



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: July 27, 2023	PROJECT NO: #23-027	PROJECT COST: Original: \$20,854,329
FACILITY NAME: University of Chicago Medical Center Ambulatory Care Medical Office Building		CITY: Orland Park	
TYPE OF PROJECT: Non-Substantive			HSA: VII

DESCRIPTION: The Applicant [The University of Chicago Medical Center] is requesting to build out the remainder of the shell space approved in August 2014 as part of Permit #14-023. The proposed cost of the project is \$20,854,329 with an expected completion date of April 30, 2024.

Information on this application for permit can be found at
<https://hfsrb.illinois.gov/projects/project.23-027.html>

EXECUTIVE SUMMARY

PROJECT DESCRIPTION:

- The University of Chicago Medical Center is proposing a new project because of changes to the Diagnostic Imaging Suite in the Orland Park Medical Office Building that has resulted in changes to a previously approved Permit #21-033. The total project cost is expected to be \$20,854,329 and will be funded with cash and securities. The Project is expected to be completed by April 30, 2024.
- According to the Applicant the scope of this Project remains largely the same as Permit #21-033, namely, the Project proposes 18 exam rooms and 3 office-based procedure rooms on the 4th floor and the relocation of 2 exam rooms in renovated space on the 2nd floor. The ambulatory care space includes the outpatient clinic, minor procedure suite, cardiology testing area, and a blood draw area on the 4th floor, plus renovated space on 3rd and 2nd Floors. The Project proposes to add one MRI, and a PET scanner to the Diagnostic Imaging Suite on the 2nd floor. The Orland Park MOB would then have two MRI's, one CT scanner, 1 PET scanner within the second-floor suite. On the 3rd Floor in the Orthopaedic Suite, there are three existing radiographic devices. The non-reviewable spaces include non-clinical support spaces, offices, building support and public waiting and circulation areas. At the conclusion to the report is the Cost Space Chart for this medical office building.
- The Applicant could not alter Permit #21-033 because under State Board rule (77 ILAC 1130.750 (b) - Alteration of Post Permit Projects) a permit is limited to an increase of the total permit dollar amount of 7% and an increase in total gross square footage of 5%. The Applicant has exceeded both of these requirements. The Applicant states that Permit #21-033 will exceed the approved permit by 12.5% or \$2,323,562 and the GSF by 1,518 GSF or 6.57%.
- Should this project be approved, the Applicant will need to relinquish Permit #21-033 as required.

PURPOSE OF THE PROJECT

- The purpose of this project is to buildout the remainder of the shell space of the existing medical office building.

PUBLIC COMMENT:

- No public hearing was requested, and no letters of support or opposition were received by the State Board.

SUMMARY

- The State Board Staff Report findings remain unchanged from the State Board Staff Report for Permit #22-033. The Applicants addressed a total 15 criteria and have not met the following:

State Board Standards Not Met	
Criteria	Reasons for Non-Compliance
Criterion 1120.140(c) – Reasonableness of Project Costs	The Applicant exceeds the Site Preparation Cost and the Modernization and Contingency costs. (See Page 11 of this report.



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PROJECT #23-027

The University of Chicago Medical Center
Medical Office Building – Orland Park

APPLICATION/CHRONOLOGY/SUMMARY	
Applicants	The University of Chicago Medical Center
Facility Name	The University of Chicago Medical Center
Location	14290 LaGrange Road, Orland Park, Illinois
Permit Holder	The University of Chicago Medical Center
Operating Entity	The University of Chicago Medical Center
Owner of Site	The University of Chicago Medical Center
Application Received	May 17, 2023
Application Deemed Substantially Complete	May 19, 2023
Review Period Ends	July 16, 2023
Project Completion Date	April 30, 2024
Review Period Extended by the State Board Staff?	No
Can the Applicants request a deferral?	Yes

I. The Proposed Project

The University of Chicago Medical Center is proposing a new project because of changes to the Diagnostic Imaging Suite in the Orland Park Medical Office Building that has resulted in changes to a previously approved Permit #21-033. The total project cost is expected to be \$20,854,329 and will be funded with cash and securities. The Project is expected to be completed by April 30, 2024.

