



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-03	BOARD MEETING: May 9, 2023	PROJECT NO: 23-008	PROJECT COST: Original: \$34,333,404
FACILITY NAME: Meadowview Behavioral Hospital		CITY: Peoria	
TYPE OF PROJECT: Substantive			HSA: II

DESCRIPTION: The Applicants [US HealthVest LLC, I2 Health, LLC, I2 Health OpCo, LLC, d/b/a Meadowview Behavioral Health, I2 Health Realty, and OSF Healthcare System, and Pointcore, Inc.] propose the establishment of a 100-bed adult behavioral health hospital in Peoria, Illinois. The cost of the project is \$34,333,404. The expected completion date is December 31, 2025.

EXECUTIVE SUMMARY

PROJECT DESCRIPTION:

- The Applicants [US HealthVest LLC, I2 Health, LLC, I2 Health OpCo, LLC, d/b/a Meadowview Behavioral Health, I2 Health Realty, and OSF Healthcare System, and Pointcore, Inc.] propose the establishment of a 100-bed adult behavioral health hospital in Peoria, Illinois. The cost of the project is \$34,333,404. The expected completion date is December 31, 2025.
- The proposed facility will provide a continuum of inpatient and outpatient behavioral healthcare, primarily for adults. The hospital will be established on property located between State Route 91, and Interstate 6, in northern Peoria. The newly constructed facility will contain approximately 64,000 GSF of space (48,400 GSF clinical, 15,600 GSF non-clinical), and will provide a full spectrum of inpatient and outpatient services to patients in the planning area (HSA-02).

PURPOSE OF THE PROJECT

- The purpose of this project is to provide inpatient acute mental illness service to the population in the HSA II AMI Planning Area.

PUBLIC COMMENT:

- No public hearing was requested. Sixty-six letters of support and no letters of opposition have been received by the State Board.

SUMMARY

- There is a **calculated excess of 41 AMI beds** in the HSA-02 AMI Planning Area and four hospitals (one recently approved to provide Adolescent Care) that provide inpatient AMI services in this Planning Area. Should the State Board approve this project there will be a **calculated excess of 141 AMI beds** in this planning area. The Applicants argue that the methodology that the State Board uses to calculate bed need is out of date and over 40 years old. The Applicants state that mental health experts recommend 40-60 AMI Beds per 100,000 population. The three hospitals that provide inpatient mental health services in this planning area over a five-year period operated at 73% occupancy which is 12% below the State Board Target Occupancy. There are AMI Beds available.
- The Applicants have addressed a total 21 criteria and have not met the following:

State Board Standards Not Met	
Criteria	Reasons for Non-Compliance
Criterion 1110.210 (b) (1) - Planning Area Need	There is a calculated excess of 41 AMI Beds in the HSA-II AMI Planning Area based upon the historical AMI patient days and the projected patient population.
Criterion 1110.210 (c) (1) Unnecessary Duplication of Service	There are existing beds at the three hospitals that are not currently being utilized in the Planning Area. Additionally, there are 44 AMI beds that have yet to come online.



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State Board Staff Report PROJECT #23-008 Meadowview Behavioral Health Hospital, Peoria

APPLICATION/CHRONOLOGY/SUMMARY	
Applicants	US HealthVest LLC, I2 Health, LLC, I2 Health OpCo, LLC, d/b/a Meadowview Behavioral Health, I2 Health Realty, OSF Healthcare System, and Pointcore, Inc.
Facility Name	Meadowview Behavioral Hospital
Location	Wood Sage Road, Lot 2, North Peoria, Illinois
Permit Holder	US HealthVest LLC, I2 Health, LLC, I2 Health OpCo, LLC, d/b/a Meadowview Behavioral Health, OSF Healthcare System, and Pointcore, Inc.
Operating Entity	US HealthVest LLC, I2 Health, LLC, I2 Health OpCo, LLC, d/b/a Meadowview Behavioral Health, OSF Healthcare System, and Pointcore, Inc.
Owner of Site	I2 Health Realty, LLC
Total GSF	64,000 GSF (48,400 GSF clinical, 15,600 non-clinical)
Application Received	February 3, 2023
Application Deemed Substantially Complete	February 7, 2023
Review Period Ends	June 7, 2023
Financial Commitment Date	May 9, 2025
Project Completion Date	December 31, 2025
Review Period Extended by the State Board Staff?	No
Can the Applicants request a deferral?	Yes

I. The Proposed Project

The Applicants [US HealthVest LLC, I2 Health, LLC, I2 Health OpCo, LLC, d/b/a Meadowview Behavioral Health, I2 Health Realty, and OSF Healthcare System, and Pointcore, Inc.] propose the establishment of a 100-bed behavioral health (AMI) hospital in Peoria, Illinois. The cost of the project is \$34,333,404. The expected completion date is December 31, 2025.

