



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

525 WEST JEFFERSON ST. • SPRINGFIELD, ILLINOIS 62761 • (217) 782-3516 • FAX: (217) 785-4111

DOCKET NO: H-07	BOARD MEETING: December 14, 2021	PROJECT NO: 21-032	PROJECT COST: Original: \$21,857,801
FACILITY NAME: Northwestern Medicine Cancer Center Delnor		CITY: Geneva	
TYPE OF PROJECT: Non-substantive			HSA: VIII

PROJECT DESCRIPTION: The Applicants (Northwestern Memorial Healthcare, Delnor Community Hospital d/b/a Northwestern Medicine Delnor Hospital) propose to add a level to an existing 2-story Medical Office Building located on the campus of Northwestern Medicine Delnor Hospital located at 304 South Randall Road, Geneva, Illinois. The expected completion date is August 31, 2024, and the estimated project cost is \$21,857,801.

The purpose of the Illinois Health Facilities Planning Act is to establish a procedure (1) which requires a person establishing, constructing or modifying a health care facility, as herein defined, to have the qualifications, background, character and financial resources to adequately provide a proper service for the community; (2) that promotes the orderly and economic development of health care facilities in the State of Illinois that avoids unnecessary duplication of such facilities; and (3) that promotes planning for and development of health care facilities needed for comprehensive health care especially in areas where the health planning process has identified unmet needs. Cost containment and support for safety net services must continue to be central tenets of the Certificate of Need process. (20 ILCS 3960/2)

The Certificate of Need process required under this Act is designed to restrain rising health care costs by preventing unnecessary construction or modification of health care facilities. The Board must assure that the establishment, construction, or modification of a health care facility or the acquisition of major medical equipment is consistent with the public interest and that the proposed project is consistent with the orderly and economic development or acquisition of those facilities and equipment and is in accord with the standards, criteria, or plans of need adopted and approved by the Board. Board decisions regarding the construction of health care facilities must consider capacity, quality, value, and equity.

Information regarding this application can be found at
<https://www2.illinois.gov/sites/hfsrb/Projects/Pages/Northwestern-Medicine-Cancer-Center-Delnor,-Geneva---21-032.aspx>

EXECUTIVE SUMMARY

PROJECT DESCRIPTION:

- The Applicants (Northwestern Memorial Healthcare, Central DuPage Hospital Association, and Delnor Community Hospital d/b/a Northwestern Medicine Delnor Hospital) propose to expand its outpatient cancer care center through the construction of an additional level to its existing Medical Office Building (MOB), located at 304 Randall Road, Geneva. The project costs are \$21,857,801, and the expected completion date is August 31, 2024.

WHY THE PROJECT IS BEFORE THE STATE BOARD:

- The project is before the State Board because the project is by or on behalf of a health care facility and the cost of the project exceeds the capital expenditure minimum of \$14,557,713.

PURPOSE OF THE PROJECT:

- The Applicants state: *“The purpose of this project is to expand oncology clinic space to meet current and projected demand at Northwestern Medicine Cancer Center Delnor. Cancer is the leading cause of death within the Delnor service area. Between 2014 and 2016, the annual average age-adjusted cancer mortality rate was 142.3 deaths per 100,000 residents in Kane County. Demand for oncology services at Delnor has grown substantially over the last five years. From FY15-FY20, infusion hours at Delnor increased by 59%. Increasing capacity at the Northwestern Medicine Cancer Center Delnor will improve the health of the service area by increasing access to oncology services. The goal of the proposed project is to expand the number of infusion stations and oncology physicians’ office space in the Northwestern Medicine Cancer Center Delnor to meet current and projected demand for oncology services at Delnor.”*

PUBLIC HEARING/COMMENT:

- A public hearing was offered but was not requested. No letters of support or opposition were submitted regarding this project.

