatry	0	0	0	0	46	98	69	170	239	1.5	1.7
Thoracic	0	0	0	0	55	33	104	53	157	1.9	1.6
Urology	0	0	1	1	90	232	138	407	545	1.5	1.8
Totals	**2**	**0**	**7**	**9**	**1580**	**3458**	**4474**	**5886**	**10360**	**2.8**	**1.7**

SURGICAL RECOVERY STATIONS Stage 1 Recovery Stations 9 Stage 2 Recovery Stations 21

Dedicated and Non-Dedicated Procedure Room Utilzation

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	2	2	793	3095	674	2476	3150	0.8	0.8
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	0	0	0	0	0	0	0	0.0	0.0
Cystoscopy	0	0	0	0	0	0	0	0	0	0.0	0.0
Multipurpose Non-Dedicated Rooms											
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center		Yes
Level of Trauma Service	**Level 1**	**Level 2**
	(Not Answered)	Adult
Operating Rooms Dedicated for Trauma Care		0
Number of Trauma Visits:		500
Patients Admitted from Trauma		0
Emergency Service Type:		Comprehensive
Number of Emergency Room Stations		17
Persons Treated by Emergency Services:		26,156
Patients Admitted from Emergency:		6,395
Total ED Visits (Emergency+Trauma):		**26,656**

Free-Standing Emergency Center

Beds in Free-Standing Centers	0
Patient Visits in Free-Standing Centers	0
Hospital Admissions from Free-Standing Center	0

Outpatient Service Data

Total Outpatient Visits	**126,304**
Outpatient Visits at the Hospital/ Campus:	126,304
Outpatient Visits Offsite/off campus	0

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	**2**
Cath Labs used for Angiography procedures	2
Dedicated Diagnostic Catheterization Lab	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	**504**
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	405
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	46
EP Catheterizations (15+)	53

Cardiac Surgery Data

Total Cardiac Surgery Cases:	**75**
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	75
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	70

Diagnostic/Interventional Equipment	Owned	Contract	Examinations Inpatient	Outpt	Contract
General Radiography/Fluoroscopy	5	0	8,423	20,815	0
Nuclear Medicine	2	0	702	1,052	0
Mammography	2	0	29	9,787	0
Ultrasound	4	0	2,271	7,926	0
Angiography	2	0			
Diagnostic Angiography			0	0	0
Interventional Angiography			704	129	0
Positron Emission Tomography (PET)	0	0	0	0	0
Computerized Axial Tomography (CAT)	2	0	2,698	8,678	0
Magnetic Resonance Imaging	1	0	813	2,827	0

Therapeutic Equipment	Owned	Contract	Therapies/ Treatments
Lithotripsy	0	0	0
Linear Accelerator	0	0	0
Image Guided Rad Therapy			0
Intensity Modulated Rad Thrpy			0
High Dose Brachytherapy	0	0	0
Proton Beam Therapy	0	0	0
Gamma Knife	0	0	0
Cyber knife	0	0	0

Hospital Profile - CY 2016 **Gottlieb Memorial Hospital** **Melrose Park** Page 1

Ownership, Management and General Information

ADMINISTRATOR NAME:	Lori Price
ADMINSTRATOR PHONE:	(708) 450-4949
OWNERSHIP:	Gottlieb Memorial Hospital
OPERATOR:	Gottlieb Memorial Hospital
MANAGEMENT:	Not for Profit Corporation (Not Church-R
CERTIFICATION:	(Not Answered)
FACILITY DESIGNATION:	General Hospital
ADDRESS	701 West North Avenue CITY: Melrose Park COUNTY: Suburban Cook County

Patients by Race

White	76.8%
Black	16.8%
American Indian	0.0%
Asian	1.8%
Hawaiian/ Pacific	0.3%
Unknown	4.4%

Patients by Ethnicity

Hispanic or Latino:	22.3%
Not Hispanic or Latino:	77.2%
Unknown:	0.4%

IDPH Number:	5793
HPA	A-06
HSA	7

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2016	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	153	125	70	5,209	23,217	2,298	4.9	69.7	45.6	55.8
0-14 Years				*0*	*0*					
15-44 Years				*853*	*3,018*					
45-64 Years				*1,507*	*6,198*					
65-74 Years				*1,110*	*5,178*					
75 Years +				*1,739*	*8,823*					
Pediatric	4	4	1	11	18	23	3.7	0.1	2.8	2.8
Intensive Care	24	21	10	881	3,453	14	3.9	9.5	39.5	45.1
Direct Admission				*693*	*2,716*					
Transfers - Not included in Facility Admissions				*188*	*737*					
Obstetric/Gynecology	0	13	4	683	1,546	24	2.3	4.3	0.0	33.0
Maternity				*652*	*1,478*					
Clean Gynecology				*31*	*68*					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	34	32	27	587	9,502	0	16.2	26.0	76.4	81.1
Swing Beds			0	0	0		0.0	0.0		
Total AMI	12			202	2,983	0	14.8	8.2	67.9	
Adolescent AMI		0	0	0	0	0	0.0	0.0		0.0
Adult AMI		12	9	202	2,983	0	14.8	8.2		67.9
Rehabilitation	20	20	16	238	2,983	0	12.5	8.2	40.8	40.8
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	**247**			**7,623**	**43,702**	**2,359**	**6.0**	**125.8**	**51.0**	

Inpatients and Outpatients Served by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Charity Care	Totals
Inpatients	57.8%	18.0%	0.2%	22.1%	1.8%	0.1%	
	4406	1370	17	1682	137	11	**7,623**
Outpatients	36.7%	18.5%	1.2%	37.8%	5.5%	0.2%	
	31809	16034	1064	32794	4782	176	**86,659**

Financial Year Reported: 7/1/2015 *to* 6/30/2016

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Totals	Charity Care Expense
Inpatient Revenue ($)	60.1%	13.8%	0.2%	25.1%	0.9%	100.0%	
	34,066,952	7,820,317	100,168	14,211,618	490,443	56,689,498	640,000
Outpatient Revenue ($)	32.2%	15.7%	0.2%	45.8%	6.1%	100.0%	
	16,715,569	8,156,541	92,437	23,730,101	3,140,241	51,834,889	627,000

Total Charity Care Expense 1,267,000

Total Charity Care as % of Net Revenue 1.2%

Birthing Data

Number of Total Births:	585
Number of Live Births:	580
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	0
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	0
CSections Performed:	167

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	0	0	0
Patient Days	2,548	337	0
Total Newborn Patient Days			2,885

Laboratory Studies

Inpatient Studies	161,122
Outpatient Studies	156,483
Studies Performed Under Contract	64,605

Organ Transplantation

Kidney:	
Heart:	
Lung:	
Heart/Lung:	
Pancreas:	
Liver:	
Total:	

Hospital Profile - CY 2016 **Gottlieb Memorial Hospital** **Melrose Park**

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	2	0	0	2	65	0	495	0	495	7.6	0.0
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	6	6	526	636	1194	1334	2528	2.3	2.1
Gastroenterology	0	0	0	0	0	0	0	0	0	0.0	0.0
Neurology	0	0	0	0	31	17	119	59	178	3.8	3.5
OB/Gynecology	0	0	0	0	76	278	226	522	748	3.0	1.9
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	0	0	1	745	1	604	605	1.0	0.8
Orthopedic	0	0	0	0	694	1162	2236	2631	4867	3.2	2.3
Otolaryngology	0	0	0	0	19	96	28	180	208	1.5	1.9
Plastic Surgery	0	0	0	0	1	94	2	217	219	2.0	2.3
Podiatry	0	0	0	0	27	86	39	151	190	1.4	1.8
Thoracic	0	0	0	0	69	26	185	44	229	2.7	1.7
Urology	0	0	1	1	190	377	728	700	1428	3.8	1.9
Totals	**2**	**0**	**7**	**9**	**1699**	**3517**	**5253**	**6442**	**11695**	**3.1**	**1.8**

SURGICAL RECOVERY STATIONS Stage 1 Recovery Stations 9 Stage 2 Recovery Stations 20

Dedicated and Non-Dedicated Procedure Room Utilization

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	2	2	752	2770	698	2078	2776	0.9	0.8
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	0	0	0	0	0	0	0	0.0	0.0
Cystoscopy	0	0	0	0	0	0	0	0	0	0.0	0.0
Multipurpose Non-Dedicated Rooms											
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center		Yes
Level of Trauma Service	**Level 1**	**Level 2**
	(Not Answered)	Adult
Operating Rooms Dedicated for Trauma Care		1
Number of Trauma Visits:		462
Patients Admitted from Trauma		0
Emergency Service Type:		Comprehensive
Number of Emergency Room Stations		17
Persons Treated by Emergency Services:		26,223
Patients Admitted from Emergency:		6,563
Total ED Visits (Emergency+Trauma):		**26,685**

Free-Standing Emergency Center

Beds in Free-Standing Centers	
Patient Visits in Free-Standing Centers	
Hospital Admissions from Free-Standing Center	

Outpatient Service Data

Total Outpatient Visits	**86,659**
Outpatient Visits at the Hospital/ Campus:	86,659
Outpatient Visits Offsite/off campus	0

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	**2**
Cath Labs used for Angiography procedures	2
Dedicated Diagnostic Catheterization Labs	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	**445**
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	390
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	55
EP Catheterizations (15+)	0

Cardiac Surgery Data

Total Cardiac Surgery Cases:	**65**
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	65
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	56

Diagnostic/Interventional Equipment	Owned	Contract	Examinations Inpatient	Outpt	Contract
General Radiography/Fluoroscopy	11	0	8,551	19,926	0
Nuclear Medicine	2	0	723	944	0
Mammography	1	0	0	9,791	0
Ultrasound	5	0	2,278	7,443	0
Angiography	2	0			
Diagnostic Angiography			244	170	0
Interventional Angiography			45	108	0
Positron Emission Tomography (PET)	0	0	0	0	0
Computerized Axial Tomography (CAT)	2	0	2,882	8,912	0
Magnetic Resonance Imaging	1	0	772	2,317	0

Therapeutic Equipment	Owned	Contract	Therapies/ Treatments
Lithotripsy	0	0	0
Linear Accelerator	0	0	0
Image Guided Rad Therapy			0
Intensity Modulated Rad Thrpy			0
High Dose Brachytherapy	0	0	0
Proton Beam Therapy	0	0	0
Gamma Knife	0	0	0
Cyber knife	0	0	0

Hospital Profile - CY 2017 **Gottlieb Memorial Hospital** **Melrose Park** Page 1

Ownership, Management and General Information

ADMINISTRATOR NAME:	Lori Price
ADMINSTRATOR PHONE	708-450-4949
OWNERSHIP:	Gottlieb Memorial Hospital
OPERATOR:	Gottlieb Memorial Hospital
MANAGEMENT:	Not for Profit Corporation
CERTIFICATION:	
FACILITY DESIGNATION:	General Hospital
ADDRESS	701 West North Avenue

CITY: Melrose Park COUNTY: Suburban Cook County

Patients by Race

White	76.2%
Black	19.0%
American Indian	0.1%
Asian	1.7%
Hawaiian/ Pacific	0.2%
Unknown	2.8%

Patients by Ethnicity

Hispanic or Latino:	18.9%
Not Hispanic or Latino:	80.9%
Unknown:	0.3%

IDPH Number:	5793
HPA	A-06
HSA	7

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2017	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	153	83	83	4,490	22,122	2,116	5.4	66.4	43.4	80.0
0-14 Years				*0*	*0*					
15-44 Years				*530*	*1,604*					
45-64 Years				*1,332*	*6,557*					
65-74 Years				*1,062*	*5,839*					
75 Years +				*1,566*	*8,122*					
Pediatric	4	4	2	13	24	2	2.0	0.1	1.8	1.8
Intensive Care	24	16	15	1,013	3,550	27	3.5	9.8	40.8	61.3
Direct Admission				*884*	*2,946*					
Transfers				*129*	*604*					
Obstetric/Gynecology	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Maternity				*0*	*0*					
Clean Gynecology				*0*	*0*					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	34	32	30	612	9,119	0	14.9	25.0	73.5	78.1
Swing Beds			0	0	0		0.0	0.0		
Total AMI	12			200	3,012	0	15.1	8.3	68.8	
Adolescent AMI		0	0	0	0	0	0.0	0.0		0.0
Adult AMI		12	12	200	3,012	0	15.1	8.3		68.8
Rehabilitation	20	20	20	470	5,912	0	12.6	16.2	81.0	81.0
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	247			6,669	43,739	2,145	6.9	125.7	50.9	

(Includes ICU Direct Admissions Only)

Inpatients and Outpatients Served by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Charity Care	Totals
Inpatients	65.6%	14.0%	0.5%	18.0%	1.8%	0.2%	
	4374	931	32	1202	119	11	**6,669**
Outpatients	38.4%	20.1%	1.1%	37.3%	2.9%	0.1%	
	29409	15396	832	28565	2246	56	**76,504**

Financial Year Reported: 7/1/2016 *to* 6/30/2017

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Totals	Charity Care Expense
Inpatient Revenue ($)	62.9%	19.9%	0.2%	17.0%	0.1%	100.0%	
	46,370,177	14,637,083	117,097	12,532,227	38,547	73,695,131	776,422
Outpatient Revenue ($)	29.0%	16.5%	0.2%	53.5%	0.9%	100.0%	
	12,181,418	6,925,472	87,762	22,497,167	378,265	42,070,084	443,234

Total Charity Care Expense 1,219,656

Total Charity Care as % of Net Revenue 1.1%

Birthing Data

Number of Total Births:	0
Number of Live Births:	0
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	0
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	0
CSections Performed:	0

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	0	0	0
Patient Days	0	0	0
Total Newborn Patient Days			0

Laboratory Studies

Inpatient Studies	163,216
Outpatient Studies	152,614
Studies Performed Under Contract	68,060

Organ Transplantation

Kidney:	0
Heart:	0
Lung:	0
Heart/Lung:	0
Pancreas:	0
Liver:	0
Total:	0

Hospital Profile - CY 2017 **Gottlieb Memorial Hospital** **Melrose Park** Page 2

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	2	0	0	2	86	24	528	44	572	6.1	1.8
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	6	6	470	720	1176	1565	2741	2.5	2.2
Gastroenterology	0	0	0	0	0	2	0	3	3	0.0	1.5
Neurology	0	0	0	0	37	19	140	56	196	3.8	2.9
OB/Gynecology	0	0	0	0	10	112	36	220	256	3.6	2.0
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	0	0	0	810	0	662	662	0.0	0.8
Orthopedic	0	0	0	0	681	1120	2066	2437	4503	3.0	2.2
Otolaryngology	0	0	0	0	15	88	24	175	199	1.6	2.0
Plastic Surgery	0	0	0	0	6	89	25	221	246	4.2	2.5
Podiatry	0	0	0	0	31	61	43	98	141	1.4	1.6
Thoracic	0	0	0	0	19	3	59	3	62	3.1	1.0
Urology	0	0	1	1	286	557	1138	1005	2143	4.0	1.8
Totals	**2**	**0**	**7**	**9**	**1641**	**3605**	**5235**	**6489**	**11724**	**3.2**	**1.8**

SURGICAL RECOVERY STATIONS Stage 1 Recovery Stations 9 Stage 2 Recovery Stations 20

Dedicated and Non-Dedicated Procedure Room Utilzation

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	2	2	784	2316	698	2078	2776	0.9	0.9
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	0	0	0	0	0	0	0	0.0	0.0
Cystoscopy	0	0	0	0	0	0	0	0	0	0.0	0.0

Multipurpose Non-Dedicated Rooms

				0	0	0	0	0	0.0	0.0
				0	0	0	0	0	0.0	0.0
0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center	Yes
Level of Trauma Service	Level 1 **Level 2** Adult & Child
Operating Rooms Dedicated for Trauma Care	1
Number of Trauma Visits:	406
Patients Admitted from Trauma	230
Emergency Service Type:	Comprehensive
Number of Emergency Room Stations	17
Persons Treated by Emergency Services:	26,383
Patients Admitted from Emergency:	5,540
Total ED Visits (Emergency+Trauma):	**26,789**

Free-Standing Emergency Center

Beds in Free-Standing Centers	0
Patient Visits in Free-Standing Centers	0
Hospital Admissions from Free-Standing Center	0

Outpatient Service Data

Total Outpatient Visits	**76,504**
Outpatient Visits at the Hospital/ Campus:	76,504
Outpatient Visits Offsite/off campus	0

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	**2**
Cath Labs used for Angiography procedures	2
Dedicated Diagnostic Catheterization Lab	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	**2,090**
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	1,548
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	542
EP Catheterizations (15+)	0

Cardiac Surgery Data

Total Cardiac Surgery Cases:	**110**
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	110
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	43

Diagnostic/Interventional Equipment	Owned	Contract	Examinations Inpatient	Outpt	Contract	Therapeutic Equipment	Owned	Contract	Therapies/ Treatments
General Radiography/Fluoroscopy	8	0	7,526	21,418	0	*Lithotripsy*	0	0	0
Nuclear Medicine	2	0	569	2,074	0	*Linear Accelerator*	0	0	0
Mammography	1	0	11	8,544	0	Image Guided Rad Therapy			0
Ultrasound	4	0	4,374	8,756	0	Intensity Modulated Rad Thrpy			0
Angiography	2	0				High Dose Brachytherapy	0	0	0
Diagnostic Angiography			0	489	0	*Proton Beam Therapy*	0	0	0
Interventional Angiography			0	977	0	*Gamma Knife*	0	0	0
Positron Emission Tomography (PET)	0	0	0	0	0	*Cyber knife*	0	0	0
Computerized Axial Tomography (CAT)	2	0	1,960	11,069	0				
Magnetic Resonance Imaging	1	0	760	2,388	0				

Hospital Profile - CY 2018 **Gottlieb Memorial Hospital** **Melrose Park**

Ownership, Management and General Information

ADMINISTRATOR NAME:	M. E. Cleary
ADMINSTRATOR PHONE:	708-538-6920
OWNERSHIP:	Gottlieb Memorial Hospital
OPERATOR:	Gottlieb Memorial Hospital
MANAGEMENT:	Not for Profit Corporation
CERTIFICATION:	
FACILITY DESIGNATION:	General Hospital
ADDRESS	701 West North Avenue **CITY:** Melrose Park **COUNTY:** Suburban Cook County

Patients by Race

White	76.0%
Black	18.6%
American Indian	0.1%
Asian	1.8%
Hawaiian/ Pacific	0.2%
Unknown	3.4%

Patients by Ethnicity

Hispanic or Latino:	19.1%
Not Hispanic or Latino:	80.4%
Unknown:	0.6%

IDPH Number:	5793
HPA	A-06
HSA	7

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2018	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	153	87	87	4,390	20,469	4,332	5.6	67.9	44.4	78.1
0-14 Years				*0*	*0*					
15-44 Years				*404*	*1,481*					
45-64 Years				*1,218*	*5,053*					
65-74 Years				*1,122*	*5,450*					
75 Years +				*1,646*	*8,485*					
Pediatric	4	0	0	0	0	0	0.0	0.0	0.0	0.0
Intensive Care	24	16	16	1,012	3,640	36	3.6	10.1	42.0	62.9
Direct Admission				*690*	*2,463*					
Transfers				*322*	*1,177*					
Obstetric/Gynecology	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Maternity				*0*	*0*					
Clean Gynecology				*0*	*0*					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	34	32	30	618	9,120	0	14.8	25.0	73.5	78.1
Swing Beds			0	0	0		0.0	0.0		
Total AMI	12			238	3,286	0	13.8	9.0	75.0	
Adolescent AMI		0	0	0	0	0	0.0	0.0		0.0
Adult AMI		12	12	238	3,286	0	13.8	9.0		75.0
Rehabilitation	20	20	20	390	5,158	0	13.2	14.1	70.7	70.7
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	**247**			**6,326**	**41,673**	**4,368**	**7.3**	**126.1**	**51.1**	

(Includes ICU Direct Admissions Only)

Inpatients and Outpatients Served by Payor Source

	Medicare	*Medicaid*	*Other Public*	*Private Insurance*	*Private Pay*	*Charity Care*	*Totals*
Inpatients	**68.9%**	**11.4%**	**0.4%**	**17.4%**	**0.4%**	**1.5%**	
	4358	722	28	1101	25	92	**6,326**
Outpatients	**40.6%**	**16.4%**	**1.9%**	**39.7%**	**0.9%**	**0.5%**	
	41309	16737	1896	40415	908	483	**101,748**

Financial Year Reported: 7/1/2017 *to* 6/30/2018

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	*Medicaid*	*Other Public*	*Private Insurance*	*Private Pay*	*Totals*	*Charity Care Expense*
Inpatient Revenue ($)	**66.8%**	**15.7%**	**0.1%**	**17.2%**	**0.2%**	**100.0%**	
	47,339,237	11,109,530	98,597	12,217,178	121,820	70,886,362	612,250
Outpatient Revenue ($)	**22.4%**	**4.3%**	**0.5%**	**66.4%**	**6.4%**	**100.0%**	
	9,727,059	1,870,722	233,567	28,888,992	2,793,103	43,513,443	678,800

Total Charity Care Expense
1,291,050

Total Charity Care as % of Net Revenue
1.1%

Birthing Data

Number of Total Births:	0
Number of Live Births:	0
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	0
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	0
CSections Performed:	0

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	0	0	0
Patient Days	0	0	0
Total Newborn Patient Days			0

Laboratory Studies

Inpatient Studies	163,216
Outpatient Studies	152,614
Studies Performed Under Contract	68,060

Organ Transplantation

Kidney:	0
Heart:	0
Lung:	0
Heart/Lung:	0
Pancreas:	0
Liver:	0
Total:	**0**

Hospital Profile - CY 2018 **Gottlieb Memorial Hospital** **Melrose Park**

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	2	0	0	2	91	17	476	35	511	5.2	2.1
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	6	6	508	634	1256	1552	2808	2.5	2.4
Gastroenterology	0	0	0	0	2	0	4	0	4	2.0	0.0
Neurology	0	0	0	0	29	18	98	59	157	3.4	3.3
OB/Gynecology	0	0	0	0	5	72	20	125	145	4.0	1.7
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	0	0	0	823	0	1366	1366	0.0	1.7
Orthopedic	0	0	0	0	678	979	2152	2303	4455	3.2	2.4
Otolaryngology	0	0	0	0	17	77	27	145	172	1.6	1.9
Plastic Surgery	0	0	0	0	6	76	16	132	148	2.7	1.7
Podiatry	0	0	0	0	19	78	32	148	180	1.7	1.9
Thoracic	0	0	0	0	13	8	22	26	48	1.7	3.3
Urology	0	0	1	1	379	503	1514	1214	2728	4.0	2.4
Totals	**2**	**0**	**7**	**9**	**1747**	**3285**	**5617**	**7105**	**12722**	**3.2**	**2.2**

SURGICAL RECOVERY STATIONS Stage 1 Recovery Stations 9 Stage 2 Recovery Stations 20

Dedicated and Non-Dedicated Procedure Room Utilization

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	2	2	543	2398	696	4974	5670	1.3	2.1
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	0	0	0	0	0	0	0	0.0	0.0
Cystoscopy	0	0	0	0	0	0	0	0	0	0.0	0.0
Multipurpose Non-Dedicated Rooms											
					0	0	0	0	0	0.0	0.0
					0	0	0	0	0	0.0	0.0
					0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center		Yes
Level of Trauma Service	**Level 1**	**Level 2**
		Adult
Operating Rooms Dedicated for Trauma Care		1
Number of Trauma Visits:		476
Patients Admitted from Trauma		250
Emergency Service Type:		Comprehensive
Number of Emergency Room Stations		17
Persons Treated by Emergency Services:		26,920
Patients Admitted from Emergency:		5,962
Total ED Visits (Emergency+Trauma):		**27,396**

Free-Standing Emergency Center

Beds in Free-Standing Centers	0
Patient Visits in Free-Standing Centers	0
Hospital Admissions from Free-Standing Center	0

Outpatient Service Data

Total Outpatient Visits	**101,748**
Outpatient Visits at the Hospital/ Campus:	100,903
Outpatient Visits Offsite/off campus	845

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	**2**
Cath Labs used for Angiography procedures	2
Dedicated Diagnostic Catheterization Labs	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	**517**
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	400
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	117
EP Catheterizations (15+)	0

Cardiac Surgery Data

Total Cardiac Surgery Cases:	**108**
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	108
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	34

Diagnostic/Interventional Equipment	Owned	Contract	Examinations Inpatient	Examinations Outpt	Examinations Contract	Therapeutic Equipment	Owned	Contract	Therapies/ Treatments
General Radiography/Fluoroscopy	8	0	8,110	20,666	0	*Lithotripsy*	0	0	0
Nuclear Medicine	2	0	477	1,896	0	*Linear Accelerator*	0	0	0
Mammography	1	0	0	7,785	0	Image Guided Rad Therapy			0
Ultrasound	4	0	2,198	6,898	0	Intensity Modulated Rad Thrpy			0
Angiography	2	0				High Dose Brachytherapy	0	0	0
Diagnostic Angiography			182	79	0	*Proton Beam Therapy*	0	0	0
Interventional Angiography			363	159	0	*Gamma Knife*	0	0	0
Positron Emission Tomography (PET)	0	0	0	0	0	*Cyber knife*	0	0	0
Computerized Axial Tomography (CAT)	2	0	2,575	10,958	0				
Magnetic Resonance Imaging	1	0	738	2,449	0				

Hospital Profile - CY 2015 MacNeal Hospital Berwyn

Ownership, Management and General Information

ADMINISTRATOR NAME:	Scott Steiner
ADMINSTRATOR PHONE	708-783-2997
OWNERSHIP:	VHS of Illinois DBA MacNeal Hospital
OPERATOR:	VHS of Illinois DBA MacNeal Hospital
MANAGEMENT:	For Profit Corporation
CERTIFICATION:	(Not Answered)
FACILITY DESIGNATION:	(Not Answered)
ADDRESS	3249 South Oak Park Avenue **CITY:** Berwyn **COUNTY:** Suburban Cook County

Patients by Race

White	47.0%
Black	10.1%
American Indian	0.0%
Asian	0.6%
Hawaiian/ Pacific	0.1%
Unknown	42.2%

Patients by Ethnicity

Hispanic or Latino:	40.0%
Not Hispanic or Latino:	57.8%
Unknown:	2.2%

IDPH Number:	5082
HPA	A-06
HSA	7

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2015	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	233	229	222	10,086	46,353	3,082	4.9	135.4	58.1	59.1
0-14 Years				*0*	*0*					
15-44 Years				*1,683*	*4,957*					
45-64 Years				*3,295*	*13,316*					
65-74 Years				*1,845*	*9,316*					
75 Years +				*3,263*	*18,764*					
Pediatric	10	10	10	244	484	534	4.2	2.8	27.9	27.9
Intensive Care	26	17	17	1,306	4,960	2	3.8	13.6	52.3	80.0
Direct Admission				*976*	*3,390*					
Transfers				*330*	*1,570*					
Obstetric/Gynecology	25	23	23	1,871	4,196	24	2.3	11.6	46.2	50.3
Maternity				*1,818*	*4,110*					
Clean Gynecology				*53*	*86*					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Swing Beds			0	0	0		0.0	0.0		
Acute Mental Illness	62	62	62	1,578	11,783	0	7.5	32.3	52.1	52.1
Rehabilitation	12	12	10	46	757	0	16.5	2.1	17.3	17.3
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	**368**			**14,801**	**68,533**	**3,642**	**4.9**	**197.7**	**53.7**	

(Includes ICU Direct Admissions Only)

Inpatients and Outpatients Served by Payor Source

	Medicare	*Medicaid*	*Other Public*	*Private Insurance*	*Private Pay*	*Charity Care*	*Totals*
Inpatients	**28.7%**	**12.6%**	**0.0%**	**56.2%**	**1.1%**	**1.5%**	
	4241	1861	0	8316	165	218	**14,801**
Outpatients	**12.9%**	**11.8%**	**0.0%**	**70.4%**	**3.8%**	**1.2%**	
	28282	25760	0	154113	8356	2553	**219,064**

Financial Year Reported: 1/1/2015 *to* 12/31/2015

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	*Medicaid*	*Other Public*	*Private Insurance*	*Private Pay*	*Totals*	*Charity Care Expense*
Inpatient Revenue ($)	**35.4%**	**18.4%**	**0.0%**	**45.9%**	**0.3%**	**100.0%**	
	55,446,061	28,875,332	0	71,981,334	488,547	156,791,274	943,841
Outpatient Revenue ($)	**14.4%**	**4.5%**	**0.0%**	**79.2%**	**1.9%**	**100.0%**	
	13,646,849	4,240,824	0	75,174,364	1,813,401	94,875,438	1,322,999

Total Charity Care Expense
2,266,840

Total Charity Care as % of Net Revenue
0.9%

Birthing Data

Number of Total Births:	1,758
Number of Live Births:	1,749
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	9
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	2
CSections Performed:	527

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	25	5	0
Patient Days	2,457	1,509	0
Total Newborn Patient Days			**3,966**

Laboratory Studies

Inpatient Studies	406,035
Outpatient Studies	231,511
Studies Performed Under Contract	0

Organ Transplantation

Kidney:	0
Heart:	0
Lung:	0
Heart/Lung:	0
Pancreas:	0
Liver:	0
Total:	**0**

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	1	0	0	1	116	0	767	0	767	6.6	0.0
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	2	2	1148	1167	2512	1675	4187	2.2	1.4
Gastroenterology	0	0	6	6	1393	5832	631	2747	3378	0.5	0.5
Neurology	0	0	1	1	179	197	621	364	985	3.5	1.8
OB/Gynecology	0	0	1	1	293	752	786	1041	1827	2.7	1.4
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	1	1	3	1209	4	927	931	1.3	0.8
Orthopedic	0	0	1	1	789	839	1843	1243	3086	2.3	1.5
Otolaryngology	0	0	1	1	113	344	202	538	740	1.8	1.6
Plastic Surgery	0	0	1	1	22	284	106	581	687	4.8	2.0
Podiatry	0	0	1	1	105	236	112	288	400	1.1	1.2
Thoracic	0	0	1	1	47	2	169	3	172	3.6	1.5
Urology	0	0	1	1	230	771	295	693	988	1.3	0.9
Totals	**1**	**0**	**17**	**18**	**4438**	**11633**	**8048**	**10100**	**18148**	**1.8**	**0.9**

SURGICAL RECOVERY STATIONS Stage 1 Recovery Stations 13 Stage 2 Recovery Stations 12

Dedicated and Non-Dedicated Procedure Room Utilzation

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	0	0	0	0	0	0	0	0.0	0.0
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	0	0	0	0	0	0	0	0.0	0.0
Cystoscopy	0	0	0	0	0	0	0	0	0	0.0	0.0
Multipurpose Non-Dedicated Rooms											
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center		Yes
Level of Trauma Service	**Level 1**	**Level 2**
	(Not Answered)	Adult
Operating Rooms Dedicated for Trauma Care		1
Number of Trauma Visits:		15,800
Patients Admitted from Trauma		4,058
Emergency Service Type:		Comprehensive
Number of Emergency Room Stations		2
Persons Treated by Emergency Services:		51,200
Patients Admitted from Emergency:		12,889
Total ED Visits (Emergency+Trauma):		**67,000**

Free-Standing Emergency Center

Beds in Free-Standing Centers	0
Patient Visits in Free-Standing Centers	0
Hospital Admissions from Free-Standing Center	0

Outpatient Service Data

Total Outpatient Visits	**219,064**
Outpatient Visits at the Hospital/ Campus:	219,064
Outpatient Visits Offsite/off campus	0

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	**3**
Cath Labs used for Angiography procedures	1
Dedicated Diagnostic Catheterization Lab	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	**1,653**
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	922
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	377
EP Catheterizations (15+)	354

Cardiac Surgery Data

Total Cardiac Surgery Cases:	**116**
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	116
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	89

Diagnostic/Interventional Equipment

	Owned	Contract	Examinations Inpatient	Outpt	Contract
General Radiography/Fluoroscopy	22	0	13,962	49,318	0
Nuclear Medicine	3	0	3,212	3,796	0
Mammography	4	0	0	23,856	0
Ultrasound	6	0	4,693	18,583	0
Angiography	3	0			
Diagnostic Angiography			176	254	0
Interventional Angiography			252	380	0
Positron Emission Tomography (PET)	0	1	0	0	294
Computerized Axial Tomography (CAT)	2	0	4,293	26,499	0
Magnetic Resonance Imaging	3	0	1,356	6,186	0

Therapeutic Equipment

	Owned	Contract	Therapies/ Treatments
Lithotripsy	0	0	0
Linear Accelerator	0	0	0
Image Guided Rad Therapy			0
Intensity Modulated Rad Thrpy			0
High Dose Brachytherapy	0	0	0
Proton Beam Therapy	0	0	0
Gamma Knife	0	0	0
Cyber knife	0	0	0

Hospital Profile - CY 2016 **MacNeal Hospital** **Berwyn** Page 1

Ownership, Management and General Information

ADMINISTRATOR NAME:	M.E. Cleary
ADMINSTRATOR PHONE:	708-783-5378
OWNERSHIP:	VHS of Illinois DBA MacNeal Hospital
OPERATOR:	VHS of Illinois DBA MacNeal Hospital
MANAGEMENT:	For Profit Corporation
CERTIFICATION:	(Not Answered)
FACILITY DESIGNATION:	(Not Answered)
ADDRESS	3249 South Oak Park Avenue CITY: Berwyn COUNTY: Suburban Cook County

Patients by Race

White	45.5%
Black	12.7%
American Indian	0.0%
Asian	0.5%
Hawaiian/ Pacific	0.1%
Unknown	41.1%

Patients by Ethnicity

Hispanic or Latino:	38.3%
Not Hispanic or Latino:	58.8%
Unknown:	2.9%

IDPH Number:	5082
HPA	A-06
HSA	7

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2016	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	233	229	222	9,036	39,581	4,017	4.8	119.1	51.1	52.0
0-14 Years				*0*	*0*					
15-44 Years				*1,620*	*4,778*					
45-64 Years				*2,974*	*11,723*					
65-74 Years				*1,757*	*8,414*					
75 Years +				*2,685*	*14,666*					
Pediatric	10	10	10	171	346	602	5.5	2.6	25.9	25.9
Intensive Care	26	17	17	1,271	4,502	2	3.5	12.3	47.3	72.4
Direct Admission				*916*	*2,962*					
Transfers - Not included in Facility Admissions				*355*	*1,540*					
Obstetric/Gynecology	25	23	23	1,471	3,414	36	2.3	9.4	37.7	41.0
Maternity				*1,447*	*3,359*					
Clean Gynecology				*24*	*55*					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Swing Beds			0	0	0		0.0	0.0		
Total AMI	68			2,439	17,047	0	7.0	46.6	68.5	
Adolescent AMI		0	0	0	0	0	0.0	0.0		0.0
Adult AMI		68	68	2,439	17,047	0	7.0	46.6		68.5
Rehabilitation	12	12	11	233	3,182	0	13.7	8.7	72.4	72.4
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	**374**			**14,266**	**68,072**	**4,657**	**5.1**	**198.7**	**53.1**	

Inpatients and Outpatients Served by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Charity Care	Totals
Inpatients	27.1%	8.4%	0.0%	61.4%	1.6%	1.5%	
	3871	1205	0	8758	223	209	**14,266**
Outpatients	13.7%	5.6%	0.0%	75.7%	4.0%	1.0%	
	31736	13019	0	175270	9256	2330	**231,611**

Financial Year Reported: 1/1/2016 *to* 12/31/2016

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Totals	Charity Care Expense
Inpatient Revenue ($)	35.5%	16.0%	0.0%	48.2%	0.3%	100.0%	
	56,089,978	25,280,374	0	75,124,504	427,723	157,922,579	1,233,453
Outpatient Revenue ($)	16.8%	2.7%	0.0%	79.4%	1.1%	100.0%	
	17,719,724	2,829,516	0	83,978,994	1,209,917	105,738,151	1,451,195

Total Charity Care Expense 2,684,648

Total Charity Care as % of Net Revenue 1.0%

Birthing Data

Number of Total Births:	1,520
Number of Live Births:	1,509
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	9
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	2
CSections Performed:	432

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	25	5	0
Patient Days	1,979	1,520	0
Total Newborn Patient Days			3,499

Laboratory Studies

Inpatient Studies	363,302
Outpatient Studies	246,018
Studies Performed Under Contract	0

Organ Transplantation

Kidney:	
Heart:	
Lung:	
Heart/Lung:	
Pancreas:	
Liver:	
Total:	

Hospital Profile - CY 2016 **MacNeal Hospital** **Berwyn**

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	1	0	0	1	110	0	886	0	886	8.1	0.0
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	2	2	979	1112	3022	2700	5722	3.1	2.4
Gastroenterology	0	0	0	0	0	0	0	0	0	0.0	0.0
Neurology	0	0	1	1	132	193	587	551	1138	4.4	2.9
OB/Gynecology	0	0	1	1	221	817	782	1993	2775	3.5	2.4
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	1	1	4	1261	10	2158	2168	2.5	1.7
Orthopedic	0	0	2	2	679	978	2244	2421	4665	3.3	2.5
Otolaryngology	0	0	1	1	117	331	285	852	1137	2.4	2.6
Plastic Surgery	0	0	1	1	18	285	122	851	973	6.8	3.0
Podiatry	0	0	0	0	85	217	175	500	675	2.1	2.3
Thoracic	0	0	1	1	28	0	137	0	137	4.9	0.0
Urology	0	0	1	1	142	523	286	917	1203	2.0	1.8
Totals	**1**	**0**	**11**	**12**	**2515**	**5717**	**8536**	**12943**	**21479**	**3.4**	**2.3**

SURGICAL RECOVERY STATIONS Stage 1 Recovery Stations 13 Stage 2 Recovery Stations 12

Dedicated and Non-Dedicated Procedure Room Utilization

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	6	6	1269	5902	887	3550	4437	0.7	0.6
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	0	0	0	0	0	0	0	0.0	0.0
Cystoscopy	0	0	0	0	0	0	0	0	0	0.0	0.0
Multipurpose Non-Dedicated Rooms											
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center		Yes
Level of Trauma Service	**Level 1**	**Level 2**
	(Not Answered)	Adult
Operating Rooms Dedicated for Trauma Care		2
Number of Trauma Visits:		12,048
Patients Admitted from Trauma		510
Emergency Service Type:		Comprehensive
Number of Emergency Room Stations		2
Persons Treated by Emergency Services:		53,756
Patients Admitted from Emergency:		7,377
Total ED Visits (Emergency+Trauma):		**65,804**

Free-Standing Emergency Center

Beds in Free-Standing Centers	
Patient Visits in Free-Standing Centers	
Hospital Admissions from Free-Standing Center	

Outpatient Service Data

Total Outpatient Visits	**231,611**
Outpatient Visits at the Hospital/ Campus:	231,611
Outpatient Visits Offsite/off campus	0

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	**3**
Cath Labs used for Angiography procedures	1
Dedicated Diagnostic Catheterization Labs	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	**1,770**
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	991
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	402
EP Catheterizations (15+)	377

Cardiac Surgery Data

Total Cardiac Surgery Cases:	**110**
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	110
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	87