II. Summary of Findings

- A. The State Board Staff finds the proposed project is **not** in conformance with the provisions of Part 1110.
- B. The State Board Staff finds the proposed project is in conformance with the provisions of Part 1120.

III. General Information

The Applicants are US HealthVest LLC, I2 Health, LLC, I2 Health OpCo, LLC, d/b/a Meadowview Behavioral Health, I2 Health Realty, and OSF Healthcare System, and Pointcore, Inc.]. OSF Healthcare System, a domestic corporation, founded in 1880, owns and operates a number of Illinois health facilities. US HealthVest operates three hospitals in Illinois. At the conclusion of this report are the facilities owned by these two entities.

There is currently a calculated excess of 41 AMI Beds in the HSA II AMI Health Service Area. The State Board Target Occupancy for the AMI category of service is 85%.

IV. Health Service Area

The proposed 100-bed AMI hospital will be in the HSA-II Health Service Area which is the Illinois counties of Bureau, Fulton, Henderson, Knox, LaSalle, Marshall, McDonough, Peoria, Putnam, Stark, Tazewell, Warren, and Woodford. The geographical service area for this hospital is within a 17-mile radius consisting of 31 zip codes located in the following Illinois counties: Fulton, Peoria, Tazewell, and Woodford. There are approximately 308,000 residents within this 17-mile service area.

V. Project Details

The Applicants are proposing to develop a 100-bed adult Acute Mental Illness (AMI) facility on property owned by OSF Healthcare, located between State Route 91 and Interstate 6 in northern Peoria. The new hospital will contain 64,000 GSF of space (48,400 GSF clinical/15,600 GSF non-clinical), and the project cost is \$34,333,404. OSF will transfer ownership of this property to PointCore Inc., who will then convey ownership to I2 Health Realty, LLC, upon project completion. I Health Development, LLC a wholly owned subsidiary of Us Health Vest will own 80% of I2 Health Opco, LLC d/b/a Meadowview Behavioral Hospital and 20% will be owned by PointCore, Inc. a wholly owned subsidiary of OSF Healthcare System. A letter of intent to form the Joint Venture has been provided at pages 49-54 of the Application for Permit.

The facility will be a two-story building. There are six nursing units three on each floor with 50-beds on each floor. The proposed project will have 20 single occupancy rooms and 40 double occupancy rooms. The beds will be Medicare and Medicaid certified. The Applicants identified the top five discharge categories for inpatient mental health care as: (1) psychosis, (2) mood disorders - persistent, (3) bipolar disorders, (4) substance abuse disorders, and (5) mood disorders - episodic. These disease categories were taken from COMP Data and is for adult residents of the 13 counties in HSA 2. It is anticipated that these disease categories will be the top five clinical conditions for admissions to the proposed hospital. According to the Applicants each of the nursing units is secure and are designed with safety and social interaction in mind. Nurse stations will be located directly across from social spaces designed to be open and with an abundance of natural light. There are two large secure courtyards accessible from the main corridor, providing access to outdoor activity.

VII. Project Costs and Source of Funds

The Applicants are funding this project in its entirety with cash/securities in the amount of \$34,333,404. Estimated start-up costs and operating deficit cost is \$6,000,000.

TABLE TWO				
Project Costs and Sources of Funds				
Use of Funds	Reviewable	Non-Reviewable	Total	% Of Total
Preplanning	\$297,580	\$71,020	\$368,600	1%
Site Survey/Soil Investigation/Site Preparation	\$22,661	\$7,339	\$30,000	0.8%

TABLE TWO Project Costs and Sources of Funds				
Use of Funds	Reviewable	Non-Reviewable	Total	% Of Total
Off Site Work	\$679,837	\$220,163	\$900,000	3.1%
New Construction Contracts	\$19,838,670	\$6,268,000	\$26,106,670	76%
Contingencies	\$1,983,867	\$626,800	\$2,610,667	7.6%
Architectural/Engineering Fees	\$1,388,707	\$438,760	\$1,827,467	5.3%
Consulting and Other Fees	\$264,381	\$85,619	\$350,000	1%
Movable or Other Equipment (not in construction contracts)	\$642,068	\$207,932	\$850,000	3%
Other Costs to be Capitalized*	\$248,831	\$541,139	\$767,500	2.2%
Total Uses of Funds	\$25,744,288	\$8,589,116	\$34,333,404	100.00%
Source of Funds				
Cash and Securities	\$25,744,288	\$8,589,116	\$34,333,404	100.00%
Total Source of Funds	\$25,744,288	\$8,589,116	\$34,333,404	100.00%

