



STATE OF ILLINOIS

## HEALTH FACILITIES AND SERVICES REVIEW BOARD

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

<b>DOCKET NO:</b> H-06	<b>BOARD MEETING:</b> March 21, 2023	<b>PROJECT NO:</b> 22-041	<b>PROJECT COST:</b>  Original: \$4,350,423
<b>FACILITY NAME:</b> Illinois Bone & Spine Institute		<b>CITY:</b> Elmhurst	
<b>TYPE OF PROJECT:</b> Substantive			<b>HSA:</b> VII

**PROJECT DESCRIPTION:** The Illinois Back & Neck Institute, PLLC d/b/a Illinois Bone & Spine Institute, is asking the State Board to approve the establish an ASTC at 300 W. Butterfield Rd., Elmhurst, Illinois. The cost to the project is \$4,350,423. The expected completion date is December 31, 2023.

**Information regarding this Application can be found at:**

<https://www2.illinois.gov/sites/hfsrb/Projects/Pages/22-041.aspx>

## EXECUTIVE SUMMARY

### **PROJECT DESCRIPTION:**

- The Illinois Back & Neck Institute, PLLC d/b/a Illinois Bone & Spine Institute, is asking the State Board to approve the establish an ASTC at 300 W. Butterfield Rd., Elmhurst, Illinois. The cost to the project is \$4,350,423. The expected completion date is December 31, 2023.
- Dr. Neema Bayran was approved by the State Board in early 2018 (Permit #17-073) to establish an ASTC performing **orthopedic and pain management surgical specialties** at 360 West Butterfield Rd., Suite 100, in Elmhurst, Illinois at a cost of \$790,000. The ASTC was licensed May 2, 2021.
- In conjunction with this Application for Permit #22-041 the Applicant has applied for Permit to discontinue the ASTC at 360 W. Butterfield Road, Elmhurst, Illinois (#23-009).

### **WHY THE PROJECT IS BEFORE THE STATE BOARD:**

- The project is before the State Board because the project proposes the establishment of a health care facility.

### **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 has addressed 21 of 23 criteria of the State Board with two of the criteria not being addressed by the Applicant.
- The expected payor mix of the Applicant 67% commercial, 23% Medicare, 2% Medicaid, Other 5% and 3% charity.

State Board Standards Not Met	
Criterion	Reasons for Non-Compliance
77 ILAC 1110.235 (c)(6)-Service Accessibility	There are existing ASTCs in the 10-mile GSA that have the capacity to absorb the Applicants workload. State Board staff number of hospitals and ASTCs that could be classified as underperforming. See TABLE THREE.
77 ILAC 1110.235 (c)(7)(A) through (C)-Duplication of Service	The establishment of this ASTC would result in a duplication of service in this 10-mile GSA.



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**STATE BOARD STAFF REPORT**

**Project #24-041**

**Illinois Bone & Spine Institute**

<b>APPLICATION/SUMMARY CHRONOLOGY</b>	
Applicant(s)	Illinois Back & Neck Institute, PLLC d/b/a Illinois Bone & Spine Institute
Facility Name	Illinois Back and Neck Institute
Location	300 West Butterfield Rd., Elmhurst, Illinois
Permit Holder	Illinois Back & Neck Institute, PLLC d/b/a Illinois Bone & Spine Institute
Owner of Site	300 West Butterfield, LLC
Application Received	November 16, 2022
Application Deemed Complete	November 17, 2022
Anticipated Completion Date	December 31, 2023
Review Period Ends	March 16, 2023
Review Period Extended by the State Board Staff?	No
Can the Applicant request a deferral?	Yes

**I. Project Description**

The Illinois Back & Neck Institute, PLLC d/b/a Illinois Bone & Spine Institute, is asking the State Board to approve the establish an ASTC at 300 W. Butterfield Rd., Elmhurst, Illinois. The cost to the project is \$4,350,423. The expected completion date is December 31, 2023.

**II. Summary of Findings**

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

**III. General Information**

Illinois Back & Neck Institute, PLLC d/b/a Illinois Bone & Spine Institute is owned by Dr. Neema Bayran, M.D. Dr. Bayran also owns the property for the proposed ASTC. This is a substantive project subject to a Part 1110 and Part 1120 review. Project financial commitment will occur after project approval.