Diagnostic/Interventional Equipment	Owned	Contract	Examinations Inpatient	Outpt	Contract
General Radiography/Fluoroscopy	22	0	13,777	47,578	0
Nuclear Medicine	3	0	2,661	3,083	0
Mammography	4	0	0	24,872	0
Ultrasound	6	0	4,155	18,832	0
Angiography	3	0			
Diagnostic Angiography			194	215	0
Interventional Angiography			273	362	0
Positron Emission Tomography (PET)	0	1	0	0	270
Computerized Axial Tomography (CAT)	2	0	4,064	26,824	0
Magnetic Resonance Imaging	3	0	1,235	6,211	0

Therapeutic Equipment	Owned	Contract	Therapies/ Treatments
Lithotripsy	0	0	0
Linear Accelerator	0	0	0
Image Guided Rad Therapy			0
Intensity Modulated Rad Thrpy			0
High Dose Brachytherapy	0	0	0
Proton Beam Therapy	0	0	0
Gamma Knife	0	0	0
Cyber knife	0	0	0

Hospital Profile - CY 2017 **MacNeal Hospital** **Berwyn**

Ownership, Management and General Information

ADMINISTRATOR NAME:	M.E. Cleary
ADMINSTRATOR PHONE	708-783-5378
OWNERSHIP:	VHS of Illinois DBA MacNeal Hospital
OPERATOR:	VHS of Illinois DBA MacNeal Hospital
MANAGEMENT:	For Profit Corporation
CERTIFICATION:	
FACILITY DESIGNATION:	
ADDRESS	3249 South Oak Park Avenue CITY: Berwyn COUNTY: Suburban Cook County

Patients by Race

White	43.4%
Black	12.9%
American Indian	0.0%
Asian	0.5%
Hawaiian/ Pacific	0.1%
Unknown	43.2%

Patients by Ethnicity

Hispanic or Latino:	40.5%
Not Hispanic or Latino:	56.8%
Unknown:	2.7%

IDPH Number:	5082
HPA	A-06
HSA	7

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2017	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	233	230	230	8,423	37,895	4,052	5.0	114.9	49.3	50.0
0-14 Years				*0*	*0*					
15-44 Years				*1,427*	*4,025*					
45-64 Years				*2,658*	*11,035*					
65-74 Years				*1,693*	*8,140*					
75 Years +				*2,645*	*14,695*					
Pediatric	10	8	8	143	253	654	6.3	2.5	24.8	31.1
Intensive Care	26	17	17	1,254	4,102	2	3.3	11.2	43.2	66.1
Direct Admission				*946*	*2,836*					
Transfers				*308*	*1,266*					
Obstetric/Gynecology	25	23	23	1,371	3,107	36	2.3	8.6	34.4	37.4
Maternity				*1,354*	*3,077*					
Clean Gynecology				*17*	*30*					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Swing Beds			0	0	0		0.0	0.0		
Total AMI	68			2,869	17,896	0	6.2	49.0	72.1	
Adolescent AMI		0	0	0	0	0	0.0	0.0		0.0
Adult AMI		68	68	2,869	17,896	0	6.2	49.0		72.1
Rehabilitation	12	12	12	227	3,043	0	13.4	8.3	69.5	69.5
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	**374**			**13,979**	**66,296**	**4,744**	**5.1**	**194.6**	**52.0**	

(Includes ICU Direct Admissions Only)

Inpatients and Outpatients Served by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Charity Care	Totals
Inpatients	26.4%	7.7%	0.0%	63.0%	1.3%	1.6%	
	3686	1081	0	8807	181	224	**13,979**
Outpatients	14.6%	4.0%	0.0%	76.1%	4.0%	1.3%	
	33096	9109	0	172417	9180	2876	**226,678**

Financial Year Reported: 1/1/2017 *to* 12/31/2017

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Totals	Charity Care Expense
Inpatient Revenue ($)	34.5%	16.2%	0.0%	49.0%	0.4%	100.0%	
	48,738,041	22,854,525	0	69,251,723	504,760	141,349,049	911,268
Outpatient Revenue ($)	15.7%	0.9%	0.0%	83.1%	0.3%	100.0%	
	16,985,575	937,799	0	89,781,650	273,452	107,978,476	1,641,081

Total Charity Care Expense 2,552,349

Total Charity Care as % of Net Revenue 1.0%

Birthing Data

Number of Total Births:	1,433
Number of Live Births:	1,423
Birthing Rooms:	9
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	0
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	2
CSections Performed:	429

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	25	5	0
Patient Days	2,228	1,216	0
Total Newborn Patient Days			**3,444**

Laboratory Studies

Inpatient Studies	322,492
Outpatient Studies	280,699
Studies Performed Under Contract	0

Organ Transplantation

Kidney:	0
Heart:	0
Lung:	0
Heart/Lung:	0
Pancreas:	0
Liver:	0
Total:	**0**

Hospital Profile - CY 2017 **MacNeal Hospital** **Berwyn**

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	1	0	0	1	93	0	605	0	605	6.5	0.0
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	2	2	863	1152	1924	1691	3615	2.2	1.5
Gastroenterology	0	0	0	0	0	0	0	0	0	0.0	0.0
Neurology	0	0	1	1	134	187	467	377	844	3.5	2.0
OB/Gynecology	0	0	1	1	160	830	393	1265	1658	2.5	1.5
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	1	1	3	1320	7	933	940	2.3	0.7
Orthopedic	0	0	2	2	659	809	1595	1164	2759	2.4	1.4
Otolaryngology	0	0	1	1	80	333	114	536	650	1.4	1.6
Plastic Surgery	0	0	1	1	19	270	93	610	703	4.9	2.3
Podiatry	0	0	1	1	103	196	108	241	349	1.0	1.2
Thoracic	0	0	0	0	42	4	139	9	148	3.3	2.3
Urology	0	0	1	1	155	562	206	508	714	1.3	0.9
Totals	**1**	**0**	**11**	**12**	**2311**	**5663**	**5651**	**7334**	**12985**	**2.4**	**1.3**

SURGICAL RECOVERY STATIONS Stage 1 Recovery Stations 15 Stage 2 Recovery Stations 12

Dedicated and Non-Dedicated Procedure Room Utilzation

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	6	6	1167	5927	841	3686	4527	0.7	0.6
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	0	0	0	0	0	0	0	0.0	0.0
Cystoscopy	0	0	0	0	0	0	0	0	0	0.0	0.0
Multipurpose Non-Dedicated Rooms											
					0	0	0	0	0	0.0	0.0
					0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center	Yes
Level of Trauma Service	**Level 1** **Level 2** Adult & Child
Operating Rooms Dedicated for Trauma Care	2
Number of Trauma Visits:	13,148
Patients Admitted from Trauma	469
Emergency Service Type:	Comprehensive
Number of Emergency Room Stations	2
Persons Treated by Emergency Services:	51,593
Patients Admitted from Emergency:	6,994
Total ED Visits (Emergency+Trauma):	**64,741**

Free-Standing Emergency Center

Beds in Free-Standing Centers	0
Patient Visits in Free-Standing Centers	0
Hospital Admissions from Free-Standing Center	0

Outpatient Service Data

Total Outpatient Visits	**226,678**
Outpatient Visits at the Hospital/ Campus:	226,678
Outpatient Visits Offsite/off campus	0

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	**3**
Cath Labs used for Angiography procedures	1
Dedicated Diagnostic Catheterization Lab	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	**2,187**
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	1,126
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	699
EP Catheterizations (15+)	362

Cardiac Surgery Data

Total Cardiac Surgery Cases:	**93**
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	93
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	79

Diagnostic/Interventional Equipment	Owned	Contract	Examinations Inpatient	Outpt	Contract
General Radiography/Fluoroscopy	15	0	11,941	45,287	0
Nuclear Medicine	3	0	995	1,205	0
Mammography	4	0	0	23,512	0
Ultrasound	6	0	3,010	15,910	0
Angiography	3	0			
Diagnostic Angiography			961	206	0
Interventional Angiography			400	1,413	0
Positron Emission Tomography (PET)	0	1	0	0	302
Computerized Axial Tomography (CAT)	2	0	3,598	19,878	0
Magnetic Resonance Imaging	3	0	1,334	6,262	0

Therapeutic Equipment	Owned	Contract	Therapies/ Treatments
Lithotripsy	0	0	0
Linear Accelerator	0	0	0
Image Guided Rad Therapy			0
Intensity Modulated Rad Thrpy			0
High Dose Brachytherapy	0	0	0
Proton Beam Therapy	0	0	0
Gamma Knife	0	0	0
Cyber knife	0	0	0

Hospital Profile - CY 2018 **MacNeal Hospital** **Berwyn**

Ownership, Management and General Information

ADMINISTRATOR NAME:	M E Cleary
ADMINSTRATOR PHONE:	708-783-5378
OWNERSHIP:	Gottlieb Community Health Services Corp
OPERATOR:	Gottlieb Community Health Services Corp
MANAGEMENT:	Not for Profit Corporation
CERTIFICATION:	
FACILITY DESIGNATION:	General Hospital
ADDRESS	3249 South Oak Park Avenue CITY: Berwyn COUNTY: Suburban Cook County

Patients by Race

White	43.6%
Black	11.7%
American Indian	0.1%
Asian	0.5%
Hawaiian/ Pacific	0.2%
Unknown	43.8%

Patients by Ethnicity

Hispanic or Latino:	41.2%
Not Hispanic or Latino:	56.2%
Unknown:	2.7%

IDPH Number:	6106
HPA	A-06
HSA	7

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2018	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	208	208	208	7,948	30,109	3,682	4.3	92.6	44.5	44.5
0-14 Years				*0*	*0*					
15-44 Years				*1,365*	*3,913*					
45-64 Years				*2,576*	*9,491*					
65-74 Years				*1,627*	*6,686*					
75 Years +				*2,380*	*10,019*					
Pediatric	10	10	10	118	210	587	6.8	2.2	21.8	21.8
Intensive Care	26	17	17	1,324	3,744	1	2.8	10.3	39.5	60.4
Direct Admission				*1,015*	*2,758*					
Transfers				*309*	*986*					
Obstetric/Gynecology	25	23	23	1,262	2,916	29	2.3	8.1	32.3	35.1
Maternity				*1,257*	*2,907*					
Clean Gynecology				*5*	*9*					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	25	25	25	450	6,516	0	14.5	17.9	71.4	71.4
Swing Beds			0	0	0		0.0	0.0		
Total AMI	68			2,557	17,030	0	6.7	46.7	68.6	
Adolescent AMI		0	0	0	0	0	0.0	0.0		0.0
Adult AMI		68	68	2,557	17,030	0	6.7	46.7		68.6
Rehabilitation	12	12	12	236	2,924	0	12.4	8.0	66.8	66.8
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	**374**			**13,586**	**63,449**	**4,299**	**5.0**	**185.6**	**49.6**	

(Includes ICU Direct Admissions Only)

Inpatients and Outpatients Served by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Charity Care	Totals
Inpatients	26.8%	7.6%	0.0%	62.5%	1.5%	1.6%	
	3646	1034	0	8495	199	212	**13,586**
Outpatients	15.4%	6.9%	0.0%	71.0%	5.0%	1.7%	
	33995	15343	0	156875	11016	3664	**220,893**

Financial Year Reported: 1/1/2018 *to* 12/31/2018

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Totals	Charity Care Expense
Inpatient Revenue ($)	28.1%	9.8%	0.0%	61.7%	0.4%	100.0%	
	39,339,294	13,774,005	0	86,397,498	589,749	140,100,546	1,135,989
Outpatient Revenue ($)	17.7%	4.9%	0.0%	79.4%	-2.0%	100.0%	
	20,798,131	5,752,305	0	93,422,659	-2,361,034	117,612,061	2,272,013

Total Charity Care Expense 3,408,002

Total Charity Care as % of Net Revenue 1.3%

Birthing Data

Number of Total Births:	1,251
Number of Live Births:	1,257
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	9
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	2
CSections Performed:	389

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	25	5	0
Patient Days	1,943	912	0
Total Newborn Patient Days			**2,855**

Laboratory Studies

Inpatient Studies	934,080
Outpatient Studies	433,233
Studies Performed Under Contract	12,566

Organ Transplantation

Kidney:	0
Heart:	0
Lung:	0
Heart/Lung:	0
Pancreas:	0
Liver:	0
Total:	**0**

Hospital Profile - CY 2018 **MacNeal Hospital** **Berwyn** Page 1

Ownership, Management and General Information

ADMINISTRATOR NAME:	M E Cleary
ADMINSTRATOR PHONE:	708-783-5378
OWNERSHIP:	Gottlieb Community Health Services Corp
OPERATOR:	Gottlieb Community Health Services Corp
MANAGEMENT:	Not for Profit Corporation
CERTIFICATION:	
FACILITY DESIGNATION:	General Hospital
ADDRESS	3249 South Oak Park Avenue CITY: Berwyn COUNTY: Suburban Cook County

Patients by Race

White	43.6%
Black	11.7%
American Indian	0.1%
Asian	0.5%
Hawaiian/ Pacific	0.2%
Unknown	43.8%

Patients by Ethnicity

Hispanic or Latino:	41.2%
Not Hispanic or Latino:	56.2%
Unknown:	2.7%

IDPH Number:	6106
HPA	A-06
HSA	7

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2018	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	208	208	208	7,948	30,109	3,682	4.3	92.6	44.5	44.5
0-14 Years				*0*	*0*					
15-44 Years				*1,365*	*3,913*					
45-64 Years				*2,576*	*9,491*					
65-74 Years				*1,627*	*6,686*					
75 Years +				*2,380*	*10,019*					
Pediatric	10	10	10	118	210	587	6.8	2.2	21.8	21.8
Intensive Care	26	17	17	1,324	3,744	1	2.8	10.3	39.5	60.4
Direct Admission				*1,015*	*2,758*					
Transfers				*309*	*986*					
Obstetric/Gynecology	25	23	23	1,262	2,916	29	2.3	8.1	32.3	35.1
Maternity				*1,257*	*2,907*					
Clean Gynecology				*5*	*9*					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	25	25	25	450	6,516	0	14.5	17.9	71.4	71.4
Swing Beds			0	0	0		0.0	0.0		
Total AMI	68			2,557	17,030	0	6.7	46.7	68.6	
Adolescent AMI		0	0	0	0	0	0.0	0.0		0.0
Adult AMI		68	68	2,557	17,030	0	6.7	46.7		68.6
Rehabilitation	12	12	12	236	2,924	0	12.4	8.0	66.8	66.8
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	**374**			**13,586**	**63,449**	**4,299**	**5.0**	**185.6**	**49.6**	

(Includes ICU Direct Admissions Only)

Inpatients and Outpatients Served by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Charity Care	Totals
Inpatients	26.8%	7.6%	0.0%	62.5%	1.5%	1.6%	
	3646	1034	0	8495	199	212	**13,586**
Outpatients	15.4%	6.9%	0.0%	71.0%	5.0%	1.7%	
	33995	15343	0	156875	11016	3664	**220,893**

Financial Year Reported: 1/1/2018 *to* 12/31/2018

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Totals	Charity Care Expense
Inpatient Revenue ($)	28.1%	9.8%	0.0%	61.7%	0.4%	100.0%	
	39,339,294	13,774,005	0	86,397,498	589,749	140,100,546	1,135,989
Outpatient Revenue ($)	17.7%	4.9%	0.0%	79.4%	-2.0%	100.0%	
	20,798,131	5,752,305	0	93,422,659	-2,361,034	117,612,061	2,272,013

Total Charity Care Expense 3,408,002

Total Charity Care as % of Net Revenue 1.3%

Birthing Data

Number of Total Births:	1,251
Number of Live Births:	1,257
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	9
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	2
CSections Performed:	389

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	25	5	0
Patient Days	1,943	912	0
Total Newborn Patient Days			2,855

Laboratory Studies

Inpatient Studies	934,080
Outpatient Studies	433,233
Studies Performed Under Contract	12,566

Organ Transplantation

Kidney:	0
Heart:	0
Lung:	0
Heart/Lung:	0
Pancreas:	0
Liver:	0
Total:	0

Hospital Profile - CY 2015 | Community First Medical Center | Chicago | Page 1

Ownership, Management and General Information

ADMINISTRATOR NAME:	Dennis FitzMaurice
ADMINSTRATOR PHONE	773-794-8399
OWNERSHIP:	Community First Healthcare of Illinois, Inc.
OPERATOR:	Community First Healthcare of Illinois, Inc.
MANAGEMENT:	For Profit Corporation
CERTIFICATION:	(Not Answered)
FACILITY DESIGNATION:	General Hospital
ADDRESS	5645 West Addison Street **CITY:** Chicago **COUNTY:** Suburban Cook (Chicago)

Patients by Race

White	55.6%
Black	7.0%
American Indian	0.0%
Asian	2.4%
Hawaiian/ Pacific	0.0%
Unknown	35.0%

Patients by Ethnicity

Hispanic or Latino:	30.7%
Not Hispanic or Latino:	68.4%
Unknown:	0.9%

IDPH Number:	5959
HPA	A-01
HSA	6

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2015	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	210	190	113	4,900	25,056	3,285	5.8	77.6	37.0	40.9
0-14 Years				*2*	*5*					
15-44 Years				*678*	*2,688*					
45-64 Years				*1,465*	*7,390*					
65-74 Years				*990*	*5,396*					
75 Years +				*1,765*	*9,577*					
Pediatric	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Intensive Care	20	20	20	1,759	5,754	0	3.3	15.8	78.8	78.8
Direct Admission				*1,468*	*4,446*					
Transfers				*291*	*1,308*					
Obstetric/Gynecology	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Maternity				*0*	*0*					
Clean Gynecology				*0*	*0*					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	66	62	53	1,058	14,195	0	13.4	38.9	58.9	62.7
Swing Beds			0	0	0		0.0	0.0		
Acute Mental Illness	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Rehabilitation	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	**296**			**7,426**	**45,005**	**3,285**	**6.5**	**132.3**	**44.7**	

(Includes ICU Direct Admissions Only)

Inpatients and Outpatients Served by Payor Source

	Medicare	*Medicaid*	*Other Public*	*Private Insurance*	*Private Pay*	*Charity Care*	*Totals*
Inpatients	**64.4%**	**18.6%**	**0.0%**	**10.5%**	**4.8%**	**1.7%**	
	4911	1422	0	801	363	130	**7,627**
Outpatients	**29.7%**	**40.0%**	**0.0%**	**20.8%**	**8.5%**	**1.0%**	
	21854	29416	0	15328	6214	713	**73,525**

Financial Year Reported: 1/1/2015 *to* 12/31/2015

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	*Medicaid*	*Other Public*	*Private Insurance*	*Private Pay*	*Totals*	*Charity Care Expense*
Inpatient Revenue ($)	**58.9%**	**23.8%**	**0.0%**	**17.3%**	**0.0%**	**100.0%**	
	47,686,526	19,267,656	0	14,029,313	14,553	80,998,048	1,002,887
Outpatient Revenue ($)	**35.9%**	**23.5%**	**0.0%**	**40.0%**	**0.7%**	**100.0%**	
	11,268,065	7,370,115	0	12,540,503	206,864	31,385,547	311,571

Total Charity Care Expense
1,314,458

Total Charity Care as % of Net Revenue
1.2%

Birthing Data

Number of Total Births:	2
Number of Live Births:	2
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	0
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	0
CSections Performed:	0

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	0	0	0
Patient Days	0	0	0

Total Newborn Patient Days: **0**

Laboratory Studies

Inpatient Studies	317,561
Outpatient Studies	133,053
Studies Performed Under Contract	1,488

Organ Transplantation

Kidney:	0
Heart:	0
Lung:	0
Heart/Lung:	0
Pancreas:	0
Liver:	0
Total:	**0**

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	0	0	0	0	78	11	137.52	10.34	147.86	1.8	0.9
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	8	8	484	442	819.5	496.9	1316.4	1.7	1.1
Gastroenterology	0	0	0	0	0	0	0	0	0	0.0	0.0
Neurology	0	0	0	0	63	11	177.58	28.23	205.81	2.8	2.6
OB/Gynecology	0	0	0	0	76	185	133.1	168.56	301.66	1.8	0.9
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	0	0	0	751	0	402.92	402.92	0.0	0.5
Orthopedic	0	0	0	0	248	108	493.13	144.08	637.21	2.0	1.3
Otolaryngology	0	0	0	0	0	0	0	0	0	0.0	0.0
Plastic Surgery	0	0	0	0	4	60	3.4	59.8	63.2	0.9	1.0
Podiatry	0	0	0	0	71	68	81.22	242.65	323.87	1.1	3.6
Thoracic	0	0	0	0	5	1	5	1.4	6.4	1.0	1.4
Urology	0	0	1	1	114	236	129.38	291.05	420.43	1.1	1.2
Totals	**0**	**0**	**9**	**9**	**1143**	**1873**	**1979.83**	**1845.93**	**3825.76**	**1.7**	**1.0**

SURGICAL RECOVERY STATIONS Stage 1 Recovery Stations 8 Stage 2 Recovery Stations 19

Dedicated and Non-Dedicated Procedure Room Utilzation

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	1	1	0	2	727	1634	895	1724	2619	1.2	1.1
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	1	0	1	0	1108	0	644	644	0.0	0.6
Cystoscopy	0	0	1	1	114	236	129	291	420	1.1	1.2
Multipurpose Non-Dedicated Rooms											
Minor Local Procedur	0	1	0	1	0	72	0	25	25	0.0	0.3
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center	No
Level of Trauma Service	**Level 1** (Not Answered) **Level 2** Not Answered
Operating Rooms Dedicated for Trauma Care	0
Number of Trauma Visits:	0
Patients Admitted from Trauma	0
Emergency Service Type:	Comprehensive
Number of Emergency Room Stations	28
Persons Treated by Emergency Services:	43,284
Patients Admitted from Emergency:	5,939
Total ED Visits (Emergency+Trauma):	**43,284**

Free-Standing Emergency Center

Beds in Free-Standing Centers	0
Patient Visits in Free-Standing Centers	0
Hospital Admissions from Free-Standing Center	0

Outpatient Service Data

Total Outpatient Visits	**73,525**
Outpatient Visits at the Hospital/ Campus:	73,525
Outpatient Visits Offsite/off campus	0

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	**2**
Cath Labs used for Angiography procedures	2
Dedicated Diagnostic Catheterization Lab	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	**663**
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	557
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	106
EP Catheterizations (15+)	0

Cardiac Surgery Data

Total Cardiac Surgery Cases:	**0**
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	0
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	0

Diagnostic/Interventional Equipment	Owned	Contract	Examinations Inpatient	Outpt	Contract
General Radiography/Fluoroscopy	9	0	16,427	24,306	0
Nuclear Medicine	2	0	693	1,100	0
Mammography	1	0	0	4,191	0
Ultrasound	4	0	3,696	6,938	0
Angiography	2	0			
Diagnostic Angiography			90	6	0
Interventional Angiography			8	1	0
Positron Emission Tomography (PET)	0	0	0	0	0
Computerized Axial Tomography (CAT)	2	0	6,129	9,076	0
Magnetic Resonance Imaging	1	1	1,100	1,731	7

Therapeutic Equipment	Owned	Contract	Therapies/ Treatments
Lithotripsy	0	0	0
Linear Accelerator	0	0	0
Image Guided Rad Therapy			0
Intensity Modulated Rad Thrpy			0
High Dose Brachytherapy	0	0	0
Proton Beam Therapy	0	0	0
Gamma Knife	0	0	0
Cyber knife	0	0	0

Hospital Profile - CY 2016 **Community First Medical Center** **Chicago** Page 1

Ownership, Management and General Information

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ADMINSTRATOR PHONE:	773-794-8399
OWNERSHIP:	Community First Healthcare of Illinois, Inc,
OPERATOR:	Community First Healthcare of Illinois, Inc,
MANAGEMENT:	For Profit Corporation
CERTIFICATION:	(Not Answered)
FACILITY DESIGNATION:	General Hospital
ADDRESS	5645 West Addison Street CITY: Chicago COUNTY: Suburban Cook (Chicago)

Patients by Race

White	54.5%
Black	7.4%
American Indian	0.1%
Asian	2.4%
Hawaiian/ Pacific	0.1%
Unknown	35.5%

Patients by Ethnicity

Hispanic or Latino:	31.5%
Not Hispanic or Latino:	68.5%
Unknown:	0.0%

IDPH Number:	5959
HPA	A-01
HSA	6

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2016	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	210	190	128	4,802	25,729	3,546	6.1	80.0	38.1	42.1
0-14 Years				*0*	*0*					
15-44 Years				*664*	*2,700*					
45-64 Years				*1,453*	*8,781*					
65-74 Years				*946*	*5,184*					
75 Years +				*1,739*	*9,064*					
Pediatric	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Intensive Care	20	20	20	1,556	5,838	0	3.8	16.0	79.8	79.8
Direct Admission				*1,277*	*4,370*					
Transfers - Not included in Facility Admissions				*279*	*1,468*					
Obstetric/Gynecology	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Maternity				*0*	*0*					
Clean Gynecology				*0*	*0*					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	66	62	53	938	13,431	0	14.3	36.7	55.6	59.2
Swing Beds			0	0	0		0.0	0.0		
Total AMI	0			0	0	0	0.0	0.0	0.0	
Adolescent AMI		0	0	0	0	0	0.0	0.0		0.0
Adult AMI		0	0	0	0	0	0.0	0.0		0.0
Rehabilitation	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	**296**			**7,017**	**44,998**	**3,546**	**6.9**	**132.6**	**44.8**	

Inpatients and Outpatients Served by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Charity Care	Totals
Inpatients	65.1%	18.0%	0.0%	10.8%	4.2%	2.0%	
	4567	1260	0	755	298	137	**7,017**
Outpatients	41.4%	34.6%	0.0%	18.1%	5.2%	0.8%	
	35352	29541	0	15451	4410	645	**85,399**

Financial Year Reported: 1/1/2016 *to* 12/31/2016

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Totals	Charity Care Expense
Inpatient Revenue ($)	52.5%	23.3%	0.0%	22.5%	1.7%	100.0%	
	39,118,902	17,376,441	0	16,787,442	1,237,984	74,520,769	3,332,278
Outpatient Revenue ($)	33.7%	24.7%	0.0%	39.0%	2.6%	100.0%	
	11,353,427	8,316,150	0	13,136,226	875,759	33,681,562	2,353,939

Total Charity Care Expense 5,686,217

Total Charity Care as % of Net Revenue 5.3%

Birthing Data

Number of Total Births:	2
Number of Live Births:	2
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	0
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	0
CSections Performed:	0

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	0	0	0
Patient Days	0	0	0
Total Newborn Patient Days			0

Laboratory Studies

Inpatient Studies	322,811
Outpatient Studies	132,994
Studies Performed Under Contract	0

Organ Transplantation

Kidney:	
Heart:	
Lung:	
Heart/Lung:	
Pancreas:	
Liver:	
Total:	

Hospital Profile - CY 2016 **Community First Medical Center** **Chicago** Page 2

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	0	0	0	0	87	19	70.6	25.4	96	0.8	1.3
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	8	8	460	419	783.3	471.4	1254.7	1.7	1.1
Gastroenterology	0	0	0	0	2	1	1.7	0.6	2.3	0.9	0.6
Neurology	0	0	0	0	67	20	193.8	39	232.8	2.9	2.0
OB/Gynecology	0	0	0	0	77	199	137.3	186.2	323.5	1.8	0.9
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	0	0	0	702	0	376.9	376.9	0.0	0.5
Orthopedic	0	0	0	0	233	113	457.1	153.5	610.6	2.0	1.4
Otolaryngology	0	0	0	0	3	4	3.3	4.8	8.1	1.1	1.2
Plastic Surgery	0	0	0	0	0	0	0	0	0	0.0	0.0
Podiatry	0	0	0	0	95	76	115.7	107.7	223.4	1.2	1.4
Thoracic	0	0	0	0	7	2	5.8	1.7	7.5	0.8	0.9
Urology	0	0	1	1	125	214	91.8	278.2	370	0.7	1.3
Totals	**0**	**0**	**9**	**9**	**1156**	**1769**	**1860.4**	**1645.4**	**3505.8**	**1.6**	**0.9**

SURGICAL RECOVERY STATIONS Stage 1 Recovery Stations 8 Stage 2 Recovery Stations 19

Dedicated and Non-Dedicated Procedure Room Utilization

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	1	1	0	2	807	1530	880	1641	2521	1.1	1.1
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	1	0	1	0	878	0	490	490	0.0	0.6
Cystoscopy	0	0	1	1	125	214	92	278	370	0.7	1.3
Multipurpose Non-Dedicated Rooms											
Minor Local Procedur	0	1	0	1	0	49	0	20	20	0.0	0.4
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center		No
Level of Trauma Service	**Level 1**	**Level 2**
	(Not Answered)	Not Answered
Operating Rooms Dedicated for Trauma Care		0
Number of Trauma Visits:		0
Patients Admitted from Trauma		0
Emergency Service Type:		Comprehensive
Number of Emergency Room Stations		28
Persons Treated by Emergency Services:		42,412
Patients Admitted from Emergency:		5,711
Total ED Visits (Emergency+Trauma):		**42,412**

Free-Standing Emergency Center

Beds in Free-Standing Centers	
Patient Visits in Free-Standing Centers	
Hospital Admissions from Free-Standing Center	

Outpatient Service Data

Total Outpatient Visits	**85,399**
Outpatient Visits at the Hospital/ Campus:	85,399
Outpatient Visits Offsite/off campus	0

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	**2**
Cath Labs used for Angiography procedures	2
Dedicated Diagnostic Catheterization Labs	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	**552**
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	439
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	113
EP Catheterizations (15+)	0

Cardiac Surgery Data

Total Cardiac Surgery Cases:	**0**
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	0
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	0

Diagnostic/Interventional Equipment	Owned	Contract	Examinations Inpatient	Outpt	Contract
General Radiography/Fluoroscopy	9	0	15,986	22,812	0
Nuclear Medicine	2	0	705	1,041	0
Mammography	1	0	2	3,693	0
Ultrasound	4	0	3,711	6,661	0
Angiography	2	0			
Diagnostic Angiography			78	56	0
Interventional Angiography			34	17	0
Positron Emission Tomography (PET)	0	0	0	0	0
Computerized Axial Tomography (CAT)	2	0	5,956	9,050	0
Magnetic Resonance Imaging	1	0	1,043	1,444	0

Therapeutic Equipment	Owned	Contract	Therapies/ Treatments
Lithotripsy	0	0	0
Linear Accelerator	0	0	0
Image Guided Rad Therapy			0
Intensity Modulated Rad Thrpy			0
High Dose Brachytherapy	0	0	0
Proton Beam Therapy	0	0	0
Gamma Knife	0	0	0
Cyber knife	0	0	0

Hospital Profile - CY 2017 **Community First Medical Center** **Chicago**

Ownership, Management and General Information

ADMINISTRATOR NAME:	Dr. Sheila Senn, Psy.D.
ADMINSTRATOR PHONE	773-794-7687
OWNERSHIP:	Community First Healthcare of Illinois, Inc.
OPERATOR:	Community First Healthcare of Illinois, Inc.
MANAGEMENT:	For Profit Corporation
CERTIFICATION:	
FACILITY DESIGNATION:	General Hospital
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Black	7.1%
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Patients by Ethnicity

Hispanic or Latino:	30.9%
Not Hispanic or Latino:	67.8%
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HPA	A-01
HSA	6

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2017	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	210	190	128	4,446	25,406	4,658	6.8	82.4	39.2	43.4
0-14 Years				*0*	*0*					
15-44 Years				*550*	*2,530*					
45-64 Years				*1,289*	*7,588*					
65-74 Years				*993*	*5,695*					
75 Years +				*1,614*	*9,593*					
Pediatric	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Intensive Care	20	20	20	1,520	5,808	20	3.8	16.0	79.8	79.8
Direct Admission				*1,194*	*4,436*					
Transfers				*326*	*1,372*					
Obstetric/Gynecology	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Maternity				*0*	*0*					
Clean Gynecology				*0*	*0*					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	66	62	52	966	14,759	0	15.3	40.4	61.3	65.2
Swing Beds			0	0	0		0.0	0.0		
Total AMI	0			0	0	0	0.0	0.0	0.0	
Adolescent AMI		0	0	0	0	0	0.0	0.0		0.0
Adult AMI		0	0	0	0	0	0.0	0.0		0.0
Rehabilitation	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	**296**			**6,606**	**45,973**	**4,678**	**7.7**	**138.8**	**46.9**	

(Includes ICU Direct Admissions Only)

Inpatients and Outpatients Served by Payor Source

	Medicare	*Medicaid*	*Other Public*	*Private Insurance*	*Private Pay*	*Charity Care*	*Totals*
Inpatients	**65.4%**	**22.0%**	**0.0%**	**9.4%**	**1.9%**	**1.2%**	
	4320	1454	0	624	126	82	**6,606**
Outpatients	**36.1%**	**39.1%**	**0.0%**	**18.8%**	**5.0%**	**1.0%**	
	33609	36395	0	17450	4692	889	**93,035**

Financial Year Reported: 1/1/2017 *to* 12/31/2017

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	*Medicaid*	*Other Public*	*Private Insurance*	*Private Pay*	*Totals*	*Charity Care Expense*
Inpatient Revenue ($)	**57.5%**	**22.1%**	**0.0%**	**19.0%**	**1.4%**	**100.0%**	
	40,896,737	15,686,387	0	13,505,392	1,021,025	71,109,541	950,647
Outpatient Revenue ($)	**30.5%**	**20.0%**	**0.0%**	**46.6%**	**3.0%**	**100.0%**	
	10,723,151	7,056,781	0	16,393,050	1,040,296	35,213,278	652,098

Total Charity Care Expense
1,602,745

Total Charity Care as % of Net Revenue
1.5%

Birthing Data

Number of Total Births:	2
Number of Live Births:	2
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	0
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	0
CSections Performed:	0

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	0	0	0
Patient Days	0	0	0
Total Newborn Patient Days			**0**

Laboratory Studies

Inpatient Studies	340,719
Outpatient Studies	108,412
Studies Performed Under Contract	0

Organ Transplantation

Kidney:	0
Heart:	0
Lung:	0
Heart/Lung:	0
Pancreas:	0
Liver:	0
Total:	**0**

Hospital Profile - CY 2017 **Community First Medical Center** **Chicago** Page 2

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	0	0	0	0	68	16	126.6	31.4	158	1.9	2.0
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	8	8	533	334	790.8	394.7	1185.5	1.5	1.2
Gastroenterology	0	0	0	0	2	0	3.3	0	3.3	1.7	0.0
Neurology	0	0	0	0	46	7	131.5	16.4	147.9	2.9	2.3
OB/Gynecology	0	0	0	0	69	161	75	154.8	229.8	1.1	1.0
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	0	0	1	657	0.4	364.8	365.2	0.4	0.6
Orthopedic	0	0	0	0	191	89	376	142.1	518.1	2.0	1.6
Otolaryngology	0	0	0	0	5	9	7.3	14.4	21.7	1.5	1.6
Plastic Surgery	0	0	0	0	5	0	3.3	0	3.3	0.7	0.0
Podiatry	0	0	0	0	91	56	108.8	96.9	205.7	1.2	1.7
Thoracic	0	0	0	0	5	3	4.4	2.8	7.2	0.9	0.9
Urology	0	0	1	1	174	175	176.5	231.8	408.3	1.0	1.3
Totals	**0**	**0**	**9**	**9**	**1190**	**1507**	**1803.9**	**1450.1**	**3254**	**1.5**	**1.0**

SURGICAL RECOVERY STATIONS Stage 1 Recovery Stations 8 Stage 2 Recovery Stations 19

Dedicated and Non-Dedicated Procedure Room Utilzation

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	1	1	0	2	840	1748	851	3047	3899	1.0	1.7
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	1	0	1	0	576	0	288	288	0.0	0.5
Cystoscopy	0	0	1	1	174	175	176	232	408	1.0	1.3
Multipurpose Non-Dedicated Rooms											
Minor Local Procedur					0	68	0	27	27	0.0	0.4
					0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center		No
Level of Trauma Service	Level 1	Level 2
Operating Rooms Dedicated for Trauma Care		0
Number of Trauma Visits:		0
Patients Admitted from Trauma		0
Emergency Service Type:		Comprehensive
Number of Emergency Room Stations		28
Persons Treated by Emergency Services:		41,108
Patients Admitted from Emergency:		5,299
Total ED Visits (Emergency+Trauma):		**41,108**

Free-Standing Emergency Center

Beds in Free-Standing Centers	0
Patient Visits in Free-Standing Centers	0
Hospital Admissions from Free-Standing Center	0

Outpatient Service Data

Total Outpatient Visits	**0**
Outpatient Visits at the Hospital/ Campus:	0
Outpatient Visits Offsite/off campus	0

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	**2**
Cath Labs used for Angiography procedures	2
Dedicated Diagnostic Catheterization Lab	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	**562**
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	453
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	109
EP Catheterizations (15+)	0

Cardiac Surgery Data

Total Cardiac Surgery Cases:	**0**
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	0
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	0

Diagnostic/Interventional Equipment	Owned	Contract	Examinations Inpatient	Outpt	Contract
General Radiography/Fluoroscopy	9	0	14,754	24,252	0
Nuclear Medicine	2	0	685	1,089	0
Mammography	1	0	15	3,292	0
Ultrasound	4	0	3,376	6,510	0
Angiography	2	0			
Diagnostic Angiography			83	77	0
Interventional Angiography			28	36	0
Positron Emission Tomography (PET)	0	0	0	0	0
Computerized Axial Tomography (CAT)	2	0	5,130	10,676	0
Magnetic Resonance Imaging	1	0	824	1,496	0

Therapeutic Equipment	Owned	Contract	Therapies/ Treatments
Lithotripsy	0	0	0
Linear Accelerator	0	0	0
Image Guided Rad Therapy			0
Intensity Modulated Rad Thrpy			0
High Dose Brachytherapy	0	0	0
Proton Beam Therapy	0	0	0
Gamma Knife	0	0	0
Cyber knife	0	0	0

Hospital Profile - CY 2018 **Community First Medical Center** **Chicago** Page 1

Ownership, Management and General Information

ADMINISTRATOR NAME:	Michelle Lilya
ADMINSTRATOR PHONE:	773-794-8399
OWNERSHIP:	Community First Healthcare of Illinois, Inc,
OPERATOR:	Community First Healthcare of Illinois, Inc,
MANAGEMENT:	For Profit Corporation
CERTIFICATION:	
FACILITY DESIGNATION:	General Hospital
ADDRESS	5645West Addison Street CITY: Chicago COUNTY: Suburban Cook (Chicago)

Patients by Race

White	50.2%
Black	7.7%
American Indian	0.0%
Asian	2.6%
Hawaiian/ Pacific	0.0%
Unknown	39.4%