VIII. Background of the Applicant, Purpose of the Project, Safety Net Impact Statement, Alternatives to the Proposed Project

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

The Applicants supplied licensure and certification/accreditation information for all Illinois-based facilities, have attested that there has been no adverse action¹ taken against any of the facilities owned or operated by the Applicant, and has authorized 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 Applicants' certificate of need. Certificate of Good Standing have been provided for the Applicants and the Applicants are in compliance with the reporting requirements of the State Board.

B) Criterion 1110.110 (b) – Purpose of the Project

According to the Applicants *"The 2022 Community Health Needs Assessment for Peoria, Tazewell, and Woodford Counties in central Illinois has identified mental health as the number one health concern for area residents. Mental Health issues outrank obesity, viruses, cancer, aging issues, diabetes, and heart disease. Addressing the community concerns requires high-priority attention and coordinated efforts by health care providers and agencies in the region. Last year, more than 600 patients at OSF St. Francis Medical Center's emergency department had to leave the region for inpatient AMI care, part of approximately 1,900 adult residents of HSA-02 who left*

¹ "Adverse Action" means 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. As defined in Section 1-129 of the Nursing Home Care Act [210 ILCS 45], "Type 'A' violation" means a violation of the Nursing Home Care Act or of the rules promulgated thereunder which creates a condition or occurrence relating to the operation and maintenance of a facility presenting a substantial probability that risk of death or serious mental or physical harm to a resident will result therefrom or has resulted in actual physical or mental harm to a resident. As defined in Section 1-128.5 of the Nursing Home Care Act, a "Type AA violation" means a violation of the Act or of the rules promulgated thereunder which creates a condition or occurrence relating to the operation and maintenance of a facility that proximately caused a resident's death. [210 ILCS 45/1-129]

the HSA for AMI care last year. This access issue is attributed to a lack of sufficient AMI beds at area hospitals. The proposed 100-bed hospital will offer primarily adult inpatient and outpatient behavioral health services, including programs for drug abuse, dual diagnosis (mental health and substance abuse), women's trauma, veterans, and seniors. It is a tremendous burden for families with members struggling with these conditions who are admitted at facilities 100 miles distant. Many of these people elect to forego needed inpatient care rather than travel to the Chicago area or other distant locations. The proposed facility will allow for these individuals and their families to receive high quality care locally."

C) Criterion 1110.110 (c) – Safety Net Impact

This project is classified as substantive and a safety net impact statement has been provided at the conclusion of this report.

D) Criterion 1110.110 (d) – Alternatives to the Proposed Project

The Applicants considered four alternatives to the proposed project.

1. Establish a 100-bed hospital on OSF St. Francis Hospital Campus.
2. Expand the existing 26-bed AMI Unit at OSF Elizabeth Medical Center- Ottawa
3. Not form a joint venture
4. Do Nothing

The **first alternative** was rejected because of the lack of space on the OSF St. Francis Hospital campus in Peoria, Illinois. The **second alternative** was rejected because the 97-bed hospital in Ottawa according to the Applicants too small to accommodate a 100-bed AMI service. The **third alternative** was rejected because according to the Applicants not forming a joint venture would not capture the synergies of both systems working together. The **fourth alternative** was rejected according to the Applicants doing nothing would not fulfill the mission of the OSF Healthcare.

IX. Size of the Project, Projected Utilization

A) Criterion 1110.120 (a) – Size of the Project

The Applicants are proposing 48,387 GSF of reviewable space for this hospital. The State Board standard for AMI beds is 440-560 per GSF. The Applicants are proposing 484 GSF per bed. The Applicants have met the requirements of the State Board.

B) Criterion 1110.120 (b) - Projected Utilization

The Applicants believe by the second year of operation after project completion they will have a patient volume of 32,850 patient days, which exceeds the State standard of 85%.