II. Summary of Findings

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

III. General Information

The Applicant [The University of Chicago Medical Center] is an 862-bed hospital in Chicago, Illinois. The University of Chicago Medical Center owns Ingalls Memorial Hospital in Harvey and Ingalls Same Day Surgery Center in Tinley Park, an ambulatory surgery treatment center. This is a non-substantive project subject to both a 1110 and 1120 review. Financial Commitment of the project will occur after permit issuance. Table One below outlines the University of Chicago Medical Center's utilization for 2021.

TABLE ONE The University of Chicago Medical Center 2021 Utilization								
Service	Authorized Beds ⁽¹⁾	Staffed Beds	Adm	Days	ALOS	ADC	Authorized Bed Occ	Staffed Bed Occ
Medical Surgical	481	453	19,409	150,154	7.74	411.38	85.53%	90.81%
Obstetrics	46	32	2,945	5,847	1.99	16.02	34.82%	50.06%
Pediatrics	60	60	3,303	16,497	4.99	45.20	75.33%	75.33%
Intensive Care	142	134	7,775	40,624	5.22	111.30	78.38%	83.06%
Neonatal Intensive Care	53	53	883	18,615	21.08	51.00	96.23%	96.23%
Total	782	732	34,315	231,737				
Permit #23-011 increased the number of medical surgical beds by 64 beds and the number of intensive care beds by 16 beds. Total Authorized beds are 862 beds. Permit #23-011.								

IV. Health Service Area

The medical office building is in the **A-4 hospital planning area**. The A-4 planning area includes the City of Chicago Community Areas of West Pullman, Riverdale, Hegewisch, Ashburn, Auburn Gresham, Beverly, Washington Heights, Mount Greenwood, and Morgan Park; Cook County Townships of Lemont, Stickney, Worth, Lyons, Palos, Calumet, Thornton, Bremen, Orland, Rich, and Bloom. There are approximately 733,000 residents in the 10-mile geographical service area ("GSA").

There are seven hospitals in the A-4 planning area; Adventist LaGrange Memorial Hospital-LaGrange, Advocate Christ Medical Center - Oak Lawn, Advocate South Suburban Hospital-Hazel Crest, Franciscan St. James Health-Olympia Fields-Olympia Fields, Ingalls Memorial Hospital-Harvey, Little Company of Mary Hospital-Evergreen Park, and Northwestern Medicine Palos Community Hospital-Palos Heights.

VII. Project Costs and Source of Funds

The Applicants are funding this project with cash in the amount of \$20,854,329.

TABLE TWO Project Costs and Sources of Funds							
Use of Funds	Original Amount Permit #21-033			Proposed			Difference
	Reviewable	Non-Reviewable	Total	Reviewable	Non-Reviewable	Total	
Site Preparation	\$485,440	\$43,120	\$528,560	\$485,440	\$43,120	\$528,560	\$0
New Construction Contracts	\$3,154,286	\$1,494,615	\$4,648,901	\$3,481,914	\$1,547,518	\$5,029,432	\$380,531
Modernization Contracts	\$1,550,300	\$481,043	\$2,031,343	\$4,618,853	\$178,848	\$4,797,701	\$2,766,358
Contingencies	\$475,927	\$192,097	\$668,024	\$293,010	\$66,990	\$360,000	(\$308,024)
Architectural/Engineering Fees	\$404,248	\$169,152	\$573,400	\$380,994	\$133,378	\$514,372	(\$59,028)
Consulting and Other Fees	\$475,929	\$189,071	\$665,000	\$528,924	\$199,668	\$728,592	\$63,592
Movable or Other Equipment	\$6,799,787	\$574,063	\$7,373,850	\$7,061,203	\$560,922	\$7,622,125	\$248,275

TABLE TWO							
Project Costs and Sources of Funds							
	Original Amount Permit #21-033			Proposed			
Use of Funds	Reviewable	Non-Reviewable	Total	Reviewable	Non-Reviewable	Total	Difference
Net Interest Expense During Construction	\$599,410	\$183,280	\$782,690	\$667,410	\$213,422	\$880,832	\$98,142
Other Costs to Be Capitalized	\$855,728	\$403,272	\$1,259,000	\$283,343	\$109,372	\$392,715	(\$866,285)
TOTAL USES OF FUNDS	\$14,801,053	\$3,729,715	\$18,530,768	\$17,801,091	\$3,053,238	\$20,854,329	\$2,323,561
Sources of Funds							
Cash			\$18,530,768			\$20,854,329	\$2,323,561
Total Sources of Funds			\$18,530,768			\$20,854,329	\$2,323,561

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 Applicant has 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 Applicant and the Applicant is in compliance with the reporting requirements of the State Board.