SUMMARY:

- The Applicant facility currently contains twenty-one (21) infusion stations. The proposed project will increase this complement to thirty (30), and the infusion center’s dedicated pharmacy, laboratory, and physician’s office space will also undergo renovation.
- The Applicants have addressed a total 10 criteria and did not meet the following:

• State Board Standards Not Met	
Criteria	Reasons for Non-Compliance
Criterion 1120.140 (c) Reasonableness of Project Cost	<p>The Applicants exceeded the State Board standards for</p> <ul style="list-style-type: none">• Site Survey/Site Preparation by \$395,388.• New Construction and Proportionate Contingencies by \$560,392.• Modernization and Proportionate Contingencies by \$228,581. <p>At the end of this report is an explanation for the overages.</p>



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STATE BOARD STAFF REPORT
Project #21-032
Northwestern Medicine Cancer Center Delnor

APPLICATION/SUMMARY CHRONOLOGY	
Applicant(s)	Northwestern Memorial Healthcare, Delnor Community Hospital d/b/a Northwestern Medicine Delnor Hospital
Facility Name	Northwestern Medicine Cancer Center Delnor
Location	304 Randall Road, Geneva, Illinois
Permit Holder	Northwestern Memorial Healthcare
Operating Entity/Licensee	Delnor Community Hospital d/b/a Northwestern Medicine Delnor Hospital
Owner of Site	Delnor Community Hospital d/b/a Northwestern Medicine Delnor Hospital
Gross Square Feet	41,588 GSF (13,391 clinical) (28,197 non-clinical)
Application Received	November 1, 2021
Application Deemed Complete	November 4, 2021
Financial Commitment Date	December 14, 2022
Anticipated Completion Date	August 31, 2024
Review Period Ends	January 3, 2022
Review Period Extended by the State Board Staff?	No
Can the Applicant request a deferral?	Yes
Expedited Review	Yes

I. Project Description

The Applicants (Northwestern Memorial Healthcare, Delnor Community Hospital d/b/a Northwestern Medicine Delnor Hospital) propose to add a level to its existing two-story cancer treatment center located at 304 Randall Road, Geneva, Illinois. The project will result in renovated pharmacy, laboratory, and physician office space, and room for nine (9) additional infusion stations. The project costs are \$21,857,801. The expected completion date is August 31, 2024.

II. Summary of Findings

- A.** State Board Staff finds the proposed project is in conformance with all relevant provisions of Part 1110 (77 ILAC 1110).
- B.** State Board Staff finds that the proposed project is **not** in conformance with Part 1120 (77 ILAC 1120).

III. General Information

The Applicants propose to add one level to an existing two-story cancer care center, located on the campus of Northwestern Medicine Delnor Hospital, in Geneva. The existing cancer care center is located in 26,018 GSF of space on the buildings lower level, that currently provides cancer care services consisting of radiation oncology and infusion therapy (21 stations). The proposed project will add 15,570 GSF of space to the facility, allowing for 9 additional infusion therapy stations, and the modernization pharmacy, laboratory, and physician's office space. Project costs total \$21,857,801, and the expected completion date is August 31, 2024.

Northwestern Medicine Delnor Hospital is located at 304 South Randall Road, Geneva. The cancer center is under the corporate management of Central DuPage Hospital Association, a subsidiary entity of Northwestern Memorial Healthcare. The proposed project is a non-substantive project subject to a Part 1110 and Part 1120 review. Financial commitment will occur after project completion.

IV. Project Uses and Sources of Funds

The Applicants are modernizing pharmacy, laboratory, and physician's office space, and adding 15,570 GSF of newly constructed space to account for these modernizations and the introduction of 9 additional infusion therapy stations. The entirety of the project cost (\$21,857,801) will be funded through cash and securities, and the Applicants have supplied A-Bond Ratings from Standard & Poor's Rating Service (3/18/20), and Moody's Investor's Service (10/16/20).

TABLE ONE				
Project Costs and Sources of Funds				
Project Uses	Reviewable	Non-Reviewable	Total	% of Total
Preplanning Costs	\$63,111	\$136,889	\$200,000	1%
Site Survey Soil Investigation	\$47,333	\$102,667	\$150,000	.9%
Site Preparation	\$536,444	\$1,163,556	\$1,700,000	7.8%
New Construction Contracts	\$1,724,400	\$6,332,545	\$8,056,945	36.9%
Modernization Contracts	\$1,700,850	\$2,981,115	\$4,681,965	21.4%
Contingencies	\$342,525	\$931,366	\$1,273,891	5.7%
Architectural & Engineering Fees	\$264,000	\$616,000	\$900,000	4.1%
Consulting and Other Fees	\$394,444	\$855,556	\$1,250,000	5.7%
Movable or Other Equipment	\$1,170,484	\$1,829,516	\$3,000,000	13.6%
Other Costs to be Capitalized	\$203,533	\$441,467	\$645,000	2.9%
Total Uses of Funds	\$6,467,125	\$15,390,676	\$21,857,801	100.00%
Project Sources of Funds	Reviewable	Non-Reviewable	Total	% of Total
Cash/Securities	\$6,467,125	\$15,390,676	\$21,857,801	100.00%

