



**DORIS TURNER**  
**STATE SENATOR • 48th DISTRICT**

September 11, 2023

Chairwoman Debra Savage and Members  
Illinois Health Facilities and Services Review Board  
525 W. Jefferson Street, 2<sup>nd</sup> Floor  
Springfield, IL 62761

Re: Springfield Clinic – Springfield Clinic Ambulatory Surgery Center Establishment of Cardiac Catheterization

Dear Chairwoman Savage and Members of the Illinois Health Facilities and Services Review Board:

I am writing to express my opposition to Springfield Clinic's Certificate of Need ("CON") application to establish cardiac catheterizations at the Springfield Clinic Ambulatory Surgery Center. It is my belief that, if approved, this project will lead to increased health disparities for our community.

As the State Senator from Illinois' 48<sup>th</sup> District, I serve on the Health Appropriations Committee and was proud to sponsor Illinois' Health Care and Human Service Reform Act (now reflected as Public Act (102-0004), that will tangibly expand health equity and establish the Anti-Racism Commission focused on eliminating systemic racism. I have also served on the Board of Directors for various health-focused organizations and was a founding board member of the SIU Federally Qualified Health Center. I currently serve on the Sangamon County Board of Health.

The proposed Springfield Clinic project would occur in Ward 2 of Springfield, part of my 48<sup>th</sup> Senate District and the city in which I was born and raised my family. According to the Heartland Alliance for Human Needs & Human Rights, Senate District 48 has over 40,000 people living in poverty and 17,335 in extreme poverty. Ward 2 encompasses portions of Census Tracts 8, 14, 15, 17, 23, 24, and 25. In each of these specific census tracts, the number of residents who are considered low income range from 50.49% to 85.06% (2017 FFIEC Geocode Census Report). Economic indicators show Black residents in Springfield fare poorer than white residents. According to Governing analysis, the median income of a Black household is \$26,572, while the median income of a white household is \$63,397. At 41%, the Springfield area's Black poverty rate is higher than all the downstate Illinois cities studied. The Springfield area's white poverty rate is 11% (Governing, 2019). In terms of earnings, the median income of a Black households in Springfield is 42% less than white households' income. This is the largest discrepancy in the nation (Governing, 2019). Approving the proposed project would be furthering these disheartening statistics.

While cardiac catheterization is a common procedure used to diagnose or treat heart problems, it does not come without risk. Heart attacks, strokes, bleeding, and blood clots are just some of the complications that could arise with the procedure. These risks are why cardiac catheterizations should be performed in a supervised hospital setting where resources are available to minimize the opportunity for them to become major complications, unlike an ambulatory surgery setting.

*Not paid for at Taxpayers' Expense.*



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In addition to this increased chance for patient harm, the approval of this project would also worsen health disparities among people of color and marginalized groups. As you are aware, Medicaid is the public health insurance program funding health care for low-income families. It is estimated that 26% of all Illinois residents are covered by Medicaid, and almost 86% of those covered are people of color.

Yet, Springfield Clinic's CON application clearly states patients covered by Medicaid comprise only 5% of their total cardiology visits. Unlike our Illinois hospitals, which provide billions of dollars in true charity care annually and take care of all patients regardless of their ability to pay, Springfield Clinic provides no charity care. In fact, the Safety Net Impact Statement in the application highlights that payment plans would be necessary for those not covered under a third-party insurance plan. Simply put, the increased patient access referenced in support for this project will not be gained by the Medicaid or uninsured population. Instead, the for-profit entity will redirect commercially insured patients from hospitals well-equipped and most capable to safely provide this service – the same hospitals demonstrating stalwart support and service to their communities before, during, and after the COVID-19 pandemic.

I trust and believe that the Illinois Health Facilities and Services Review Board prioritizes equity, fairness, and quality of care for patients when making decisions that impact the health and well-being of Illinois residents. Accordingly, I encourage you to oppose this request for cardiac catheterization services, project #22-027.

Sincerely,



Doris Turner  
State Senator

cc: John Kniery