Dr. Neema Bayran was approved by the State Board (Permit #17-073) to establish an ASTC performing orthopedic and pain management surgical specialties at 360 West Butterfield Rd., Suite 100, in Elmhurst, Illinois at a cost of \$790,000. The ASTC was licensed May 2, 2021.

#### IV. Project Uses and Sources of Funds

The project is being funded by cash in the amount of \$150,000, a mortgage in the amount of \$3,129,000 and the fair market value of a lease of \$1,071,422.

<b>TABLE ONE</b> Uses and Sources of Funds			
Use of Funds	Reviewable	Non-reviewable	Total
New Construction Contracts	\$791,438	\$1,030,286	\$1,821,724
Contingencies	\$78,932	\$134,977	\$213,909
Architectural and Engineering Fees	\$67,204	\$87,643	\$154,847
Consulting and Other Fees	\$75,365	\$98,287	\$173,652
Movable Equipment	\$466,750	\$88,250	\$555,000
Net Interest Expense	\$31,625	\$41,244	\$72,869
FMV of Lease	\$464,997	\$606,425	\$1,071,422
Other Costs to Capitalized	\$124,558	\$162,442	\$287,000
Total Uses	\$2,100,869	\$2,249,554	\$4,350,423
Source of Funds			
Cash	\$65,100	\$84,900	\$150,000
Mortgage	\$1,357,986	\$1,771,014	\$3,129,000
Leases	\$464,997	\$606,425	\$1,071,422
Total Sources of Funds	\$1,888,083	\$2,462,339	\$4,350,422

#### V. Background of the Applicant, Safety Net Impact Statement, Purpose of the Project

- A. Criterion 1110.110 (a) – Background of the Applicant
- B. Criterion 1110.110 (b) – Purpose of the Project
- C. Criterion 1110.110 (c) – Safety Net Impact Statement
- D. Criterion 1110.110 (d) – Alternatives to the Project

##### A) Background of the Applicant

The Applicant has certified that there have been no adverse action taking against any facility owned and/or operated by the Applicant during the three years prior to filing of the application. The Applicant also certifies that there have been no individuals cited, arrested, taken into custody, charged with, indicted, convicted, or tried for, or pled guilty to the commission of any felony or misdemeanor or violation of the law, except for minor parking violations; or the subject of any juvenile delinquency or youthful offender proceeding. The Applicant permits the 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.

##### B) Purpose of the Project

The purpose of this project is to seek approval from the State Board to move an existing ASTC located at 360 W. Butterfield Road, Suite 100, Elmhurst, Illinois to 300 W

Butterfield Road, Elmhurst, Illinois approximately .3 miles. The Applicant is asking the State Board to approve a NEW location owned by the Dr. Neema Bayran. The Applicant states the lease for the current space expires in 2024 and the current building owner has been unwilling to enter a long-term lease with the licensee. The Applicant believes the continued operation of the facility is not economically feasible and threatens the facility's long-term financial viability. The Applicant believes control over the physical site will ensure the uninterrupted operation of the new facility.

### C) Safety Net Impact Statement

The Applicant states the Illinois Bone and Joint Institute is a new entity and has no applicable historical data. According to the Applicant it is anticipated that the proposed facility will have a positive material impact on essential safety net services in the community. According to the application Dr. Bayran and his practice have long maintained a commitment to servicing diverse community in the Chicago and Chicagoland area. The diversity has included both racial and economic diversity. This is evidenced by the location of their current physician practice sites, and the proposed business plan for the facility which intends to service Medicaid patients and patients without regard to their ability to pay for procedures.

The Table below outlines the Applicants' projected payor mix along with the 3-year average of ASTCs in the HSA 7 Health Service Area.

<b>TABLE TWO</b>			
Payor Mix			
Payor	Applicant	3-year Average HSA-7	
	% Of Patients	% Of Patients	% Of Revenue
Commercial	67%	60.23%	71.00%
Medicare	23%	32.91%	19.43%
Medicaid	2%	2.53%	2.07%
Other	5%	4.31%	7.50%
Charity	3%	0.28%	0.18%

#### **D) Alternatives to the Project**

**The Applicant considered four alternatives to the proposed project.**

**Maintain the Status Quo** was rejected because the Applicant states the current location's lease expires in 2024 and a long-term lease is not available. **Utilizing other facilities** was rejected because according to the Applicant other facilities did not have the capacity to accommodate the demand for the physician services. **Proposing a project of greater or lesser scope** was rejected because these two alternatives would not meet the needs of the community. Referring patients to hospitals was rejected because according to the Applicant it would increase cost to patients and payer.