TABLE ONE Project Costs and Sources of Funds				
Project Uses	Reviewable	Non-Reviewable	Total	% of Total
Total Sources of Funds	\$6,467,125	\$15,390,676	\$21,857,801	100.00%

V. Background of the Applicant

A) Criterion 1110.110(a) – Background of the Applicant

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

- A) A listing of all health care facilities currently owned and/or operated by the Applicant in Illinois or elsewhere, including licensing, certification, and accreditation identification numbers, as applicable.
- B) A listing of all health care facilities currently owned and/or operated in Illinois, by any corporate officers or directors, LLC members, partners, or owners of at least 5% of the proposed health care facility.
- C) Authorization permitting HFSRB and IDPH access to any documents necessary to verify the information submitted, including, but not limited to official records of IDPH or other State agencies; the licensing or certification records of other states, when applicable; and the records of nationally recognized accreditation organizations. Failure to provide the authorization shall constitute an abandonment or withdrawal of the application without any further action by HFSRB.
- D) An attestation that the Applicant have had no *adverse action*¹ taken against any facility they own or operate, or a listing of adverse action taken against facilities the Applicant own.

1. The Applicants supplied a list containing 18 facilities under their full or partial the ownership (application, p. 48). The Applicants provided signed certification pages (application pgs. 10-11), serving as attestation that there has been no adverse action taken against facilities owned by Applicants during the three (3) years prior to filing the application.
2. The signed certification pages also contain authorization permitting the Illinois Health Facilities and Services Review Board and the Illinois Department of Public Health to have access to any documents necessary to verify information submitted in connection to the Applicant's certificate of need to add surgical specialties. The authorization includes but is not limited to official records of IDPH or other State agencies; the licensing or certification records of other states, when applicable; and the records of nationally recognized accreditation organizations.
3. The site is owned by Delnor Community Hospital, and evidence of this can be found at pages 29-33 of the application for permit.
4. Compliance with Executive Order #2006-05 and the Illinois State Agency Historic Resources Preservation Act/Flood Plains Act is located on pages 35-38 of the application.

¹Adverse action is defined as a disciplinary action taken by IDPH, CMMS, or any other State or federal agency against a person or entity that owns or operates or owns and operates a licensed or Medicare or Medicaid certified healthcare facility in the State of Illinois. These actions include, but are not limited to, all Type "A" and Type "AA" violations." (77 IAC 1130.140)

5. Certificates of Good Standing from the State of Illinois has been provided at pages 27-28 of the Application for Permit.

VI. Purpose of Project, Safety Net Impact Statement and Alternatives

The following three (3) criteria are informational; no conclusion on the adequacy of the information submitted is being made.

A) Criterion 1110.110 (b) Purpose of the Project

To demonstrate compliance with this criterion the Applicant must document that the project will provide health services that improve the health care or well-being of the market area population to be served.

- The Applicants state: *“The purpose of this project is to expand oncology clinic space to meet current and projected demand at Northwestern Medicine Cancer Center Delnor. Cancer is the leading cause of death within the Delnor service area. Between 2014 and 2016, the annual average age-adjusted cancer mortality rate was 142.3 deaths per 100,000 residents in Kane County. Demand for oncology services at Delnor has grown substantially over the last five years. From FY15 -FY20, infusion hours at Delnor increased by 59%. Increasing capacity at the Northwestern Medicine Cancer Center Delnor will improve the health of the service area by increasing access to oncology services. The goal of the proposed project is to expand the number of infusion stations and oncology physicians’ office space in the Northwestern Medicine Cancer Center Delnor to meet current and projected demand for oncology services at Delnor”.*

B) Criterion 1110.110 (c) - Safety Net Impact Statement

This project is a non-substantive project, and a safety net impact statement is not required. The Applicants reported no Charity Care data for Center for the two facilities under ownership/management of the Applicants (see Table One).