Patients by Ethnicity

Hispanic or Latino:	35.3%
Not Hispanic or Latino:	64.1%
Unknown:	0.6%

IDPH Number:	5959
HPA	A-01
HSA	6

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2018	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	210	157	119	5,105	25,628	4,131	5.8	81.5	38.8	51.9
0-14 Years				*0*	*0*					
15-44 Years				*645*	*2,506*					
45-64 Years				*1,510*	*7,433*					
65-74 Years				*1,119*	*6,047*					
75 Years +				*1,831*	*9,642*					
Pediatric	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Intensive Care	20	20	20	1,672	6,398	23	3.8	17.6	88.0	88.0
Direct Admission				*1,300*	*4,678*					
Transfers				*372*	*1,720*					
Obstetric/Gynecology	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Maternity				*0*	*0*					
Clean Gynecology				*0*	*0*					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	66	60	57	982	12,357	0	12.6	33.9	51.3	56.4
Swing Beds			0	0	0		0.0	0.0		
Total AMI	0			0	0	0	0.0	0.0	0.0	
Adolescent AMI		0	0	0	0	0	0.0	0.0		0.0
Adult AMI		0	0	0	0	0	0.0	0.0		0.0
Rehabilitation	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	296			7,387	44,383	4,154	6.6	133.0	44.9	

(Includes ICU Direct Admissions Only)

Inpatients and Outpatients Served by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Charity Care	Totals
Inpatients	62.4%	18.3%	0.5%	9.6%	5.2%	3.9%	
	4140	1215	35	637	347	257	**6,631**
Outpatients	43.3%	26.2%	0.3%	19.3%	7.3%	3.5%	
	41858	25358	325	18669	7053	3380	**96,643**

Financial Year Reported: 1/1/2018 *to* 12/31/2018

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Totals	Charity Care Expense
Inpatient Revenue ($)	54.1%	7.4%	0.5%	38.0%	0.0%	100.0%	
	37,613,543	5,164,738	360,502	26,406,939	15,726	69,561,448	3,378,066
Outpatient Revenue ($)	21.3%	14.1%	0.1%	64.2%	0.4%	100.0%	
	9,403,659	6,211,832	42,093	28,346,344	180,660	44,184,588	2,188,866

Total Charity Care Expense 5,566,931

Total Charity Care as % of Net Revenue 4.9%

Birthing Data

Number of Total Births:	5
Number of Live Births:	5
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	0
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	0
CSections Performed:	0

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	0	0	0
Patient Days	0	0	0
Total Newborn Patient Days			0

Laboratory Studies

Inpatient Studies	317,885
Outpatient Studies	158,530
Studies Performed Under Contract	0

Organ Transplantation

Kidney:	0
Heart:	0
Lung:	0
Heart/Lung:	0
Pancreas:	0
Liver:	0
Total:	0

Hospital Profile - CY 2018 **Community First Medical Center** **Chicago** Page 2

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	0	0	0	0	55	25	111	41	152	2.0	1.6
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	0	0	396	431	676	438	1114	1.7	1.0
Gastroenterology	0	0	0	0	1	105	1	87	88	1.0	0.8
Neurology	0	0	0	0	59	12	186	18	204	3.2	1.5
OB/Gynecology	0	0	0	0	50	194	100	195	295	2.0	1.0
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	0	0	0	509	0	266	266	0.0	0.5
Orthopedic	0	0	0	0	166	74	310	97	407	1.9	1.3
Otolaryngology	0	0	0	0	1	14	2	16	18	2.0	1.1
Plastic Surgery	0	0	0	0	2	1	2	1	3	1.0	1.0
Podiatry	0	0	0	0	56	54	65	76	141	1.2	1.4
Thoracic	0	0	0	0	21	3	25	4	29	1.2	1.3
Urology	0	0	0	0	123	204	139	275	414	1.1	1.3
Totals	**0**	**0**	**0**	**0**	**930**	**1626**	**1617**	**1514**	**3131**	**1.7**	**0.9**

SURGICAL RECOVERY STATIONS Stage 1 Recovery Stations 6 Stage 2 Recovery Stations 19

Dedicated and Non-Dedicated Procedure Room Utilization

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	0	0	529	1603	568	1715	2283	1.1	1.1
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	0	0	0	121	0	239	239	0.0	2.0
Cystoscopy	0	0	0	0	34	71	28	76	104	0.8	1.1
Multipurpose Non-Dedicated Rooms											
					0	0	0	0	0	0.0	0.0
					0	0	0	0	0	0.0	0.0
					0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center		No
Level of Trauma Service	**Level 1**	**Level 2**
Operating Rooms Dedicated for Trauma Care		0
Number of Trauma Visits:		0
Patients Admitted from Trauma		0
Emergency Service Type:		Comprehensive
Number of Emergency Room Stations		28
Persons Treated by Emergency Services:		39,620
Patients Admitted from Emergency:		7,623
Total ED Visits (Emergency+Trauma):		**39,620**

Free-Standing Emergency Center

Beds in Free-Standing Centers	0
Patient Visits in Free-Standing Centers	0
Hospital Admissions from Free-Standing Center	0

Outpatient Service Data

Total Outpatient Visits	**44,509**
Outpatient Visits at the Hospital/ Campus:	39,943
Outpatient Visits Offsite/off campus	4,566

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	**1**
Cath Labs used for Angiography procedures	1
Dedicated Diagnostic Catheterization Labs	1
Dedicated Interventional Catheterization Labs	1
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	**655**
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	468
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	94
EP Catheterizations (15+)	93

Cardiac Surgery Data

Total Cardiac Surgery Cases:	**0**
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	0
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	0

Diagnostic/Interventional Equipment	Owned	Contract	Examinations Inpatient	Outpt	Contract
General Radiography/Fluoroscopy	5	0	15,774	22,733	0
Nuclear Medicine	2	0	661	949	0
Mammography	1	0	0	3,204	0
Ultrasound	4	0	3,257	6,444	0
Angiography	1	0			
Diagnostic Angiography			39	36	0
Interventional Angiography			21	24	0
Positron Emission Tomography (PET)	0	0	0	0	0
Computerized Axial Tomography (CAT)	2	0	6,456	12,936	0
Magnetic Resonance Imaging	1	0	879	1,276	0

Therapeutic Equipment	Owned	Contract	Therapies/ Treatments
Lithotripsy	0	0	0
Linear Accelerator	0	0	0
Image Guided Rad Therapy			0
Intensity Modulated Rad Thrpy			0
High Dose Brachytherapy	0	0	0
Proton Beam Therapy	0	0	0
Gamma Knife	0	0	0
Cyber knife	0	0	0

Hospital Profile - CY 2015 VHS West Suburban Medical Center Oak Park Page 1

Ownership, Management and General Information

ADMINISTRATOR NAME:	Jennifer (Fambauch) Lamont
ADMINSTRATOR PHONE	708-763-2531
OWNERSHIP:	VHS West Suburban Medical Center
OPERATOR:	VHS West Suburban Medical Center
MANAGEMENT:	For Profit Corporation
CERTIFICATION:	(Not Answered)
FACILITY DESIGNATION:	General Hospital
ADDRESS	3 Erie Court **CITY:** Oak Park **COUNTY:** Suburban Cook County

Patients by Race

White	16.7%
Black	69.9%
American Indian	0.0%
Asian	0.5%
Hawaiian/ Pacific	0.0%
Unknown	12.8%

Patients by Ethnicity

Hispanic or Latino:	8.1%
Not Hispanic or Latino:	87.1%
Unknown:	4.8%

IDPH Number:	5694
HPA	A-06
HSA	7

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2015	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	135	101	101	5,277	22,500	1,598	4.6	66.0	48.9	65.4
0-14 Years				*0*	*0*					
15-44 Years				*1,052*	*3,555*					
45-64 Years				*1,992*	*8,326*					
65-74 Years				*1,015*	*4,688*					
75 Years +				*1,218*	*5,931*					
Pediatric	5	5	5	17	29	0	1.7	0.1	1.6	1.6
Intensive Care	24	14	14	1,163	2,310	6	2.0	6.3	26.4	45.3
Direct Admission				*958*	*1,640*					
Transfers				*205*	*670*					
Obstetric/Gynecology	20	20	20	1,656	4,022	89	2.5	11.3	56.3	56.3
Maternity				*1,641*	*3,985*					
Clean Gynecology				*15*	*37*					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	50	42	36	650	10,509	0	16.2	28.8	57.6	68.6
Swing Beds			0	0	0		0.0	0.0		
Acute Mental Illness	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Rehabilitation	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	**234**			**8,558**	**39,370**	**1,693**	**4.8**	**112.5**	**48.1**	

(Includes ICU Direct Admissions Only)

Inpatients and Outpatients Served by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Charity Care	Totals
Inpatients	**29.3%**	**14.3%**	**0.0%**	**53.9%**	**1.0%**	**1.4%**	
	2509	1226	0	4612	89	122	**8,558**
Outpatients	**17.0%**	**12.5%**	**0.0%**	**65.7%**	**2.3%**	**2.6%**	
	26299	19296	0	101770	3589	3955	**154,909**

Financial Year Reported: 1/1/2015 *to* 12/31/2015

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Totals	Charity Care Expense
Inpatient Revenue ($)	**34.6%**	**24.6%**	**0.0%**	**40.7%**	**0.1%**	**100.0%**	
	29,680,742	21,067,276	0	34,884,720	95,018	85,727,756	512,361
Outpatient Revenue ($)	**22.1%**	**5.0%**	**0.0%**	**70.7%**	**2.1%**	**100.0%**	
	11,935,716	2,696,709	0	38,191,833	1,159,770	53,984,028	1,252,884

Total Charity Care Expense
1,765,245

Total Charity Care as % of Net Revenue
1.3%

Birthing Data

Number of Total Births:	1,578
Number of Live Births:	1,566
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	12
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	2
CSections Performed:	363

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	25	8	0
Patient Days	2,587	1,504	0
Total Newborn Patient Days			**4,091**

Laboratory Studies

Inpatient Studies	304,799
Outpatient Studies	136,050
Studies Performed Under Contract	0

Organ Transplantation

Kidney:	0
Heart:	0
Lung:	0
Heart/Lung:	0
Pancreas:	0
Liver:	0
Total:	**0**

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	0	0	0	0	89	125	367	238	605	4.1	1.9
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	8	8	796	1267	1453	1833	3286	1.8	1.4
Gastroenterology	0	0	0	0	0	0	0	0	0	0.0	0.0
Neurology	0	0	0	0	0	0	0	0	0	0.0	0.0
OB/Gynecology	0	0	0	0	147	499	388	757	1145	2.6	1.5
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	0	0	1	662	2	821	823	2.0	1.2
Orthopedic	0	0	0	0	254	436	813	852	1665	3.2	2.0
Otolaryngology	0	0	0	0	9	26	16	36	52	1.8	1.4
Plastic Surgery	0	0	0	0	3	61	9	184	193	3.0	3.0
Podiatry	0	0	0	0	5	131	7	215	222	1.4	1.6
Thoracic	0	0	0	0	12	2	30	4	34	2.5	2.0
Urology	0	0	0	0	98	282	247	522	769	2.5	1.9
Totals	**0**	**0**	**8**	**8**	**1414**	**3491**	**3332**	**5462**	**8794**	**2.4**	**1.6**

SURGICAL RECOVERY STATIONS Stage 1 Recovery Stations 16 Stage 2 Recovery Stations 25

Dedicated and Non-Dedicated Procedure Room Utilzation

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	4	4	610	3925	1211	7018	8229	2.0	1.8
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	0	0	0	0	0	0	0	0.0	0.0
Cystoscopy	0	0	0	0	0	0	0	0	0	0.0	0.0
Multipurpose Non-Dedicated Rooms											
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center	No
Level of Trauma Service	**Level 1** (Not Answered) **Level 2** Not Answered
Operating Rooms Dedicated for Trauma Care	0
Number of Trauma Visits:	0
Patients Admitted from Trauma	0
Emergency Service Type:	Comprehensive
Number of Emergency Room Stations	25
Persons Treated by Emergency Services:	50,497
Patients Admitted from Emergency:	5,366
Total ED Visits (Emergency+Trauma):	**50,497**

Free-Standing Emergency Center

Beds in Free-Standing Centers	0
Patient Visits in Free-Standing Centers	0
Hospital Admissions from Free-Standing Center	0

Outpatient Service Data

Total Outpatient Visits	**154,909**
Outpatient Visits at the Hospital/ Campus:	100,071
Outpatient Visits Offsite/off campus	54,838

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	**1**
Cath Labs used for Angiography procedures	1
Dedicated Diagnostic Catheterization Lab	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	**706**
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	518
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	188
EP Catheterizations (15+)	0

Cardiac Surgery Data

Total Cardiac Surgery Cases:	**20**
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	20
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	12

Diagnostic/Interventional Equipment

	Owned	Contract	Examinations Inpatient	Outpt	Contract
General Radiography/Fluoroscopy	14	0	8,586	30,816	0
Nuclear Medicine	3	0	478	725	0
Mammography	3	0	0	20,286	0
Ultrasound	14	0	2,702	14,913	0
Angiography	1	0			
Diagnostic Angiography			0	0	0
Interventional Angiography			934	1,505	0
Positron Emission Tomography (PET)	0	0	0	0	0
Computerized Axial Tomography (CAT)	5	0	3,583	8,441	0
Magnetic Resonance Imaging	3	0	497	2,911	0

Therapeutic Equipment

	Owned	Contract	Therapies/ Treatments
Lithotripsy	0	0	0
Linear Accelerator	0	0	0
Image Guided Rad Therapy			0
Intensity Modulated Rad Thrpy			0
High Dose Brachytherapy	0	0	0
Proton Beam Therapy	0	0	0
Gamma Knife	0	0	0
Cyber knife	0	0	0

Hospital Profile - CY 2016 **VHS West Suburban Medical Center** **Oak Park** Page 1

Ownership, Management and General Information

ADMINISTRATOR NAME:	Christopher Frysztak
ADMINSTRATOR PHONE:	708-763-2254
OWNERSHIP:	VHS West Suburban Medical Center
OPERATOR:	VHS West Suburban Medical Center
MANAGEMENT:	For Profit Corporation
CERTIFICATION:	(Not Answered)
FACILITY DESIGNATION:	(Not Answered)
ADDRESS	3 Erie Court CITY: Oak Park COUNTY: Suburban Cook County

Patients by Race

White	13.9%
Black	71.6%
American Indian	0.0%
Asian	0.5%
Hawaiian/ Pacific	0.1%
Unknown	13.9%

Patients by Ethnicity

Hispanic or Latino:	8.0%
Not Hispanic or Latino:	86.1%
Unknown:	5.9%

IDPH Number:	5694
HPA	A-06
HSA	7

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2016	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	135	101	101	4,961	20,162	1,748	4.4	59.9	44.3	59.3
0-14 Years				*0*	*0*					
15-44 Years				*1,006*	*3,424*					
45-64 Years				*1,897*	*7,491*					
65-74 Years				*969*	*4,172*					
75 Years +				*1,089*	*5,075*					
Pediatric	5	5	5	15	38	0	2.5	0.1	2.1	2.1
Intensive Care	24	14	14	1,097	3,246	8	3.0	8.9	37.0	63.5
Direct Admission				*872*	*2,472*					
Transfers - Not included in Facility Admissions				*225*	*774*					
Obstetric/Gynecology	20	20	20	1,586	3,883	36	2.5	10.7	53.5	53.5
Maternity				*1,577*	*3,861*					
Clean Gynecology				*9*	*22*					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	50	42	36	548	9,887	0	18.0	27.0	54.0	64.3
Swing Beds			0	0	0		0.0	0.0		
Total AMI	0			0	0	0	0.0	0.0	0.0	
Adolescent AMI		0	0	0	0	0	0.0	0.0		0.0
Adult AMI		0	0	0	0	0	0.0	0.0		0.0
Rehabilitation	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	**234**			**7,982**	**37,216**	**1,792**	**4.9**	**106.6**	**45.5**	

Inpatients and Outpatients Served by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Charity Care	Totals
Inpatients	28.1%	9.1%	0.0%	59.7%	1.7%	1.4%	
	2241	728	0	4765	133	115	**7,982**
Outpatients	17.9%	5.5%	0.0%	72.0%	2.4%	2.2%	
	27367	8458	0	110048	3649	3364	**152,886**

Financial Year Reported: 1/1/2016 *to* 12/31/2016

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Totals	Charity Care Expense
Inpatient Revenue ($)	35.6%	21.2%	0.0%	43.1%	0.1%	100.0%	
	31,760,631	18,884,261	0	38,487,054	85,172	89,217,118	525,615
Outpatient Revenue ($)	21.9%	0.3%	0.0%	77.6%	0.1%	100.0%	
	9,760,840	132,097	0	34,555,046	56,811	44,504,794	1,398,938

Total Charity Care Expense 1,924,553

Total Charity Care as % of Net Revenue 1.4%

Birthing Data

Number of Total Births:	1,537
Number of Live Births:	1,521
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	12
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	12
CSections Performed:	346

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	25	8	0
Patient Days	2,593	1,610	0
Total Newborn Patient Days			**4,203**

Laboratory Studies

Inpatient Studies	280,059
Outpatient Studies	146,838
Studies Performed Under Contract	0

Organ Transplantation

Kidney:	
Heart:	
Lung:	
Heart/Lung:	
Pancreas:	
Liver:	
Total:	

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	0	0	0	0	64	127	240	233	473	3.8	1.8
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	8	8	720	1113	1387	1651	3038	1.9	1.5
Gastroenterology	0	0	0	0	0	0	0	0	0	0.0	0.0
Neurology	0	0	0	0	0	0	0	0	0	0.0	0.0
OB/Gynecology	0	0	0	0	125	430	307	682	989	2.5	1.6
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	0	0	3	618	4	767	771	1.3	1.2
Orthopedic	0	0	0	0	151	366	494	783	1277	3.3	2.1
Otolaryngology	0	0	0	0	4	21	8	28	36	2.0	1.3
Plastic Surgery	0	0	0	0	11	59	47	177	224	4.3	3.0
Podiatry	0	0	0	0	0	116	0	193	193	0.0	1.7
Thoracic	0	0	0	0	8	0	29	0	29	3.6	0.0
Urology	0	0	0	0	67	195	165	370	535	2.5	1.9
Totals	**0**	**0**	**8**	**8**	**1153**	**3045**	**2681**	**4884**	**7565**	**2.3**	**1.6**

SURGICAL RECOVERY STATIONS Stage 1 Recovery Stations 16 Stage 2 Recovery Stations 25

Dedicated and Non-Dedicated Procedure Room Utilization

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	4	4	605	3859	1222	7038	8260	2.0	1.8
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	0	0	0	0	0	0	0	0.0	0.0
Cystoscopy	0	0	0	0	0	0	0	0	0	0.0	0.0
Multipurpose Non-Dedicated Rooms											
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center	No
Level of Trauma Service	Level 1 / Level 2
	(Not Answered) / Not Answered
Operating Rooms Dedicated for Trauma Care	0
Number of Trauma Visits:	2,091
Patients Admitted from Trauma	0
Emergency Service Type:	Comprehensive
Number of Emergency Room Stations	25
Persons Treated by Emergency Services:	50,859
Patients Admitted from Emergency:	6,572
Total ED Visits (Emergency+Trauma):	**52,950**

Free-Standing Emergency Center

Beds in Free-Standing Centers	
Patient Visits in Free-Standing Centers	
Hospital Admissions from Free-Standing Center	

Outpatient Service Data

Total Outpatient Visits	**152,886**
Outpatient Visits at the Hospital/ Campus:	152,886
Outpatient Visits Offsite/off campus	0

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	**1**
Cath Labs used for Angiography procedures	1
Dedicated Diagnostic Catheterization Labs	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	**683**
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	496
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	187
EP Catheterizations (15+)	0

Cardiac Surgery Data

Total Cardiac Surgery Cases:	**11**
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	11
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	8

Diagnostic/Interventional Equipment	Owned	Contract	Examinations Inpatient	Outpt	Contract
General Radiography/Fluoroscopy	15	0	9,049	29,165	0
Nuclear Medicine	3	0	410	717	0
Mammography	3	0	0	19,798	0
Ultrasound	12	0	14,317	2,370	0
Angiography	1	0			
Diagnostic Angiography			333	693	0
Interventional Angiography			264	378	0
Positron Emission Tomography (PET)	0	0	0	0	0
Computerized Axial Tomography (CAT)	5	0	3,939	8,671	0
Magnetic Resonance Imaging	2	0	443	3,014	0

Therapeutic Equipment	Owned	Contract	Therapies/ Treatments
Lithotripsy	0	0	0
Linear Accelerator	0	0	0
Image Guided Rad Therapy			0
Intensity Modulated Rad Thrpy			0
High Dose Brachytherapy	0	0	0
Proton Beam Therapy	0	0	0
Gamma Knife	0	0	0
Cyber knife	0	0	0

Hospital Profile - CY 2017 **West Suburban Medical Center** **Oak Park**

Ownership, Management and General Information

ADMINISTRATOR NAME:	Christopher Frysztak
ADMINSTRATOR PHONE	708-763-2254
OWNERSHIP:	VHS West Suburban Medical Center
OPERATOR:	VHS West Suburban Medical Center
MANAGEMENT:	For Profit Corporation
CERTIFICATION:	
FACILITY DESIGNATION:	General Hospital
ADDRESS	3 Erie Ct **CITY:** Oak Park **COUNTY:** Suburban Cook County

Patients by Race

White	14.5%
Black	71.5%
American Indian	0.0%
Asian	0.4%
Hawaiian/ Pacific	0.0%
Unknown	13.7%

Patients by Ethnicity

Hispanic or Latino:	8.5%
Not Hispanic or Latino:	86.3%
Unknown:	5.1%

IDPH Number:	5694
HPA	A-06
HSA	7

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2017	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	135	101	101	4,615	19,161	1,438	4.5	56.4	41.8	55.9
0-14 Years				*0*	*0*					
15-44 Years				*845*	*2,948*					
45-64 Years				*1,765*	*6,869*					
65-74 Years				*942*	*4,270*					
75 Years +				*1,063*	*5,074*					
Pediatric	5	5	1	13	25	0	1.9	0.1	1.4	1.4
Intensive Care	24	12	12	1,063	3,346	16	3.2	9.2	38.4	76.8
Direct Admission				*830*	*2,542*					
Transfers				*233*	*804*					
Obstetric/Gynecology	20	20	20	1,543	3,821	58	2.5	10.6	53.1	53.1
Maternity				*1,534*	*3,802*					
Clean Gynecology				*9*	*19*					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	50	42	36	622	9,637	0	15.5	26.4	52.8	62.9
Swing Beds			0	0	0		0.0	0.0		
Total AMI	0			0	0	0	0.0	0.0	0.0	
Adolescent AMI		0	0	0	0	0	0.0	0.0		0.0
Adult AMI		0	0	0	0	0	0.0	0.0		0.0
Rehabilitation	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	**234**			**7,623**	**35,990**	**1,512**	**4.9**	**102.7**	**43.9**	

(Includes ICU Direct Admissions Only)

Inpatients and Outpatients Served by Payor Source

	Medicare	*Medicaid*	*Other Public*	*Private Insurance*	*Private Pay*	*Charity Care*	*Totals*
Inpatients	**27.7%**	**7.3%**	**0.0%**	**61.7%**	**1.3%**	**2.0%**	
	2114	553	0	4700	102	154	**7,623**
Outpatients	**17.6%**	**4.4%**	**0.0%**	**73.4%**	**2.1%**	**2.4%**	
	25867	6510	0	107879	3112	3585	**146,953**

Financial Year Reported: 1/1/2017 *to* 12/31/2017

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	*Medicaid*	*Other Public*	*Private Insurance*	*Private Pay*	*Totals*	*Charity Care Expense*
Inpatient Revenue ($)	**34.2%**	**22.9%**	**0.0%**	**42.8%**	**0.1%**	**100.0%**	
	28,868,631	19,337,144	0	36,119,612	87,215	84,412,603	568,519
Outpatient Revenue ($)	**22.1%**	**1.7%**	**0.0%**	**75.4%**	**0.7%**	**100.0%**	
	9,234,217	722,480	0	31,520,597	310,716	41,788,010	1,479,783

Total Charity Care Expense
2,048,302

Total Charity Care as % of Net Revenue
1.6%

Birthing Data

Number of Total Births:	1,443
Number of Live Births:	1,457
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	12
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	2
CSections Performed:	371

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	25	8	0
Patient Days	2,663	1,258	0
Total Newborn Patient Days			**3,921**

Laboratory Studies

Inpatient Studies	114,445
Outpatient Studies	145,676
Studies Performed Under Contract	51,454

Organ Transplantation

Kidney:	0
Heart:	0
Lung:	0
Heart/Lung:	0
Pancreas:	0
Liver:	0
Total:	**0**

Hospital Profile - CY 2017 **West Suburban Medical Center** **Oak Park**

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	0	0	0	0	64	81	195	162	357	3.0	2.0
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	8	8	765	913	1393	1423	2816	1.8	1.6
Gastroenterology	0	0	0	0	0	0	0	0	0	0.0	0.0
Neurology	0	0	0	0	0	0	0	0	0	0.0	0.0
OB/Gynecology	0	0	0	0	97	356	243	558	801	2.5	1.6
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	0	0	0	567	0	687	687	0.0	1.2
Orthopedic	0	0	0	0	174	304	613	656	1269	3.5	2.2
Otolaryngology	0	0	0	0	3	17	4	24	28	1.3	1.4
Plastic Surgery	0	0	0	0	8	63	30	158	188	3.8	2.5
Podiatry	0	0	0	0	2	77	4	130	134	2.0	1.7
Thoracic	0	0	0	0	6	0	18	0	18	3.0	0.0
Urology	0	0	0	0	75	162	170	332	502	2.3	2.0
Totals	**0**	**0**	**8**	**8**	**1194**	**2540**	**2670**	**4130**	**6800**	**2.2**	**1.6**

SURGICAL RECOVERY STATIONS Stage 1 Recovery Stations 16 Stage 2 Recovery Stations 25

Dedicated and Non-Dedicated Procedure Room Utilzation

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	4	4	610	3774	1209	6707	7916	2.0	1.8
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	0	0	0	2	0	2	2	0.0	1.0
Cystoscopy	0	0	0	0	0	0	0	0	0	0.0	0.0
Multipurpose Non-Dedicated Rooms											
					0	0	0	0	0	0.0	0.0
					0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center		No
Level of Trauma Service	**Level 1**	**Level 2**
Operating Rooms Dedicated for Trauma Care		0
Number of Trauma Visits:		0
Patients Admitted from Trauma		0
Emergency Service Type:		Comprehensive
Number of Emergency Room Stations		25
Persons Treated by Emergency Services:		44,260
Patients Admitted from Emergency:		7,631
Total ED Visits (Emergency+Trauma):		**44,260**

Free-Standing Emergency Center

Beds in Free-Standing Centers	0
Patient Visits in Free-Standing Centers	0
Hospital Admissions from Free-Standing Center	0

Outpatient Service Data

Total Outpatient Visits	**146,953**
Outpatient Visits at the Hospital/ Campus:	146,953
Outpatient Visits Offsite/off campus	0

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	**1**
Cath Labs used for Angiography procedures	1
Dedicated Diagnostic Catheterization Lab	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	**688**
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	391
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	223
EP Catheterizations (15+)	74

Cardiac Surgery Data

Total Cardiac Surgery Cases:	**6**
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	6
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	0

Diagnostic/Interventional Equipment	Owned	Contract	Examinations Inpatient	Outpt	Contract
General Radiography/Fluoroscopy	15	0	9,097	28,253	0
Nuclear Medicine	3	0	473	665	0
Mammography	3	0	0	19,382	0
Ultrasound	8	0	2,435	12,694	0
Angiography	1	0			
Diagnostic Angiography			318	476	0
Interventional Angiography			60	218	0
Positron Emission Tomography (PET)	0	0	0	0	0
Computerized Axial Tomography (CAT)	3	0	4,159	9,138	0
Magnetic Resonance Imaging	2	0	462	2,907	0

Therapeutic Equipment	Owned	Contract	Therapies/ Treatments
Lithotripsy	0	0	0
Linear Accelerator	0	0	0
Image Guided Rad Therapy			0
Intensity Modulated Rad Thrpy			0
High Dose Brachytherapy	0	0	0
Proton Beam Therapy	0	0	0
Gamma Knife	0	0	0
Cyber knife	0	0	0

Hospital Profile - CY 2018 **West Suburban Medical Center** **Oak Park**

Ownership, Management and General Information

ADMINISTRATOR NAME:	Christopher Frysztak
ADMINSTRATOR PHONE:	708-763-2254
OWNERSHIP:	VHS West Suburban Medical Center
OPERATOR:	VHS West Suburban Medical Center
MANAGEMENT:	For Profit Corporation
CERTIFICATION:	
FACILITY DESIGNATION:	General Hospital
ADDRESS	3 Erie Court **CITY:** Oak Park **COUNTY:** Suburban Cook County

Patients by Race

White	11.0%
Black	73.8%
American Indian	0.0%
Asian	0.4%
Hawaiian/ Pacific	0.1%
Unknown	14.6%

Patients by Ethnicity

Hispanic or Latino:	10.7%
Not Hispanic or Latino:	87.7%
Unknown:	1.6%

IDPH Number:	5694
HPA	A-06
HSA	7

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2018	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	135	101	101	4,726	19,273	1,472	4.4	56.8	42.1	56.3
0-14 Years				*0*	*0*					
15-44 Years				*864*	*2,729*					
45-64 Years				*1,717*	*6,818*					
65-74 Years				*1,016*	*4,554*					
75 Years +				*1,129*	*5,172*					
Pediatric	5	5	1	3	9	0	3.0	0.0	0.5	0.5
Intensive Care	24	12	12	1,044	3,758	14	3.6	10.3	43.1	86.1
Direct Admission				*809*	*2,605*					
Transfers				*235*	*1,153*					
Obstetric/Gynecology	20	20	20	1,358	3,664	79	2.8	10.3	51.3	51.3
Maternity				*1,348*	*3,644*					
Clean Gynecology				*10*	*20*					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	50	42	36	601	8,361	0	13.9	22.9	45.8	54.5
Swing Beds			0	0	0		0.0	0.0		
Total AMI	0			0	0	0	0.0	0.0	0.0	
Adolescent AMI		0	0	0	0	0	0.0	0.0		0.0
Adult AMI		0	0	0	0	0	0.0	0.0		0.0
Rehabilitation	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	**234**			**7,497**	**35,065**	**1,565**	**4.9**	**100.4**	**42.9**	

(Includes ICU Direct Admissions Only)

Inpatients and Outpatients Served by Payor Source

	Medicare	*Medicaid*	*Other Public*	*Private Insurance*	*Private Pay*	*Charity Care*	*Totals*
Inpatients	**27.1%**	**7.4%**	**0.0%**	**61.4%**	**0.8%**	**3.3%**	
	2033	558	0	4600	57	249	**7,497**
Outpatients	**17.4%**	**4.5%**	**0.0%**	**72.5%**	**2.4%**	**3.2%**	
	25157	6561	0	104915	3502	4635	**144,770**

Financial Year Reported: 1/1/2018 *to* 12/31/2018

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	*Medicaid*	*Other Public*	*Private Insurance*	*Private Pay*	*Totals*	*Charity Care Expense*
Inpatient Revenue ($)	**35.9%**	**19.3%**	**0.0%**	**44.6%**	**0.2%**	**100.0%**	
	29,942,632	16,108,049	0	37,204,190	161,529	83,416,400	967,574
Outpatient Revenue ($)	**22.6%**	**2.1%**	**0.0%**	**73.6%**	**1.6%**	**100.0%**	
	9,535,963	899,943	0	30,997,773	670,982	42,104,661	2,135,076

Total Charity Care Expense
3,102,649

Total Charity Care as % of Net Revenue
2.5%

Birthing Data

Number of Total Births:	1,348
Number of Live Births:	1,356
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	12
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	2
CSections Performed:	329

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	25	8	0
Patient Days	2,479	1,413	0
Total Newborn Patient Days			**3,892**

Laboratory Studies

Inpatient Studies	122,557
Outpatient Studies	145,023
Studies Performed Under Contract	53,093

Organ Transplantation

Kidney:	0
Heart:	0
Lung:	0
Heart/Lung:	0
Pancreas:	0
Liver:	0
Total:	**0**

Hospital Profile - CY 2018 **West Suburban Medical Center** **Oak Park**

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	0	0	0	0	85	158	250	293	543	2.9	1.9
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	8	8	739	815	1313	1239	2552	1.8	1.5
Gastroenterology	0	0	0	0	0	0	0	0	0	0.0	0.0
Neurology	0	0	0	0	0	0	0	0	0	0.0	0.0
OB/Gynecology	0	0	0	0	105	387	279	596	875	2.7	1.5
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	0	0	1	602	2	723	725	2.0	1.2
Orthopedic	0	0	0	0	209	320	741	747	1488	3.5	2.3
Otolaryngology	0	0	0	0	0	10	0	13	13	0.0	1.3
Plastic Surgery	0	0	0	0	6	46	26	152	178	4.3	3.3
Podiatry	0	0	0	0	7	81	17	146	163	2.4	1.8
Thoracic	0	0	0	0	0	0	0	0	0	0.0	0.0
Urology	0	0	0	0	55	168	136	347	483	2.5	2.1
Totals	**0**	**0**	**8**	**8**	**1207**	**2587**	**2764**	**4256**	**7020**	**2.3**	**1.6**

SURGICAL RECOVERY STATIONS Stage 1 Recovery Stations 16 Stage 2 Recovery Stations 25

Dedicated and Non-Dedicated Procedure Room Utilization

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	4	4	616	3258	1256	5931	7187	2.0	1.8
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	0	0	0	2	0	2	2	0.0	1.0
Cystoscopy	0	0	0	0	0	0	0	0	0	0.0	0.0
Multipurpose Non-Dedicated Rooms											
					0	0	0	0	0	0.0	0.0
					0	0	0	0	0	0.0	0.0
					0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center		No
Level of Trauma Service	**Level 1**	**Level 2**
Operating Rooms Dedicated for Trauma Care		0
Number of Trauma Visits:		0
Patients Admitted from Trauma		0
Emergency Service Type:		Comprehensive
Number of Emergency Room Stations		26
Persons Treated by Emergency Services:		50,582
Patients Admitted from Emergency:		5,747
Total ED Visits (Emergency+Trauma):		**50,582**

Free-Standing Emergency Center

Beds in Free-Standing Centers	0
Patient Visits in Free-Standing Centers	0
Hospital Admissions from Free-Standing Center	0

Outpatient Service Data

Total Outpatient Visits	**144,770**
Outpatient Visits at the Hospital/ Campus:	144,770
Outpatient Visits Offsite/off campus	0

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	**1**
Cath Labs used for Angiography procedures	1
Dedicated Diagnostic Catheterization Labs	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	**873**
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	455
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	314
EP Catheterizations (15+)	104

Cardiac Surgery Data

Total Cardiac Surgery Cases:	**0**
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	0
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	0

Diagnostic/Interventional Equipment	Owned	Contract	Examinations Inpatient	Outpt	Contract
General Radiography/Fluoroscopy	15	0	9,028	28,534	0
Nuclear Medicine	3	0	402	672	0
Mammography	3	0	0	19,279	0
Ultrasound	7	0	2,481	12,154	0
Angiography	1	0			
Diagnostic Angiography			107	124	0
Interventional Angiography			324	459	0
Positron Emission Tomography (PET)	0	0	0	0	0
Computerized Axial Tomography (CAT)	3	0	4,015	9,252	0
Magnetic Resonance Imaging	2	0	537	2,946	0

Therapeutic Equipment	Owned	Contract	Therapies/ Treatments
Lithotripsy	0	0	0
Linear Accelerator	0	0	0
Image Guided Rad Therapy			0
Intensity Modulated Rad Thrpy			0
High Dose Brachytherapy	0	0	0
Proton Beam Therapy	0	0	0
Gamma Knife	0	0	0
Cyber knife	0	0	0

Hospital Profile - CY 2015 | Swedish Covenant Hospital | Chicago | Page 1

Ownership, Management and General Information

ADMINISTRATOR NAME:	Mark Newton
ADMINSTRATOR PHONE	773-878-8200 ext. 1000
OWNERSHIP:	Swedish Covenant Hospital
OPERATOR:	Swedish Covenant Hospital
MANAGEMENT:	Church-Related
CERTIFICATION:	(Not Answered)
FACILITY DESIGNATION:	General Hospital
ADDRESS	5145 North California Avenue **CITY:** Chicago **COUNTY:** Suburban Cook (Chicago)

Patients by Race

White	70.5%
Black	8.1%
American Indian	0.1%
Asian	16.1%
Hawaiian/ Pacific	0.1%
Unknown	5.0%

Patients by Ethnicity

Hispanic or Latino:	21.3%
Not Hispanic or Latino:	73.7%
Unknown:	5.0%

IDPH Number:	2717
HPA	A-01
HSA	6

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2015	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	171	144	142	9,357	42,586	4,961	5.1	130.3	76.2	90.5
0-14 Years				*0*	*0*					
15-44 Years				*1,795*	*5,869*					
45-64 Years				*2,651*	*11,590*					
65-74 Years				*1,758*	*8,890*					
75 Years +				*3,153*	*16,237*					
Pediatric	6	6	5	124	303	127	3.5	1.2	19.6	19.6
Intensive Care	18	18	17	895	4,513	0	5.0	12.4	68.7	68.7
Direct Admission				*679*	*2,449*					
Transfers				*216*	*2,064*					
Obstetric/Gynecology	21	21	18	1,709	3,660	77	2.2	10.2	48.8	48.8
Maternity				*1,574*	*3,308*					
Clean Gynecology				*135*	*352*					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	37	25	24	520	5,679	0	10.9	15.6	42.1	62.2
Swing Beds			0	0	0		0.0	0.0		
Acute Mental Illness	34	31	21	556	4,156	0	7.5	11.4	33.5	36.7
Rehabilitation	25	25	20	348	4,969	0	14.3	13.6	54.5	54.5
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	**312**			**13,293**	**65,866**	**5,165**	**5.3**	**194.6**	**62.4**	

(Includes ICU Direct Admissions Only)

Inpatients and Outpatients Served by Payor Source

	Medicare	*Medicaid*	*Other Public*	*Private Insurance*	*Private Pay*	*Charity Care*	*Totals*
Inpatients	**44.3%**	**29.4%**	**0.0%**	**22.8%**	**1.0%**	**2.5%**	
	5890	3910	0	3028	134	331	**13,293**
Outpatients	**30.2%**	**29.3%**	**0.0%**	**29.1%**	**8.8%**	**2.6%**	
	70444	68466	0	67976	20482	5970	**233,338**

Financial Year Reported: 10/1/2014 to 9/30/2015

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	*Medicaid*	*Other Public*	*Private Insurance*	*Private Pay*	*Totals*	*Charity Care Expense*
Inpatient Revenue ($)	**42.2%**	**14.3%**	**0.0%**	**43.4%**	**0.1%**	**100.0%**	
	58,018,114	19,737,962	0	59,759,699	123,530	137,639,305	2,310,780
Outpatient Revenue ($)	**25.8%**	**9.5%**	**0.0%**	**63.0%**	**1.6%**	**100.0%**	
	25,432,607	9,346,085	0	62,044,569	1,619,739	98,443,000	3,066,220

Total Charity Care Expense
5,377,000

Total Charity Care as % of Net Revenue
2.3%

Birthing Data

Number of Total Births:	2,090
Number of Live Births:	2,084
Birthing Rooms:	0
Labor Rooms:	2
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	9
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	2
CSections Performed:	519

Newborn Nursery Utilization

	Level I	Level II	Level III+
Beds	22	12	0
Patient Days	3,672	1,239	0
Total Newborn Patient Days			**4,911**