#### **VI. Size of the Project, Projected Utilization**

##### **Criterion 1110.120 (a) – Size of the Project**

##### **Criterion 1110.120 (b) – Projected Utilization**

##### **A) Size of the Project**

The Applicant is proposing one operating room at 2,737 GSF of space. This is below the State Board Standard of 2,750 GSF per operating room.

##### **B) Projected Utilization**

The Applicant is projecting 1,386 patients and 1,004 hours in the first year of operation. These referrals are based upon the utilization of the existing facility over the past 12 months. The 1,004 hours justifies the one operating room being requested.

#### **VIII. Non-Hospital Based Ambulatory Surgical Treatment Center Services**

77 ILAC 1110.235 (c)(2)(B)(i) & (ii)	–	Service to GSA Residents
77 ILAC 1110.235 (c)(3)(A) & (B) or (C)	–	Service Demand – Establishment
77 ILAC 1110.235 (c)(5)(A) & (B)	–	Treatment Room Need Assessment
77 ILAC 1110.235 (c)(6)	–	Service Accessibility
77 ILAC 1110.235 (c)(7)(A) through (C)	–	Unnecessary Duplication Maldistribution
77 ILAC 1110.235 (c)(8)(A) & (B)	–	Staffing
77 ILAC 1110.235 (c)(9)	–	Charge Commitment
77 ILAC 1110.235 (c)(10)(A) & (B)	–	Assurance

##### **A) (Formula Calculation)**

As stated in 77 Ill. Adm. Code 1100, no formula need determination for the number of ASTCs and the number of surgical/treatment rooms in a geographic service area has been established. Need shall be established pursuant to the applicable review criteria of this Part.

##### **B) Service to Geographic Service Area Residents**

The Applicants shall document that the primary purpose of the project will be to provide necessary health care to the residents of the geographic service area (GSA) in which the proposed project will be physically located.

i) *The Applicants shall provide a list of zip code areas (in total or in part) that comprise the GSA. The GSA is the area consisting of all zip code areas that are located within the established radii outlined in 77 Ill. Adm. Code 1100.510(d) of the project's site.*

ii) *The Applicants shall provide patient origin information by zip code for all admissions for the last*

*12-month period, verifying that at least 50% of admissions were residents of the GSA. Patient origin information shall be based upon the patient's legal residence (other than a health care facility) for the last 6 months immediately prior to admission.*

The established radii for a facility located in Suburban Cook and DuPage County is 10-miles per 77 ILAC 1100.510. The Applicant identified 28 zip codes in this 10-mile service area with a population of approximately 1.45 million residents. The Applicants identified patients by zip code of residence for the latest 12-month period. Of the 965 patients the Applicant provided zip code information seen 621 patients resided in these 28-zip codes. [Application for Permit page 68]

### **3) Service Demand – Establishment of an ASTC Facility or Additional ASTC Service**

#### **5) Treatment Room Need Assessment**

*The Applicants shall document that the proposed project is necessary to accommodate the service demand experienced annually by the Applicants, over the latest 2-year period, as evidenced by historical and projected referrals.*

In past 12-months the Applicant provided care to 1,368 patients at the existing ASTC. As documented above the 1,004 hours justifies the one operating room being requested. Based upon Part 1110 Appendix B that Applicant has sufficient service demand to justify the one operating room.

#### **6) Service Accessibility**

*The proposed ASTC services being established or added are necessary to improve access for residents of the GSA. The Applicants shall document that at least one of the following conditions exists in the GSA:*

- A) There are no other IDPH-licensed ASTCs within the identified GSA of the proposed project.*
- B) The other IDPH-licensed ASTC and hospital surgical/treatment rooms used for those ASTC services proposed by the project within the identified GSA are utilized at or above the utilization level specified in 77 Ill. Adm. Code 1100.*
- C) The ASTC services or specific types of procedures or operations that are components of an ASTC service are not currently available in the GSA or that existing underutilized services in the GSA have restrictive admission policies.*
- D) The proposed project is a cooperative venture sponsored by 2 or more persons, at least one of which operates an existing hospital. Documentation shall provide evidence that:*
  - i) The existing hospital is currently providing outpatient services to the population of the subject GSA.*
  - ii) The existing hospital has sufficient historical workload to justify the number of surgical/treatment rooms at the existing hospital and at the proposed ASTC, based upon the treatment room utilization standard specified in 77 Ill. Adm. Code 1100.*
  - iii) The existing hospital agrees not to increase its surgical/treatment room capacity until the proposed project's surgical/treatment rooms are operating at or above the utilization rate specified in 77 Ill. Adm. Code 1100 for a period of at least 12 consecutive months; and*
  - iv) The proposed charges for comparable procedures at the ASTC will be lower than those of the existing hospital.*