TABLE TWO			
Charity Care Information			
Delnor Community Hospital			
	FY2018	FY2019	FY2020
Net Patient Revenue	\$354,008,975	\$376,622,449	\$363,610,720
Amount of Charity Care (Charges)	\$16,825,594	\$20,496,851	\$12,043,131
Cost of Charity Care	\$1,904,436	\$1,918,515	\$2,736,476
Northwestern Memorial HealthCare			
Net Patient Revenue	\$4,877,615,420	\$5,665,736,442	\$5,570,736,744
Amount of Charity Care (Charges)	\$321,715,102	\$354,450,428	\$411,965,498
Cost of Charity Care	\$65,929,276	\$68,334,946	\$89,728,349

C) Criterion 1110.110 (d) - Alternatives to the Project

To demonstrate compliance with this criterion the Applicant must document all alternatives to the proposed project that were considered.

The Applicant considered two alternatives regarding this project, to include the option chosen.

1) Use Space in Existing Medical Office Building on Campus

The Applicants rejected this alternative because the office buildings proximal to the NM Cancer Center lack sufficient space (15,500 GSF), to accommodate a project of its size. No project costs were identified with this alternative.

2) Relocate Patients to Infusion Center at Warrenville Location

The Applicant notes Northwestern Medicine Cancer Center Warrenville offer infusion services, has 24 infusion stations, and is located less than 15 miles from the Applicant facility. However, it is noted that the Warrenville facility has experienced exponential growth in its utilization in the last 5-6 years, and notes there would be insufficient capacity to absorb the patient load from the Delnor Geneva campus. No project costs were identified with this alternative.

VII. Project Scope and Size, Utilization and Assurances

A) Criterion 1110.120 (a) - Size of Project

To demonstrate compliance with this criterion the Applicant must document that the proposed size of the project is in compliance with the State Board Standard in Part 1110 Appendix B.

The Applicants propose to add nine (9) infusion stations to an existing 21-station infusion center, located on the campus of Northwestern Medicine Delnor Community Hospital, in Geneva. The proposed expansion will result in a total of 30 private infusion bays. The infusion center will consist of 10,273 GSF of space. There is no state standard for infusion services. The dedicated pharmacy will also be expanded to accommodate additional Chemo hood rooms, pyxis machines and additional workspace. The pharmacy space will be 1,364 GSF, and no state standard exists for this space. Lastly, the Infusion Center's Laboratory will be expanded as well to meet the increased operational need, consisting of 1,754 GSF of space. No state standard exists for Laboratory services. Non-clinical components affected by the expansion/modernization include physician office space (14,682 GSF), administrative space (4,619 GSF), waiting rooms/public access (6,178 GSF), and mechanical rooms space (2,718 GSF). It appears the space addressed in this criterion is inapplicable to the proposed project.

B) Criterion 1110.120(b) – Projected Utilization

To demonstrate compliance with this criterion the Applicant must document that the facility will be at target occupancy as specified in Part 1110.

The proposed project seeks to expand the services (21-30 infusion stations), at Northwestern Medicine Cancer Care Center Delnor. While no state standard exists for infusion utilization, the applicants report using a 65% occupancy benchmark, and notes

an average annual increase in these services of 11.7%. No utilization standards exist for infusion or the other services included in this project.

VIII. Criterion 1110.270 - Clinical Service Areas Other than Categories of Service

The Applicants propose a major modernization/expansion project for its Infusion Services on the campus of Northwestern Medicine Delnor Hospital campus, in Geneva. In addition to the expansion of its infusion services from 21 stations to 30, the Applicants propose to modernize/expand it support pharmacy and laboratory services. The non-clinical components of the project involve modernization/expansion of physician's office space, administrative space, waiting rooms/public access, and mechanical rooms space. None of the mentioned services are applicable to State Board size/utilization standards.

A) Infusion Services

The Applicants propose to add 9 infusion stations to its 21-station complement, resulting in an all private 30-station infusion center in 10, 273 GSF of space. While infusion services have no applicable state standards, the industry has adopted a utilization benchmark of 65% to facilitate strategic planning in this area. Table Three shows both historical and projected utilization to illustrate the annual average reported growth rate of 11.7%, projected through FY 2025.