X. Acute Mental Illness (AMI)

A) Criterion 1110.210 (b) (1) - Planning Area Need

The applicant shall document that the number of beds to be established or added is necessary to serve the planning area's population. The Applicants are proposing to establish a 100-bed AMI Hospital in a Peoria, Illinois. There is a calculated excess of 41 AMI Beds in this HSA II AMI Planning Area.

2) Criterion 1110.210 (b) (2) - Service to Planning Area Residents

The Applicants believe approximately 60% or more of the volume for the proposed hospital will reside in the HSA II Service Area. The Applicants assume that the geographic distribution of patients receiving AMI care at the new hospital will reflect the overall distribution of OSF Saint Francis Medical Center patients. (See page 131-132 of the Application for Permit).

3) Criterion 1110.210 (b) (3) Service Demand – Establishment of AMI/CMI Service

The Applicants propose to establish a 100-bed AMI facility designed to meet the programmatic needs of Adult AMI patients. According to the Applicants a number of residents of HSA 2 were not able to be accommodated in the three hospital AMI units in HSA 2 and were admitted at other hospitals in Illinois and out of state. According to COMP data, 4,935 adult residents of HSA 2 were admitted for inpatient behavioral health care in 2021.² 2,732 of these patients were admitted at AMI units in HSA 2. 1,898 adult patients had to travel to hospitals outside of HSA 2 to receive care, due mostly to lack of available bed capacity near home. These 1,898 patients constitute 39% of the total 4,935 residents admitted for behavioral health care. Of the 1,898 residents of HSA 2 who received care outside of the HSA, 1,253 traveled to metropolitan Chicago and were admitted at hospitals between 140 and 200 miles from Peoria.

Physicians affiliated with OSF Saint Francis Medical Center, physicians who are chief medical officers at 14 OSF hospitals in Illinois, and hospitals and other clinical service providers and special service agencies have written in support of the project, and collectively have committed to refer 4,030 patients in the second year of operation of the proposed behavioral hospital. An Average Length of Stay of 10.5 days is projected for the hospital. If these patients materialize the proposed hospital will be at 116% occupancy. (See Application for Permit page 132-148)

4) Criterion 1110.210(b) (5) - Service Accessibility

There is no absence of service in the HSA II – AMI Planning Area. There have been no access limitations due to payor status of patients or restrictive admission policies of existing providers identified by the Applicants. The Applicants provided the top five reasons provided for lack of access to AMI units in the HSA II AMI Planning Area:

1. Lack of beds, currently at capacity.
2. Lack of staff to care for patients.
3. Lack of available services/providers to treat complex patients, dual diagnosis etc. therefore, need to send to US Health Vest Hospitals in Chicago.
4. Facilities may have open Pediatric beds available, but not Adult behavioral health Beds and vice versa.

² Note the State Board does not have access to COMP Data to verify information used in the Applicants' analysis.

5. Many psychiatric units/hospitals do not have a robust program for outpatient services post discharge.

The Health Resources and Services Administration has documented that the HSA II AMI Service Area is a mental health professional shortage area.

TABLE THREE							
Facilities in the HSA-II AMI Planning Area							
		2018	2019	2020	2021	2022	Ave
Carle Health Methodist Medical Center	59	88.37%	95.24%	73.31%	87.30%	81.42%	85.13%
OSF Saint Elizabeth Medical Center	26	58.27%	59.68%	54.90%	43.17%	56.60%	54.52%
Proctor Community Hospital	18	56.04%	60.52%	53.70%	61.42%	43.82%	55.10%
Total	103	75.12%	80.20%	65.24%	71.64%	68.58%	72.16%
Carle Young Minds Institute	44						
	147						

5. Criterion 1110.210 (c) (1) (2) (3) - Unnecessary Duplication/Maldistribution

1. Unnecessary Duplication of Service

There are four hospitals with AMI Units in the HSA II-AMI Planning Area. One Hospital was recently approved by the State Board a 44-bed adolescent facility (Young Minds Institute k/n/a as Carle Health Methodist Medical Center in Peoria). Over the past five years these three hospitals had an average daily census of 75 patients with an occupancy of 72.16%.

2. Maldistribution

There are 4,181 Acute Mental Illness (AMI) beds in the State of Illinois, and the population in the State of Illinois is approximately 13,129,233. The number of AMI beds per thousand population is 0.316 per thousand in the State of Illinois.

For the Planning Area for the Project, the Statewide ratio is 0.227 beds per 1,000 population.

147 beds divided by 647,000 persons = 0.227 beds per 1,000 population

247 beds divided by 627,900 persons (year 2024) = 0.393 AMI beds per 1,000 population.