Laboratory Studies

Inpatient Studies	433,902
Outpatient Studies	507,707
Studies Performed Under Contract	83,466

Organ Transplantation

Kidney:	0
Heart:	0
Lung:	0
Heart/Lung:	0
Pancreas:	0
Liver:	0
Total:	**0**

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	0	0	1	1	305	417	1767	564	2331	5.8	1.4
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	3	6	9	739	1034	1659	1742	3401	2.2	1.7
Gastroenterology	0	0	0	0	41	7	60	7	67	1.5	1.0
Neurology	0	0	0	0	401	2145	1516	1338	2854	3.8	0.6
OB/Gynecology	0	0	0	0	128	494	433	863	1296	3.4	1.7
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	0	0	3	1054	10	1017	1027	3.3	1.0
Orthopedic	0	0	0	0	591	601	1816	1296	3112	3.1	2.2
Otolaryngology	0	0	0	0	45	218	90	395	485	2.0	1.8
Plastic Surgery	0	0	0	0	10	152	39	590	629	3.9	3.9
Podiatry	0	0	0	0	102	231	178	422	600	1.7	1.8
Thoracic	0	0	0	0	168	52	186	59	245	1.1	1.1
Urology	0	0	0	0	64	107	299	258	557	4.7	2.4
Totals	**0**	**3**	**7**	**10**	**2597**	**6512**	**8053**	**8551**	**16604**	**3.1**	**1.3**

SURGICAL RECOVERY STATIONS Stage 1 Recovery Stations 0 Stage 2 Recovery Stations 0

Dedicated and Non-Dedicated Procedure Room Utilzation

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	3	3	837	3284	642	2132	2774	0.8	0.6
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	0	0	0	0	0	0	0	0.0	0.0
Cystoscopy	0	0	1	1	174	260	289	436	725	1.7	1.7
Multipurpose Non-Dedicated Rooms											
Minor Surgery	0	0	2	2	72	272	112	288	400	1.6	1.1
Opthalmology	0	0	1	1	1	13	1	31	32	1.0	2.4
	0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center	No
Level of Trauma Service	**Level 1** (Not Answered) **Level 2** Not Answered
Operating Rooms Dedicated for Trauma Care	0
Number of Trauma Visits:	0
Patients Admitted from Trauma	0
Emergency Service Type:	Comprehensive
Number of Emergency Room Stations	30
Persons Treated by Emergency Services:	54,203
Patients Admitted from Emergency:	13,707
Total ED Visits (Emergency+Trauma):	**54,203**

Free-Standing Emergency Center

Beds in Free-Standing Centers	0
Patient Visits in Free-Standing Centers	0
Hospital Admissions from Free-Standing Center	0

Outpatient Service Data

Total Outpatient Visits	**233,338**
Outpatient Visits at the Hospital/ Campus:	227,790
Outpatient Visits Offsite/off campus	5,548

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	**2**
Cath Labs used for Angiography procedures	0
Dedicated Diagnostic Catheterization Lab	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	**1,726**
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	1,054
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	324
EP Catheterizations (15+)	348

Cardiac Surgery Data

Total Cardiac Surgery Cases:	**124**
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	124
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	89

Diagnostic/Interventional Equipment

	Owned	Contract	Examinations Inpatient	Outpt	Contract
General Radiography/Fluoroscopy	24	0	14,913	50,225	0
Nuclear Medicine	3	0	1,381	998	0
Mammography	4	0	1	12,109	0
Ultrasound	13	0	3,556	21,012	0
Angiography	1	0			
Diagnostic Angiography			164	158	0
Interventional Angiography			43	25	0
Positron Emission Tomography (PET)	1	0	2	281	0
Computerized Axial Tomography (CAT)	3	0	3,454	16,848	0
Magnetic Resonance Imaging	2	0	2,454	6,166	0

Therapeutic Equipment

	Owned	Contract	Therapies/ Treatments
Lithotripsy	0	0	0
Linear Accelerator	1	0	3,738
Image Guided Rad Therapy			0
Intensity Modulated Rad Thrpy			738
High Dose Brachytherapy	0	0	0
Proton Beam Therapy	0	0	0
Gamma Knife	0	0	0
Cyber knife	0	1	541

Hospital Profile - CY 2016 **Swedish Covenant Hospital** **Chicago**

Ownership, Management and General Information

ADMINISTRATOR NAME:	Anthony Guaccio
ADMINSTRATOR PHONE:	773-878-8200 ext.1000
OWNERSHIP:	Swedish Covenant Hospital
OPERATOR:	Swedish Covenant Hospital
MANAGEMENT:	Church-Related
CERTIFICATION:	(Not Answered)
FACILITY DESIGNATION:	General Hospital
ADDRESS	5145 North California Avenue **CITY:** Chicago **COUNTY:** Suburban Cook (Chicago)

Patients by Race

White	68.5%
Black	8.0%
American Indian	0.1%
Asian	17.4%
Hawaiian/ Pacific	0.0%
Unknown	5.9%

Patients by Ethnicity

Hispanic or Latino:	22.1%
Not Hispanic or Latino:	72.0%
Unknown:	5.9%

IDPH Number:	2717
HPA	A-01
HSA	6

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2016	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	171	156	152	8,979	40,019	5,449	5.1	124.2	72.6	79.6
0-14 Years				*0*	*0*					
15-44 Years				*1,755*	*5,750*					
45-64 Years				*2,559*	*11,359*					
65-74 Years				*1,658*	*7,905*					
75 Years +				*3,007*	*15,005*					
Pediatric	6	6	4	84	247	142	4.6	1.1	17.7	17.7
Intensive Care	18	18	14	769	3,853	0	5.0	10.5	58.5	58.5
Direct Admission				*545*	*2,003*					
Transfers - Not included in Facility Admissions				*224*	*1,850*					
Obstetric/Gynecology	21	21	21	1,657	3,637	121	2.3	10.3	48.9	48.9
Maternity				*1,518*	*3,237*					
Clean Gynecology				*139*	*400*					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	37	25	24	486	5,944	0	12.2	16.2	43.9	65.0
Swing Beds			0	0	0		0.0	0.0		
Total AMI	34			616	4,833	0	7.8	13.2	38.8	
Adolescent AMI		0	0	0	0	0	0.0	0.0		0.0
Adult AMI		31	25	616	4,833	0	7.8	13.2		42.6
Rehabilitation	25	25	18	336	4,214	0	12.5	11.5	46.1	46.1
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	**312**			**12,703**	**62,747**	**5,712**	**5.4**	**187.0**	**60.0**	

Inpatients and Outpatients Served by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Charity Care	Totals
Inpatients	43.8%	34.6%	0.0%	17.9%	1.6%	2.1%	
	5569	4396	0	2268	199	271	**12,703**
Outpatients	30.1%	29.3%	0.0%	29.6%	8.0%	2.9%	
	71744	69864	0	70580	19092	6831	**238,111**

Financial Year Reported: 10/1/2015 *to* 9/30/2016

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Totals	Charity Care Expense
Inpatient Revenue ($)	53.1%	24.8%	0.0%	22.0%	0.1%	100.0%	
	69,742,102	32,606,093	0	28,948,291	150,909	131,447,395	2,279,427
Outpatient Revenue ($)	33.5%	20.5%	0.0%	44.4%	1.6%	100.0%	
	33,503,335	20,554,654	0	44,430,611	1,560,649	100,049,249	3,680,573

Total Charity Care Expense
5,960,000

Total Charity Care as % of Net Revenue
2.6%

Birthing Data

Number of Total Births:	2,125
Number of Live Births:	2,115
Birthing Rooms:	0
Labor Rooms:	2
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	9
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	2
CSections Performed:	531

Newborn Nursery Utilization

	Level I	Level II	Level III+
Beds	22	12	0
Patient Days	3,745	1,349	0
Total Newborn Patient Days			**5,094**

Laboratory Studies

Inpatient Studies	438,944
Outpatient Studies	536,838
Studies Performed Under Contract	114,383

Organ Transplantation

Kidney:	
Heart:	
Lung:	
Heart/Lung:	
Pancreas:	
Liver:	
Total:	

Hospital Profile - CY 2016 **Swedish Covenant Hospital** **Chicago**

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	0	0	1	1	263	450	1553	556	2109	5.9	1.2
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	3	6	9	586	1123	1359	1913	3272	2.3	1.7
Gastroenterology	0	0	0	0	8	8	6	6	12	0.8	0.8
Neurology	0	0	0	0	356	3540	1203	1745	2948	3.4	0.5
OB/Gynecology	0	0	0	0	135	527	474	1014	1488	3.5	1.9
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	0	0	14	1074	33	1056	1089	2.4	1.0
Orthopedic	0	0	0	0	546	514	1730	1146	2876	3.2	2.2
Otolaryngology	0	0	0	0	36	233	58	412	470	1.6	1.8
Plastic Surgery	0	0	0	0	8	130	36	542	578	4.5	4.2
Podiatry	0	0	0	0	104	213	198	429	627	1.9	2.0
Thoracic	0	0	0	0	124	69	143	101	244	1.2	1.5
Urology	0	0	0	0	45	120	170	240	410	3.8	2.0
Totals	**0**	**3**	**7**	**10**	**2225**	**8001**	**6963**	**9160**	**16123**	**3.1**	**1.1**

SURGICAL RECOVERY STATIONS Stage 1 Recovery Stations 0 Stage 2 Recovery Stations 0

Dedicated and Non-Dedicated Procedure Room Utilization

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	3	3	864	3241	775	2605	3380	0.9	0.8
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	0	0	0	0	0	0	0	0.0	0.0
Cystoscopy	0	0	1	1	144	236	223	387	610	1.5	1.6
Multipurpose Non-Dedicated Rooms											
	0	0	2	2	22	197	11	91	102	0.5	0.5
11	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center		No
Level of Trauma Service	**Level 1**	**Level 2**
	(Not Answered)	Not Answered
Operating Rooms Dedicated for Trauma Care		0
Number of Trauma Visits:		0
Patients Admitted from Trauma		0
Emergency Service Type:		Comprehensive
Number of Emergency Room Stations		30
Persons Treated by Emergency Services:		53,848
Patients Admitted from Emergency:		13,655
Total ED Visits (Emergency+Trauma):		**53,848**

Free-Standing Emergency Center

Beds in Free-Standing Centers	
Patient Visits in Free-Standing Centers	
Hospital Admissions from Free-Standing Center	

Outpatient Service Data

Total Outpatient Visits	**238,111**
Outpatient Visits at the Hospital/ Campus:	234,551
Outpatient Visits Offsite/off campus	3,560

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	**2**
Cath Labs used for Angiography procedures	0
Dedicated Diagnostic Catheterization Labs	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	**1,834**
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	1,081
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	402
EP Catheterizations (15+)	351

Cardiac Surgery Data

Total Cardiac Surgery Cases:	**136**
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	136
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	112

Diagnostic/Interventional Equipment	Owned	Contract	Examinations Inpatient	Outpt	Contract
General Radiography/Fluoroscopy	24	0	14,978	53,410	0
Nuclear Medicine	3	0	1,303	1,909	0
Mammography	4	0	2	12,208	0
Ultrasound	13	0	8,432	22,499	0
Angiography	1	0			
Diagnostic Angiography			116	165	0
Interventional Angiography			95	113	0
Positron Emission Tomography (PET)	1	0	375	0	0
Computerized Axial Tomography (CAT)	3	0	3,157	16,918	0
Magnetic Resonance Imaging	2	0	2,358	5,670	0

Therapeutic Equipment	Owned	Contract	Therapies/ Treatments
Lithotripsy	0	0	0
Linear Accelerator	1	0	3,738
Image Guided Rad Therapy			0
Intensity Modulated Rad Thrpy			646
High Dose Brachytherapy	0	0	0
Proton Beam Therapy	0	0	0
Gamma Knife	0	0	0
Cyber knife	0	1	497

Hospital Profile - CY 2017 **Swedish Covenant Hospital** **Chicago**

Ownership, Management and General Information

ADMINISTRATOR NAME:	Anthony Guaccio
ADMINSTRATOR PHONE	773-878-5370
OWNERSHIP:	Swedish Covenant Hospital
OPERATOR:	Swedish Covenant Hospital
MANAGEMENT:	Church-Related
CERTIFICATION:	
FACILITY DESIGNATION:	General Hospital
ADDRESS	5145 N. California Avenue

CITY: Chicago COUNTY: Suburban Cook (Chicago)

Patients by Race

White	50.4%
Black	8.1%
American Indian	0.1%
Asian	16.3%
Hawaiian/ Pacific	0.1%
Unknown	24.9%

Patients by Ethnicity

Hispanic or Latino:	22.5%
Not Hispanic or Latino:	77.4%
Unknown:	0.1%

IDPH Number:	2717
HPA	A-01
HSA	6

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2017	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	171	156	140	8,435	37,790	5,900	5.2	119.7	70.0	76.7
0-14 Years				*0*	*0*					
15-44 Years				*1,624*	*5,489*					
45-64 Years				*2,280*	*9,875*					
65-74 Years				*1,640*	*7,764*					
75 Years +				*2,891*	*14,662*					
Pediatric	6	6	4	67	162	148	4.6	0.8	14.2	14.2
Intensive Care	18	18	14	1,088	3,583	0	3.3	9.8	54.5	54.5
Direct Admission				*524*	*1,964*					
Transfers				*564*	*1,619*					
Obstetric/Gynecology	21	21	21	1,763	4,057	121	2.4	11.4	54.5	54.5
Maternity				*1,640*	*3,679*					
Clean Gynecology				*123*	*378*					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	37	25	24	503	5,953	0	11.8	16.3	44.1	65.2
Swing Beds			0	0	0		0.0	0.0		
Total AMI	34			860	6,012	0	7.0	16.5	48.4	
Adolescent AMI		0	0	0	0	0	0.0	0.0		0.0
Adult AMI		31	27	860	6,012	0	7.0	16.5		53.1
Rehabilitation	25	25	21	301	3,847	0	12.8	10.5	42.2	42.2
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	**312**			**12,453**	**61,404**	**6,169**	**5.4**	**185.1**	**59.3**	

(Includes ICU Direct Admissions Only)

Inpatients and Outpatients Served by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Charity Care	Totals
Inpatients	43.6%	35.3%	0.0%	17.5%	2.2%	1.4%	
	5431	4392	0	2175	276	179	**12,453**
Outpatients	31.2%	30.0%	0.0%	30.1%	6.4%	2.3%	
	67225	64574	0	64894	13704	5059	**215,456**

Financial Year Reported: 10/1/2016 *to* 9/30/2017

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Totals	Charity Care Expense
Inpatient Revenue ($)	53.8%	23.5%	0.0%	22.6%	0.1%	100.0%	
	68,022,318	29,744,718	0	28,534,170	169,914	126,471,120	1,858,111
Outpatient Revenue ($)	33.6%	21.0%	0.0%	43.8%	1.6%	100.0%	
	32,810,065	20,526,803	0	42,734,664	1,560,158	97,631,690	4,354,459

Total Charity Care Expense **6,212,570**

Total Charity Care as % of Net Revenue **2.8%**

Birthing Data

Number of Total Births:	2,277
Number of Live Births:	2,290
Birthing Rooms:	0
Labor Rooms:	2
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	9
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	2
CSections Performed:	575

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	22	12	0
Patient Days	4,204	1,446	0

Total Newborn Patient Days **5,650**

Laboratory Studies

Inpatient Studies	457,888
Outpatient Studies	503,551
Studies Performed Under Contract	99,045

Organ Transplantation

Kidney:	0
Heart:	0
Lung:	0
Heart/Lung:	0
Pancreas:	0
Liver:	0
Total:	**0**

Hospital Profile - CY 2017 **Swedish Covenant Hospital** **Chicago**

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	0	0	1	1	208	421	1310	631	1941	6.3	1.5
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	3	6	9	427	1018	1043	1944	2987	2.4	1.9
Gastroenterology	0	0	0	0	0	2	0	1	1	0.0	0.5
Neurology	0	0	0	0	250	3843	1068	2766	3834	4.3	0.7
OB/Gynecology	0	0	0	0	124	612	421	1182	1603	3.4	1.9
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	0	0	1	876	4	1165	1169	4.0	1.3
Orthopedic	0	0	0	0	486	536	1375	1064	2439	2.8	2.0
Otolaryngology	0	0	0	0	37	169	61	360	421	1.6	2.1
Plastic Surgery	0	0	0	0	2	117	7	492	499	3.5	4.2
Podiatry	0	0	0	0	73	219	152	422	574	2.1	1.9
Thoracic	0	0	0	0	92	34	121	63	184	1.3	1.9
Urology	0	0	0	0	46	128	182	306	488	4.0	2.4
Totals	**0**	**3**	**7**	**10**	**1746**	**7975**	**5744**	**10396**	**16140**	**3.3**	**1.3**

SURGICAL RECOVERY STATIONS Stage 1 Recovery Stations 13 Stage 2 Recovery Stations 13

Dedicated and Non-Dedicated Procedure Room Utilzation

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	3	3	765	3159	1002	2763	3765	1.3	0.9
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	0	0	0	0	0	0	0	0.0	0.0
Cystoscopy	0	0	1	1	113	198	252	362	614	2.2	1.8
Multipurpose Non-Dedicated Rooms											
Minor Surgery					35	65	42	53	95	1.2	0.8
					0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center	No
Level of Trauma Service	Level 1 / Level 2
Operating Rooms Dedicated for Trauma Care	0
Number of Trauma Visits:	0
Patients Admitted from Trauma	0
Emergency Service Type:	Comprehensive
Number of Emergency Room Stations	35
Persons Treated by Emergency Services:	52,858
Patients Admitted from Emergency:	13,096
Total ED Visits (Emergency+Trauma):	**52,858**

Free-Standing Emergency Center

Beds in Free-Standing Centers	0
Patient Visits in Free-Standing Centers	0
Hospital Admissions from Free-Standing Center	0

Outpatient Service Data

Total Outpatient Visits	**215,456**
Outpatient Visits at the Hospital/ Campus:	212,799
Outpatient Visits Offsite/off campus	2,657

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	**2**
Cath Labs used for Angiography procedures	0
Dedicated Diagnostic Catheterization Lab	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	**1,968**
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	1,206
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	490
EP Catheterizations (15+)	272

Cardiac Surgery Data

Total Cardiac Surgery Cases:	**131**
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	131
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	120

Diagnostic/Interventional Equipment	Owned	Contract	Examinations Inpatient	Outpt	Contract
General Radiography/Fluoroscopy	24	0	13,305	53,844	0
Nuclear Medicine	4	0	1,011	2,281	0
Mammography	4	0	0	11,984	0
Ultrasound	12	0	1,586	20,614	0
Angiography	1	0			
Diagnostic Angiography			139	152	0
Interventional Angiography			110	125	0
Positron Emission Tomography (PET)	1	0	0	356	0
Computerized Axial Tomography (CAT)	3	0	2,948	17,592	0
Magnetic Resonance Imaging	2	0	1,908	5,846	0

Therapeutic Equipment	Owned	Contract	Therapies/ Treatments
Lithotripsy	0	0	0
Linear Accelerator	1	0	2,616
Image Guided Rad Therapy			643
Intensity Modulated Rad Thrpy			487
High Dose Brachytherapy	0	0	0
Proton Beam Therapy	0	0	0
Gamma Knife	0	0	0
Cyber knife	0	1	335

Hospital Profile - CY 2018 **Swedish Covenant Hospital** **Chicago** Page 1

Ownership, Management and General Information

ADMINISTRATOR NAME:	Anthony Guaccio
ADMINSTRATOR PHONE:	773-878-5370
OWNERSHIP:	Swedish Covenant Health
OPERATOR:	Swedish Covenant Health
MANAGEMENT:	Church-Related
CERTIFICATION:	
FACILITY DESIGNATION:	General Hospital
ADDRESS	5145 N California Ave

CITY: Chicago COUNTY: Suburban Cook (Chicago)

Patients by Race

White	50.1%
Black	9.1%
American Indian	0.3%
Asian	15.9%
Hawaiian/ Pacific	0.1%
Unknown	24.4%

Patients by Ethnicity

Hispanic or Latino:	24.2%
Not Hispanic or Latino:	75.8%
Unknown:	0.0%

IDPH Number:	2717
HPA	A-01
HSA	6

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2018	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	171	156	152	8,315	37,302	6,345	5.2	119.6	69.9	76.7
0-14 Years				*0*	*0*					
15-44 Years				*1,476*	*5,133*					
45-64 Years				*2,321*	*9,754*					
65-74 Years				*1,695*	*8,410*					
75 Years +				*2,823*	*14,005*					
Pediatric	6	6	3	45	108	160	6.0	0.7	12.2	12.2
Intensive Care	18	18	13	1,066	2,704	0	2.5	7.4	41.2	41.2
Direct Admission				*472*	*1,784*					
Transfers				*594*	*920*					
Obstetric/Gynecology	21	21	19	1,849	4,398	142	2.5	12.4	59.2	59.2
Maternity				*1,815*	*4,325*					
Clean Gynecology				*34*	*73*					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	37	30	24	430	5,220	0	12.1	14.3	38.7	47.7
Swing Beds			0	0	0		0.0	0.0		
Total AMI	34			1,086	7,446	0	6.9	20.4	60.0	
Adolescent AMI		0	0	0	0	0	0.0	0.0		0.0
Adult AMI		31	31	1,086	7,446	0	6.9	20.4		65.8
Rehabilitation	25	25	20	328	3,885	0	11.8	10.6	42.6	42.6
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	**312**			**12,525**	**61,063**	**6,647**	**5.4**	**185.5**	**59.5**	

(Includes ICU Direct Admissions Only)

Inpatients and Outpatients Served by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Charity Care	Totals
Inpatients	43.0%	29.2%	0.0%	22.8%	2.0%	3.0%	
	5386	3662	0	2858	247	372	**12,525**
Outpatients	35.1%	27.1%	0.0%	32.2%	2.9%	2.6%	
	92027	71023	0	84357	7725	6934	**262,066**

Financial Year Reported: 10/1/2017 *to* 9/30/2018

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Totals	Charity Care Expense
Inpatient Revenue ($)	54.4%	24.0%	0.0%	21.4%	0.1%	100.0%	
	72,903,779	32,201,455	0	28,679,823	178,710	133,963,767	3,277,178
Outpatient Revenue ($)	34.7%	19.9%	0.0%	43.8%	1.6%	100.0%	
	35,234,811	20,206,497	0	44,503,347	1,640,922	101,585,577	5,346,975

Total Charity Care Expense 8,624,153

Total Charity Care as % of Net Revenue 3.7%

Birthing Data

Number of Total Births:	2,288
Number of Live Births:	2,290
Birthing Rooms:	0
Labor Rooms:	2
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	9
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	2
CSections Performed:	594

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	22	12	0
Patient Days	4,345	1,289	0

Total Newborn Patient Days **5,634**

Laboratory Studies

Inpatient Studies	490,856
Outpatient Studies	509,374
Studies Performed Under Contract	103,248

Organ Transplantation

Kidney:	0
Heart:	0
Lung:	0
Heart/Lung:	0
Pancreas:	0
Liver:	0
Total:	**0**

Hospital Profile - CY 2018 **Swedish Covenant Hospital** **Chicago** Page 2

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	0	0	1	1	220	391	1317	582	1899	6.0	1.5
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	3	6	9	542	1146	1412	2108	3520	2.6	1.8
Gastroenterology	0	0	0	0	0	1	0	2	2	0.0	2.0
Neurology	0	0	0	0	347	3998	1329	2104	3433	3.8	0.5
OB/Gynecology	0	0	0	0	101	571	379	1219	1598	3.8	2.1
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	0	0	2	918	4	1115	1119	2.0	1.2
Orthopedic	0	0	0	0	581	635	1723	1249	2972	3.0	2.0
Otolaryngology	0	0	0	0	28	138	51	236	287	1.8	1.7
Plastic Surgery	0	0	0	0	2	128	9	457	466	4.5	3.6
Podiatry	0	0	0	0	121	221	217	472	689	1.8	2.1
Thoracic	0	0	0	0	106	45	139	69	208	1.3	1.5
Urology	0	0	0	0	90	194	251	377	628	2.8	1.9
Totals	**0**	**3**	**7**	**10**	**2140**	**8386**	**6831**	**9990**	**16821**	**3.2**	**1.2**

SURGICAL RECOVERY STATIONS Stage 1 Recovery Stations 13 Stage 2 Recovery Stations 13

Dedicated and Non-Dedicated Procedure Room Utilization

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	3	3	743	3192	755	2794	3549	1.0	0.9
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	0	0	0	0	0	0	0	0.0	0.0
Cystoscopy	0	0	1	1	86	158	180	82	262	2.1	0.5
Multipurpose Non-Dedicated Rooms											
Minor Procedures				1	4	48	4	29	33	1.0	0.6
Device Insertion (IC				1	78	90	192	206	398	2.5	2.3
					0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center		No
Level of Trauma Service	**Level 1**	**Level 2**
Operating Rooms Dedicated for Trauma Care		0
Number of Trauma Visits:		0
Patients Admitted from Trauma		0
Emergency Service Type:		Comprehensive
Number of Emergency Room Stations		42
Persons Treated by Emergency Services:		50,564
Patients Admitted from Emergency:		12,894
Total ED Visits (Emergency+Trauma):		**50,564**

Free-Standing Emergency Center

Beds in Free-Standing Centers	0
Patient Visits in Free-Standing Centers	0
Hospital Admissions from Free-Standing Center	0

Outpatient Service Data

Total Outpatient Visits	**262,066**
Outpatient Visits at the Hospital/ Campus:	259,804
Outpatient Visits Offsite/off campus	2,262

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	**2**
Cath Labs used for Angiography procedures	0
Dedicated Diagnostic Catheterization Labs	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	**1,817**
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	1,137
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	356
EP Catheterizations (15+)	324

Cardiac Surgery Data

Total Cardiac Surgery Cases:	**108**
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	108
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	89

Diagnostic/Interventional Equipment	Owned	Contract	Examinations Inpatient	Outpt	Contract
General Radiography/Fluoroscopy	24	0	19,070	49,865	0
Nuclear Medicine	4	0	1,130	2,477	0
Mammography	4	0	0	12,432	0
Ultrasound	12	0	1,927	20,626	0
Angiography	1	0			
Diagnostic Angiography			502	320	0
Interventional Angiography			410	370	0
Positron Emission Tomography (PET)	1	0	0	0	0
Computerized Axial Tomography (CAT)	3	0	6,971	15,194	0
Magnetic Resonance Imaging	2	0	2,180	6,433	0

Therapeutic Equipment	Owned	Contract	Therapies/ Treatments
Lithotripsy	0	0	0
Linear Accelerator	0	0	3,582
Image Guided Rad Therapy			1,290
Intensity Modulated Rad Thrpy			847
High Dose Brachytherapy	0	0	0
Proton Beam Therapy	0	0	0
Gamma Knife	0	0	0
Cyber knife	0	1	18

Hospital Profile - CY 2015 | Presence St. Elizabeth Hospital | Chicago | Page 1

Ownership, Management and General Information

ADMINISTRATOR NAME:	Martin Judd
ADMINSTRATOR PHONE	312-770-2115
OWNERSHIP:	Presence Health Care
OPERATOR:	Presence St. Mary and Elizabeth Medical Center DBA
MANAGEMENT:	Church-Related
CERTIFICATION:	(Not Answered)
FACILITY DESIGNATION:	General Hospital
ADDRESS	1431 North Claremont **CITY:** Chicago **COUNTY:** Suburban Cook (Chicago)

Patients by Race

White	21.5%
Black	39.3%
American Indian	0.0%
Asian	0.7%
Hawaiian/ Pacific	0.0%
Unknown	38.4%

Patients by Ethnicity

Hispanic or Latino:	16.7%
Not Hispanic or Latino:	62.0%
Unknown:	21.3%

IDPH Number:	6015
HPA	A-02
HSA	6

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2015	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	40	40	35	1,781	4,946	0	2.8	13.6	33.9	33.9
0-14 Years				*0*	*0*					
15-44 Years				*690*	*1,848*					
45-64 Years				*1,018*	*2,875*					
65-74 Years				*66*	*202*					
75 Years +				*7*	*21*					
Pediatric	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Intensive Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Direct Admission				*0*	*0*					
Transfers				*0*	*0*					
Obstetric/Gynecology	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Maternity				*0*	*0*					
Clean Gynecology				*0*	*0*					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	28	26	26	358	7,981	0	22.3	21.9	78.1	84.1
Swing Beds			0	0	0		0.0	0.0		
Acute Mental Illness	40	40	40	1,168	10,909	0	9.3	29.9	74.7	74.7
Rehabilitation	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	**108**			**3,307**	**23,836**	**0**	**7.2**	**65.3**	**60.5**	

(Includes ICU Direct Admissions Only)

Inpatients and Outpatients Served by Payor Source

	Medicare	*Medicaid*	*Other Public*	*Private Insurance*	*Private Pay*	*Charity Care*	*Totals*
Inpatients	**16.9%**	**32.1%**	**0.0%**	**44.2%**	**0.4%**	**6.4%**	
	558	1061	0	1463	13	212	**3,307**
Outpatients	**21.9%**	**15.0%**	**0.0%**	**57.4%**	**2.1%**	**3.5%**	
	3521	2412	0	9211	329	569	**16,042**

Financial Year Reported: 1/1/2015 to 12/31/2015

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	*Medicaid*	*Other Public*	*Private Insurance*	*Private Pay*	*Totals*	*Charity Care Expense*
Inpatient Revenue ($)	**33.6%**	**41.9%**	**0.0%**	**24.2%**	**0.2%**	**100.0%**	
	6,714,764	8,365,723	0	4,827,823	46,789	19,955,099	418,113
Outpatient Revenue ($)	**20.2%**	**35.7%**	**0.0%**	**43.8%**	**0.4%**	**100.0%**	
	2,199,699	3,875,695	0	4,756,337	39,247	10,870,978	422,055

Total Charity Care Expense
840,168

Total Charity Care as % of Net Revenue
2.7%

Birthing Data

Number of Total Births:	0
Number of Live Births:	0
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	0
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	0
CSections Performed:	0

Newborn Nursery Utilization

	Level I	Level II	Level III+
Beds	0	0	0
Patient Days	0	0	0

Total Newborn Patient Days: **0**

Laboratory Studies

Inpatient Studies	28,509
Outpatient Studies	12,151
Studies Performed Under Contract	0

Organ Transplantation

Kidney:	0
Heart:	0
Lung:	0
Heart/Lung:	0
Pancreas:	0
Liver:	0
Total:	**0**

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	0	0	0	0	0	9	0	16	16	0.0	1.8
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	4	0	4	0	77	0	41	41	0.0	0.5
Gastroenterology	0	0	0	0	0	0	0	0	0	0.0	0.0
Neurology	0	0	0	0	0	0	0	0	0	0.0	0.0
OB/Gynecology	0	0	0	0	0	0	0	0	0	0.0	0.0
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	0	0	0	777	0	512	512	0.0	0.7
Orthopedic	0	0	0	0	0	37	0	40	40	0.0	1.1
Otolaryngology	0	0	0	0	0	0	0	0	0	0.0	0.0
Plastic Surgery	0	0	0	0	0	0	0	0	0	0.0	0.0
Podiatry	0	0	0	0	0	187	0	220	220	0.0	1.2
Thoracic	0	0	0	0	0	1	0	1	1	0.0	1.0
Urology	0	1	0	1	0	145	0	109	109	0.0	0.8
Totals	**0**	**5**	**0**	**5**	**0**	**1233**	**0**	**939**	**939**	**0.0**	**0.8**

SURGICAL RECOVERY STATIONS Stage 1 Recovery Stations 8 Stage 2 Recovery Stations 18

Dedicated and Non-Dedicated Procedure Room Utilzation

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	0	0	0	0	0	0	0	0.0	0.0
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	0	0	0	0	0	0	0	0.0	0.0
Cystoscopy	0	0	1	1	0	0	0	0	0	0.0	0.0
Multipurpose Non-Dedicated Rooms											
General Surgery	0	0	4	4	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center		No
Level of Trauma Service	**Level 1**	**Level 2**
	(Not Answered)	Not Answered
Operating Rooms Dedicated for Trauma Care		0
Number of Trauma Visits:		0
Patients Admitted from Trauma		0
Emergency Service Type:		Stand-By
Number of Emergency Room Stations		8
Persons Treated by Emergency Services:		1,769
Patients Admitted from Emergency:		136
Total ED Visits (Emergency+Trauma):		**1,769**

Free-Standing Emergency Center

Beds in Free-Standing Centers	0
Patient Visits in Free-Standing Centers	0
Hospital Admissions from Free-Standing Center	0

Outpatient Service Data

Total Outpatient Visits	**16,042**
Outpatient Visits at the Hospital/ Campus:	16,042
Outpatient Visits Offsite/off campus	0

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	**0**
Cath Labs used for Angiography procedures	0
Dedicated Diagnostic Catheterization Lab	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	**0**
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	0
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	0
EP Catheterizations (15+)	0

Cardiac Surgery Data

Total Cardiac Surgery Cases:	**0**
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	0
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	0

Diagnostic/Interventional Equipment			Examinations			Therapeutic Equipment			Therapies/ Treatments
	Owned	*Contract*	*Inpatient*	*Outpt*	*Contract*		*Owned*	*Contract*	
General Radiography/Fluoroscopy	11	0	485	6,632	0	*Lithotripsy*	0	1	17
Nuclear Medicine	0	0	0	0	0	*Linear Accelerator*	0	0	0
Mammography	0	0	0	0	0	Image Guided Rad Therapy			0
Ultrasound	1	0	44	66	0	Intensity Modulated Rad Thrpy			0
Angiography	0	0				High Dose Brachytherapy	0	0	0
Diagnostic Angiography			0	0	0	*Proton Beam Therapy*	0	0	0
Interventional Angiography			0	0	0	*Gamma Knife*	0	0	0
Positron Emission Tomography (PET)	0	1	0	0	127	*Cyber knife*	0	0	0
Computerized Axial Tomography (CAT)	1	0	57	127	0				
Magnetic Resonance Imaging	0	1	0	0	589				

Hospital Profile - CY 2016 **Presence Saint Elizabeth Hospital** **Chicago** Page 1

Ownership, Management and General Information

ADMINISTRATOR NAME:	Martin Judd
ADMINSTRATOR PHONE:	312-770-2115
OWNERSHIP:	Presence Chicago Hospitals Network
OPERATOR:	Presence Chicago Hospitals Network
MANAGEMENT:	Church-Related
CERTIFICATION:	(Not Answered)
FACILITY DESIGNATION:	General Hospital
ADDRESS	1431 North Claremont CITY: Chicago COUNTY: Suburban Cook (Chicago)

Patients by Race

White	20.4%
Black	39.0%
American Indian	0.0%
Asian	0.7%
Hawaiian/ Pacific	0.0%
Unknown	39.8%

Patients by Ethnicity

Hispanic or Latino:	16.4%
Not Hispanic or Latino:	80.3%
Unknown:	3.3%

IDPH Number:	6015
HPA	A-02
HSA	6

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2016	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	40	40	23	1,674	4,576	0	2.7	12.5	31.3	31.3
0-14 Years				*0*	*0*					
15-44 Years				*612*	*1,611*					
45-64 Years				*1,006*	*2,802*					
65-74 Years				*55*	*161*					
75 Years +				*1*	*2*					
Pediatric	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Intensive Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Direct Admission				*0*	*0*					
Transfers - Not included in Facility Admissions				*0*	*0*					
Obstetric/Gynecology	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Maternity				*0*	*0*					
Clean Gynecology				*0*	*0*					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	28	28	28	418	8,514	0	20.4	23.3	83.1	83.1
Swing Beds			0	0	0		0.0	0.0		
Total AMI	40			1,130	9,861	0	8.7	26.9	67.4	
Adolescent AMI		40	40	1,130	9,861	0	8.7	26.9		67.4
Adult AMI		0	0	0	0	0	0.0	0.0		0.0
Rehabilitation	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	**108**			**3,222**	**22,951**	**0**	**7.1**	**62.7**	**58.1**	

Inpatients and Outpatients Served by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Charity Care	Totals
Inpatients	18.3%	17.0%	0.0%	59.1%	0.3%	5.2%	
	591	549	0	1903	11	168	**3,222**
Outpatients	21.5%	6.0%	0.0%	64.4%	2.1%	6.0%	
	3462	970	0	10377	346	963	**16,118**

Financial Year Reported: 1/1/2016 *to* 12/31/2016

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Totals	Charity Care Expense
Inpatient Revenue ($)	27.2%	42.3%	0.0%	27.1%	3.4%	100.0%	
	5,745,281	8,934,751	0	5,725,700	724,662	21,130,394	433,567
Outpatient Revenue ($)	40.1%	17.7%	0.0%	41.5%	0.7%	100.0%	
	3,911,955	1,728,765	0	4,054,962	67,386	9,763,068	347,969

Total Charity Care Expense 781,536

Total Charity Care as % of Net Revenue 2.5%

Birthing Data

Number of Total Births:	0
Number of Live Births:	0
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	0
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	0
CSections Performed:	0

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	0	0	0
Patient Days	0	0	0
Total Newborn Patient Days			0

Laboratory Studies

Inpatient Studies	56,614
Outpatient Studies	28,144
Studies Performed Under Contract	0

Organ Transplantation

Kidney:	
Heart:	
Lung:	
Heart/Lung:	
Pancreas:	
Liver:	
Total:	

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	0	0	0	0	0	7	0	17	17	0.0	2.4
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	4	4	0	107	0	60	60	0.0	0.6
Gastroenterology	0	0	0	0	0	0	0	0	0	0.0	0.0
Neurology	0	0	0	0	0	0	0	0	0	0.0	0.0
OB/Gynecology	0	0	0	0	0	0	0	0	0	0.0	0.0
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	0	0	0	864	0	543	543	0.0	0.6
Orthopedic	0	0	0	0	0	4	0	4	4	0.0	1.0
Otolaryngology	0	0	0	0	0	0	0	0	0	0.0	0.0
Plastic Surgery	0	0	0	0	0	0	0	0	0	0.0	0.0
Podiatry	0	0	0	0	0	145	0	189	189	0.0	1.3
Thoracic	0	0	0	0	0	0	0	0	0	0.0	0.0
Urology	0	0	1	1	0	106	0	99	99	0.0	0.9
Totals	**0**	**0**	**5**	**5**	**0**	**1233**	**0**	**912**	**912**	**0.0**	**0.7**

SURGICAL RECOVERY STATIONS Stage 1 Recovery Stations 8 Stage 2 Recovery Stations 18

Dedicated and Non-Dedicated Procedure Room Utilization

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	0	0	0	0	0	0	0	0.0	0.0
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	0	0	0	0	0	0	0	0.0	0.0
Cystoscopy	0	0	1	1	0	0	0	0	0	0.0	0.0
Multipurpose Non-Dedicated Rooms											
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center		No
Level of Trauma Service	Level 1	Level 2
	(Not Answered)	Not Answered
Operating Rooms Dedicated for Trauma Care		0
Number of Trauma Visits:		0
Patients Admitted from Trauma		0
Emergency Service Type:		Stand-By
Number of Emergency Room Stations		0
Persons Treated by Emergency Services:		1,688
Patients Admitted from Emergency:		77
Total ED Visits (Emergency+Trauma):		**1,688**

Free-Standing Emergency Center

Beds in Free-Standing Centers	
Patient Visits in Free-Standing Centers	
Hospital Admissions from Free-Standing Center	

Outpatient Service Data

Total Outpatient Visits	**16,118**
Outpatient Visits at the Hospital/ Campus:	16,118
Outpatient Visits Offsite/off campus	0

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	**0**
Cath Labs used for Angiography procedures	0
Dedicated Diagnostic Catheterization Labs	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	**0**
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	0
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	0
EP Catheterizations (15+)	0

Cardiac Surgery Data

Total Cardiac Surgery Cases:	**0**
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	0
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	0

Diagnostic/Interventional Equipment	Owned	Contract	Examinations Inpatient	Outpt	Contract	Therapeutic Equipment	Owned	Contract	Therapies/ Treatments
General Radiography/Fluoroscopy	10	0	582	7,781	0	*Lithotripsy*	0	1	13
Nuclear Medicine	0	0	0	0	0	*Linear Accelerator*	0	0	0
Mammography	0	0	0	0	0	Image Guided Rad Therapy			0
Ultrasound	1	0	36	60	0	Intensity Modulated Rad Thrpy			0
Angiography	0	0				High Dose Brachytherapy	0	0	0
Diagnostic Angiography			0	0	0	*Proton Beam Therapy*	0	0	0
Interventional Angiography			0	0	0	*Gamma Knife*	0	0	0
Positron Emission Tomography (PET)	0	1	0	0	140	*Cyber knife*	0	0	0
Computerized Axial Tomography (CAT)	1	0	55	127	0				
Magnetic Resonance Imaging	0	1	0	0	507				

Hospital Profile - CY 2017 **Presence Saint Elizabeth Hospital** **Chicago** Page 1

Ownership, Management and General Information

ADMINISTRATOR NAME:	Martin Judd
ADMINSTRATOR PHONE	312-770-2115
OWNERSHIP:	Presence Chicago Hospitals Network
OPERATOR:	Presence Chicago Hospitals Network
MANAGEMENT:	Church-Related
CERTIFICATION:	
FACILITY DESIGNATION:	General Hospital
ADDRESS	1431 North Claremont CITY: Chicago COUNTY: Suburban Cook (Chicago)

Patients by Race

White	23.6%
Black	35.3%
American Indian	0.1%
Asian	0.9%
Hawaiian/ Pacific	0.1%
Unknown	40.1%

Patients by Ethnicity

Hispanic or Latino:	#Div/0!
Not Hispanic or Latino:	#Div/0!
Unknown:	#Div/0!