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

In August of 2014 [Permit #14-023] the Applicant was approved to construct a 4-story medical office building to house physician offices, examination rooms, and diagnostic and treatment facilities. The medical office building houses the following clinical components: radiation oncology with one vault for a linear accelerator; an infusion therapy center with 26 infusion rooms; diagnostic imaging, one (1) MRI, one (1) CT, three (3) radiographic devices, two (2) ultrasound machines, a mammography, and a nuclear medicine scanner; and 80 exam rooms to support orthopedics and other specialties, such as women's health, pediatrics, gastroenterology, cardiology, and surgical consulting. As part of the approval of Permit #14-023 the fourth floor of the medical office space was approved for **shell space**

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]

which under State Board rules requires the submittal of an application for permit to build out the shelled space.

In June of 2019 [Permit #19-013] the State Board approved the build-out of a portion of the 4th floor shell space to house a Mammography Suite, in approximately 7,500 GSF of space at a cost of approximately \$5.6 million. Permit #19-013 is a joint venture with Solis Mammography.

In December 2021 [Permit #21-033] the Applicant [The University of Chicago Medical Center] was approved to build out the remainder of the shell space approved in August 2014 as part of Permit #14-023. Specifically, the Applicant was approved to complete the build out of the fourth floor of the Orland Park medical office building with 18 multi-specialty exams rooms (17 net new multi-specialty exam rooms and 1 relocated exam room), a procedure suite with two rooms equipped for GI endoscopy, colonoscopy and other similar office-based procedures, and dedicated space for cardiac and vascular imaging. Additionally, the Applicant was approved to expand diagnostic imaging with one (1) additional MRI and one (1) PET scan in the existing diagnostic imaging suite on the second floor. The build out was approved for 23,100 GSF and a total project cost of approximately \$18,530,768 and will be funded with cash and securities. The Project was expected to be completed by May 31, 2023.

The purpose of this project is to allow the build out of the remainder of the shell space on the fourth floor of the medical office building that was approved as part of Permit #14-023 and to reconfigure existing space on the second and third floors of the Orland Park medical office building, and to expand diagnostic imaging.

C) Criterion 1110.110 (c) – Safety Net Impact

This project is classified as non-substantive and a safety net impact statement is not required. At the conclusion of this report is Charity Care and Medicaid information as required by the State Board.

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

The only alternative considered for this project (Permit #23-027) was to complete Permit #21-033.

Previously the Applicant did not consider a project of greater scope or utilizing other available resources in the service area. The Applicant was approved by the State Board to enter a joint venture/partnership with *Solis Mammography* to provide women's health at the medical office building in June of 2019 [Permit #19-013].

The Applicant believes the additional services proposed in this project will complement the Mammography Services already offered and will add to the spectrum of cancer screening services available. According to the Applicant the decision was made to make a substantial commitment to serving the needs of patients in Planning Area A-04 by completing the medical facility. The Applicant anticipates that the proposed expansion of the facility will be well utilized as evidenced by the high demand for its

existing services. The Applicant believes that having a tightly integrated multi-disciplinary team of clinical staff centrally located in the community is the best alternative and will maximize the availability to high quality patient care for which there is strong demand.