1.5 times the Statewide average is 0.477.

To have a surplus of AMI beds in the 17-mile GSA the ratio of beds to population must be more than one and one-half times the State average. Based upon that ratio there is not a surplus of AMI beds in the 17-mile GSA.

3. Impact on other Hospitals

Based upon the information reviewed it appears that the proposed project will not lower the utilization of other area hospitals providing AMI services in the 17-mile GSA.

6) Criterion 1110.210 (e) - Staffing

According to the Applicants staffing will follow the models in place at Chicago Behavioral Hospital in Des Plaines, Lake Behavioral Hospital and Silver Oaks Behavioral Hospital. US HealthVest staffs its hospitals to deliver safe and high-quality care to our patients. The Applicants state through the development of new hospitals and in partnering with health systems, US HealthVest has experience working with a variety of structures to achieve optimal

staffing. A board-certified psychiatrist will be installed as Medical Director. The proposed hospital will utilize the same recruitment processes and human resources procedures in place at the existing US HealthVest hospitals. For recruiting staff, US HealthVest uses web-based programs and traditional sites and methods such as nurse.com, monster.com, careerbuilder.com, National Healthcare Career Network, Sun-Times Network, Chicago Tribune, and job fairs. Where there are opportunities and interest on the part of its employees, US HealthVest will enable the transfer of employees from the other US HealthVest facilities in Illinois. US HealthVest expects that the success experienced in staffing those facilities will be the experience for start-up and continuing operations in Peoria. Even though staffing has been a challenge throughout healthcare and other industries, the staff vacancy rates for the Illinois US Health Vest hospitals have *been* low. Staff vacancy rates are as follows:

Chicago Behavioral Hospital - 6%

Lake Behavioral Hospital - 5%

Silver Oaks Behavioral Hospital - 9%

7) Criterion 1110.210 (f) - Performance Requirements

- 1) *The minimum freestanding facility size for acute mental illness is a minimum facility capacity of 20 beds.*

The Applicants are proposing to establish a 100-bed AMI Hospital. The Applicants have met the requirements of this criterion.

8) Criterion 1110.210 (g) -Assurances

The applicant representative who signs the CON application shall submit a signed and dated statement attesting to the applicant's understanding that, by the second year of operation after the project completion, the applicant will achieve and maintain the occupancy standards specified in 77 Ill. Adm. Code 1100 for each category of service involved in the proposal.

The Applicants provided the required assurance at page 164 of the application. The Applicants have met the requirements of this criterion.

XII. Financial Viability Economic Feasibility

A) Criterion 1120.120 – Availability of Funds

B) Criterion 1120.130 – Financial Viability

C) Criterion 1120.140 (a) – Reasonableness of Financing Arrangements

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

The Applicants are funding this project with cash or internal resources. Based upon the information provided, the Applicants have sufficient resources to fund this project and have qualified for the financial waiver. There is no debt being used to fund this project; therefore criteria 1120.140 (a) and 1120.140 (b) are not applicable to this project. Both OSF Healthcare and US HealthVest Financial statements have been provided to the State Board and there are sufficient assets to fund this project.

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

Preplanning Costs total \$297,500 and are 1.32% of new construction, contingencies, and movable equipment costs of \$22,464,605. This appears reasonable when compared to the State Board Standard of 1.8%.

Site Survey/Site Preparation Costs total \$22,661 and are less than 1% of new construction and contingencies cost of \$21,822,537. This appears reasonable when compared to the State Board Standard of 5%.

New Construction and Contingency costs total \$21,822,537 or \$451 per GSF. This appears reasonable when compared to the State Board Standard of \$486.30 per GSF. This standard reflects a project mi-point 2024.

Contingency Costs total \$1,983,867 and are 10% of new construction costs. This appears reasonable when compared to the State Board Standard of 10%.

Architectural and Engineering Fees total \$390,849 and are 6.36% of new construction and contingency costs. This appears reasonable when compared to the State Board Standard of 6.22% - 9.34%.

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

Consulting and Other Fees	\$264,381
Movable or Other Equipment (not in construction contracts)	\$642,068
Other Costs to be Capitalized	\$248,831

F) Criterion 1120.140 (e) - Projected Operating Cost

The Applicants are estimating projected operating costs of \$757 per day. The State Board does not have a standard for this criterion.

G) Criterion 1120.140 (f) – Total Effect of the Project on Capital Costs

The Applicants are estimating the capital costs per patient day of \$28.65. The State Board does not have a standard for this criterion.