IDPH Number:	6015
HPA	A-02
HSA	6

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2017	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	40	40	23	1,483	4,150	0	2.8	11.4	28.4	28.4
0-14 Years				*0*	*0*					
15-44 Years				*647*	*1,729*					
45-64 Years				*767*	*2,223*					
65-74 Years				*67*	*192*					
75 Years +				*2*	*6*					
Pediatric	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Intensive Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Direct Admission				*0*	*0*					
Transfers				*0*	*0*					
Obstetric/Gynecology	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Maternity				*0*	*0*					
Clean Gynecology				*0*	*0*					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	28	28	28	459	8,188	0	17.8	22.4	80.1	80.1
Swing Beds			0	0	0		0.0	0.0		
Total AMI	40			1,212	9,623	0	7.9	26.4	65.9	
Adolescent AMI		40	40	1,212	9,623	0	7.9	26.4		65.9
Adult AMI		0	0	0	0	0	0.0	0.0		0.0
Rehabilitation	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	**108**			**3,154**	**21,961**	**0**	**7.0**	**60.2**	**55.7**	

(Includes ICU Direct Admissions Only)

Inpatients and Outpatients Served by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Charity Care	Totals
Inpatients	20.0%	18.0%	0.0%	60.7%	0.4%	0.9%	
	631	567	0	1916	12	28	**3,154**
Outpatients	25.4%	46.1%	0.0%	24.7%	2.2%	1.6%	
	3557	6451	0	3459	313	223	**14,003**

Financial Year Reported: 1/1/2017 *to* 12/31/2017

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Totals	Charity Care Expense
Inpatient Revenue ($)	4.5%	28.9%	0.0%	64.7%	2.0%	100.0%	
	3,130,404	20,040,848	0	44,902,117	1,359,110	69,432,479	228,587
Outpatient Revenue ($)	4.5%	28.9%	0.0%	64.7%	2.0%	100.0%	
	1,663,010	10,646,587	0	23,853,995	722,020	36,885,612	172,321

Total Charity Care Expense 400,908

Total Charity Care as % of Net Revenue 0.4%

Birthing Data

Number of Total Births:	0
Number of Live Births:	0
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	0
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	0
CSections Performed:	0

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	0	0	0
Patient Days	0	0	0
Total Newborn Patient Days			0

Laboratory Studies

Inpatient Studies	54,640
Outpatient Studies	11,976
Studies Performed Under Contract	0

Organ Transplantation

Kidney:	0
Heart:	0
Lung:	0
Heart/Lung:	0
Pancreas:	0
Liver:	0
Total:	0

Hospital Profile - CY 2017 **Presence Saint Elizabeth Hospital** **Chicago** Page 2

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	0	0	0	0	0	3	0	6	6	0.0	2.0
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	4	4	0	17	0	10	10	0.0	0.6
Gastroenterology	0	0	0	0	0	0	0	0	0	0.0	0.0
Neurology	0	0	0	0	0	0	0	0	0	0.0	0.0
OB/Gynecology	0	0	0	0	0	0	0	0	0	0.0	0.0
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	0	0	0	837	0	513	513	0.0	0.6
Orthopedic	0	0	0	0	0	0	0	0	0	0.0	0.0
Otolaryngology	0	0	0	0	0	0	0	0	0	0.0	0.0
Plastic Surgery	0	0	0	0	0	0	0	0	0	0.0	0.0
Podiatry	0	0	0	0	0	82	0	101	101	0.0	1.2
Thoracic	0	0	0	0	0	0	0	0	0	0.0	0.0
Urology	0	0	1	1	0	116	0	103	103	0.0	0.9
Totals	**0**	**0**	**5**	**5**	**0**	**1055**	**0**	**733**	**733**	**0.0**	**0.7**

SURGICAL RECOVERY STATIONS Stage 1 Recovery Stations 8 Stage 2 Recovery Stations 18

Dedicated and Non-Dedicated Procedure Room Utilzation

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	0	0	0	0	0	0	0	0.0	0.0
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	0	0	0	0	0	0	0	0.0	0.0
Cystoscopy	0	0	1	1	0	116	0	103	103	0.0	0.9
Multipurpose Non-Dedicated Rooms											
					0	0	0	0	0	0.0	0.0
					0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center		No
Level of Trauma Service	**Level 1**	**Level 2**
Operating Rooms Dedicated for Trauma Care		0
Number of Trauma Visits:		0
Patients Admitted from Trauma		0
Emergency Service Type:		Stand-By
Number of Emergency Room Stations		8
Persons Treated by Emergency Services:		3,055
Patients Admitted from Emergency:		924
Total ED Visits (Emergency+Trauma):		**3,055**

Free-Standing Emergency Center

Beds in Free-Standing Centers	0
Patient Visits in Free-Standing Centers	0
Hospital Admissions from Free-Standing Center	0

Outpatient Service Data

Total Outpatient Visits	**14,003**
Outpatient Visits at the Hospital/ Campus:	14,003
Outpatient Visits Offsite/off campus	0

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	**0**
Cath Labs used for Angiography procedures	0
Dedicated Diagnostic Catheterization Lab	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	**0**
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	0
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	0
EP Catheterizations (15+)	0

Cardiac Surgery Data

Total Cardiac Surgery Cases:	**0**
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	0
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	0

Diagnostic/Interventional Equipment	Owned	Contract	Examinations Inpatient	Outpt	Contract	Therapeutic Equipment	Owned	Contract	Therapies/ Treatments
General Radiography/Fluoroscopy	10	0	620	7,414	0	*Lithotripsy*	0	0	0
Nuclear Medicine	0	0	0	0	0	*Linear Accelerator*	0	0	0
Mammography	0	0	0	0	0	Image Guided Rad Therapy			0
Ultrasound	1	0	45	52	0	Intensity Modulated Rad Thrpy			0
Angiography	0	0				High Dose Brachytherapy	0	0	0
Diagnostic Angiography			0	0	0	*Proton Beam Therapy*	0	0	0
Interventional Angiography			0	0	0	*Gamma Knife*	0	0	0
Positron Emission Tomography (PET)	0	0	0	0	0	*Cyber knife*	0	0	0
Computerized Axial Tomography (CAT)	1	0	68	156	0				
Magnetic Resonance Imaging	1	0	30	490	0				

Hospital Profile - CY 2018 **Presence Saint Elizabeth Hospital** **Chicago** Page 1

Ownership, Management and General Information

ADMINISTRATOR NAME:	Martin Judd
ADMINSTRATOR PHONE:	312-770-2115
OWNERSHIP:	Presence Chicago Hospitals Network
OPERATOR:	Presence Chicago Hospitals Network
MANAGEMENT:	Church-Related
CERTIFICATION:	
FACILITY DESIGNATION:	General Hospital
ADDRESS	1431 North Claremont CITY: Chicago COUNTY: Suburban Cook (Chicago)

Patients by Race

White	22.1%
Black	32.4%
American Indian	0.1%
Asian	0.8%
Hawaiian/ Pacific	0.0%
Unknown	44.5%

Patients by Ethnicity

Hispanic or Latino:	0.0%
Not Hispanic or Latino:	55.5%
Unknown:	44.5%

IDPH Number:	6015
HPA	A-02
HSA	6

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2018	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	40	40	0	1,141	3,336	0	2.9	9.1	22.8	22.8
0-14 Years				*0*	*0*					
15-44 Years				*486*	*1,409*					
45-64 Years				*601*	*1,762*					
65-74 Years				*50*	*155*					
75 Years +				*4*	*10*					
Pediatric	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Intensive Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Direct Admission				*0*	*0*					
Transfers				*0*	*0*					
Obstetric/Gynecology	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Maternity				*0*	*0*					
Clean Gynecology				*0*	*0*					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	28	28	0	430	7,549	0	17.6	20.7	73.9	73.9
Swing Beds			0	0	0		0.0	0.0		
Total AMI	40			1,182	8,798	0	7.4	24.1	60.3	
Adolescent AMI		40	0	1,182	8,798	0	7.4	24.1		60.3
Adult AMI		0	0	0	0	0	0.0	0.0		0.0
Rehabilitation	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	**108**			**2,753**	**19,683**	**0**	**7.1**	**53.9**	**49.9**	

(Includes ICU Direct Admissions Only)

Inpatients and Outpatients Served by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Charity Care	Totals
Inpatients	20.8%	15.9%	0.0%	61.0%	0.0%	2.3%	
	572	438	0	1679	0	64	**2,753**
Outpatients	4.0%	27.1%	0.0%	62.4%	3.3%	3.2%	
	682	4619	0	10639	567	538	**17,045**

Financial Year Reported: 1/1/2018 *to* 6/30/2018

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Totals	Charity Care Expense
Inpatient Revenue ($)	4.5%	28.9%	0.0%	64.7%	2.0%	100.0%	
	1,386,299	8,875,088	0	19,884,900	601,882	30,748,169	528,991
Outpatient Revenue ($)	4.5%	28.9%	0.0%	64.7%	2.0%	100.0%	
	490,894	3,142,705	0	7,041,324	213,129	10,888,052	829,955

Total Charity Care Expense
1,358,946

Total Charity Care as % of Net Revenue
3.3%

Birthing Data

Number of Total Births:	0
Number of Live Births:	0
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	0
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	0
CSections Performed:	0

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	0	0	0
Patient Days	0	0	0

Total Newborn Patient Days: **0**

Laboratory Studies

Inpatient Studies	51,374
Outpatient Studies	9,290
Studies Performed Under Contract	0

Organ Transplantation

Kidney:	0
Heart:	0
Lung:	0
Heart/Lung:	0
Pancreas:	0
Liver:	0
Total:	**0**

Hospital Profile - CY 2018 **Presence Saint Elizabeth Hospital** **Chicago** Page 2

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	0	0	0	0	0	0	0	0	0	0.0	0.0
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	4	4	0	0	0	0	0	0.0	0.0
Gastroenterology	0	0	0	0	0	0	0	0	0	0.0	0.0
Neurology	0	0	0	0	0	0	0	0	0	0.0	0.0
OB/Gynecology	0	0	0	0	0	0	0	0	0	0.0	0.0
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	0	0	0	366	0	235	235	0.0	0.6
Orthopedic	0	0	0	0	0	0	0	0	0	0.0	0.0
Otolaryngology	0	0	0	0	0	0	0	0	0	0.0	0.0
Plastic Surgery	0	0	0	0	0	0	0	0	0	0.0	0.0
Podiatry	0	0	0	0	0	5	0	6	6	0.0	1.2
Thoracic	0	0	0	0	0	0	0	0	0	0.0	0.0
Urology	0	0	1	1	0	29	0	24	24	0.0	0.8
Totals	**0**	**0**	**5**	**5**	**0**	**400**	**0**	**265**	**265**	**0.0**	**0.7**

SURGICAL RECOVERY STATIONS Stage 1 Recovery Stations 5 Stage 2 Recovery Stations 15

Dedicated and Non-Dedicated Procedure Room Utilization

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	0	0	0	0	0	0	0	0.0	0.0
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	0	0	0	0	0	0	0	0.0	0.0
Cystoscopy	0	0	0	0	0	29	0	24	24	0.0	0.8
Multipurpose Non-Dedicated Rooms											
					0	0	0	0	0	0.0	0.0
					0	0	0	0	0	0.0	0.0
					0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center		No
Level of Trauma Service	**Level 1**	**Level 2**
Operating Rooms Dedicated for Trauma Care		0
Number of Trauma Visits:		0
Patients Admitted from Trauma		0
Emergency Service Type:		Stand-By
Number of Emergency Room Stations		10
Persons Treated by Emergency Services:		2,744
Patients Admitted from Emergency:		1,114
Total ED Visits (Emergency+Trauma):		**2,744**

Free-Standing Emergency Center

Beds in Free-Standing Centers	0
Patient Visits in Free-Standing Centers	0
Hospital Admissions from Free-Standing Center	0

Outpatient Service Data

Total Outpatient Visits	**17,045**
Outpatient Visits at the Hospital/ Campus:	17,045
Outpatient Visits Offsite/off campus	0

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	**0**
Cath Labs used for Angiography procedures	0
Dedicated Diagnostic Catheterization Labs	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	**0**
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	0
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	0
EP Catheterizations (15+)	0

Cardiac Surgery Data

Total Cardiac Surgery Cases:	**0**
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	0
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	0

Diagnostic/Interventional Equipment	Owned	Contract	Examinations Inpatient	Outpt	Contract
General Radiography/Fluoroscopy	5	0	547	7,316	0
Nuclear Medicine	0	0	0	0	0
Mammography	0	0	0	0	0
Ultrasound	1	0	47	33	0
Angiography	0	0			
Diagnostic Angiography			0	0	0
Interventional Angiography			0	0	0
Positron Emission Tomography (PET)	0	0	0	0	0
Computerized Axial Tomography (CAT)	1	0	62	162	0
Magnetic Resonance Imaging	0	1	31	344	0

Therapeutic Equipment	Owned	Contract	Therapies/ Treatments
Lithotripsy	0	0	0
Linear Accelerator	0	0	0
Image Guided Rad Therapy			0
Intensity Modulated Rad Thrpy			0
High Dose Brachytherapy	0	0	0
Proton Beam Therapy	0	0	0
Gamma Knife	0	0	0
Cyber knife	0	0	0

Attachment 7
Impact on Access Notification Letter

Rush Oak Park Hospital
520 South Maple Avenue
Oak Park, IL 60304-1097

Tel: 708.383.9300
Fax: 708.660.6658
www.roph.org

RUSH

August 19, 2020

Joseph Ottolino
Chief Executive Officer
West Suburban Medical Center
3 Erie St.
Oak Park, IL 60302

Re: Discontinuation of Skilled Nursing Category of Service

Dear Mr. Ottolino,

The Rush Oak Park Hospital, located at 520 South Maple Avenue, Oak Park Illinois 60304, is filing a Certificate of Exemption application with the Illinois Health Facilities and Services Review Board ("HFSRB") regarding the facility's proposed discontinuation of the skilled nursing category of service at the hospital. The discontinuation relates to the existing 36 bed inpatient unit at the Rush Oak Park Hospital. The discontinuation of the skilled nursing category of service is anticipated by September 22, 2020 or immediately after approval of the Certificate of Exemption application filed with the HFSRB.

During calendar years 2015 through 2018, the facility treated patients in the volumes set forth below:

Number of Patients by Year and Utilization Percentage

	2015	2016	2017	2018
Rush Oak Park Hospital **Skilled Nursing Unit**	38.90%	42.70%	40.10%	41.60%

A copy of the facility's 2015 through 2018 Annual Hospital Questionnaire Profiles, which are maintained by the HFSRB on their website is enclosed for your reference. Please contact me in writing if you have any questions. Thank you for your attention to this matter.

Sincerely,

Robert Spadoni
Vice-President and Chief Operating Officer
Rush Oak Park Hospital

Rush Oak Park Hospital
520 South Maple Avenue
Oak Park, IL 60304-1097

Tel: 708.383.9300
Fax: 708.660.6658
www.roph.org

RUSH

August 19, 2020

Scott Teffeteller
Regional Operating Officer
AMITA Health Saint Elizabeth Medical Center
1431 N. Claremont Ave.
Chicago, IL 60622

Re: Discontinuation of Skilled Nursing Category of Service

Dear Mr. Teffeteller,

The Rush Oak Park Hospital, located at 520 South Maple Avenue, Oak Park Illinois 60304, is filing a Certificate of Exemption application with the Illinois Health Facilities and Services Review Board ("HFSRB") regarding the facility's proposed discontinuation of the skilled nursing category of service at the hospital. The discontinuation relates to the existing 36 bed inpatient unit at the Rush Oak Park Hospital. The discontinuation of the skilled nursing category of service is anticipated by September 22, 2020 or immediately after approval of the Certificate of Exemption application filed with the HFSRB.

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Sincerely,

Robert Spadoni
Vice-President and Chief Operating Officer
Rush Oak Park Hospital

Rush Oak Park Hospital
520 South Maple Avenue
Oak Park, IL 60304-1097

Tel: 708.383.9300
Fax: 708.660.6658
www.roph.org

RUSH

August 19, 2020

Anthony Guaccio
Chief Executive Officer
Swedish Covenant Hospital
5140 N. California Ave.
Chicago, IL 60625

Re: Discontinuation of Skilled Nursing Category of Service

Dear Mr. Guaccio,

The Rush Oak Park Hospital, located at 520 South Maple Avenue, Oak Park Illinois 60304, is filing a Certificate of Exemption application with the Illinois Health Facilities and Services Review Board ("HFSRB") regarding the facility's proposed discontinuation of the skilled nursing category of service at the hospital. The discontinuation relates to the existing 36 bed inpatient unit at the Rush Oak Park Hospital. The discontinuation of the skilled nursing category of service is anticipated by September 22, 2020 or immediately after approval of the Certificate of Exemption application filed with the HFSRB.

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Sincerely,

Robert Spadoni
Vice-President and Chief Operating Officer
Rush Oak Park Hospital

Rush Oak Park Hospital
520 South Maple Avenue
Oak Park, IL 60304-1097

Tel: 708.383.9300
Fax: 708.660.6658
www.roph.org

RUSH

August 19, 2020

John Baird
Chief Executive Officer
AMITA Health Saint Joseph Hospital
2900 N. Lake Shore Dr.
Chicago, IL 60657

Re: Discontinuation of Skilled Nursing Category of Service

Dear Mr. Baird,

The Rush Oak Park Hospital, located at 520 South Maple Avenue, Oak Park Illinois 60304, is filing a Certificate of Exemption application with the Illinois Health Facilities and Services Review Board ("HFSRB") regarding the facility's proposed discontinuation of the skilled nursing category of service at the hospital. The discontinuation relates to the existing 36 bed inpatient unit at the Rush Oak Park Hospital. The discontinuation of the skilled nursing category of service is anticipated by September 22, 2020 or immediately after approval of the Certificate of Exemption application filed with the HFSRB.

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Sincerely,

Robert Spadoni
Vice-President and Chief Operating Officer
Rush Oak Park Hospital

Rush Oak Park Hospital
520 South Maple Avenue
Oak Park, IL 60304-1097

Tel: 708.383.9300
Fax: 708.660.6658
www.roph.org

RUSH

August 19, 2020

Dennis Fitzmaurice
Chief Executive Officer
Community First Medical Center
5645 W. Addison St.
Chicago, IL 60634

Re: Discontinuation of Skilled Nursing Category of Service

Dear Mr. Fitzmaurice,

The Rush Oak Park Hospital, located at 520 South Maple Avenue, Oak Park Illinois 60304, is filing a Certificate of Exemption application with the Illinois Health Facilities and Services Review Board ("HFSRB") regarding the facility's proposed discontinuation of the skilled nursing category of service at the hospital. The discontinuation relates to the existing 36 bed inpatient unit at the Rush Oak Park Hospital. The discontinuation of the skilled nursing category of service is anticipated by September 22, 2020 or immediately after approval of the Certificate of Exemption application filed with the HFSRB.

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Sincerely,

Robert Spadoni
Vice-President and Chief Operating Officer
Rush Oak Park Hospital

Rush Oak Park Hospital
520 South Maple Avenue
Oak Park, IL 60304-1097

Tel: 708.383.9300
Fax: 708.660.6658
www.roph.org

RUSH

August 19, 2020

Shawn P. Vincent
Chief Executive Officer
Gottlieb Memorial Hospital
701 W. North Ave.
Melrose Park, IL 60160

Re: Discontinuation of Skilled Nursing Category of Service

Dear Mr. Vincent,

The Rush Oak Park Hospital, located at 520 South Maple Avenue, Oak Park Illinois 60304, is filing a Certificate of Exemption application with the Illinois Health Facilities and Services Review Board ("HFSRB") regarding the facility's proposed discontinuation of the skilled nursing category of service at the hospital. The discontinuation relates to the existing 36 bed inpatient unit at the Rush Oak Park Hospital. The discontinuation of the skilled nursing category of service is anticipated by September 22, 2020 or immediately after approval of the Certificate of Exemption application filed with the HFSRB.

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Number of Patients by Year and Utilization Percentage

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A copy of the facility's 2015 through 2018 Annual Hospital Questionnaire Profiles, which are maintained by the HFSRB on their website is enclosed for your reference. Please contact me in writing if you have any questions. Thank you for your attention to this matter.

Sincerely,

Robert Spadoni
Vice-President and Chief Operating Officer
Rush Oak Park Hospital

Rush Oak Park Hospital
520 South Maple Avenue
Oak Park, IL 60304-1097

Tel: 708.383.9300
Fax: 708.660.6658
www.roph.org

RUSH

August 19, 2020

Mary Elizabeth Cleary
Chief Executive Officer
MacNeal Hospital
3249 S. Oak Park Ave.
Berwyn, IL 60402

Re: Discontinuation of Skilled Nursing Category of Service

Dear Ms. Cleary,

The Rush Oak Park Hospital, located at 520 South Maple Avenue, Oak Park Illinois 60304, is filing a Certificate of Exemption application with the Illinois Health Facilities and Services Review Board ("HFSRB") regarding the facility's proposed discontinuation of the skilled nursing category of service at the hospital. The discontinuation relates to the existing 36 bed inpatient unit at the Rush Oak Park Hospital. The discontinuation of the skilled nursing category of service is anticipated by September 22, 2020 or immediately after approval of the Certificate of Exemption application filed with the HFSRB.

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Rush Oak Park Hospital **Skilled Nursing Unit**	38.90%	42.70%	40.10%	41.60%

A copy of the facility's 2015 through 2018 Annual Hospital Questionnaire Profiles, which are maintained by the HFSRB on their website is enclosed for your reference. Please contact me in writing if you have any questions. Thank you for your attention to this matter.

Sincerely,

Robert Spadoni
Vice-President and Chief Operating Officer
Rush Oak Park Hospital

Hospital Profile - CY 2015 Rush Oak Park Hospital Oak Park

Ownership, Management and General Information

ADMINISTRATOR NAME:	BRUCE ELEGANT
ADMINSTRATOR PHONE	708-660-6660
OWNERSHIP:	RUSH UNIVERSITY MEDICAL CENTER
OPERATOR:	RUSH UNIVERSITY MEDICAL CENTER
MANAGEMENT:	Not for Profit Corporation (Not Church-R
CERTIFICATION:	(Not Answered)
FACILITY DESIGNATION:	General Hospital
ADDRESS	520 South Maple Street **CITY:** Oak Park **COUNTY:** Suburban Cook County

Patients by Race

White	50.6%
Black	45.1%
American Indian	0.2%
Asian	1.0%
Hawaiian/ Pacific	0.1%
Unknown	3.0%

Patients by Ethnicity

Hispanic or Latino:	6.8%
Not Hispanic or Latino:	93.1%
Unknown:	0.0%

IDPH Number:	1750
HPA	A-06
HSA	7

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2015	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	151	73	73	3,168	14,082	1,133	4.8	41.7	27.6	57.1
0-14 Years				*1*	*2*					
15-44 Years				*488*	*1,712*					
45-64 Years				*1,011*	*4,404*					
65-74 Years				*659*	*2,911*					
75 Years +				*1,009*	*5,053*					
Pediatric	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Intensive Care	14	14	14	1,178	2,838	23	2.4	7.8	56.0	56.0
Direct Admission				*953*	*2,257*					
Transfers				*225*	*581*					
Obstetric/Gynecology	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Maternity				*0*	*0*					
Clean Gynecology				*0*	*0*					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	36	22	22	393	5,107	0	13.0	14.0	38.9	63.6
Swing Beds			0	0	0		0.0	0.0		
Acute Mental Illness	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Rehabilitation	36	10	10	92	1,039	0	11.3	2.8	7.9	28.5
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	**237**			**4,606**	**23,066**	**1,156**	**5.3**	**66.4**	**28.0**	

(Includes ICU Direct Admissions Only)

Inpatients and Outpatients Served by Payor Source

	Medicare	*Medicaid*	*Other Public*	*Private Insurance*	*Private Pay*	*Charity Care*	*Totals*
Inpatients	**63.0%**	**15.1%**	**0.0%**	**20.2%**	**0.9%**	**0.8%**	
	2901	694	2	929	43	37	**4,606**
Outpatients	**34.0%**	**19.4%**	**0.1%**	**40.7%**	**2.0%**	**3.8%**	
	34313	19635	96	41072	2012	3876	**101,004**

Financial Year Reported: 7/1/2014 *to* 6/30/2015

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	*Medicaid*	*Other Public*	*Private Insurance*	*Private Pay*	*Totals*	*Charity Care Expense*
Inpatient Revenue ($)	**56.0%**	**16.3%**	**0.1%**	**27.3%**	**0.4%**	**100.0%**	
	24,969,259	7,266,924	32,094	12,154,773	157,459	44,580,509	365,991
Outpatient Revenue ($)	**21.3%**	**10.0%**	**0.1%**	**67.8%**	**0.8%**	**100.0%**	
	16,807,384	7,876,351	89,937	53,485,423	658,907	78,918,002	2,162,258

Total Charity Care Expense
2,528,249

Total Charity Care as % of Net Revenue
2.0%

Birthing Data

Number of Total Births:	0
Number of Live Births:	0
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	0
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	0
CSections Performed:	0

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	0	0	0
Patient Days	0	0	0
Total Newborn Patient Days			**0**

Laboratory Studies

Inpatient Studies	110,962
Outpatient Studies	219,680
Studies Performed Under Contract	83,727

Organ Transplantation

Kidney:	0
Heart:	0
Lung:	0
Heart/Lung:	0
Pancreas:	0
Liver:	0
Total:	**0**

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	0	0	0	0	0	0	0	0	0	0.0	0.0
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	8	8	482	2055	1013	1260	2273	2.1	0.6
Gastroenterology	0	0	0	0	0	0	0	0	0	0.0	0.0
Neurology	0	0	0	0	0	0	0	0	0	0.0	0.0
OB/Gynecology	0	0	0	0	10	32	23	33	56	2.3	1.0
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	0	0	0	375	0	438	438	0.0	1.2
Orthopedic	0	0	0	0	336	2008	892	3255	4147	2.7	1.6
Otolaryngology	0	0	0	0	1	0	2	0	2	2.0	0.0
Plastic Surgery	0	0	0	0	0	0	0	0	0	0.0	0.0
Podiatry	0	0	0	0	35	291	56	377	433	1.6	1.3
Thoracic	0	0	0	0	3	0	8	0	8	2.7	0.0
Urology	0	0	1	1	58	44	69	47	116	1.2	1.1
Totals	**0**	**0**	**9**	**9**	**925**	**4805**	**2063**	**5410**	**7473**	**2.2**	**1.1**

SURGICAL RECOVERY STATIONS Stage 1 Recovery Stations 10 Stage 2 Recovery Stations 26

Dedicated and Non-Dedicated Procedure Room Utilzation

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	3	3	645	2872	323	1436	1759	0.5	0.5
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	0	0	0	0	0	0	0	0.0	0.0
Cystoscopy	0	0	0	0	0	0	0	0	0	0.0	0.0
Multipurpose Non-Dedicated Rooms											
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center	No
Level of Trauma Service	**Level 1** **Level 2**
	(Not Answered) Not Answered
Operating Rooms Dedicated for Trauma Care	0
Number of Trauma Visits:	0
Patients Admitted from Trauma	0
Emergency Service Type:	Basic
Number of Emergency Room Stations	17
Persons Treated by Emergency Services:	32,480
Patients Admitted from Emergency:	3,564
Total ED Visits (Emergency+Trauma):	**32,480**

Free-Standing Emergency Center

Beds in Free-Standing Centers	0
Patient Visits in Free-Standing Centers	0
Hospital Admissions from Free-Standing Center	0

Outpatient Service Data

Total Outpatient Visits	**120,301**
Outpatient Visits at the Hospital/ Campus:	120,301
Outpatient Visits Offsite/off campus	0

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	**1**
Cath Labs used for Angiography procedures	1
Dedicated Diagnostic Catheterization Lab	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	**587**
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	316
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	231
EP Catheterizations (15+)	40

Cardiac Surgery Data

Total Cardiac Surgery Cases:	**0**
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	0
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	0

Diagnostic/Interventional Equipment	Owned	Contract	Examinations Inpatient	Examinations Outpt	Examinations Contract	Therapeutic Equipment	Owned	Contract	Therapies/ Treatments
General Radiography/Fluoroscopy	9	0	6,152	20,215	0	*Lithotripsy*	0	0	0
Nuclear Medicine	2	0	328	727	0	*Linear Accelerator*	1	0	3,626
Mammography	2	0	0	6,702	0	Image Guided Rad Therapy			635
Ultrasound	4	0	1,534	4,928	0	Intensity Modulated Rad Thrpy			2,065
Angiography	1	0				High Dose Brachytherapy	0	0	0
Diagnostic Angiography			205	318	0	*Proton Beam Therapy*	0	0	0
Interventional Angiography			399	480	0	*Gamma Knife*	0	0	0
Positron Emission Tomography (PET)	0	0	0	0	0	*Cyber knife*	0	0	0
Computerized Axial Tomography (CAT)	2	0	2,353	7,437	0				
Magnetic Resonance Imaging	0	1	0	0	2,048				

Source: 2015 Annual Hospital Questionnaire, Illinois Department of Public Health, Health Systems Development.

Hospital Profile - CY 2016 **Rush Oak Park Hospital** **Oak Park**

Ownership, Management and General Information

ADMINISTRATOR NAME:	Bruce Elegant
ADMINSTRATOR PHONE:	(708) 660-6660
OWNERSHIP:	Rush University Medical Center
OPERATOR:	Rush University Medical Center
MANAGEMENT:	Not for Profit Corporation (Not Church-R
CERTIFICATION:	(Not Answered)
FACILITY DESIGNATION:	General Hospital
ADDRESS	520 South Maple Street **CITY:** Oak Park **COUNTY:** Suburban Cook County

Patients by Race

White	49.5%
Black	45.0%
American Indian	0.1%
Asian	0.6%
Hawaiian/ Pacific	0.1%
Unknown	4.7%

Patients by Ethnicity

Hispanic or Latino:	7.4%
Not Hispanic or Latino:	92.6%
Unknown:	0.0%

IDPH Number:	1750
HPA	A-06
HSA	7

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2016	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	151	73	73	3,171	13,792	1,533	4.8	41.9	27.7	57.4
0-14 Years				*0*	*0*					
15-44 Years				*499*	*1,638*					
45-64 Years				*998*	*4,025*					
65-74 Years				*679*	*3,100*					
75 Years +				*995*	*5,029*					
Pediatric	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Intensive Care	14	14	14	1,146	2,651	27	2.3	7.3	52.3	52.3
Direct Admission				*908*	*2,120*					
Transfers - Not included in Facility Admissions				*238*	*531*					
Obstetric/Gynecology	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Maternity				*0*	*0*					
Clean Gynecology				*0*	*0*					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	36	22	22	384	5,620	0	14.6	15.4	42.7	69.8
Swing Beds			0	0	0		0.0	0.0		
Total AMI	0			0	0	0	0.0	0.0	0.0	
Adolescent AMI		0	0	0	0	0	0.0	0.0		0.0
Adult AMI		0	0	0	0	0	0.0	0.0		0.0
Rehabilitation	36	10	6	61	724	0	11.9	2.0	5.5	19.8
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	**237**			**4,524**	**22,787**	**1,560**	**5.4**	**66.5**	**28.1**	

Inpatients and Outpatients Served by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Charity Care	Totals
Inpatients	**62.6%**	**14.1%**	**0.0%**	**21.1%**	**0.9%**	**1.2%**	
	2834	637	0	955	42	56	**4,524**
Outpatients	**34.1%**	**19.4%**	**0.1%**	**40.7%**	**1.9%**	**3.9%**	
	36730	20898	97	43796	1996	4220	**107,737**

Financial Year Reported: 7/1/2015 *to* 6/30/2016

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Totals	Charity Care Expense
Inpatient Revenue ($)	**58.4%**	**18.0%**	**0.0%**	**23.6%**	**0.0%**	**100.0%**	
	26,651,045	8,228,461	5,892	10,747,323	0	45,632,721	532,021
Outpatient Revenue ($)	**21.6%**	**9.8%**	**0.1%**	**67.8%**	**0.8%**	**100.0%**	
	18,495,487	8,346,140	65,481	58,017,666	675,136	85,599,910	2,231,885

Total Charity Care Expense
2,763,906
Total Charity Care as % of Net Revenue
2.1%

Birthing Data

Number of Total Births:	0
Number of Live Births:	0
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	0
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	0
CSections Performed:	0

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	0	0	0
Patient Days	0	0	0
Total Newborn Patient Days			0

Laboratory Studies

Inpatient Studies	103,215
Outpatient Studies	237,705
Studies Performed Under Contract	87,478

Organ Transplantation

Kidney:	
Heart:	
Lung:	
Heart/Lung:	
Pancreas:	
Liver:	
Total:	

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	0	0	0	0	1	0	3	0	3	3.0	0.0
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	9	9	442	2070	876	1363	2239	2.0	0.7
Gastroenterology	0	0	0	0	0	0	0	0	0	0.0	0.0
Neurology	0	0	0	0	0	0	0	0	0	0.0	0.0
OB/Gynecology	0	0	0	0	2	25	6	28	34	3.0	1.1
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	0	0	0	306	0	337	337	0.0	1.1
Orthopedic	0	0	0	0	328	2170	827	3212	4039	2.5	1.5
Otolaryngology	0	0	0	0	0	4	0	4	4	0.0	1.0
Plastic Surgery	0	0	0	0	0	0	0	0	0	0.0	0.0
Podiatry	0	0	0	0	44	298	70	405	475	1.6	1.4
Thoracic	0	0	0	0	2	0	5	0	5	2.5	0.0
Urology	0	0	0	0	52	70	57	72	129	1.1	1.0
Totals	**0**	**0**	**9**	**9**	**871**	**4943**	**1844**	**5421**	**7265**	**2.1**	**1.1**

SURGICAL RECOVERY STATIONS — Stage 1 Recovery Stations: 10 — Stage 2 Recovery Stations: 26

Dedicated and Non-Dedicated Procedure Room Utilzation

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	3	3	441	2925	221	1462	1683	0.5	0.5
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	0	0	0	0	0	0	0	0.0	0.0
Cystoscopy	0	0	0	0	0	0	0	0	0	0.0	0.0

Multipurpose Non-Dedicated Rooms

0	0	0	0	0	0	0	0	0	0.0	0.0
0	0	0	0	0	0	0	0	0	0.0	0.0
0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center		No
Level of Trauma Service	Level 1	Level 2
	(Not Answered)	Not Answered
Operating Rooms Dedicated for Trauma Care		0
Number of Trauma Visits:		0
Patients Admitted from Trauma		0
Emergency Service Type:		Basic
Number of Emergency Room Stations		17
Persons Treated by Emergency Services:		38,119
Patients Admitted from Emergency:		3,825
Total ED Visits (Emergency+Trauma):		**38,119**

Free-Standing Emergency Center

Beds in Free-Standing Centers	
Patient Visits in Free-Standing Centers	
Hospital Admissions from Free-Standing Center	

Outpatient Service Data

Total Outpatient Visits	**130,622**
Outpatient Visits at the Hospital/ Campus:	130,622
Outpatient Visits Offsite/off campus	0

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	**2**
Cath Labs used for Angiography procedures	2
Dedicated Diagnostic Catheterization Labs	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	**586**
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	375
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	196
EP Catheterizations (15+)	15

Cardiac Surgery Data

Total Cardiac Surgery Cases:	**0**
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	0
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	0

Diagnostic/Interventional Equipment	Owned	Contract	Examinations Inpatient	Examinations Outpt	Examinations Contract
General Radiography/Fluoroscopy	5	0	5,911	21,637	0
Nuclear Medicine	2	0	261	719	0
Mammography	2	0	0	5,991	0
Ultrasound	3	0	1,396	6,043	0
Angiography	2	0			
Diagnostic Angiography			144	451	0
Interventional Angiography			489	528	0
Positron Emission Tomography (PET)	0	0	0	0	0
Computerized Axial Tomography (CAT)	2	0	2,531	8,619	0
Magnetic Resonance Imaging	1	0	454	1,788	0

Therapeutic Equipment	Owned	Contract	Therapies/ Treatments
Lithotripsy	0	0	0
Linear Accelerator	1	0	3,321
Image Guided Rad Therapy			2,417
Intensity Modulated Rad Thrpy			1,498
High Dose Brachytherapy	0	0	0
Proton Beam Therapy	0	0	0
Gamma Knife	0	0	0
Cyber knife	0	0	0

Source: 2016 Annual Hospital Questionnaire, Illinois Department of Public Health, Health Systems Development.