TABLE THREE				
Historical/Projected Utilization Northwestern Medicine Cancer Center Delnor				
Year	Infusion Hours	# of Stations	Annual Hours of Operation	Infusion Utilization
FY 15	19,034	19	46,930	41%
FY 16	23,562	19	46,930	50%
FY 17	24,025	19	46,930	51%
FY 18	25,964	21	51,870	50%
FY 19	26,692	21	51,870	51%
FY 20	30,188	21	51,870	58%
FY 21	33,101	21	51,870	64%
FY 22	36,295	21	51,870	70%
FY 23	39,798	21	51,870	77%
FY 24	43,638	30	74,100	59%
FY 25	47,850	30	74,100	65%

The proposed expansion of Pharmacy and Laboratory services at the Cancer Center will support the projected growth in utilization of the infusion center, and neither have applicable state standards for space or utilization.

IX. Financial Viability

A) Criterion 1120.120 - Availability of Funds

B) Criterion 1120.130 – Financial Viability

To demonstrate compliance with these criteria the Applicants must document sufficient cash to fund the proposed project and that the Applicants are financially viable.

The Applicants are funding this project with cash/securities totaling \$21,857,804. The Applicant (Northwestern Memorial Healthcare) has supplied proof of an Aa2 Bond Rating from Moody's Investors Service (October 2020), proof of an AA+ Bond Rating from Standard & Poor's Ratings Services (March 2020) and Audited Financial Statements. The bond rating and the results shown in Table Four prove the Applicants have sufficient cash to fund the cash portion of the project. The Applicants have successfully addressed this criterion.

TABLE FOUR		
Northwestern Memorial Healthcare		
Years ended December 31st, 2019, 2020		
[Audited Data]		
Year	2019	2020
Cash	\$329,646	\$1,336,516
Current Assets	\$1,764,720	\$2,490,475
Total Assets	\$12,528,131	\$14,104,628
Current Liabilities	\$1,636,766	\$2,159,963
LTD	\$51,731,688	\$39,673,876
Total Liabilities	\$4,254,084	\$5,014,310
Net Patient Revenue	\$5,665,736	\$5,570,737
Total Revenues	\$6,052,028	\$6,288,427
Income from Operations	\$283,529	\$293,000
Net Income	\$346,551	\$813,961
Source: Northwestern Healthcare Audited Financial Statements, #21-008 Application File		

X. Economic Feasibility

A) Criterion 1120.140(a) – Reasonableness of Financial Arrangements

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

To demonstrate compliance with this criterion the Applicants must document the terms of the debt financing and attest the financing will be at the lowest cost available to the Applicants.

The Applicants are funding this project with cash/securities totaling \$21,857,804. The Applicant (Northwestern Memorial Healthcare) has supplied proof of an Aa2 Bond Rating from Moody's Investors Service (October 2020), proof of an AA+ Bond Rating from Standard & Poor's Ratings Services (March 2020) and Audited Financial Statements. The bond rating and the results shown in Table Four prove the Applicants have sufficient cash to fund the project in its entirety, and there will be no leases executed or debt financing incurred. The Applicants have successfully addressed this criterion.

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

To demonstrate compliance with this criterion the Applicants must document that the project costs are reasonable by the meeting the State Board Standards in Part 1120 Appendix A.

Only Clinical Costs are reviewed in this criterion. The clinical gross square footage for new construction is 3,832 GSF, and the clinical gross square footage for modernization is 6,670 GSF. The Applicants have met the State Board Standards for the following criteria, and a positive finding result.

Pre-Planning Costs – These costs total \$63,111, which is .13% of the construction, modernization, contingencies, and equipment costs (\$4,938,269). This appears to be in conformance with the State standard of 1.8%.

Site Survey/Site Preparation – These costs total \$583,777, which is 15.5% of the construction, modernization, and contingency costs (\$3,767,775). This appears to be in excess of the State standard of 5.0%. or \$188,389. The difference is \$395,388.

New Construction and Proportionate Contingencies – These costs total \$1,896,690 or \$494.96 GSF. ($\$1,896,690/3,832=\494.96). This appears **high** when compared to the State Board Standard of \$348.72/GSF [new construction 2023 mid-point of construction]. The difference is \$560,392 [$\$494.96-\$348.72=\146.24 per GSF x 3,832 GSF = \$560,392].