Acute Mental Illness Bed Need Methodology

Occupancy target is 85% utilization.

Bed need for Acute Mental Illness category of service is calculated by first multiplying the projected planning area population five (5) years from the base year by a minimum bed rate of .11 per 1,000 population to establish the minimum number of Acute Mental Illness beds needed in the planning area. Next, the actual utilization rate is calculated by dividing the planning area base year patient days by the planning area base year total estimated population. This actual base year utilization rate is multiplied by the projected planning area population five (5) years from the base year to find projected patient days. This patient days figure is divided by 365 to determine Average Daily Census, which is divided by 0.85, to factor in the 85 percent target utilization rate, to arrive at projected beds needed for the planning area.

The planning area Acute Mental Illness bed need is the greater of the calculated minimum bed need and the projected bed need based on actual utilization figures. The planned use rate is multiplied by the projected area population to find projected patient days. The patient days are divided by 365 to calculate Average Daily Census, which is divided by 0.85 (85% utilization target) to project the number of Acute Mental Illness beds needed.

The number of Acute Mental Illness beds needed in the planning area is compared to the number of authorized Acute Mental Illness beds in the planning area to determine if there is a need for additional beds or if there are excess beds in the planning area.

List of OSF Healthcare Facilities in Illinois:

• OSF Little Company of Mary Medical Center, Evergreen Park	274 beds
• OSF Saint Anthony's Health Center, Alton	49 beds
• OSF Holy Family Medical Center, Monmouth	23 beds
• OSF St. Luke Medical Center, Kewanee	25 beds
• OSF St. Elizabeth Medical Center, Ottawa	97 beds
• OSF St. Clare Medical Center, Princeton	25 beds
• OSF Heart of Mary Medical Center, Urbana	210 beds
• OSF St. Paul Medical Center, Mendota	25 beds
• OSF Children's Hospital of Illinois, Peoria	144 beds
• OSF Sacred Heart Medical Center, Danville	174 beds
• OSF Saint Anthony Medical Center, Rockford	241 beds
• OSF Saint Francis Medical Center, Peoria	505 beds
• OSF St. James- John W. Albrecht Medical Center, Pontiac	42 beds
• OSF St. Joseph Medical Center, Bloomington	149 beds
• OSF St. Mary Medical Center, Galesburg	81 beds
• OSF Transitional Care Hospital	47 beds

US HealthVest, LLC has three hospitals in Illinois:

- Chicago Behavioral Hospital- Des Plaines – 145 beds
- Lake Behavioral Hospital- Waukegan – 146 beds
- Silver Oaks Hospital- New Lenox – 110 beds

US Health Vest Illinois Hospitals Average Daily Census							
Years	2021	2020	2019	2018	2017	Ave	Ave Occupancy
Chicago Behavioral Hospital – Des Plaines							
145 beds	129.4	124.6	120	114.6	113.1	120.34	82.99%
Lake Behavioral Hospital - Waukegan							
146 beds	86.3	51.2	34.6	23.14		48.81	33.43%
Silver Oaks Behavioral Hospital – New Lenox							
110 beds	74.8	65.3	37.3			59.13	53.76%

OSF St. Francis Hospital 2021 Utilization							
Service	Authorized Beds	Staffed Beds	ALOS	ADC	Authorized Bed Occupancy	Staffed Bed Occupancy	
Medical Surgical	399	399	7.7	350.6	87.87%	87.87%	
Pediatric	40	40	7.1	33.8	84.50%	84.50%	
Intensive Care	91	81	3.6	67.9	74.62%	83.83%	
Obstetric	52	38	3.3	26.2	50.38%	68.95%	
Neonatal	40	38	24.1	31.9	79.75%	83.95%	
	622	596					

SAFETY NET IMPACT STATEMENT

[See pages 228-232 of the Application for Permit]

a. 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.

The Applicants note the proposed project will complement three existing AMI programs currently operating in the health service area (HSA). The project is designed to meet the needs of families who would otherwise have to travel out of the HSA for inpatient adolescent psychiatric care. Because it provides a specialized level of AMI care, the project will have little to no impact on area facilities and their ability to provide safety net services in the area.

b. 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.

There is no basis to believe this should impact the ability of other area providers to cross-subsidize safety net services in the service/planning area.

c. How the discontinuation of a facility or service might impact the remaining safety net providers in each community, if reasonably known by the applicant.

The proposed project does not seek to discontinue any services in the planning area.