IX. Size of the Project, Projected Utilization

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

The Project proposes 18 exam rooms and 3 office-based procedure rooms on the 4th floor and the relocation of 2 exam rooms in renovated space on the 2nd floor. The ambulatory care space includes the outpatient clinic, minor procedure suite, cardiology testing area, and a blood draw area on the 4th floor, plus renovated space on 3rd and 2nd Floors. The Project proposes to add one MRI, and a PET scanner to the Diagnostic Imaging Suite on the 2nd floor. The Orland Park MOB would then have two MRI's, one CT scanner, 1 PET scanner within the second-floor suite. On the 3rd Floor in the Orthopaedic Suite, there are three existing radiographic devices. The non-reviewable spaces include non-clinical support spaces, offices, building support and public waiting and circulation areas. This totals 7,116 BGSF for a total project of 23,100 BGSF. At the conclusion to the report is the Cost Space Chart for this medical office building.

As can be seen by the Table below **the Applicant has met the size requirements** of the State Board for all services in which the State Board has standards. The Applicant provided a space plan for the 4th floor shell space and the modernization of the 2nd and 3rd floors of the medical office building. See pages 54-58 of the Application for Permit.

TABLE THREE Size of the Project						
Department/Service	# of Rooms/Units	Proposed GSF		State Board Standard		Met Standard
		Total	Room/Unit	Room/Unit	Total	
Ambulatory Care						
Exam Rooms	20	12,701	552	800 GSF	18,400	Yes
Office Based Exam Rooms	3					
MRI	1		1,503	1,800 GSF		Yes
PET	1		1,680	1,800 GSF		

B) Criterion 1110.120 - Projected Utilization²

Imaging

MRI

The Applicant is proposing 1 additional MRI for the Imaging Suite. The current MRI currently supports several specialties offered at Orland Park, and according to the Applicant since FY20,

² Appendix B: All Diagnostic and Treatment utilization numbers are the minimums per unit **for establishing more** than one unit, except where noted in 77 Ill. Adm. Code 1100.

has been operating above the state utilization standard of 2,500 procedures per year. In the first ten months of FY23, the MRI has been running at a rate of 4,483 procedures per year. The Applicant believes that at the conclusion of this project, the capacity for provider visits in the building will increase by 20% above current levels. The Applicant is estimating an increase in MRI procedures to grow in proportion to provider capacity for visits. This growth is expected to happen over two years of operation and will result in meeting the state standard of 5,000 procedures for the two machines. The Applicant is expecting 5,689 exams for the two MRI scanners which is in excess of the State Standard of 2,500 exams per machine.

PET

The Applicant is proposing a PET³ scanner for the Imaging Suite. The Applicant states projections for utilization are based on the experience at other University of Chicago Medical Center ambulatory clinics. Based on the clinics that are currently at the Orland Park MOB, and those that will be added as part of the Project, the Applicant is projecting 600 visits per year in the second year of operation and growing to more than 1,000 visits per year in future years. The Applicant utilized *Sg2 Market Forecast*, a 3rd party forecasting tool to estimate demand for specific services in the A-04 Hospital Planning Area, the demand for PET scans is projected to grow 12% between 2021 and 2029. The State Board Standard for more than one PET scanner is 3,600 scans per year. Because there will be just one PET scanner, the projected 600 annual scans in the second year of operation meets the standard set by the Review Board.

Based upon the historical growth in MRI exams the addition of a second MRI unit appears reasonable. Additionally based upon the historical growth in visits at the Orland Park facility the addition of providing PET scans at this facility appears justified.

³ A PET scanner detects early signs of cancer, heart disease and brain disorders. A PET scan is an imaging test that can help reveal the metabolic or biochemical function of your tissues and organs. The PET scan uses a radioactive drug (tracer) to show both normal and abnormal metabolic activity. A PET scan can often detect diseases before the disease shows up on other imaging tests, such as computerized tomography (CT) and magnetic resonance imaging (MRI). The PET images are typically combined with CT or **MRI** and are called PET-CT or PET-MRI. Many types of solid tumors can be detected by PET-CT and PET-MRI including brain, breast, cervical, colorectal esophageal, lung, pancreatic, prostate cancers. PET scans can also show if decreased areas of blood circulation in the heart that may indicate a need for certain heart procedures, such as coronary artery bypass surgery, and can help visualize the presence of seizures and Alzheimer's. The Applicant believes the PET scanner will complement and enhance the existing capability of the Diagnostic Suite and further reduce the need for patients to travel to the hospital for additional testing.