Modernization and Proportionate Contingencies – These costs total \$1,871,085 or \$280.25 per GSF. ($\$1,871,085/6,670=\280.52). This appears **high** when compared to the State Board Standard of \$246.25/GSF [modernization 2023 mid-point of construction]. The difference is \$228,581 [$\$280.52-\$246.25=\34.27 per GSF x 6,670 GSF = \$228,581].

Contingencies/New Construction – These costs total \$172,290 and are 9.9% of new construction costs (\$1,724,400). This appears reasonable when compared to the State Board Standard of 10%.

Contingencies/Modernization – These costs total \$170,235 and are 10% of modernization costs (\$1,700,850). This appears reasonable when compared to the State Board Standard of 10%-15%.

Architectural and Engineering Fees/New Construction – These costs total \$142,852 and are 7.5% of new construction and contingencies (\$1,896,690). These costs appear reasonable when compared to the State Board Standard of 6.22% - 9.34%.

Architectural and Engineering Fees/Modernization – These costs total \$141,148 and are 7.5% of modernization and contingencies (\$1,871,085). These costs appear reasonable when compared to the State Board Standard of 6.54% - 9.82%.

Consulting and Other Fees – These costs are \$394,444. The State Board does not have a standard for these costs.

Movable Equipment – These costs total \$1,170,484 and are not reviewable by the State Board (hospital).

Other Costs to be Capitalized – These costs total \$203,533. The State Board does not have a standard for these costs. These fees include permits and fees (\$200,000), landscaping (\$254,984), signage (\$30,000), tree removal (\$70,000), and utility fees from the City of Geneva (\$90,016).

The Applicants exceeded the applicable State standards for site survey/soil investigation/site preparation, new construction and proportionate contingencies, and modernization and proportionate contingencies. The Applicants supplied a detailed cost structure for these criteria at the end of this report. A negative finding results for this criterion.

D) Criterion 1120.140(d) – Projected Operating Costs

The Applicants are projecting \$2,335.86 in operating expenses per unit of service during its first year of service (2025). The Board does not have a standard for this criterion.

E) Criterion 1120.140(e) – Effect of the Project on Capital Costs

The Applicants are projecting capital costs of \$6.93 per equivalent patient day. The Board does not have a standard for this criterion.

The Applicants identified critical project components that attributed to the mentioned overages in Criterion 1120.140 (c) Reasonableness of Project Costs

Site Survey/ Soil Investigation and Site Preparation \$583,777 (clinical)

Expenses related to this criterion involve geotechnical monitoring, survey, storm water protection, and analysis of site soils. Site preparation involves general site work (earth moving, shoring, unit paving), utility company service work, and extensive storm water detention work.

New Construction and Proportionate Contingencies \$1,896,690 (clinical)

Modernization and Proportionate Contingencies: \$1,871,085 (clinical)

Substructure

- 14” thick foundation walls, in opposition to 12” thick walls
- Rammed aggregate piers for existing soil stabilization
- 5” thick slab on grade, in opposition to 4” thick slab on grade

Shell

- Steel columns in opposition to concrete columns
- Steel roof structure in opposition to concrete roof structure
- Stone, brick, and metal with stud exterior walls in opposition to brick with CMU enclosure
- Curtain wall instead of wood window
- Aluminum doors instead of wood doors
- Skylights

Interiors

- Drywall partitions that extend above the ceiling to the deck and include insulation and framing
- Sliding door for each infusion bay
- Ceramic tiles
- 2x2 ceiling tiles in opposition to 1x1 tiles
- Specialty paint coating that has a higher cost of material and installation

Services

The project includes additional MEP services not included in the base RS Means number, such as:

- Gas boiler
- Lighting controls
- Security system
- 400kW generator

Equipment & Furnishings

- Specialty millwork that includes custom glove dispenser holders and paper towel dispenser holders

A detailed map of the Geneva, Illinois area and surrounding regions. The map shows major highways, including Interstate 88 (I-88) running north-south and several state routes. Key locations labeled include Kaneville, Elburn, Batavia, North Aurora, and Naperville. A callout box points to the Northwestern Medicine Cancer Center at 304 Randall Rd, Geneva, IL 60134. The map also shows the DuPage Airport and various local roads and landmarks. A scale bar at the bottom indicates distances in miles (0 to 10).