Hospital Profile - CY 2017 **Rush Oak Park Hospital, Inc.** **Oak Park**

Ownership, Management and General Information

ADMINISTRATOR NAME:	Bruce Elegant
ADMINSTRATOR PHONE	708 660-6663
OWNERSHIP:	Rush University Medical Center
OPERATOR:	Rush University Medical Center
MANAGEMENT:	Not for Profit Corporation
CERTIFICATION:	
FACILITY DESIGNATION:	General Hospital
ADDRESS	520 S Maple Avenue **CITY:** Oak Park **COUNTY:** Suburban Cook County

Patients by Race

White	47.3%
Black	44.9%
American Indian	0.0%
Asian	0.8%
Hawaiian/ Pacific	0.2%
Unknown	6.8%

Patients by Ethnicity

Hispanic or Latino:	8.2%
Not Hispanic or Latino:	91.7%
Unknown:	0.2%

IDPH Number:	1750
HPA	A-06
HSA	7

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2017	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	151	73	69	3,494	12,393	1,227	3.9	37.3	24.7	51.1
0-14 Years				*0*	*0*					
15-44 Years				*557*	*1,616*					
45-64 Years				*1,071*	*3,407*					
65-74 Years				*768*	*2,857*					
75 Years +				*1,098*	*4,513*					
Pediatric	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Intensive Care	14	14	14	914	2,596	31	2.9	7.2	51.4	51.4
Direct Admission				*738*	*2,109*					
Transfers				*176*	*487*					
Obstetric/Gynecology	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Maternity				*0*	*0*					
Clean Gynecology				*0*	*0*					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	36	21	21	355	5,266	0	14.8	14.4	40.1	68.7
Swing Beds			0	0	0		0.0	0.0		
Total AMI	0			0	0	0	0.0	0.0	0.0	
Adolescent AMI		0	0	0	0	0	0.0	0.0		0.0
Adult AMI		0	0	0	0	0	0.0	0.0		0.0
Rehabilitation	36	10	6	60	878	0	14.6	2.4	6.7	24.1
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	**237**			**4,647**	**21,133**	**1,258**	**4.8**	**61.3**	**25.9**	

(Includes ICU Direct Admissions Only)

Inpatients and Outpatients Served by Payor Source

	Medicare	*Medicaid*	*Other Public*	*Private Insurance*	*Private Pay*	*Charity Care*	*Totals*
Inpatients	**61.9%**	**14.2%**	**0.1%**	**21.9%**	**0.7%**	**1.3%**	
	2876	658	3	1016	33	61	**4,647**
Outpatients	**32.6%**	**18.3%**	**0.1%**	**44.4%**	**1.5%**	**3.1%**	
	37268	20965	69	50823	1766	3495	**114,386**

Financial Year Reported: 7/1/2016 *to* 6/30/2017

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	*Medicaid*	*Other Public*	*Private Insurance*	*Private Pay*	*Totals*	*Charity Care Expense*
Inpatient Revenue ($)	**51.0%**	**18.0%**	**0.0%**	**30.9%**	**0.1%**	**100.0%**	
	25,034,529	8,858,872	8,597	15,174,840	38,710	49,115,548	493,013
Outpatient Revenue ($)	**21.5%**	**11.2%**	**0.0%**	**67.1%**	**0.2%**	**100.0%**	
	18,937,227	9,843,207	40,042	59,204,476	164,956	88,189,908	2,303,877

Total Charity Care Expense
2,796,890

Total Charity Care as % of Net Revenue
2.0%

Birthing Data

Number of Total Births:	0
Number of Live Births:	0
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	0
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	0
CSections Performed:	0

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	0	0	0
Patient Days	0	0	0
Total Newborn Patient Days			**0**

Laboratory Studies

Inpatient Studies	105,227
Outpatient Studies	257,566
Studies Performed Under Contract	97,677

Organ Transplantation

Kidney:	0
Heart:	0
Lung:	0
Heart/Lung:	0
Pancreas:	0
Liver:	0
Total:	**0**

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	0	0	0	0	11	37	24	35	59	2.2	0.9
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	9	9	350	2241	642	1521	2163	1.8	0.7
Gastroenterology	0	0	0	0	0	0	0	0	0	0.0	0.0
Neurology	0	0	0	0	0	0	0	0	0	0.0	0.0
OB/Gynecology	0	0	0	0	1	78	6	82	88	6.0	1.1
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	0	0	0	343	0	370	370	0.0	1.1
Orthopedic	0	0	0	0	326	2061	850	3072	3922	2.6	1.5
Otolaryngology	0	0	0	0	3	91	4	116	120	1.3	1.3
Plastic Surgery	0	0	0	0	0	0	0	0	0	0.0	0.0
Podiatry	0	0	0	0	23	260	75	363	438	3.3	1.4
Thoracic	0	0	0	0	0	0	0	0	0	0.0	0.0
Urology	0	0	0	0	42	42	60	39	99	1.4	0.9
Totals	**0**	**0**	**9**	**9**	**756**	**5153**	**1661**	**5598**	**7259**	**2.2**	**1.1**

SURGICAL RECOVERY STATIONS	Stage 1 Recovery Stations	10	Stage 2 Recovery Stations	26

Dedicated and Non-Dedicated Procedure Room Utilzation

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	3	3	413	2977	206	1489	1695	0.5	0.5
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	0	0	0	0	0	0	0	0.0	0.0
Cystoscopy	0	0	0	0	0	0	0	0	0	0.0	0.0
Multipurpose Non-Dedicated Rooms											
					0	0	0	0	0	0.0	0.0
					0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center		No
Level of Trauma Service	Level 1	Level 2
Operating Rooms Dedicated for Trauma Care		0
Number of Trauma Visits:		0
Patients Admitted from Trauma		0
Emergency Service Type:		Comprehensive
Number of Emergency Room Stations		16
Persons Treated by Emergency Services:		36,958
Patients Admitted from Emergency:		3,767
Total ED Visits (Emergency+Trauma):		**36,958**

Free-Standing Emergency Center

Beds in Free-Standing Centers	0
Patient Visits in Free-Standing Centers	0
Hospital Admissions from Free-Standing Center	0

Outpatient Service Data

Total Outpatient Visits	**114,386**
Outpatient Visits at the Hospital/ Campus:	114,386
Outpatient Visits Offsite/off campus	0

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	**2**
Cath Labs used for Angiography procedures	2
Dedicated Diagnostic Catheterization Lab	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	**281**
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	183
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	68
EP Catheterizations (15+)	30

Cardiac Surgery Data

Total Cardiac Surgery Cases:	**0**
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	0
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	0

Diagnostic/Interventional Equipment	Owned	Contract	Examinations: Inpatient	Examinations: Outpt	Examinations: Contract	Therapeutic Equipment	Owned	Contract	Therapies/ Treatments
General Radiography/Fluoroscopy	5	0	5,633	22,378	0	*Lithotripsy*	0	0	0
Nuclear Medicine	2	0	222	867	0	*Linear Accelerator*	1	0	3,526
Mammography	4	0	0	11,619	0	Image Guided Rad Therapy			940
Ultrasound	3	0	1,359	6,689	0	Intensity Modulated Rad Thrpy			1,810
Angiography	2	0				High Dose Brachytherapy	0	0	0
Diagnostic Angiography			86	203	0	*Proton Beam Therapy*	0	0	0
Interventional Angiography			259	213	0	*Gamma Knife*	0	0	0
Positron Emission Tomography (PET)	0	0	0	0	0	*Cyber knife*	0	0	0
Computerized Axial Tomography (CAT)	2	0	2,668	9,089	0				
Magnetic Resonance Imaging	1	0	455	2,929	0				

Source: 2017 Annual Hospital Questionnaire, Illinois Department of Public Health, Health Systems Development.

Hospital Profile - CY 2018 **Rush Oak Park Hospital, Inc.** **Oak Park**

Ownership, Management and General Information

ADMINISTRATOR NAME:	Bruce Elegant
ADMINSTRATOR PHONE:	708-660-6663
OWNERSHIP:	Rush University Medical Center
OPERATOR:	Rush University Medical Center
MANAGEMENT:	Not for Profit Corporation
CERTIFICATION:	
FACILITY DESIGNATION:	General Hospital
ADDRESS	520 S. Maple Avenue **CITY:** Oak Park **COUNTY:** Suburban Cook County

Patients by Race

White	46.5%
Black	44.9%
American Indian	0.3%
Asian	0.8%
Hawaiian/ Pacific	0.1%
Unknown	7.4%

Patients by Ethnicity

Hispanic or Latino:	8.3%
Not Hispanic or Latino:	91.6%
Unknown:	0.1%

IDPH Number:	1750
HPA	A-06
HSA	7

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2018	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	151	73	73	3,356	11,963	1,216	3.9	36.1	23.9	49.5
0-14 Years				*0*	*0*					
15-44 Years				*476*	*1,442*					
45-64 Years				*1,034*	*3,644*					
65-74 Years				*761*	*2,703*					
75 Years +				*1,085*	*4,174*					
Pediatric	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Intensive Care	14	14	14	902	2,392	29	2.7	6.6	47.4	47.4
Direct Admission				*736*	*2,009*					
Transfers				*166*	*383*					
Obstetric/Gynecology	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Maternity				*0*	*0*					
Clean Gynecology				*0*	*0*					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	36	21	20	360	5,460	0	15.2	15.0	41.6	71.2
Swing Beds			0	0	0		0.0	0.0		
Total AMI	0			0	0	0	0.0	0.0	0.0	
Adolescent AMI		0	0	0	0	0	0.0	0.0		0.0
Adult AMI		0	0	0	0	0	0.0	0.0		0.0
Rehabilitation	0	10	10	18	298	0	16.6	0.8	0.0	8.2
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	**201**			**4,470**	**20,113**	**1,245**	**4.8**	**58.5**	**29.1**	

(Includes ICU Direct Admissions Only)

Inpatients and Outpatients Served by Payor Source

	Medicare	*Medicaid*	*Other Public*	*Private Insurance*	*Private Pay*	*Charity Care*	*Totals*
Inpatients	**63.9%**	**13.8%**	**0.0%**	**20.0%**	**1.3%**	**1.0%**	
	2856	615	0	895	59	45	**4,470**
Outpatients	**30.8%**	**18.4%**	**0.1%**	**45.8%**	**2.0%**	**2.9%**	
	38384	22922	74	57057	2549	3602	**124,588**

Financial Year Reported: 7/1/2017 to 6/30/2018

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	*Medicaid*	*Other Public*	*Private Insurance*	*Private Pay*	*Totals*	*Charity Care Expense*
Inpatient Revenue ($)	**59.9%**	**15.9%**	**0.0%**	**24.3%**	**-0.2%**	**100.0%**	
	25,857,529	6,870,809	13,749	10,491,266	-80,479	43,152,874	611,142
Outpatient Revenue ($)	**22.1%**	**10.8%**	**0.1%**	**66.5%**	**0.6%**	**100.0%**	
	21,824,468	10,675,377	49,843	65,673,495	598,386	98,821,569	2,214,229

Total Charity Care Expense 2,825,371

Total Charity Care as % of Net Revenue 2.0%

Birthing Data

Number of Total Births:	0
Number of Live Births:	0
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	0
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	0
CSections Performed:	0

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	0	0	0
Patient Days	0	0	0
Total Newborn Patient Days			**0**

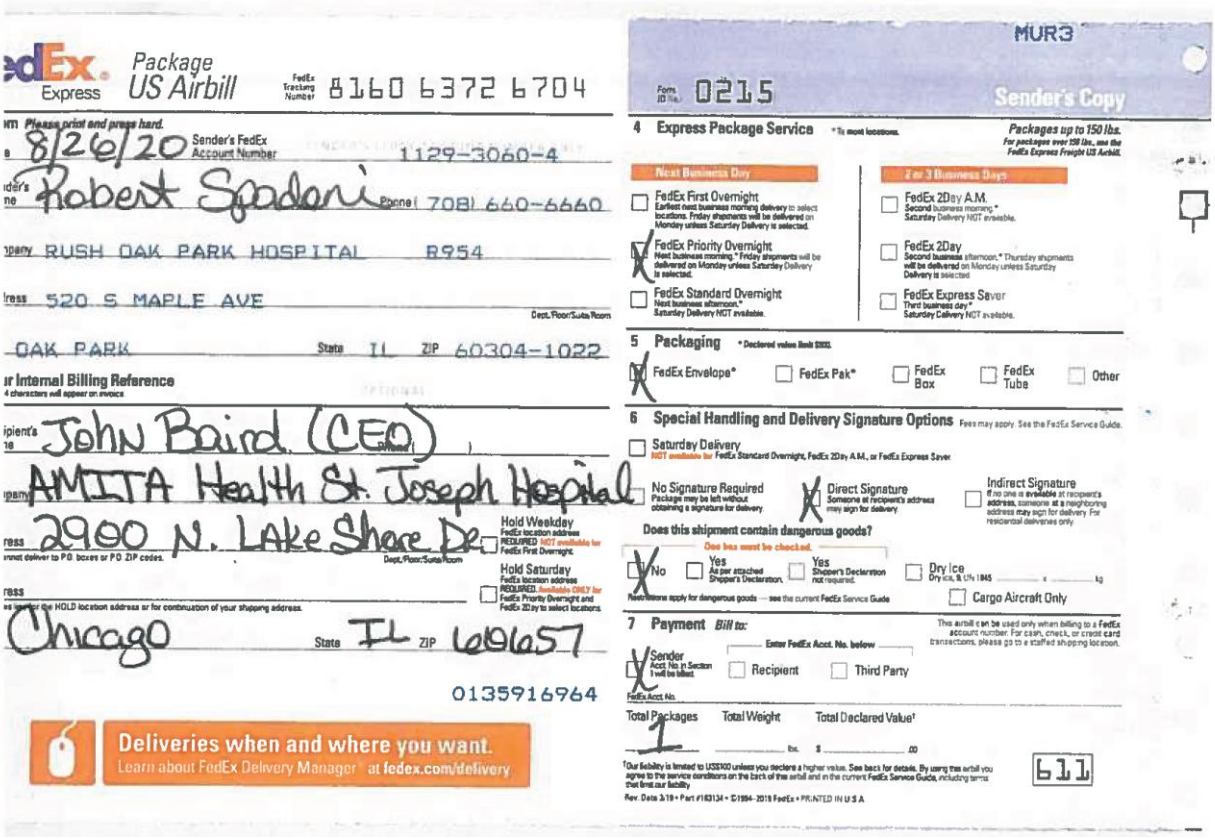
Laboratory Studies

Inpatient Studies	101,317
Outpatient Studies	289,579
Studies Performed Under Contract	110,520

Organ Transplantation

Kidney:	0
Heart:	0
Lung:	0
Heart/Lung:	0
Pancreas:	0
Liver:	0
Total:	**0**

Attachment 7
Impact on Access Notification Letter FedEx Mail Receipts



FedEx Express Package US Airbill
FedEx tracking Number 8160 6372 6704

Please print and press hard.
8/26/20 Sender's FedEx Account Number 1129-3060-4
Sender's Name Robert Spadoni Phone (708) 660-6660
Company RUSH OAK PARK HOSPITAL R954
Address 520 S MAPLE AVE Dept./Floor/Suite/Room
OAK PARK State IL ZIP 60304-1022
Your Internal Billing Reference
Recipient's Name John Baird (CEO)
Company AMITA Health St. Joseph Hospital
Address 2900 N. Lake Shore Dr. Dept./Floor/Suite/Room
Address
Chicago State IL ZIP 606657
0135916964

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MUR3
Form ID No. 0215 Sender's Copy

4 Express Package Service
Next Business Day
FedEx First Overnight
FedEx Priority Overnight
FedEx Standard Overnight
2 or 3 Business Days
FedEx 2Day A.M.
FedEx 2Day
FedEx Express Saver

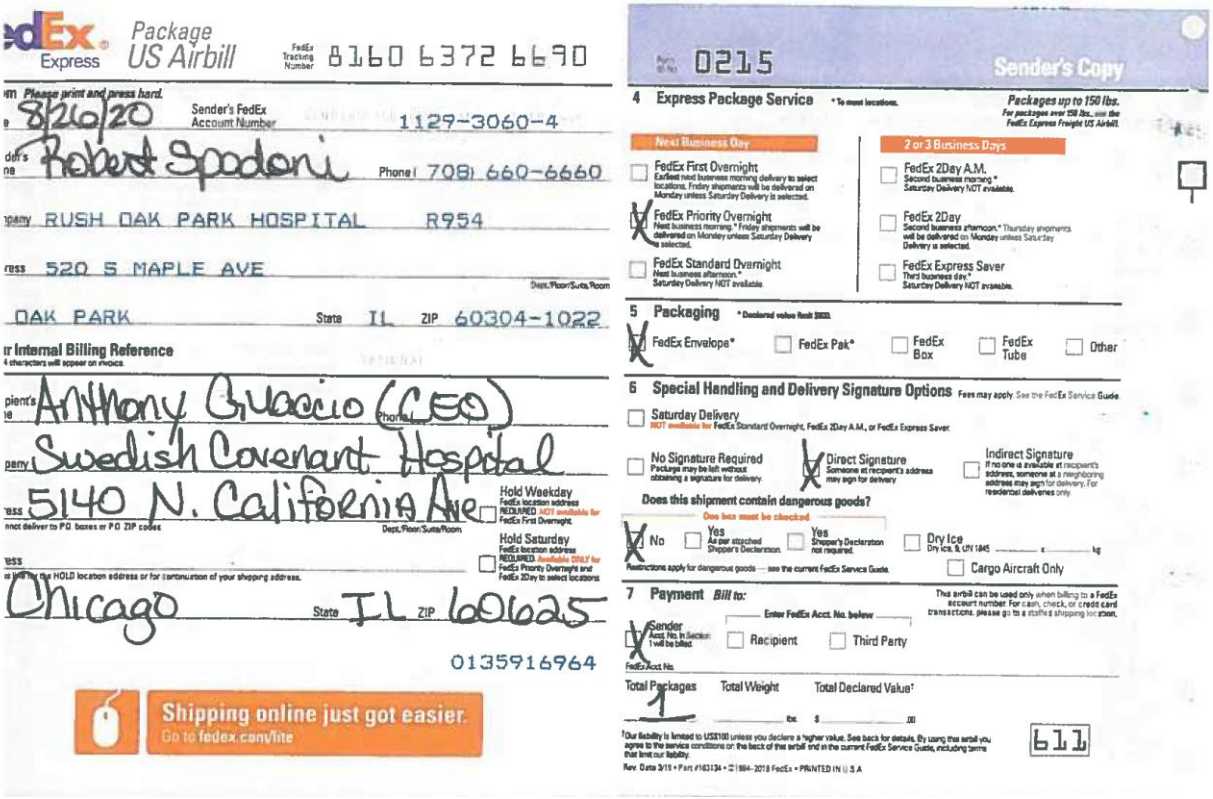
5 Packaging
FedEx Envelope* FedEx Pak* FedEx Box FedEx Tube Other

6 Special Handling and Delivery Signature Options
Saturday Delivery
No Signature Required
Direct Signature
Indirect Signature
Does this shipment contain dangerous goods?
No Yes Yes Dry Ice Cargo Aircraft Only

7 Payment Bill to:
Sender Recipient Third Party
Total Packages 1 Total Weight Total Declared Value

611

Attachment 7
Impact on Access Notification Letter FedEx Mail Receipts



FedEx Express Package US Airbill
FedEx Tracking Number 8160 6372 6690

Please print and press hard.
8/26/20
Sender's FedEx Account Number 1129-3060-4
Sender's Name Robert Spodoni Phone (708) 660-6660
Company RUSH OAK PARK HOSPITAL R954
Address 520 S MAPLE AVE
Dept./Floor/Suite/Room
OAK PARK State IL ZIP 60304-1022
Your Internal Billing Reference
Recipient's Name Anthony Guaccio (CEO) Phone
Company Swedish Covenant Hospital
Address 5140 N. California Ave
Cannot deliver to P.O. boxes or P.O. ZIP codes.
Dept./Floor/Suite/Room
Hold Weekday FedEx location address REQUIRED. NOT available for FedEx First Overnight.
Hold Saturday FedEx location address REQUIRED. Available ONLY for FedEx Priority Overnight and FedEx 2Day to select locations.
Address
Enter the HOLD location address or for continuation of your shipping address.
City Chicago State IL ZIP 606625
0135916964

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4 Express Package Service * To most locations.
Packages up to 150 lbs. For packages over 150 lbs., see the FedEx Express Freight US Airbill.

Next Business Day
- [ ] FedEx First Overnight — Earliest next business morning delivery to select locations. Friday shipments will be delivered on Monday unless Saturday Delivery is selected.
- [X] FedEx Priority Overnight — Next business morning.* Friday shipments will be delivered on Monday unless Saturday Delivery is selected.
- [ ] FedEx Standard Overnight — Next business afternoon.* Saturday Delivery NOT available.

2 or 3 Business Days
- [ ] FedEx 2Day A.M. — Second business morning.* Saturday Delivery NOT available.
- [ ] FedEx 2Day — Second business afternoon.* Thursday shipments will be delivered on Monday unless Saturday Delivery is selected.
- [ ] FedEx Express Saver — Third business day.* Saturday Delivery NOT available.

5 Packaging * Declared value limit $500.
- [X] FedEx Envelope*
- [ ] FedEx Pak*
- [ ] FedEx Box
- [ ] FedEx Tube
- [ ] Other

6 Special Handling and Delivery Signature Options Fees may apply. See the FedEx Service Guide.
- [ ] Saturday Delivery — NOT available for FedEx Standard Overnight, FedEx 2Day A.M., or FedEx Express Saver.

Signature options:
- [ ] No Signature Required — Package may be left without obtaining a signature for delivery.
- [X] Direct Signature — Someone at recipient's address may sign for delivery.
- [ ] Indirect Signature — If no one is available at recipient's address, someone at a neighboring address may sign for delivery. For residential deliveries only.

Does this shipment contain dangerous goods? One box must be checked.
- [X] No
- [ ] Yes — As per attached Shipper's Declaration
- [ ] Yes — Shipper's Declaration not required
- [ ] Dry Ice — Dry Ice, 9, UN 1845 ____ x ____ kg
- [ ] Cargo Aircraft Only

Restrictions apply for dangerous goods — see the current FedEx Service Guide.

7 Payment Bill to:
- [X] Sender — Acct. No. in Section 1 will be billed.
- [ ] Recipient
- [ ] Third Party

Enter FedEx Acct. No. below
FedEx Acct. No.

This airbill can be used only when billing to a FedEx account number. For cash, check, or credit card transactions, please go to a staffed shipping location.

Total Packages 1 Total Weight ____ lbs. Total Declared Value* $ ____.00

*Our liability is limited to US$100 unless you declare a higher value. See back for details. By using this airbill you agree to the service conditions on the back of this airbill and in the current FedEx Service Guide, including terms that limit our liability.

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Attachment 7
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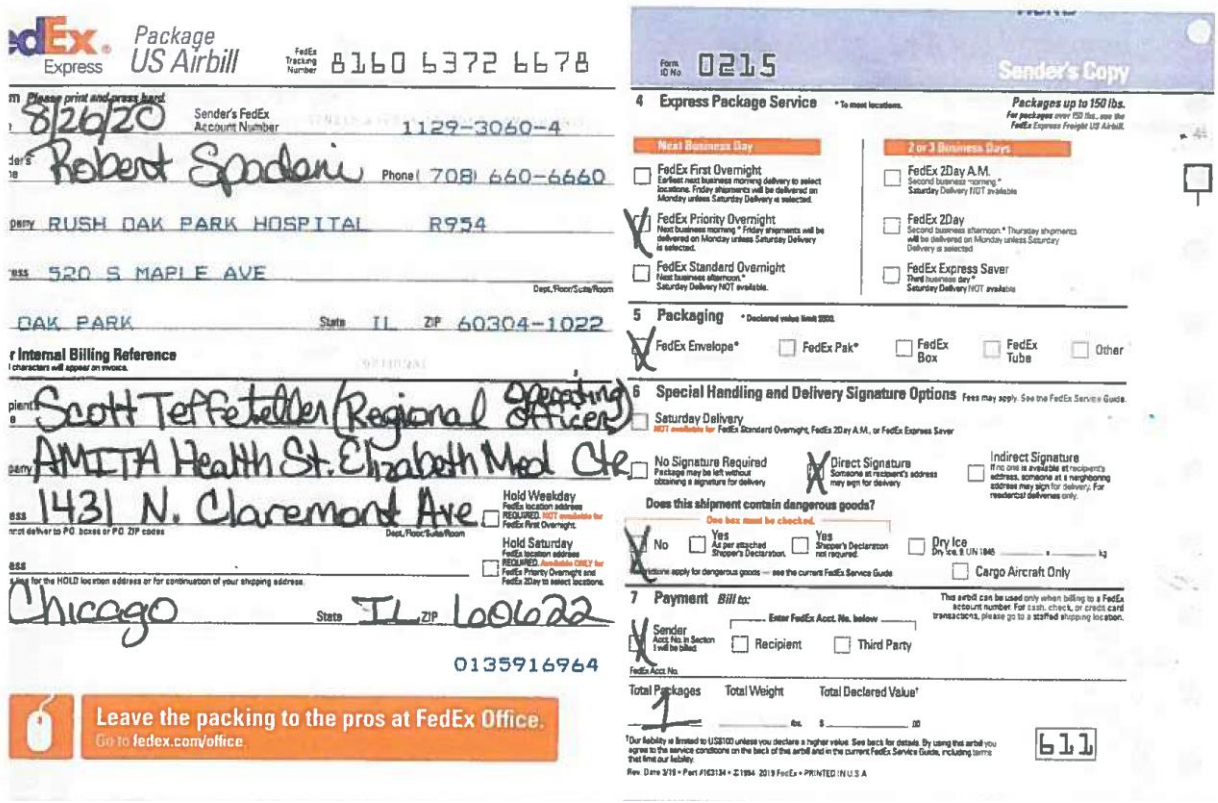

FedEx Express Package US Airbill

FedEx Tracking Number 8160 6372 6678

Please print and press hard

8/26/20

Sender's FedEx Account Number 1129-3060-4

Robert Spodaro Phone (708) 660-6660

RUSH OAK PARK HOSPITAL R954

520 S MAPLE AVE

OAK PARK State IL ZIP 60304-1022

Internal Billing Reference

Scott Teffeteller (Regional Operating Officer)

AMITA Health St. Elizabeth Med Ctr

1431 N. Claremont Ave

Chicago State IL ZIP 606122

0135916964

Leave the packing to the pros at FedEx Office.
Go to fedex.com/office

Form ID No 0215 Sender's Copy

4 Express Package Service

Next Business Day

- FedEx First Overnight
- FedEx Priority Overnight
- FedEx Standard Overnight

2 or 3 Business Days

- FedEx 2Day A.M.
- FedEx 2Day
- FedEx Express Saver

5 Packaging

- FedEx Envelope*
- FedEx Pak*
- FedEx Box
- FedEx Tube
- Other

6 Special Handling and Delivery Signature Options

- Saturday Delivery
- No Signature Required
- Direct Signature
- Indirect Signature

Does this shipment contain dangerous goods?

- No
- Yes
- Dry Ice

7 Payment Bill to:

- Sender
- Recipient
- Third Party

Total Packages 1 Total Weight Total Declared Value

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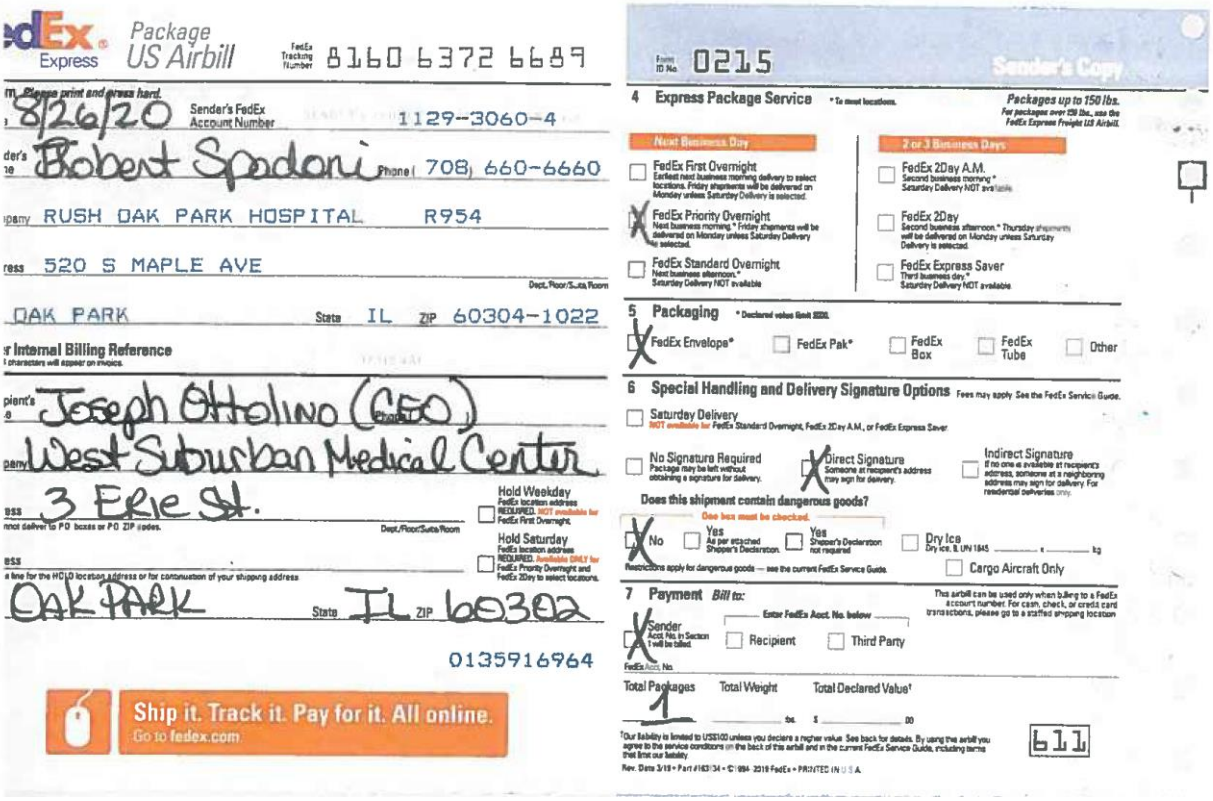
Attachment 7
Impact on Access Notification Letter FedEx Mail Receipts



FedEx Express Package US Airbill

FedEx Tracking Number 8160 6372 6689

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8/26/20

Sender's FedEx Account Number 1129-3060-4

Robert Spadoni Phone (708) 660-6660

RUSH OAK PARK HOSPITAL R954

520 S MAPLE AVE

OAK PARK State IL ZIP 60304-1022

Internal Billing Reference

Joseph Ottolino (CEO)

West Suburban Medical Center

3 Erie St.

Hold Weekday — FedEx location address REQUIRED. NOT available for FedEx First Overnight.

Hold Saturday — FedEx location address REQUIRED. Available ONLY for FedEx Priority Overnight and FedEx 2Day to select locations.

OAK PARK State IL ZIP 60302

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Ship it. Track it. Pay for it. All online. Go to fedex.com

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4 Express Package Service — Packages up to 150 lbs.

Next Business Day

- FedEx First Overnight — Earliest next business morning delivery to select locations. Friday shipments will be delivered on Monday unless Saturday Delivery is selected.
- [X] FedEx Priority Overnight — Next business morning.* Friday shipments will be delivered on Monday unless Saturday Delivery is selected.
- FedEx Standard Overnight — Next business afternoon.* Saturday Delivery NOT available

2 or 3 Business Days

- FedEx 2Day A.M. — Second business morning.* Saturday Delivery NOT available
- FedEx 2Day — Second business afternoon.* Thursday shipments will be delivered on Monday unless Saturday Delivery is selected.
- FedEx Express Saver — Third business day.* Saturday Delivery NOT available

5 Packaging — * Declared value limit $500.

- [X] FedEx Envelope*
- FedEx Pak*
- FedEx Box
- FedEx Tube
- Other

6 Special Handling and Delivery Signature Options — Fees may apply. See the FedEx Service Guide.

- Saturday Delivery — NOT available for FedEx Standard Overnight, FedEx 2Day A.M., or FedEx Express Saver
- No Signature Required — Package may be left without obtaining a signature for delivery.
- [X] Direct Signature — Someone at recipient's address may sign for delivery.
- Indirect Signature — If no one is available at recipient's address, someone at a neighboring address may sign for delivery. For residential deliveries only.

Does this shipment contain dangerous goods? One box must be checked.

- [X] No
- Yes — As per attached Shipper's Declaration.
- Yes — Shipper's Declaration not required
- Dry Ice — Dry Ice, 9, UN 1845 ____ x ____ kg

Restrictions apply for dangerous goods — see the current FedEx Service Guide.

- Cargo Aircraft Only

7 Payment Bill to:

- [X] Sender — Acct. No. in Section 1 will be billed.
- Recipient
- Third Party

Enter FedEx Acct. No. below

FedEx Acct. No.

This airbill can be used only when billing to a FedEx account number. For cash, check, or credit card transactions, please go to a staffed shipping location.

Total Packages: 1 — Total Weight: ____ lbs. — Total Declared Value*: $ ____ .00

*Our liability is limited to US$100 unless you declare a higher value. See back for details. By using this airbill you agree to the service conditions on the back of this airbill and in the current FedEx Service Guide, including terms that limit our liability.

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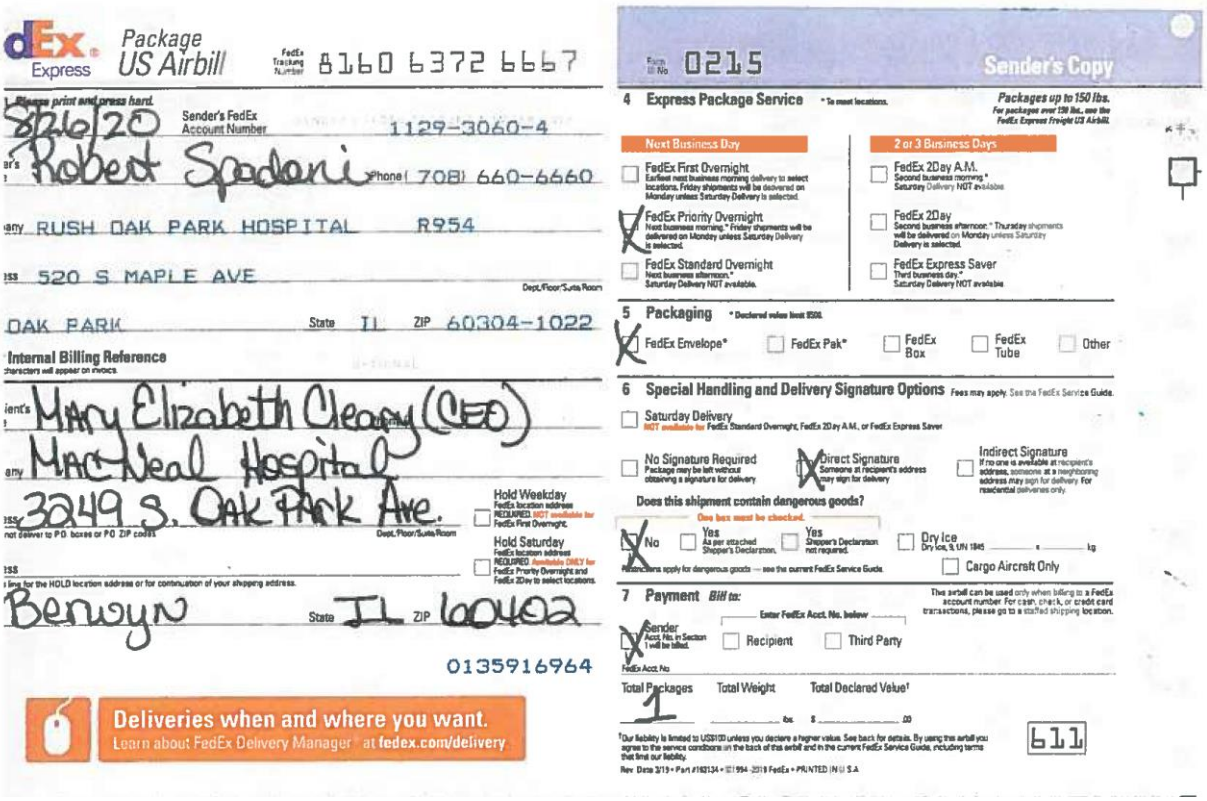

FedEx Express Package US Airbill

FedEx Tracking No. 8160 6372 6667

Please print and press hard.

8/26/20

Sender's FedEx Account Number 1129-3060-4

Robert Spadoni Phone (708) 660-6660

Company RUSH OAK PARK HOSPITAL R954

Address 520 S MAPLE AVE

Dept./Floor/Suite/Room

OAK PARK State IL ZIP 60304-1022

Internal Billing Reference

Mary Elizabeth Cleary (CEO)

Company MacNeal Hospital

Address 3249 S. Oak Park Ave.

Dept./Floor/Suite/Room

Berwyn State IL ZIP 60402

0135916964

Hold Weekday — FedEx location address REQUIRED. NOT available for FedEx First Overnight.

Hold Saturday — FedEx location address REQUIRED. Available ONLY for FedEx Priority Overnight and FedEx 2Day to select locations.

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Form No. 0215 — Sender's Copy

4 Express Package Service — Packages up to 150 lbs.

Next Business Day

- FedEx First Overnight — Earliest next business morning delivery to select locations. Friday shipments will be delivered on Monday unless Saturday Delivery is selected.
- [X] FedEx Priority Overnight — Next business morning.* Friday shipments will be delivered on Monday unless Saturday Delivery is selected.
- FedEx Standard Overnight — Next business afternoon.* Saturday Delivery NOT available.

2 or 3 Business Days

- FedEx 2Day A.M. — Second business morning.* Saturday Delivery NOT available.
- FedEx 2Day — Second business afternoon.* Thursday shipments will be delivered on Monday unless Saturday Delivery is selected.
- FedEx Express Saver — Third business day.* Saturday Delivery NOT available.

5 Packaging — * Declared value limit $500.

- [X] FedEx Envelope*
- FedEx Pak*
- FedEx Box
- FedEx Tube
- Other

6 Special Handling and Delivery Signature Options — Fees may apply. See the FedEx Service Guide.

- Saturday Delivery — NOT available for FedEx Standard Overnight, FedEx 2Day A.M., or FedEx Express Saver

- No Signature Required — Package may be left without obtaining a signature for delivery
- [X] Direct Signature — Someone at recipient's address may sign for delivery
- Indirect Signature — If no one is available at recipient's address, someone at a neighboring address may sign for delivery. For residential deliveries only.

Does this shipment contain dangerous goods? One box must be checked.

- [X] No
- Yes — As per attached Shipper's Declaration.
- Yes — Shipper's Declaration not required.
- Dry Ice — Dry Ice, 9, UN 1845 ____ x ____ kg

Transactions apply for dangerous goods — see the current FedEx Service Guide.

- Cargo Aircraft Only

7 Payment Bill to:

- [X] Sender — Acct. No. in Section 1 will be billed.
- Recipient
- Third Party

Enter FedEx Acct. No. below

FedEx Acct. No.

The airbill can be used only when billing to a FedEx account number. For cash, check, or credit card transactions, please go to a staffed shipping location.