TABLE EIGHT OSF Healthcare System Charity Care and Medicaid Information			
	2019	2020	2021
Net Patient Revenue	\$2,410,772,560	\$2,383,901,200	\$2,978,991,756
CHARITY CARE			
Charity (# of patients)	2019	2020	2021
Inpatient	1,031	1,231	945
Outpatient	20,261	22,945	28,323
Total	21,292	24,176	29,268
Charity (cost in dollars)			
Inpatient	\$17,583,796	\$18,862,733	\$17,740,857
Outpatient	\$19,122,296	\$22,422,102	\$22,532,449
Total	\$36,706,092	\$41,284,835	\$40,273,306
% Of Charity Care to Net Revenue	1.52%	1.73%	1.35%
MEDICAID	2019	2020	2021
Medicaid (# of patients)			
Inpatient	14,371	14,074	15,608
Outpatient	374,009	307,481	427,556
Total	388,380	321,555	443,164
Medicaid (revenue)			
Inpatient	\$222,287,288	\$253,442,281	4274,688,101

TABLE EIGHT OSF Healthcare System Charity Care and Medicaid Information			
	2019	2020	2021
Net Patient Revenue	\$2,410,772,560	\$2,383,901,200	\$2,978,991,756
Outpatient	\$172,028,785	\$131,986,088	\$201,739,577
Total	\$394,316,073	\$385,428,369	\$476,427,678
% Of Medicaid to Net Revenue	16.3%	16.2%	16%

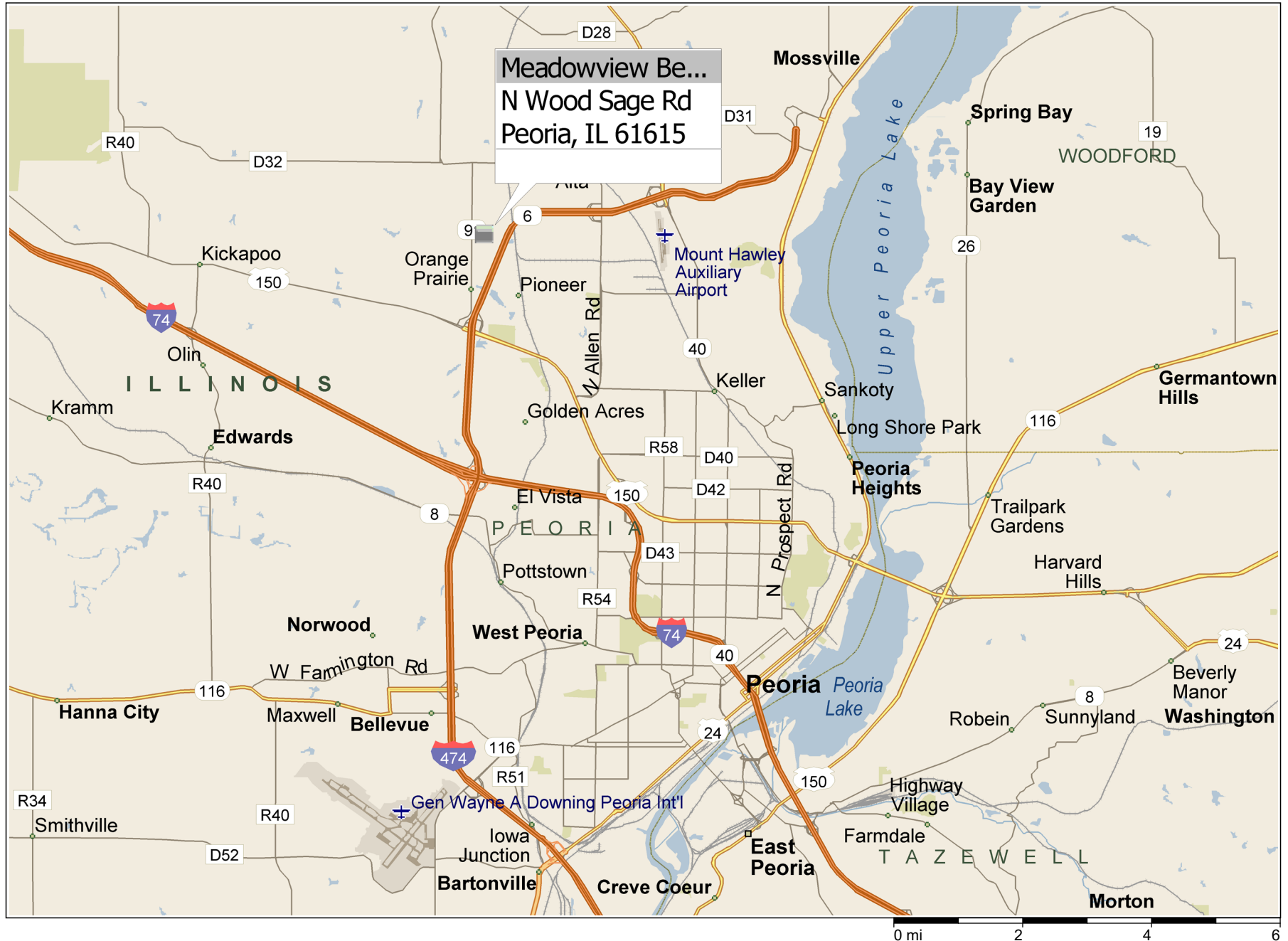
TABLE NINE Silver Oaks Behavioral Hospital Charity Care and Medicaid Information			
	2019	2020	2021
Net Patient Revenue	\$8,112,734	\$12,750,198	\$27,443,576
CHARITY CARE			
Charity (# of patients)	2019	2020	2021
Inpatient	251	54	72
Outpatient	0	0	1
Total	251	54	73
Charity (cost in dollars)			
Inpatient	\$498,464	\$184,471	\$640,880
Outpatient	\$0	\$2,339	\$786
Total	\$498,464	\$186,610	\$641,666
% Of Charity Care to Net Revenue	6.1%	1.46%	2.3%
MEDICAID	2019	2020	2021
Medicaid (# of patients)			
Inpatient	2,052	408	549
Outpatient	1,654	281	422
Total	3,706	689	971
Medicaid (revenue)			
Inpatient	\$1,529,635	\$9,644,453	\$2,084,439
Outpatient	\$302,728	\$448,130	\$794,822
Total	\$1,832,363	\$10,092,583	\$2,879,261
% Of Medicaid to Net Revenue	22.5%	79.1%	10.5%