#### **Applicants Response in Part:**

The Applicant proposes to establish an ASTC with one operating room. The Applicant in addressing this criterion stated in part “*Ten of fourteen existing surgery centers within 10 miles of the proposed facility offer ophthalmological services. Two of fourteen existing surgery centers within 10 miles of the proposed facility are associated or owned by hospital systems and serve patients from those facilities. The DMG Surgical Center is operating at*

*or above the state standard for utilization of their facility and is not currently a destination for Illinois Back and Neck patients. Hinsdale Surgical Center is nearing the state standard for four operating rooms and offers procedures in 11 categories of service, and finally Midwest Center of Day Surgery does have some available capacity but has not been a facility that has service Illinois Back and Neck Institute patients in the pasty and serviced no Medicaid patients according to their last several annual surveys while offered procedures in 6 categories of service” [Application for Permit page 75].*

### **Board Staff Analysis**

The Applicants are required to meet one of four conditions outlined in rule. Pain Management and Orthopedic surgical service is available within the 10-mile GSA. The Applicants identified 14 ASTCs one being the Applicant’s existing facility and no hospitals as required that are in the 10-mile GSA. Of the 14 ASTCs, one discontinued (Eye Surgery Center Hinsdale), one performs gastro procedures only (Chicago Prostate Cancer Surgery Center), one DuPage Eye Surgery performs Ophthalmology procedures, and one performs OB/GYN procedures (Ambulatory Surgicenter of Downers Grove). Of the nine remaining ASTCs, six ASTCs can accommodate the Applicants’ workload. Of the six hospitals three have excess capacity.

<b>TABLE THREE</b>				
<b>ASTCs and Hospitals in the 10-mile GSA</b>				
<b>ASTC</b>	<b>CITY</b>	<b>Rooms</b>	<b>Hours</b>	<b>Occ</b>
Aiden Center for Day Surgery	Addison	6	903	10%
DMG Surgicenter	Lombard	11	14,213	86%
Elmhurst Outpatient Surgery Center	Elmhurst	8	5,005	42%
Hinsdale Surgical Center	Hinsdale	6	5,004	56%
Loyola University ASC	Oakbrook Terrace	3	536	12%
Midwest Center for Day Surgery	Downers Grove	6	4,668	52%
Rush Oak Brook Surgery Center	Oak Brook	8	10,882	91%
Salt Creek Surgery Center	Westmont	4	5,803	97%
Ortho Tec Surgery Center	Elmhurst	1	544	36%
Total		53		
<b>Hospitals</b>				
Advocate Good Samaritan Hospital	Downers Grove	23	21,264	62%
Adventist Hinsdale Hospital	Hinsdale	21	21,892	69%
Elmhurst Memorial Hospital	Elmhurst	21	35,431	112%
Adventist LaGrange Memorial Hospital	LaGrange	19	11,171	39%
Loyola University Medical Center	Maywood	11	13,537	82%
Loyola Health System at Gottlieb	Melrose Park	34	52,321	103%
Total		129		

The Applicants have not documented access problems in the GSA, nor have they met the requirements of a cooperative venture. The applicants have not met the requirements of this criterion.