Total Packages	Total Weight	Total Declared Value†
1	____ lbs.	$ ____ .00

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†Our liability is limited to US$100 unless you declare a higher value. See back for details. By using this airbill you agree to the service conditions on the back of this airbill and in the current FedEx Service Guide, including terms that limit our liability.

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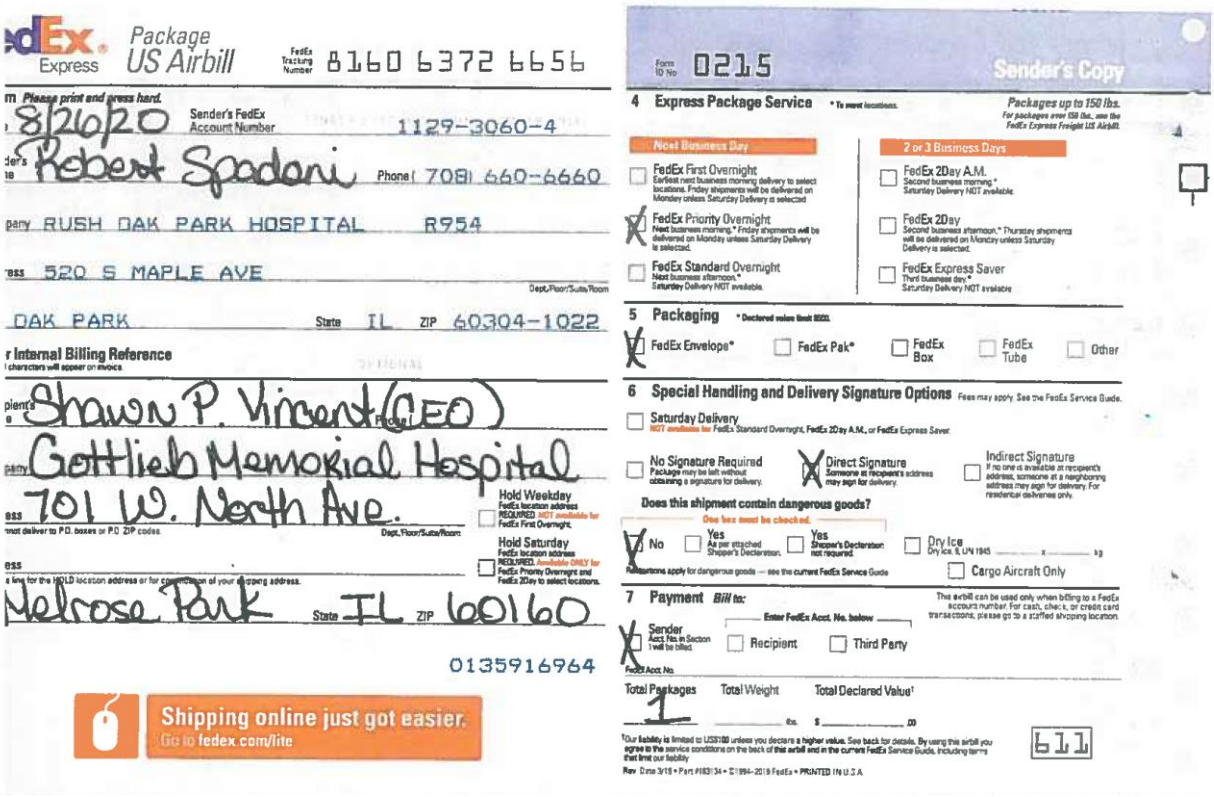

FedEx Express Package US Airbill

FedEx Tracking Number 8160 6372 6656

Please print and press hard.

8/26/20

Sender's FedEx Account Number 1129-3060-4

Robert Spadoni Phone (708) 660-6660

RUSH OAK PARK HOSPITAL R954

520 S MAPLE AVE

Dept./Floor/Suite/Room

OAK PARK State IL ZIP 60304-1022

Internal Billing Reference

Shawn P. Vincent (CEO)

Gottlieb Memorial Hospital

701 W. North Ave.

Dept./Floor/Suite/Room

Hold Weekday

Hold Saturday

Melrose Park State IL ZIP 60160

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4 Express Package Service

Next Business Day

FedEx First Overnight

FedEx Priority Overnight

FedEx Standard Overnight

2 or 3 Business Days

FedEx 2Day A.M.

FedEx 2Day

FedEx Express Saver

5 Packaging

FedEx Envelope* FedEx Pak* FedEx Box FedEx Tube Other

6 Special Handling and Delivery Signature Options

Saturday Delivery

No Signature Required

Direct Signature

Indirect Signature

Does this shipment contain dangerous goods?

No Yes Dry Ice Cargo Aircraft Only

7 Payment Bill to:

Sender Recipient Third Party

Total Packages 1 Total Weight Total Declared Value

611

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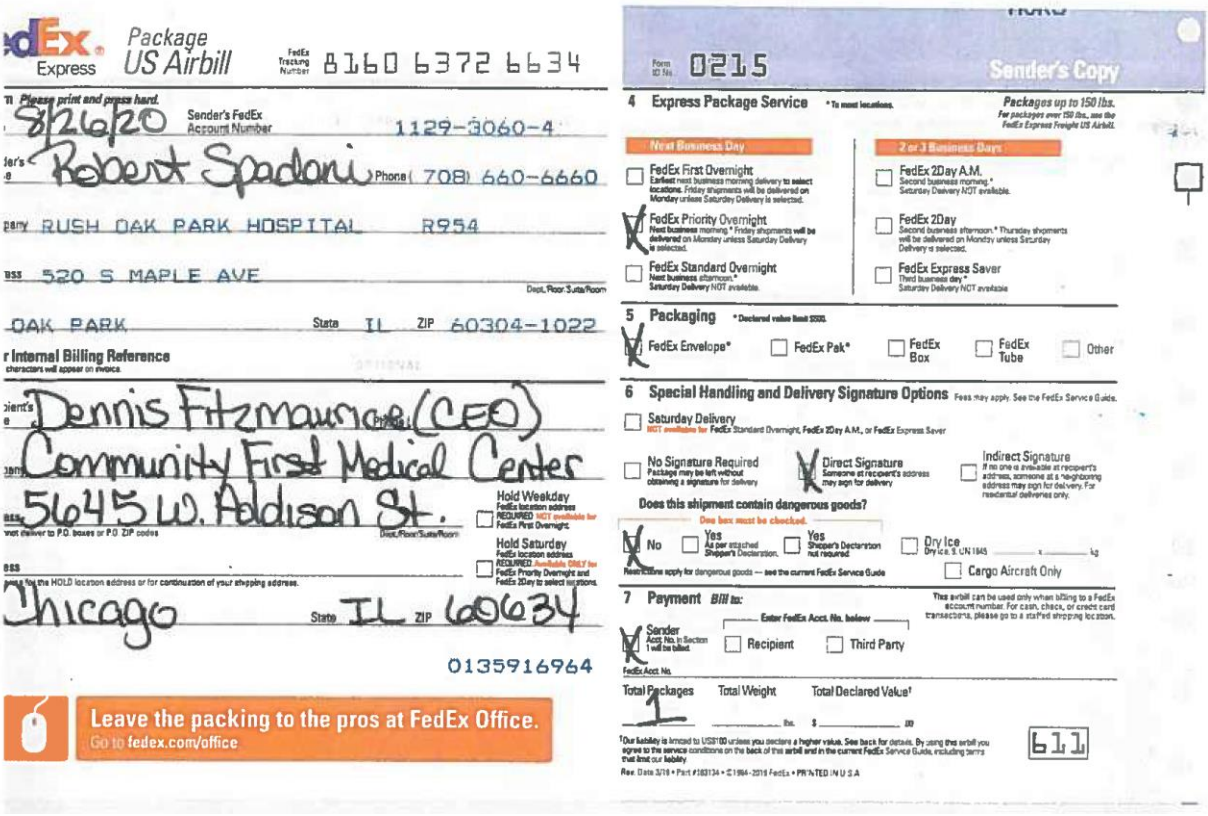
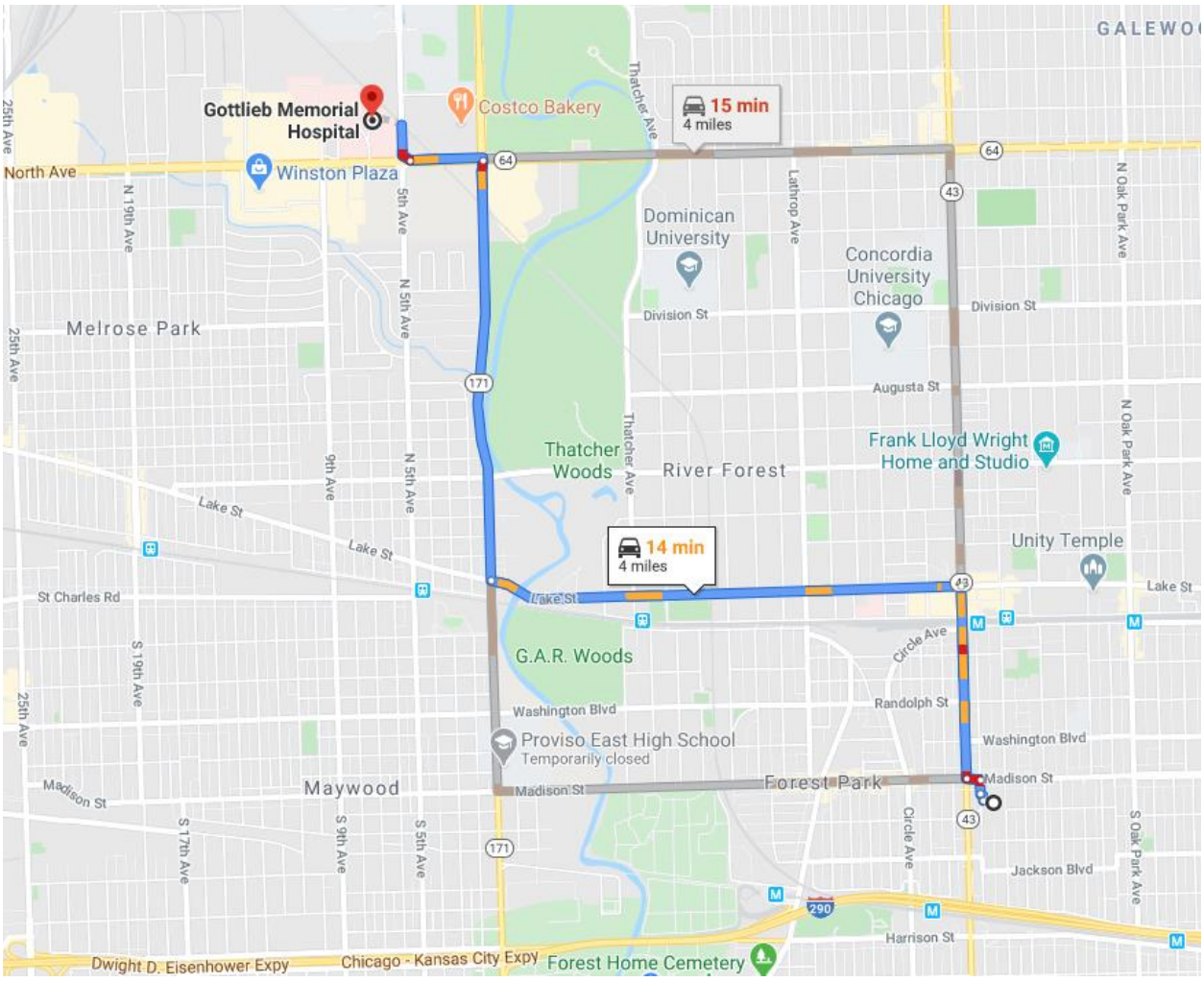


FedEx Express Package US Airbill
FedEx Tracking Number 8160 6372 6634
Please print and press hard.
8/26/20
Sender's FedEx Account Number 1129-3060-4
Robert Spadoni Phone (708) 660-6660
RUSH OAK PARK HOSPITAL R954
520 S MAPLE AVE
OAK PARK State IL ZIP 60304-1022
Internal Billing Reference
Dennis Fitzmaurice (CEO)
Community First Medical Center
5645 W. Addison St.
Chicago State IL ZIP 606634
0135916964
Leave the packing to the pros at FedEx Office.
Go to fedex.com/office

Form ID No. 0215 Sender's Copy
4 Express Package Service
Next Business Day
FedEx First Overnight
FedEx Priority Overnight
FedEx Standard Overnight
2 or 3 Business Days
FedEx 2Day A.M.
FedEx 2Day
FedEx Express Saver
5 Packaging
FedEx Envelope* FedEx Pak* FedEx Box FedEx Tube Other
6 Special Handling and Delivery Signature Options
Saturday Delivery
No Signature Required
Direct Signature
Indirect Signature
Does this shipment contain dangerous goods?
No Yes Yes Dry Ice
Cargo Aircraft Only
7 Payment Bill to:
Sender Recipient Third Party
Total Packages 1 Total Weight Total Declared Value
611

Attachment 7
Map Reflecting Distance of Providers with Hospital Based Skilled Nursing Units in the HSA and Market Area

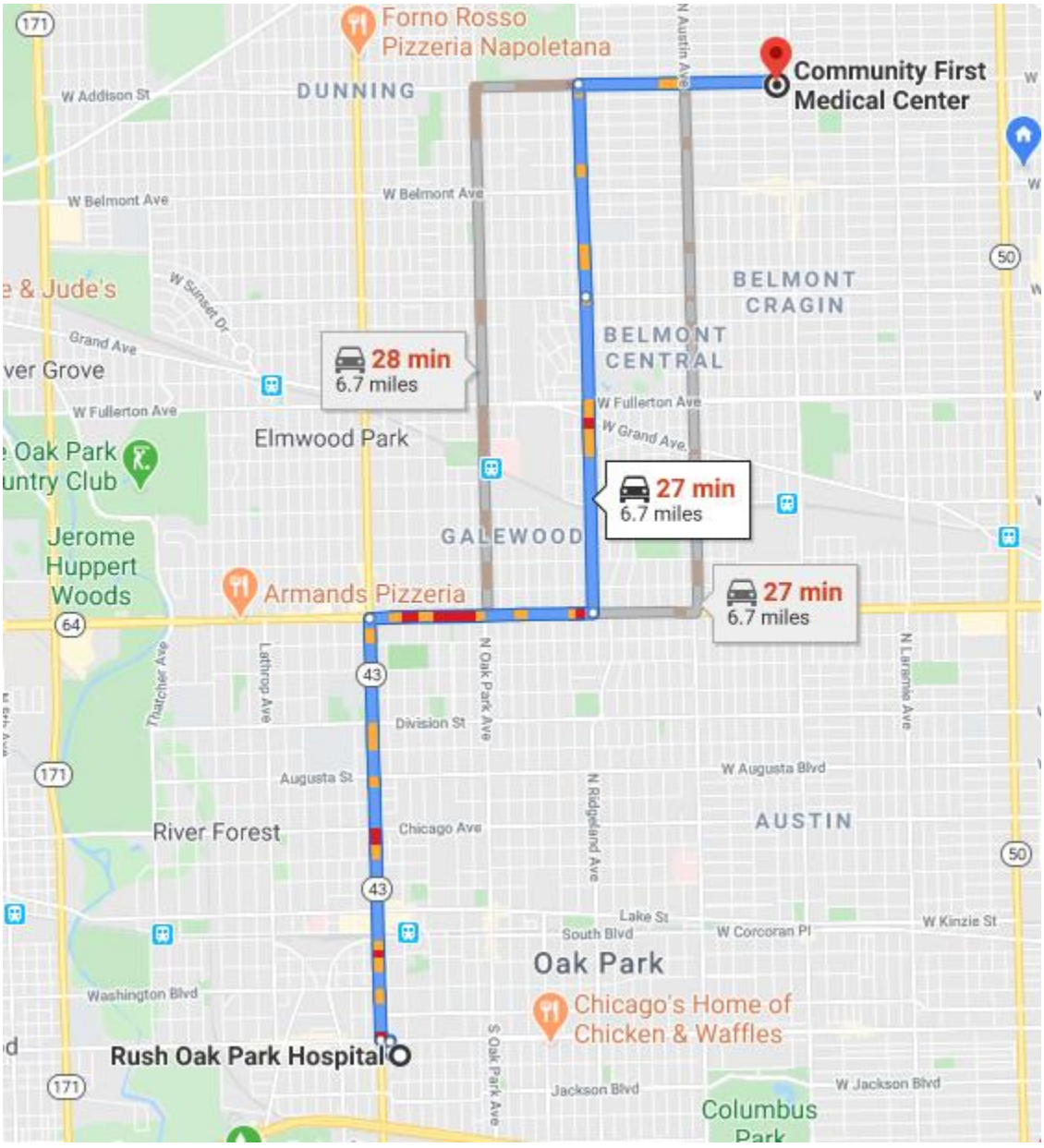
Gottlieb Memorial Hospital



Source: Google Maps

Attachment 7
Map Reflecting Distance of Providers with Hospital Based Skilled Nursing Units in the HSA and Market Area

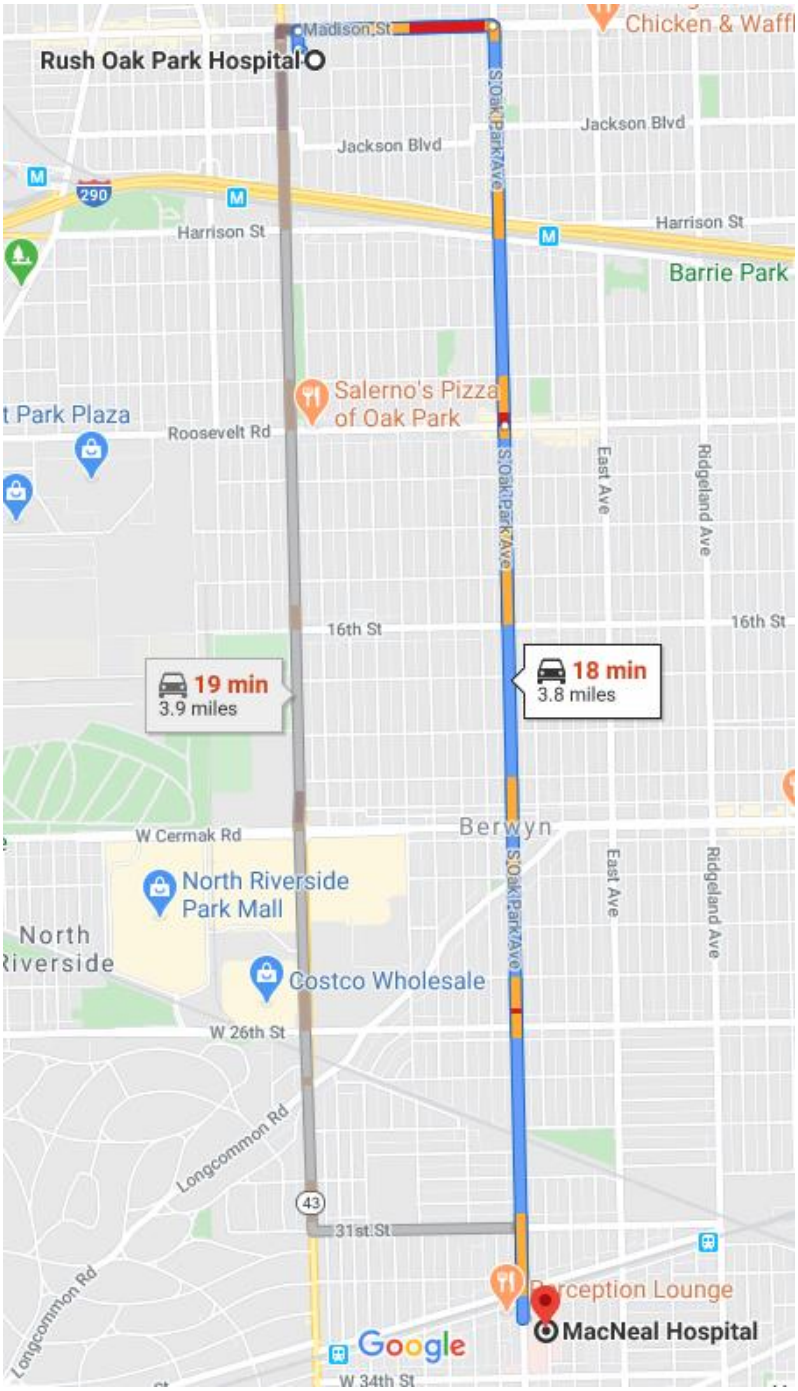
Community First Medical Center



Source: Google Maps

Attachment 7
Map Reflecting Distance of Providers with Hospital Based Skilled Nursing Units in the HSA and Market Area

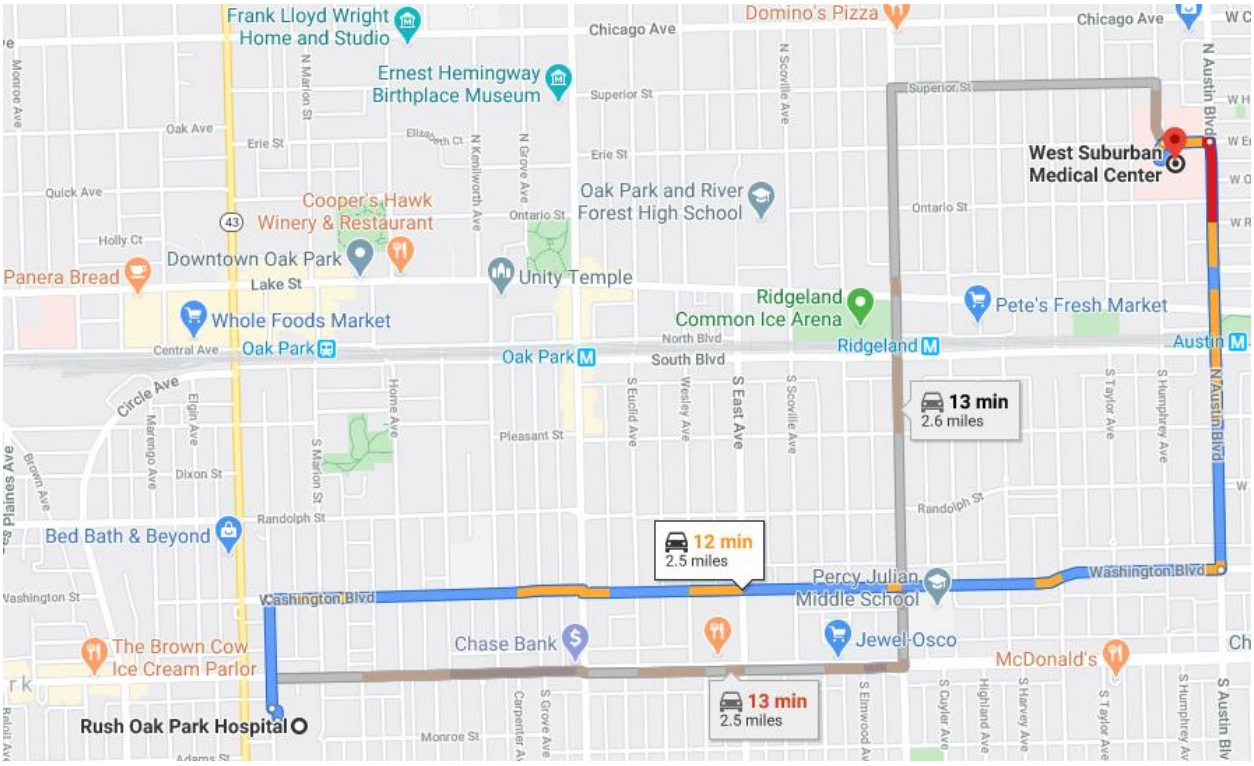
MacNeal Hospital



Source: Google Maps

Attachment 7
Map Reflecting Distance of Providers with Hospital Based Skilled Nursing Units in the HSA and Market Area

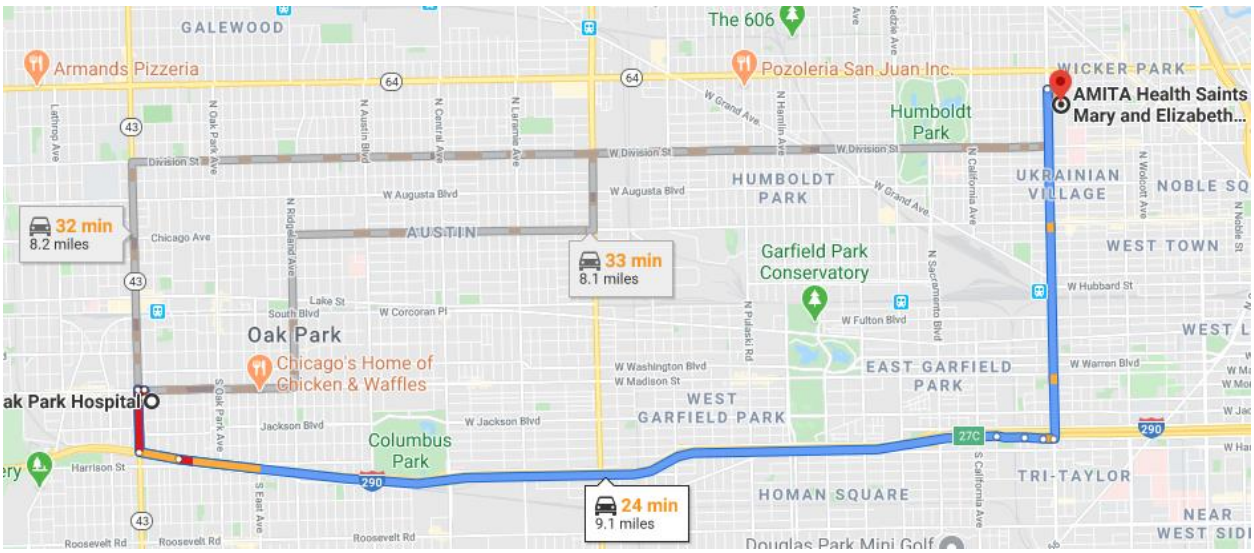
West Suburban Hospital



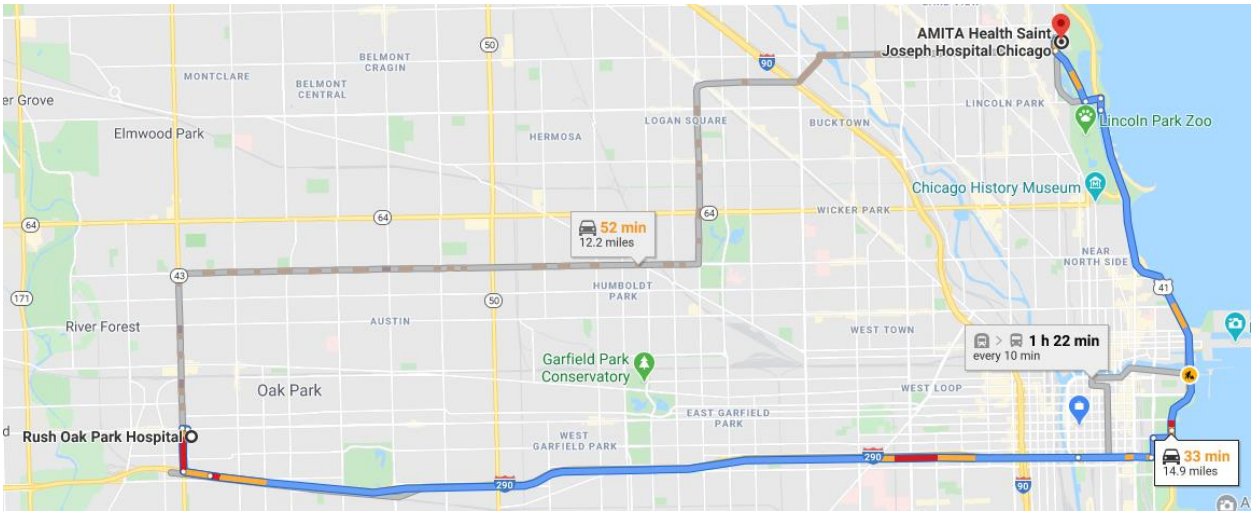
Source: Google Maps

Attachment 7
Map Reflecting Distance of Providers with Hospital Based Skilled Nursing Units in the HSA and Market Area

Presence Saint Elizabeth Hospital



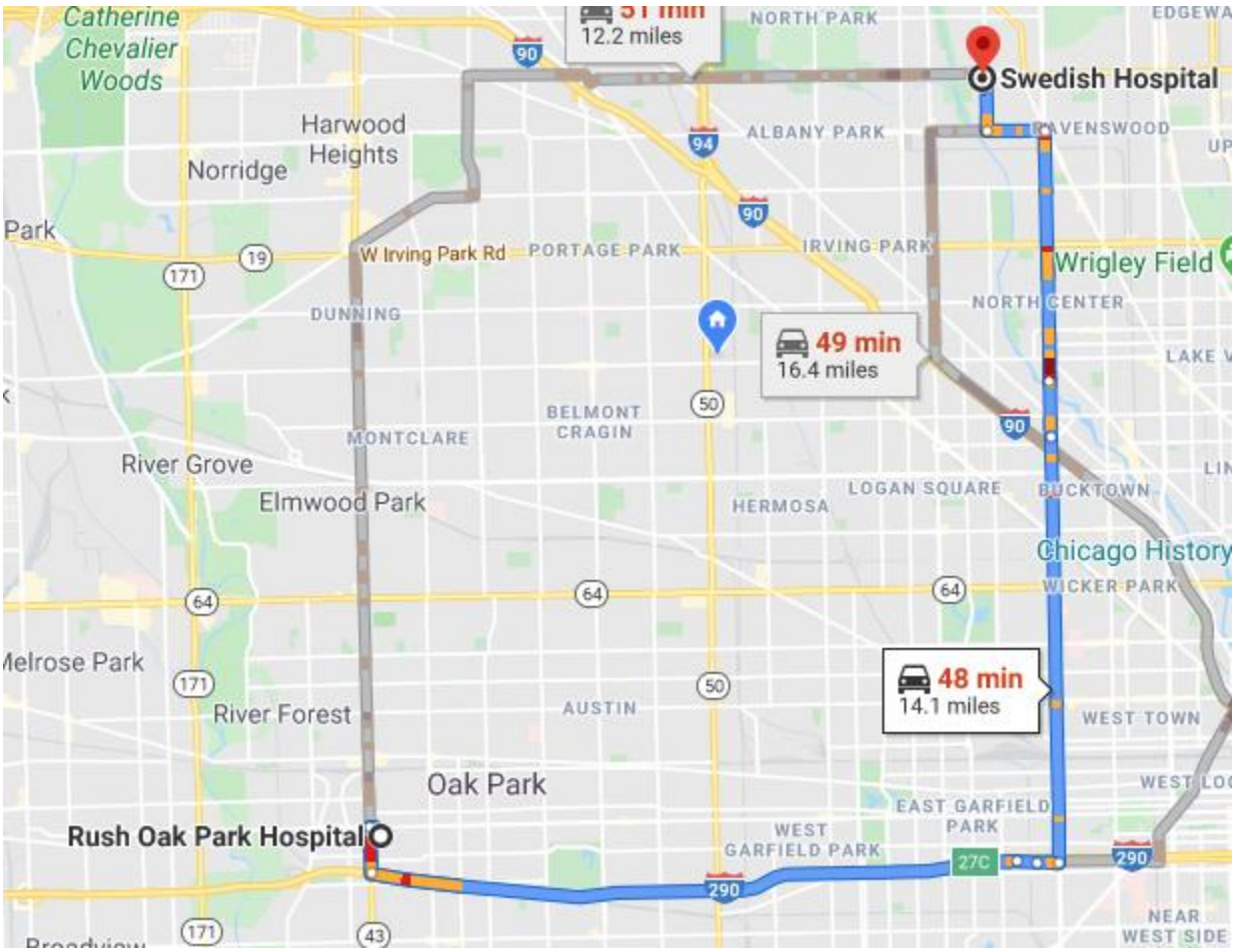
Presence Saint Joseph Hospital



Source: Google Maps

Attachment 7
Map Reflecting Distance of Providers with Hospital Based Skilled Nursing Units in the HSA and Market Area

Swedish Covenant Hospital



Source: Google Maps

Attachment 7
List of Rush Preferred Providers

Rush Oak Park
520 S Maple Ave,
Oak Park, IL 60304
Phone: 708-383-9300

Alden Town Manor
6120 Ogden Ave
Cicero, IL 60804
Phone: 708-863-0500

Legacy - Warren Barr South Loop
1725 South Wabash Ave.
Chicago, IL 60616
Phone: 312-922-2777

Aperion Care Forest Park
8200 Roosevelt Rd
Forest Park, IL 60608
Phone: 708-488-9850

Symphony of Lincoln Park
1366 W Fullerton Ave
Chicago, IL 60614
Phone: 773- 248-9300

Legacy - Warren Barr Gold Coast
66 West Oak St
Chicago, IL 60610
Phone: 312-705-6700

Alden Courts of Des Plaines
1227 East Golf Road
Des Plaines, IL 60016
Phone: 847-294-0644

Alden Courts of Huntley
12140A Regency Parkway
Huntley, IL 60142
Phone: 847-961-7600

Alden Courts of Shorewood
700 West Black Road
Aurora, IL 60404
Phone: 815-230-8600

Alden Courts of Waterford
1991 Randi Drive
Aurora, IL 60504
Phone: 630-851-1466

Alden Debes
550 South Mulford
Rockford, IL 61108
Phone: 815-484-1002

Alden Des Plaines
1221 East Golf Road
Des Plaines, IL 60016
Phone: 847-768-1300

Alden Estates of Barrington
1420 Sout Barrington Road
Barrington, IL 60010
Phone: 847-382-6664

Alden Estates of Evanston
2520 Gross Point Road
Evanston, IL 60201
Phone: 847-328-6000

Alden Estates of Huntley
12140B Regency Parkway
Huntley, IL 60142
Phone: 847-961-7500

Alden Estates of Naperville
1525 Oxford Lane
Naperville, IL 60565
Phone: 630-983-0300

Alden Estates of Northmoor
5831 North Northwest Highway
Chicago, IL 60631
Phone: 773-775-8080

Alden Estates of Orland Park
16450 S 97th Ave
Orland Park, IL 60467
Phone: 708-403-6500

Alden Estates of Shorewood
710 West Black Road
Shorewood, IL 60404
Phone: 815-230-8700

Alden Estates of Skokie
4626 Old Orchard Rd
Skokie, IL 60076
Phone: 847-676-4800

Alden Heather Manor
15600 South Honore
Harvey, IL 60426
Phone: 708-333-9550

Attachment 7
List of Rush Preferred Providers

Alden Lakeland
820 West Lawrence Avenue
Chicago, IL 60640
Phone: 773-769-2570

Alden Lincoln Park
504 West Wellington Avenue
Chicago, IL 60657
Phone: 773-281-6200

Alden Long Grove
2308 Old Hicks Road
Long Grove, IL 60047
Phone: 847-438-8275

Alden Meadow Park
709 Meadow Park Drive
Clinton, WI 53525
Phone: 608-676-2202

Alden North Shore
5050 Touhy Ave
Skokie, IL 60077
Phone: 847-679-6100

Alden of Waterford
2021 Randi Drive
Aurora, IL 60504
Phone: 630-851-7266

Alden of Waterford Cont. Care
Montgomery Road and Alden Circle
Aurora, IL 60504
Phone: 630-851-1880

Alden Park Strathmoor
5668 Strathmoor Drive
Rockford IL 61107
Phone: 815-229-5200

Alden Poplar Creek
1545 Barrington Road
Hoffman Estates, IL 60169
Phone: 847-884-0011

Alden Princeton
255 W 69th St
Chicago, IL 60621
Phone: 773-224-5900

Alden Terrace of McHenry
803 Royal Drive
McHenry, IL 60050
Phone: 815-344-2600

Alden Town Manor
6120 Ogden Ave
Cicero, IL 60804
Phone: 708-863-0500

Alden Valley Ridge
275 East Army Trail Road
Bloomingdale, IL 60108
Phone: 630-893-9616

Alden Village
267 East Lake Street.
Bloomingdale, IL 60108
Phone: 630-529-3350

Alden Village North
7464 N. Sheridan Road
Chicago, IL 60626
Phone: 773-338-0200

Alden Wentworth
201 W 69th St
Chicago, IL 60621
Phone: 773-487-1200

Legacy - Astoria Place Living & Rehab
6300 North Carolina Ave.
Chicago, IL 60659
Phone: 773-973-1900

Legacy - Avantara Elgin
1950 Larkin Avenue
Elgin, IL 60123
Phone: 847-742-7070

Legacy - Avantara Evergreen Park
10124 South Kedzie Avenue
Evergreen Park, IL 60805
Phone: 708-907-7000

Legacy - Avantara Long Grove
1666 Checker Rd
Long Grove, IL 60047
Phone: 847-491-1111

Legacy - Avantara Park Ridge
1601 North Western Ave
Park Ridge, IL 60068
Phone: 847-825-5531

Legacy - Bella Terra
8425 Waukegan Rd
Morton Grove, IL 60053
Phone: 847-965-8100

Legacy - Carlton
725 West Montrose Ave
Chicago, IL 60613
Phone: 773-929-1700

Legacy - Chalet Living & Rehab
7350 N Sheridan Rd
Chicago, IL 60626
Phone: 773-274-1000

Legacy - Clark Manor
7433 North Clark St.
Chicago, IL 60626
Phone: 773-338-8788

Legacy - Grove at the Lake
2534 Elim Ave
Zion, IL 60099
Phone: 847-746-8435

Legacy - Grove Berwyn
3601 S. Harlem Avenue
Berwyn, IL 60402
Phone: 708-749-4160

Legacy - Grove Elmhurst
127 West Diversey Ave
Elmhurst, IL 60126
Phone: 630-530-5225

Legacy - Grove Evanston
500 Asbury Ave
Evanston, IL 60202
Phone: 847-316-3320

Legacy - Grove Fox Valley
1601 N. Farnsworth
Aurora, IL 60505
Phone: 630-898-1180

Attachment 7
List of Rush Preferred Providers

Legacy - Grove La Grange Park
701 North La Grange Rd
La Grange Park, IL 60526
Phone: 708-354-7300

Legacy - Grove Lincoln Park
2732 N Hampden Ct
Chicago, IL 60613 60614
Phone: 773-248-6000

Legacy - Grove Skokie
9000 North Lavergne Ave
Skokie, IL 60077
Phone: 847-679-2322

Legacy - Grove St. Charles
611 Allen Lane
St. Charles, IL 60174
Phone: 630-377-2211

Legacy – Lakefront
7618 North Sheridan Rd
Chicago, IL 60626
Phone: 773-743-7711

Legacy - Peterson Park
6141 North Pulaski Rd
Chicago, IL 60646
Phone: 773-478-2000

Legacy - Warren Barr Lincoln Park
2732 North Hampden Ct.
Chicago, IL 60614
Phone: 773-248-6000

Legacy - Warren Barr Lincolnshire
150 Jamestown Ln
Lincolnshire, IL 60069
Phone 224-543-7100

Legacy - Warren Barr North Shore
2773 Skokie Valley Rd
Highland Park, IL 60035
Phone 847-266-9266

St. Joseph Village of Chicago
4021 W Belmont Ave
Chicago, IL 60641
Phone: 773-328-5500

Transitional Care of Arlington Heights
1200 North Arlington Hts Rd
Arlington Heights, IL 60004
Phone: 847-392-9000

Attachment 8
Background of the Applicant

Rush University System for Health owns the following Illinois healthcare facilities:

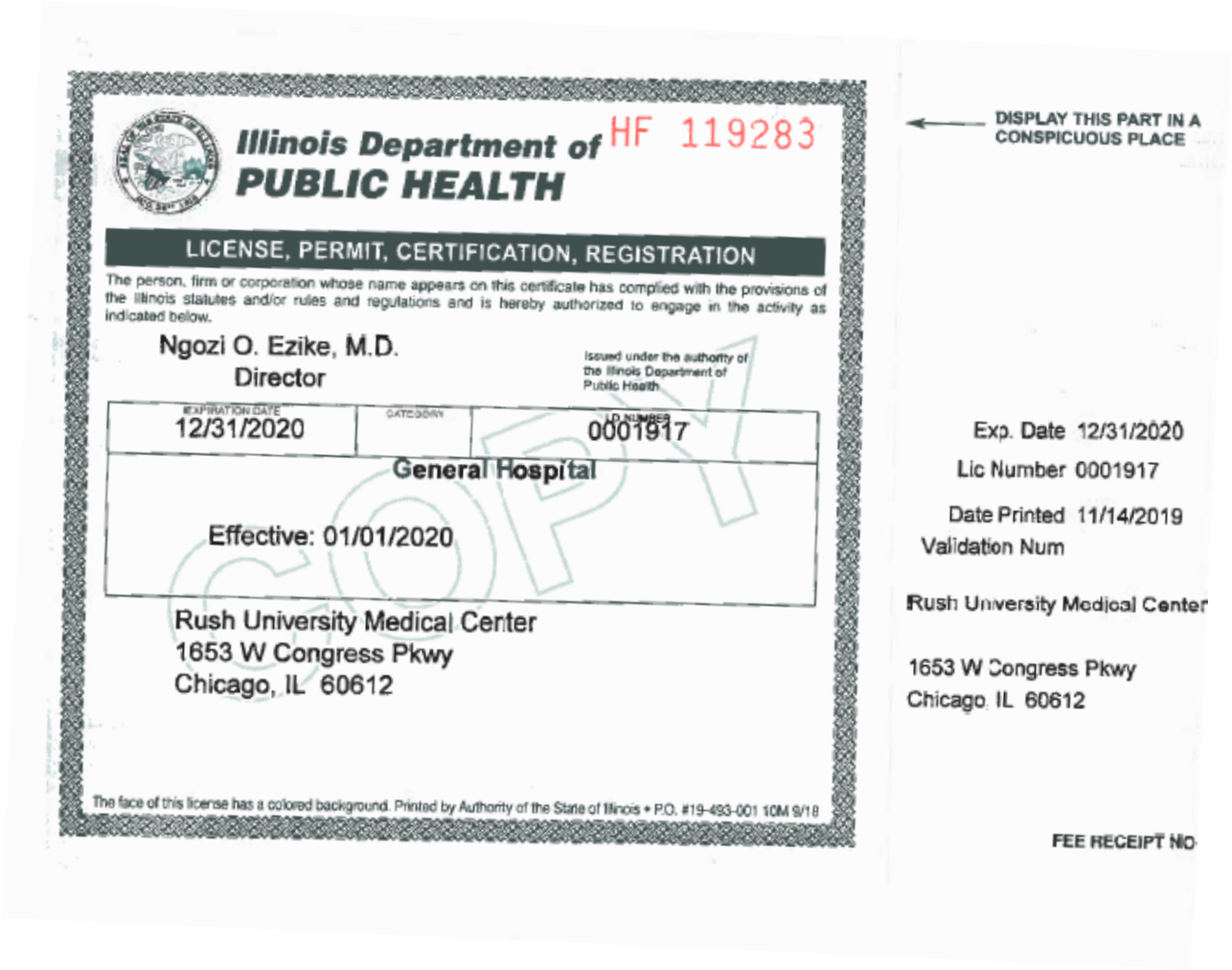
- Rush University Medical Center
- Rush Oak Park Hospital
- Rush Copley Medical Center
- Rush Surgicenter at the Professional Bldg, Ltd.
- Rush Oak Book Surgery Center, LLC
- Rush-Copley Surgicenter, LLC

A copy of the licenses for each facility is included with this attachment.