TABLE TEN Chicago Behavioral Hospital Charity Care and Medicaid Information			
	2019	2020	2021
Net Patient Revenue	\$36,193,744	\$34,245,557	\$42,992,243
CHARITY CARE			
Charity (# of patients)	2019	2020	2021
Inpatient	13	15	246
Outpatient	0	2	2
Total	13	17	248
Charity (cost in dollars)			
Amount of Charity Care (charges)	\$37,202	\$50,784	\$783,168
Cost of Charity Care	\$37,202	\$50,784	\$783,168
% Of Charity Care to Net Revenue	.01%	.01%	.18%
MEDICAID	2019	2020	2021
Medicaid (# of patients)			
Inpatient	112	3,800	3,906
Outpatient	398	2,783	3,106
Total	510	6,583	7,012
Medicaid (revenue)			
Inpatient	\$1,158,848	\$12,589,560	\$25,001,799
Outpatient	\$43,507	\$458,970	\$703,560
Total	\$1,202,355	\$13,048,530	\$25,705,359
% Of Medicaid to Net Revenue	3.3%	38.1%	59.8%

TABLE ELEVEN Lake Behavioral Hospital Charity Care and Medicaid Information			
	2019	2020	2021
Net Patient Revenue	\$11,188,817	\$20,806,705	\$25,060,608
CHARITY CARE			
Charity (# of patients)	2019	2020	2021
Inpatient	0	33	121
Outpatient	0	0	3
Total	0	33	124
Charity (cost in dollars)			
Amount of Charity Care (charges)	\$271,410	\$201,403	\$120,086
Cost of Charity Care	\$271,410	\$201,403	120,086
% Of Charity Care to Net Revenue	2.4%	.09%	.04%

TABLE ELEVEN Lake Behavioral Hospital Charity Care and Medicaid Information			
	2019	2020	2021
Net Patient Revenue	\$11,188,817	\$20,806,705	\$25,060,608
MEDICAID	2019	2020	2021
Medicaid (# of patients)			
Inpatient	789	1,226	1,895
Outpatient	0	1,720	2,157
Total	789	2,946	4,052
Medicaid (revenue)			
Inpatient	\$2,639,158	\$4,529,933	\$12,016,444
Outpatient	\$286,362	\$290,319	\$470,574
Total	\$2,925,520	\$4,820,252	\$12,487,018
% Of Medicaid to Net Revenue	26.1%	23.1%	49.8%

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