**7) Unnecessary Duplication/Maldistribution**

*A) The Applicants shall document that the project will not result in an unnecessary duplication. The Applicants shall provide the following information for the proposed GSA zip code areas identified in subsection (c)(2)(B)(i):*

*i) the total population of the GSA (based upon the most recent population numbers available for the State of Illinois); and*  
*ii) the names and locations of all existing or approved health care facilities located within the GSA that provide the ASTC services that are proposed by the project.*

*B) The Applicants shall document that the project will not result in maldistribution of services. Maldistribution exists when the GSA has an excess supply of facilities and ASTC services characterized by such factors as, but not limited to:*

*i) a ratio of surgical/treatment rooms to population that exceeds one and one-half times the State average.*

*ii) historical utilization (for the latest 12-month period prior to submission of the application) for existing surgical/treatment rooms for the ASTC services proposed by the project that are below the utilization standard specified in 77 Ill. Adm. Code 1100; or*

*iii) insufficient population to provide the volume or caseload necessary to utilize the surgical/treatment rooms proposed by the project at or above utilization standards specified in 77 Ill. Adm. Code 1100.*

*C) The Applicants shall document that, within 24 months after project completion, the proposed project:*

*i) will not lower the utilization of other area providers below the utilization standards specified in 77 Ill. Adm. Code 1100; and*

*ii) will not lower, to a further extent, the utilization of other GSA facilities that are currently (during the latest 12-month period) operating below the utilization standards.*

**Maldistribution-10 Mile GSA**

There are 182 operating procedure rooms in the 10-mile GSA and a population of approximately 1,453,000 residents. The ratio of operating procedure rooms to population in the 10-mile GSA is .1256 per thousand population. There are approximately 12.58 million residents in the State of Illinois and a total of 2,599 operating procedure rooms in the State of Illinois. The ratio of operating procedure rooms to population in State of Illinois is .2065 per thousand population. When compared to the State of Illinois ratio there is not surplus of operating/procedure rooms in the 10-mile GSA.

**Duplication**

Six of the ASTCs that provide pain management and orthopedic services have excess capacity that can accommodate the demand identified by the Applicants. Additionally, three Hospitals have capacity that can accommodate this demand proposed by this project.

The Applicants stated: “Some of licensed ASTCs in the geographic service area are either operating at or near target utilization, some do not offer the same services that are proposed by this project, others are affiliated with hospital institutions and serve patients from those facilities. While there is available surgical capacity in the GSA, the proposed facility seeks to replace existing facility and will not increase maldistribution on the GSA.”

**8) Staffing**

**A) Staffing Availability**

*The Applicants shall document that relevant clinical and professional staffing needs for the proposed project were considered and that the staffing requirements of licensure and The Joint Commission or other nationally*

*recognized accrediting bodies can be met. In addition, the Applicants shall document that necessary staffing is available by providing letters of interest from prospective staff members, completed applications for employment, or a narrative explanation of how the proposed staffing will be achieved.*

**B) Medical Director**

*It is recommended that the procedures to be performed for each ASTC service are under the direction of a physician who is board certified or board eligible by the appropriate professional standards organization or entity that credentials or certifies the health care worker for competency in that category of service.*

According to the Applicant the facility will appoint, Neema Bayran M.D. who is a Surgeon as the Medical Director for the ASTC. The Applicant states traditionally the Applicant has not had any difficulty in staffing their existing offices nor do they anticipate difficulty in staffing the proposed ASTC. As needed additional staff will be identified and employed utilizing existing job search sites and professional placement services.

**9) Charge Commitment**

*In order to meet the objectives of the Act, which are to improve the financial ability of the public to obtain necessary health services; and to establish an orderly and comprehensive health care delivery system that will guarantee the availability of quality health care to the general public; and 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 Applicants shall submit the following:*

- A) a statement of all charges, except for any professional fee (physician charge); and*
- B) a commitment that these charges will not increase, at a minimum, for the first 2 years of operation unless a permit is first obtained pursuant to 77 Ill. Adm. Code 1130.310(a).*

The Applicant provided the necessary attestation as required by this criterion at page 82 of the Application for Permit. See pages 78-111 of the Application for Permit.

**10) Assurances**

*A) The Applicants shall attest that a peer review program exists or will be implemented that evaluates whether patient outcomes are consistent with quality standards established by professional organizations for the ASTC services, and if outcomes do not meet or exceed those standards, that a quality improvement plan will be initiated.*

*B) The Applicants shall document that, in the second year of operation after the project completion date, the annual utilization of the surgical/treatment rooms will meet or exceed the utilization standard specified in 77 Ill. Adm. Code 1100. Documentation shall include, but not be limited to, historical utilization trends, population growth, expansion of professional staff or programs (demonstrated by signed contracts with additional physicians) and the provision of new procedures that would increase utilization.*

The Applicant provided the necessary attestation as required by this criterion at page 111 of the Application for Permit.