A copy of a letter certifying that no adverse action has been taken against any of the aforementioned facilities in the three year prior to the filing of the application.

Additionally, a copy of a letter providing authorization to HFSRB and IDPH to access to any documents necessary to verify the information submitted, including, but not limited to: official records of DPH or other State agencies; the licensing or certification records of other states, when applicable; and the records of nationally recognized accreditation organizations.

Attachment 8
Rush University Medical Center Hospital License



Illinois Department of PUBLIC HEALTH

HF 119283

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

The person, firm or corporation whose name appears on this certificate has complied with the provisions of the Illinois statutes and/or rules and regulations and is hereby authorized to engage in the activity as indicated below.

Ngozi O. Ezike, M.D.
Director

Issued under the authority of the Illinois Department of Public Health

EXPIRATION DATE	CATEGORY	I.D. NUMBER
12/31/2020		0001917

General Hospital

Effective: 01/01/2020

Rush University Medical Center
1653 W Congress Pkwy
Chicago, IL 60612

The face of this license has a colored background. Printed by Authority of the State of Illinois • P.O. #19-493-001 10M 9/18

COPY

← DISPLAY THIS PART IN A CONSPICUOUS PLACE

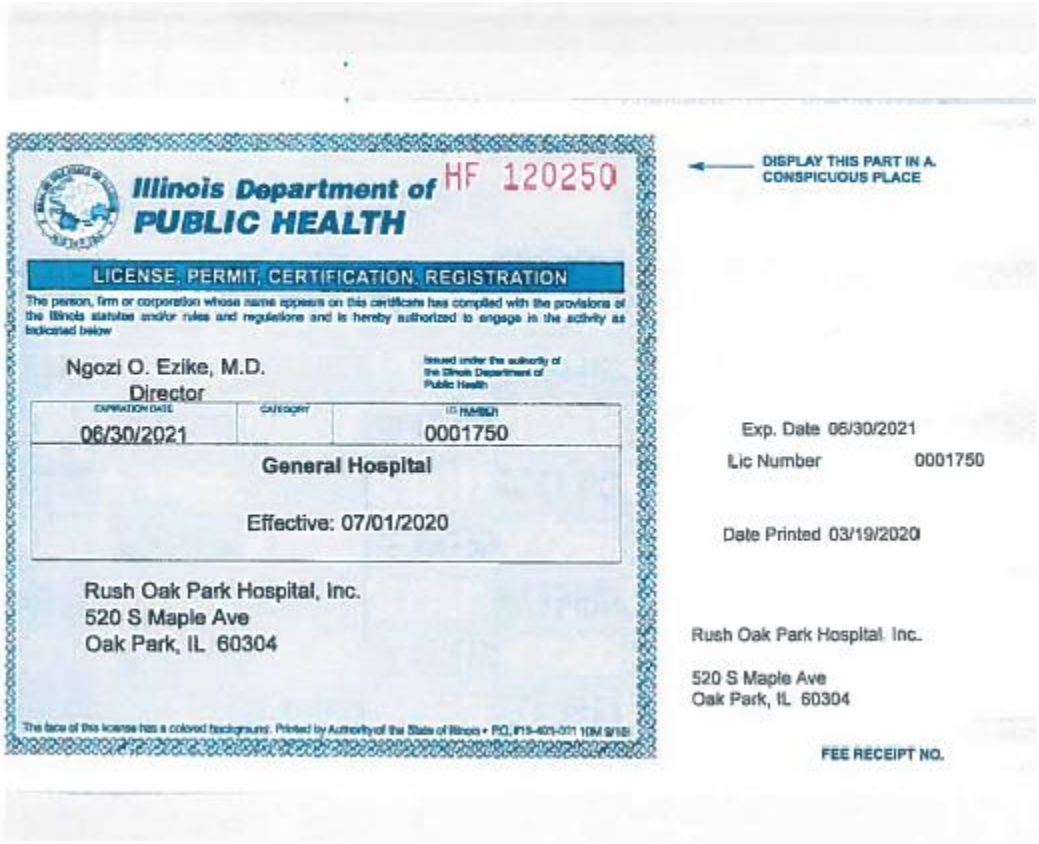
Exp. Date 12/31/2020
Lic Number 0001917
Date Printed 11/14/2019
Validation Num

Rush University Medical Center

1653 W Congress Pkwy
Chicago IL 60612

FEE RECEIPT NO

Attachment 8
Rush Oak Park Hospital License



Illinois Department of PUBLIC HEALTH

HF 120250

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

The person, firm or corporation whose name appears on this certificate has complied with the provisions of the Illinois statutes and/or rules and regulations and is hereby authorized to engage in the activity as indicated below

Ngozi O. Ezike, M.D.
Director

Issued under the authority of the Illinois Department of Public Health

EXPIRATION DATE	CATEGORY	ID NUMBER
06/30/2021		0001750

General Hospital

Effective: 07/01/2020

Rush Oak Park Hospital, Inc.
520 S Maple Ave
Oak Park, IL 60304

The face of this license has a colored background. Printed by Authority of the State of Illinois • PO. #19-405-031 10M 9/18

DISPLAY THIS PART IN A CONSPICUOUS PLACE

Exp. Date 06/30/2021

Lic Number 0001750

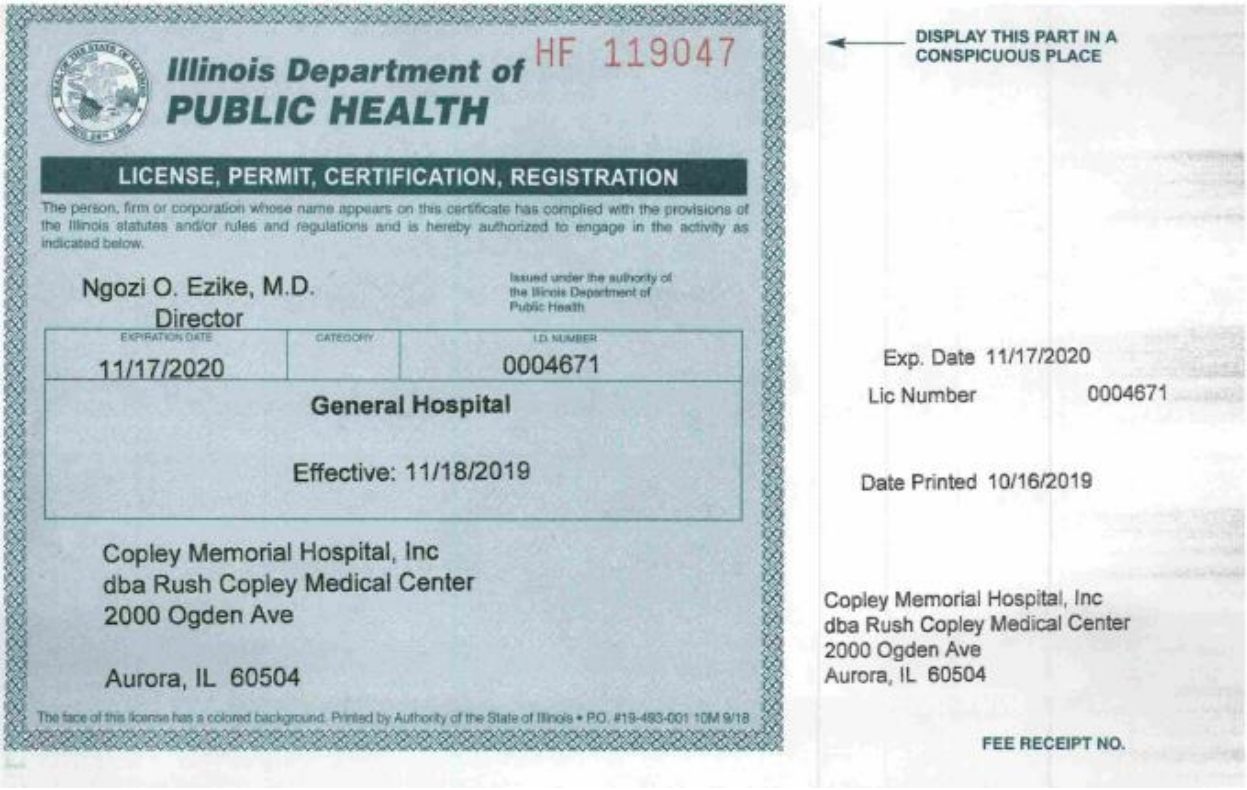
Date Printed 03/19/2020

Rush Oak Park Hospital, Inc.

520 S Maple Ave
Oak Park, IL 60304

FEE RECEIPT NO.

Attachment 8
Rush Copley Medical Center Hospital License



Illinois Department of PUBLIC HEALTH

HF 119047

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

The person, firm or corporation whose name appears on this certificate has complied with the provisions of the Illinois statutes and/or rules and regulations and is hereby authorized to engage in the activity as indicated below.

Ngozi O. Ezike, M.D.
Director

Issued under the authority of the Illinois Department of Public Health

EXPIRATION DATE	CATEGORY	I.D. NUMBER
11/17/2020		0004671

General Hospital

Effective: 11/18/2019

Copley Memorial Hospital, Inc
dba Rush Copley Medical Center
2000 Ogden Ave

Aurora, IL 60504

The face of this license has a colored background. Printed by Authority of the State of Illinois • P.O. #19-493-001 10M 9/18

← DISPLAY THIS PART IN A CONSPICUOUS PLACE

Exp. Date 11/17/2020

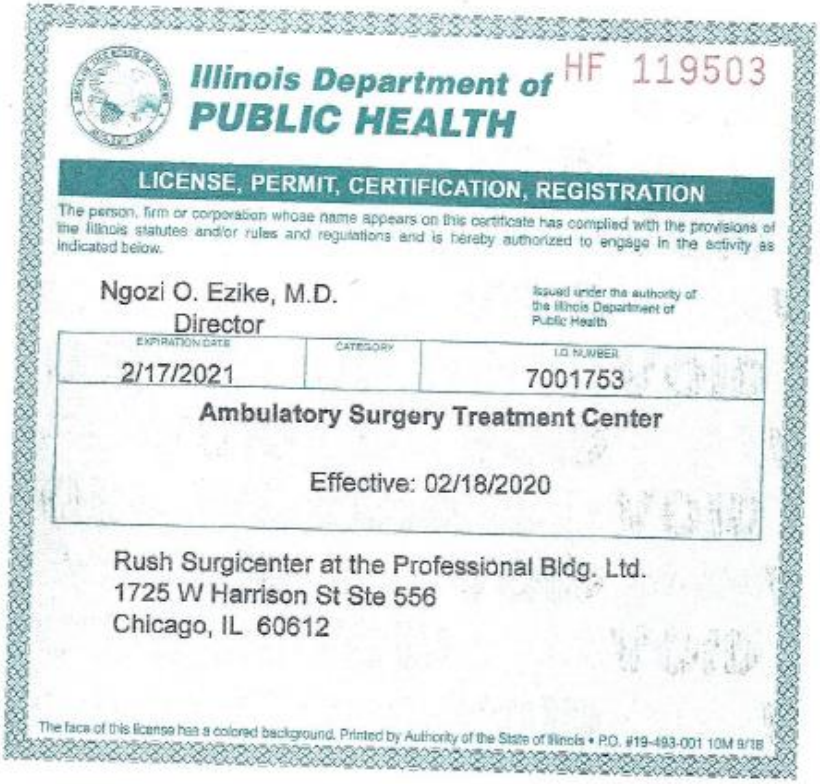
Lic Number 0004671

Date Printed 10/16/2019

Copley Memorial Hospital, Inc
dba Rush Copley Medical Center
2000 Ogden Ave
Aurora, IL 60504

FEE RECEIPT NO.

Attachment 8
Rush Surgicenter at the Professional Building ASTC License



Illinois Department of PUBLIC HEALTH

HF 119503

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

The person, firm or corporation whose name appears on this certificate has complied with the provisions of the Illinois statutes and/or rules and regulations and is hereby authorized to engage in the activity as indicated below.

Ngozi O. Ezike, M.D.
Director

Issued under the authority of the Illinois Department of Public Health

EXPIRATION DATE	CATEGORY	LIC NUMBER
2/17/2021		7001753

Ambulatory Surgery Treatment Center

Effective: 02/18/2020

Rush Surgicenter at the Professional Bldg. Ltd.
1725 W Harrison St Ste 556
Chicago, IL 60612

The face of this license has a colored background. Printed by Authority of the State of Illinois • P.O. #19-493-001 10M 9/18

← DISPLAY THIS PART IN A CONSPICUOUS PLACE

Exp. Date 2/17/2021

Lic Number 7001753

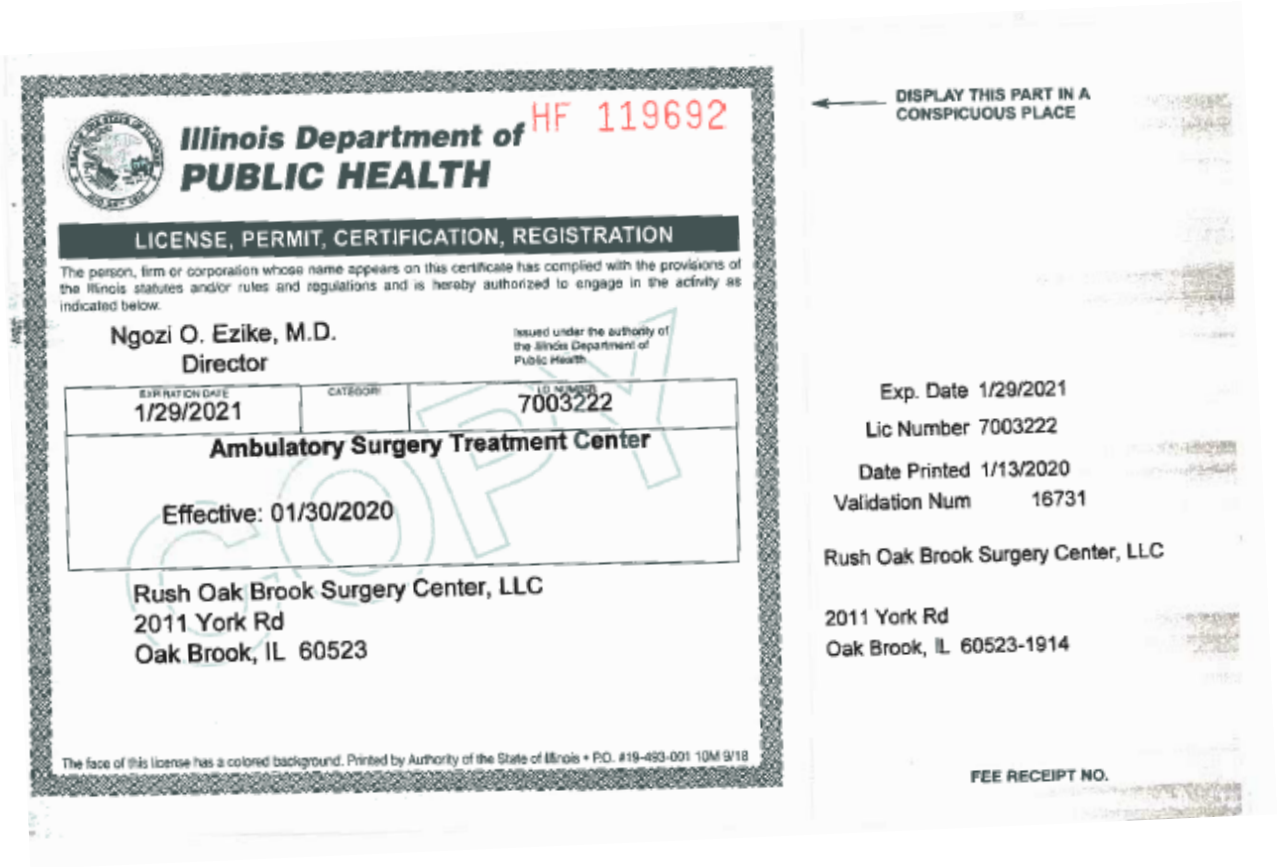
Date Printed 12/12/2019

Rush Surgicenter at the Professional B

1725 W Harrison St Ste 556
Chicago, IL 60612-2846

FEE RECEIPT NO.

Attachment 8
Rush Oak Brook Surgery Center ASTC License



Illinois Department of PUBLIC HEALTH

HF 119692

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

The person, firm or corporation whose name appears on this certificate has complied with the provisions of the Illinois statutes and/or rules and regulations and is hereby authorized to engage in the activity as indicated below.

Ngozi O. Ezike, M.D.
Director

Issued under the authority of the Illinois Department of Public Health

EXPIRATION DATE	CATEGORY	I.D. NUMBER
1/29/2021		7003222

Ambulatory Surgery Treatment Center

Effective: 01/30/2020

Rush Oak Brook Surgery Center, LLC
2011 York Rd
Oak Brook, IL 60523

The face of this license has a colored background. Printed by Authority of the State of Illinois • P.O. #19-493-001 10M 9/18

COPY

← DISPLAY THIS PART IN A CONSPICUOUS PLACE

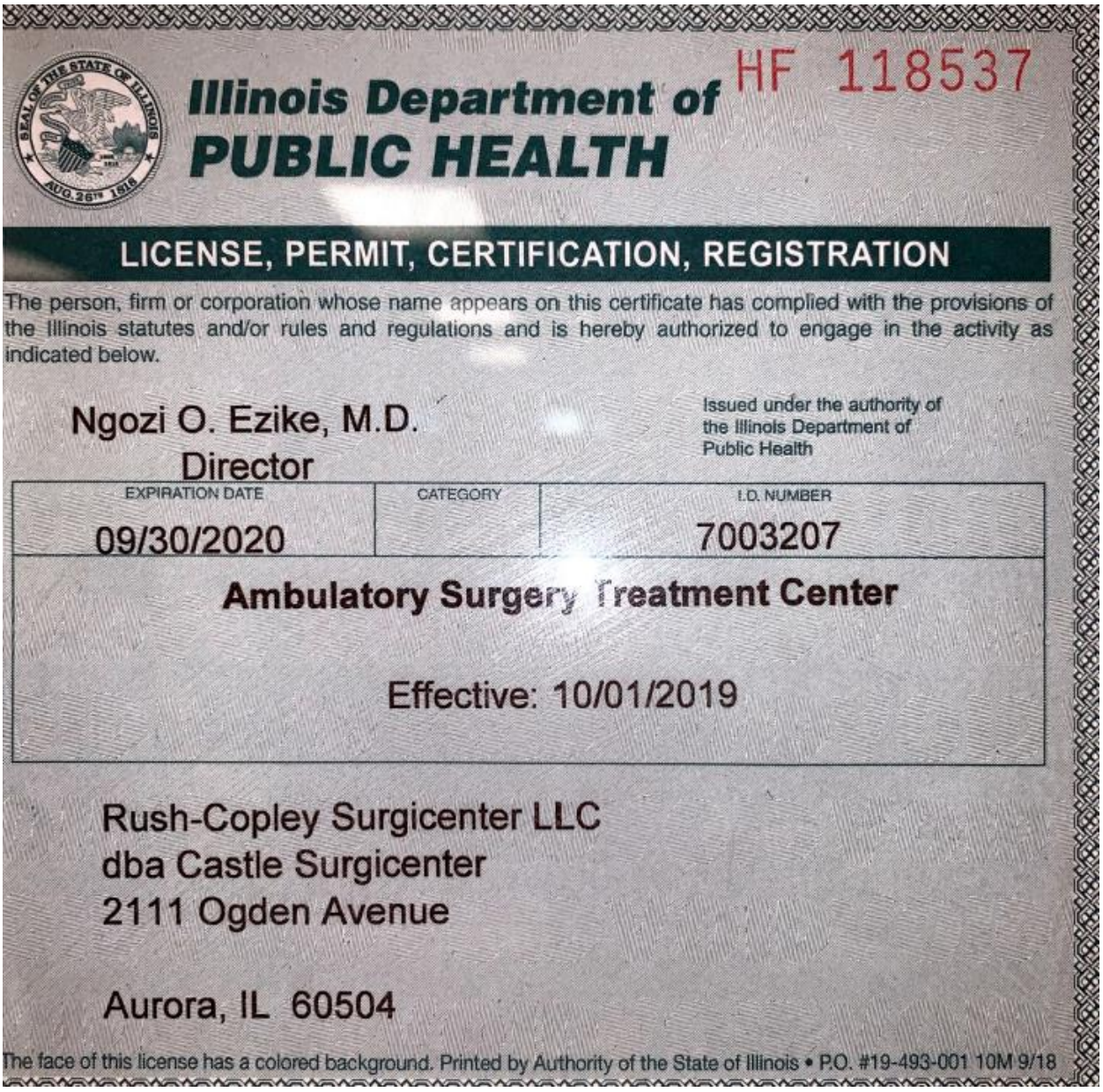
Exp. Date 1/29/2021
Lic Number 7003222
Date Printed 1/13/2020
Validation Num 16731

Rush Oak Brook Surgery Center, LLC

2011 York Rd
Oak Brook, IL 60523-1914

FEE RECEIPT NO.

Attachment 8
Rush-Copley Surgicenter ASTC License



Illinois Department of PUBLIC HEALTH

HF 118537

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

The person, firm or corporation whose name appears on this certificate has complied with the provisions of the Illinois statutes and/or rules and regulations and is hereby authorized to engage in the activity as indicated below.

Ngozi O. Ezike, M.D.
Director

Issued under the authority of the Illinois Department of Public Health

EXPIRATION DATE	CATEGORY	I.D. NUMBER
09/30/2020		7003207

Ambulatory Surgery Treatment Center

Effective: 10/01/2019

Rush-Copley Surgicenter LLC
dba Castle Surgicenter
2111 Ogden Avenue

Aurora, IL 60504

The face of this license has a colored background. Printed by Authority of the State of Illinois • P.O. #19-493-001 10M 9/18

Attachment 8
Certification and Authorization Letter

Rush University System for Health
1725 West Harrison Street
Suite 364
Chicago, IL 60612

RUSH

August 19, 2020

Courtney Avery
Board Administrator
Illinois Health Facilities and Service Review Board
525 West Jefferson Street, 2nd Floor
Springfield, Illinois 62761

Re: Certification and Authorization

Dear Ms. Avery,

As representative of Rush University System for Health, I, Carl Bergetz, give authorization to the Health Facilities and Services Review Board and the Illinois Department of Public Health (IDPH) to access 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, and the records of nationally recognized accreditation organizations.

I further verify that, Rush University System for Health has ownership interest in the following Illinois healthcare facilities:

- Rush University Medical Center
- Rush Oak Park Hospital
- Rush Copley Medical Center
- Rush Surgicenter at the Professional Building Ltd.
- Rush Oak Book Surgery Center, LLC
- Rush-Copley Surgicenter, LLC

Additionally, none of the health care facilities listed above have been cited for an adverse action in the past three (3) years.

I hereby certify this is true and based upon my personal knowledge under penalty of perjury and in accordance with 735 ILCS 5/1-109.

Sincerely,

Carl Bergetz, JD
Chief Legal Officer
Rush University System for Health

Attachment 9
Safety Net Impact Statement

In accordance with the Illinois Health Facilities Planning Act (20 ILCS 3960/5.4), the applicant provides the following safety net impact statement addressing the following questions presented in the Certificate of Exemption application.

1. The project's material impact, if any, on essential safety net services in the community, to the extent that it is feasible for an applicant to have such knowledge.

This proposed modification will have little, if any, impact on the essential safety net services in the community. As is evidenced by the most recent hospital profile data and the utilization reported at Rush Oak Park Hospital was below 43% for its skilled nursing category of service. This is, in part, due to the availability of other quality providers in the community with both hospital based and free standing skilled nursing options for patients from the community. The data also reflects ample capacity in HSA 7 and within the defined Market Area.

2. The project's impact on the ability of another provider or health care system to cross-subsidize safety net services, if reasonably known to the applicant.

The mission of the HFSRB is to promote effective and efficient utilization of existing facilities as a means to improve overall healthcare delivery. The proposed discontinuation address challenges faced by the applicant, both with regards to patient census and financial impact, and could improve the overall ability of other providers to provide care.

3. How the discontinuation of a service might impact the remaining safety net providers in a given community, if reasonably known by the applicant.

As noted above, there is the potential that this discontinuation will result in a more natural distribution of patients among other area providers, it will allow the Rush Oak Park Hospital to better meet the needs of the community in areas in which this hospital has become a preferred destination for care. The applicant would also note that the majority of patients served by the skilled nursing unit have been Medicare patients, a highly desirable patient population. Less than 5% of patient served at the facility have utilized Medicaid or charity care. Accordingly, we are confident that the impact upon any essential safety net services will be minimal.

Attachment 9
Safety Net Impact

Rush University Medical Center

Safety Net Information per PA 96-0031			
CHARITY CARE			
Charity (# of patients)	**FY16**	**FY17**	**FY18**
Inpatient	539	480	476
Outpatient	12,168	11,655	12,224
Total	**12,707**	**12,135**	**12,700**
Charity (cost In dollars)	**FY16**	**FY17**	**FY18**
Inpatient	$9,593,714	$10,686,523	$7,388,724
Outpatient	$10,340,459	$10,917,270	$10,645,902
Total	**$19,934,173**	**$21,603,793**	**$18,034,626**
MEDICAID			
Medicaid (# of patients)	**FY16**	**FY17**	**FY18**
Inpatient	7,432	6,981	8,134
Outpatient	109,058	107,016	114,735
Total	116,490	113,997	122,869
Medicaid (revenue)	**FY 16**	**FY17**	**FY18**
Inpatient	$92,476,000	$100,059,000	$112,923,000
Outpatient	$32,417,000	$31,698,000	$30,265,000
Total	**$124,893,000**	**$131,757,000**	**$143,188,000**

Attachment 9
Safety Net Impact

Rush Oak Park Hospital

Safety Net Information per PA 96-0031			
CHARITY CARE			
Charity (# of patients)	**FY16**	**FY17**	**FY18**
Inpatient	56	61	45
Outpatient	4,220	3,495	3,602
Total	**4,276**	**3,556**	**3,647**
Charity (cost In dollars)	**FY16**	**FY17**	**FY18**
Inpatient	$532,021	$493,013	$611,142
Outpatient	$2,231,885	$2,303,877	$2,214,229
Total	**$2,763,906**	**$2,796,890**	**$2,825,371**
MEDICAID			
Medicaid (# of patients)	**FY16**	**FY17**	**FY18**
Inpatient	637	658	615
Outpatient	20,898	20,965	22,922
Total	21,535	21,623	23,537
Medicaid (revenue)	**FY 16**	**FY17**	**FY18**
Inpatient	$8,228,461	$8,858,872	$6,870,809
Outpatient	$8,346,140	$9,843,207	$10,675,377
Total	**$16,574,601**	**$18,702,079**	**$17,546,186**

Attachment 9
Safety Net Impact

Rush Copley Medical Center

Safety Net Information per PA 96-0031			
CHARITY CARE			
Charity (# of patients)	**FY16**	**FY17**	**FY18**
Inpatient	186	157	138
Outpatient	778	590	492
Total	**964**	**747**	**630**
Charity (cost In dollars)	**FY16**	**FY17**	**FY18**
Inpatient	$2,191,178	$2,672,294	$2,129,038
Outpatient	$2,357,486	$2.293,079	$1,832,746
Total	**$4,548,664**	**$4,965,373**	**$3,961,784**
MEDICAID			
Medicaid (# of patients)	**FY16**	**FY17**	**FY18**
Inpatient	2,391	2,294	2,183
Outpatient	53,338	49,504	48,381
Total	55,729	51,798	50,564
Medicaid (revenue)	**FY 16**	**FY17**	**FY18**
Inpatient	$36,998,742	$28,109,323	$27,983,450
Outpatient	$19,559,000	$24,639,933	$24,927,322
Total	**$56,557,742**	**$52,749,256**	**$52,910,772**

Attachment 9
Safety Net Impact

Rush Surgicenter at the Professional Bldg. Ltd.

Safety Net Information per PA 96-0031			
CHARITY CARE			
Charity (# of patients)	**FY16**	**FY17**	**FY18**
Inpatient	0	0	0
Outpatient	0	0	0
Total	**0**	0	0
Charity (cost In dollars)	**FY16**	**FY17**	**FY18**
Inpatient	$0	$0	$0
Outpatient	$0	$0	$0
Total	**$0**	**$0**	**$0**
MEDICAID			
Medicaid (# of patients)	**FY16**	**FY17**	**FY18**
Inpatient	0	0	0
Outpatient	0	0	0
Total	0	0	0
Medicaid (revenue)	**FY 16**	**FY17**	**FY18**
Inpatient	$0	$0	$0
Outpatient	$0	$0	$0
Total	**$0**	**$0**	**$0**

Attachment 9
Safety Net Impact

Rush Oak Brook Surgery Center, LLC*

Safety Net Information per PA 96-0031			
CHARITY CARE			
Charity (# of patients)	**FY16**	**FY17**	**FY18**
Inpatient	N/A	N/A	N/A
Outpatient	N/A	N/A	N/A
Total	**N/A**	**N/A**	**N/A**
Charity (cost In dollars)	**FY16**	**FY17**	**FY18**
Inpatient	N/A	N/A	N/A
Outpatient	N/A	N/A	N/A
Total	**N/A**	**N/A**	**N/A**
MEDICAID			
Medicaid (# of patients)	**FY16**	**FY17**	**FY18**
Inpatient	N/A	N/A	N/A
Outpatient	N/A	N/A	N/A
Total	**N/A**	**N/A**	**N/A**
Medicaid (revenue)	**FY 16**	**FY17**	**FY18**
Inpatient	N/A	N/A	N/A
Outpatient	N/A	N/A	N/A
Total	**N/A**	**N/A**	**N/A**

***** The Rush Oak Brook Surgery Center was licensed on January 30, 2019 and there is no charity care or Medicaid data available for fiscal years 2016-2018.

Attachment 9
Safety Net Impact

Rush-Copley Surgicenter, LLC

Safety Net Information per PA 96-0031			
CHARITY CARE			
Charity (# of patients)	**FY16**	**FY17**	**FY18**
Inpatient	0	0	0
Outpatient	1	1	0
Total	**1**	**1**	**0**
Charity (cost In dollars)	**FY16**	**FY16**	**FY16**
Inpatient	$0	$0	$0
Outpatient	$3.316	$3.316	$0
Total	**$3,316**	**$3,316**	**$0**
MEDICAID			
Medicaid (# of patients)	**FY16**	**FY16**	**FY18**
Inpatient	0	0	0
Outpatient	4	3	5
Total	4	3	5
Medicaid (revenue)	**FY 16**	**FY 16**	**FY17**
Inpatient	$0	$0	$0
Outpatient	$1,369	$3,527	$0
Total	**$1,369**	**$3,257**	**$0**

Attachment 10
Charity Care

Rush University Medical Center

CHARITY CARE			
Charity (# of patients)	**FY16**	**FY17**	**FY18**
Inpatient	539	480	476
Outpatient	12,168	11,655	12,224
Total	**12,707**	**12,135**	**12,700**
Charity (cost In dollars)	**FY16**	**FY17**	**FY18**
Inpatient	$9,593,714	$10,686,523	$7,388,724
Outpatient	$10,340,459	$10,917,270	$10,645,902
Total	**$19,934,173**	**$21,603,793**	**$18,034,626**
Net Patient Revenue	**$141,974,443**	**$1,211,537,000**	**$1,304,792,000**
Charity Care as % of Net Revenue	**2.0%**	**1.8%**	**1.4%**

Rush Oak Park Hospital

CHARITY CARE			
Charity (# of patients)	**FY16**	**FY17**	**FY18**
Inpatient	56	61	45
Outpatient	4,220	3,495	3,602
Total	**4,276**	**3,556**	**3,647**
Charity (cost In dollars)	**FY16**	**FY17**	**FY18**
Inpatient	$532,021	$493,013	$611,142
Outpatient	$2,231,885	$2,303,877	$2,214,229
Total	**$2,763,906**	**$2,796,890**	**$2,825,371**
Net Patient Revenue	**$131,232,631**	**$137,305,456**	**$141,974,443**
Charity Care as % of Net Revenue	**2.1%**	**2.0%**	**2.0%**

Attachment 10
Charity Care

Rush Copley Medical Center

CHARITY CARE			
Charity (# of patients)	**FY16**	**FY17**	**FY18**
Inpatient	186	157	138
Outpatient	778	590	492
Total	**964**	**747**	**630**
Charity (cost In dollars)	**FY16**	**FY17**	**FY18**
Inpatient	$2,191,178	$2,672,294	$2,129,038
Outpatient	$2,357,486	$2.293,079	$1,832,746
Total	**$4,548,664**	**$4,965,373**	**$3,961,784**
Net Patient Revenue	**$335,283,001**	**$344,619,000**	**$326,610,672**
Charity Care as % of Net Revenue	**1.4%**	**1.4%**	**1.2%**

Rush Surgicenter at the Professional Bldg. Ltd.

CHARITY CARE			
Charity (# of patients)	**FY16**	**FY17**	**FY18**
Inpatient	0	0	0
Outpatient	0	0	0
Total	**0**	0	0
Charity (cost In dollars)	**FY16**	**FY17**	**FY18**
Inpatient	$0	$0	$0
Outpatient	$0	$0	$0
Total	**$0**	**$0**	**$0**
Net Patient Revenue	**$21,811,265**	$24,329,587	$24,627,088
Charity Care as % of Net Revenue	**0%**	**0%**	**0%**

Attachment 10
Charity Care

Rush Oak Brook Surgery Center, LLC*

CHARITY CARE			
Charity (# of patients)	**FY16**	**FY17**	**FY18**
Inpatient	N/A	N/A	N/A
Outpatient	N/A	N/A	N/A
Total	**N/A**	**N/A**	**N/A**
Charity (cost In dollars)	**FY16**	**FY17**	**FY18**
Inpatient	N/A	N/A	N/A
Outpatient	N/A	N/A	N/A
Total	**N/A**	**N/A**	**N/A**
Net Patient Revenue	N/A	N/A	N/A
Charity Care as % of Net Revenue	**N/A**	**N/A**	**N/A**

***** The Rush Oak Brook Surgery Center was licensed on January 30, 2019 and there is no charity care data available for fiscal years 2016-2018.

Rush-Copley Surgicenter, LLC

CHARITY CARE			
Charity (# of patients)	**FY16**	**FY17**	**FY18**
Inpatient	0	0	0
Outpatient	1	1	0
Total	**1**	**1**	**0**
Charity (cost In dollars)	**FY16**	**FY16**	**FY16**
Inpatient	$0	$0	$0
Outpatient	$3.316	$3.316	$0
Total	**$3,316**	**$3,316**	**$0**
Net Patient Revenue	**$4,706,995**	**$3,342,520**	**$3,363,235**
Charity Care as % of Net Revenue	**0%**	**0%**	**0%**

After paginating the entire completed application indicate, in the chart below, the page numbers for the included attachments:

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