## **X. Financial Viability**

A) Criterion 1120.120 – Availability of Funds

B) Criterion 1120.130 – Financial Viability

The Applicants must demonstrate that it has sufficient funds available for capital and operating costs necessary to support the proposed project. The project is being funded with \$150,000 in cash, the fair market value of a lease in the amount of \$1,071,422 and a loan of \$3,129,001 for a total cost of \$4,350,423. Estimated start-up costs and operating deficit cost is \$3,652,288.

The Applicants provided a letter from the Old National Bank stating is the State Board should approve this project the Old National Bank is prepared to extend the Applicant \$3.7 million.

## **XI. Economic Feasibility**

**A) Criterion 1120.140 (a) - Reasonableness of Financing Arrangements**

**B) Criterion 1120.140 (b) - Conditions of Debt Financing**

The Applicant provided a letter from Old National Bank that states should the State Board approve the project the bank is prepared to extend Old National Bank \$3.7 million in credit exposure to finance the project. The State Board considers leasing as debt financing. The terms of the lease are as follows:

<b>TABLE FOUR Terms of Lease</b>	
Lessee	Illinois Back & Neck Institute, PLLC
Lessor	Menaj, LLC
Term	10 Year
Rent	\$148,000 annually with 3% increase annually

The lease terms are between related parties and the financing arrangement and conditions of debt financing appear reasonable.

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

New construction costs and contingencies are \$870,370 or \$318.00 per GSF. This appears reasonable when compared to the State Board Standard of \$467.00 per GSF.

Contingency Costs are \$78,932 and are 9.9%. This appears reasonable when compared to the State Board Standard of 10%.

A&E Fees are \$67,204 and are less than 1% of new construction and contingency costs. This appears reasonable when compared to the State Board Standard of 12.33%

Movable and Other Equipment are \$466,750 per room. This cost appears reasonable when compared to the State Board Standard of \$535,157 per room.

The State Board does not have a standard for these costs:

Consulting and Other Fees	\$75,365
Net Interest Expense	\$31,625
FMV of Lease	\$464,997
Other Costs to Capitalized	\$124,558

**D) Criterion 1120.140 (d) – Direct Operating Costs**

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

The Applicant did not complete these two criteria. The State Board does not have a standard for these costs.

<b>TABLE FIVE</b>				
<b>Proforma Income Statement</b>				
	2023	% Of Sales	2024	% Of Sales
Sales	\$7,150,000		\$7,865,500	
Employee Cost	\$880,000	12.31%	\$968,000	13.54%
Advertising	\$550,000	7.69%	\$605,000	8.46%
Medical Supplies	\$825,000	11.54%	\$907,500	12.69%
Other Medical Exp	\$11,000	0.15%	\$12,100	0.17%
Insurance	\$137,500	1.92%	\$151,250	2.12%
Billing Service	\$220,000	3.08%	\$242,000	3.38%
Meals and Ent	\$27,500	0.38%	\$30,250	0.42%
Professional Fees	\$38,500	0.54%	\$42,350	0.59%
Equipment Rental	\$22,000	0.31%	\$24,200	0.34%
Outside Services	\$55,000	0.77%	\$60,500	0.85%
Computer	\$44,000	0.62%	\$48,400	0.68%
Bank Fees	\$5,500	0.08%	\$6,050	0.08%
Office	\$55,000	0.77%	\$60,500	0.85%
Repairs & Maintenance	\$11,000	0.15%	\$12,100	0.17%
Licenses & Permits	\$16,500	0.23%	\$18,150	0.25%
Travel	\$5,500	0.08%	\$6,050	0.08%
Travel, Meeting and Supplies	\$11,000	0.15%	\$12,100	0.17%
Continuing Education	\$5,500	0.08%	\$6,050	0.08%
Telephone	\$5,500	0.08%	\$6,050	0.08%
Utilities	\$16,500	0.23%	\$18,150	0.25%
State Taxes	\$99,000	1.38%	\$108,900	1.52%
Depreciation	\$212,088	2.97%	\$212,088	2.97%
Interest	\$150,000	2.10%	\$210,000	2.94%
Real Estate	\$100,000	1.40%	\$100,000	1.40%
Rent	\$148,700	2.08%	\$153,161	2.14%
Expenses	\$3,652,288	51.08%	\$4,020,899	56.24%
Net Income	\$3,497,712		\$3,844,101	