X. Clinical Services Other than Categories of Service

A) Criterion 1110.270 (c) (2) – Necessary Expansion

This project is considered a necessary expansion of the clinical services provided at the Orland Park Medical Office Building. The Table below outlines the expansion at this medical office building.

TABLE FOUR Expansion of Medical Office Building		
Imaging	Existing	Proposed
MRI	1	2
PET	0	1
Clinic Exam Rooms		
• New	0	17
• Relocated	3	3
Minor Procedure Rooms	0	3
Mobile cardiac Imaging Room	0	1
Stress Echo Testing	2	1
Vascular Testing Room	1	1

As documented above the Applicant proposes to complete the build out of the fourth floor of the Orland Park MOB with 18 multi-specialty exams rooms (17 new net exam rooms and 3 relocated room) and 1 minor procedure room in an outpatient clinic, a minor procedure suite with two minor procedure rooms equipped for GI endoscopy, colonoscopy² and other similar office-based procedures, dedicated space for cardiac and vascular testing, and a blood draw area. Additionally, the Applicant proposes to expand diagnostic imaging with one (1) additional MRI and one (1) PET scan in the existing diagnostic imaging suite on the second floor. Additionally, the Applicant states there will be small, renovated spaces on the second floor, including 2 renovated exam rooms. According to the Applicant based on current and planned provider FTEs, the new space on the 4th floor will result in an approximately 20% increase in clinical capacity exams in the building.

The Applicant states this project is an expansion of existing outpatient services in order to accommodate current and growing demand for ambulatory care. The Project includes a material expansion in Diagnostic Imaging Services, including a PET scan and MRI that will join an existing MRI, CT, ultrasound, mammography, radiographic, and fluoroscopic. One MRI in a Diagnostic Imaging Suite (Permit #14-023) has been approved.

The Applicant state the use of the MRI has been steady and growing, with the single MRI in use justifying twice the number of machines. Clinic expansion from the Project is expected to result in 20% more outpatient visits and MRI volumes are expected to increase proportionally. The Applicant expects that in the second year (2025), the proposed MRI machines will experience 5,689 exams combined, meeting the state standard of 2,500

exams per machine. Should the projections materialize the Applicant has met the requirements of this criterion. (See pages 61-64 of the Application for Permit)

TABLE FIVE Historical and Projected Utilization				
	Year	Historical	Projected	State Standard
MRI				
	FY18	1,788		2,500 procedures per unit
	FY19	1,961		
	FY20	2,920		
	FY21	3,771		
	FY22	4,272		
	FY23		4,483	
	FY24		5,185	
	FY25		5,689	
PET				
	FY18			3.600 visits/year
	FY19			
	FY20			
	FY21			
	FY22			
	FY23			
	FY24		450	
	FY25		600	

XI. Financial Viability and Economic Feasibility

A) Criterion 1120.120 – Availability of Funds

B) Criterion 1120.130 – Financial Viability

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

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

The Applicant is funding this project with cash in the amount of \$20,854,329. The Applicant has a bond rating of A- or better from Fitch's or Standard and Poor's rating agencies, or A3 or better from Moody's. The Applicant has met the requirements of the criteria listed above.

Fitchratings states “UChicago Medicine is a major Academic Medical Center system, whose flagship University of Chicago Medical Center campus is located on the campus of University of Chicago. In 2016, Ingalls joined University of Chicago Medical Center.

While the University of Chicago is not obligated on University of Chicago Medical Center's bonds, the University of Chicago Medical Center is a component unit of the University and there is very tight alignment between the two (UChicago would be required to assume certain University of Chicago Medical Center debt only if the University terminated its affiliation agreement or lease with the medical center). UChicago Medicine's total operating revenue measured nearly \$3 billion in audited fiscal 2022 (June 30 FYE). The planned acquisition of AdventHealth's Chicagoland assets will add nearly \$1 billion in operating revenue to the system."

TABLE SIX University of Chicago Medical Center Audited as of June 30 th (In thousands)			
	2022	2021	2020
Cash	\$60,997	\$184,839	\$538,725
Current Assets	\$828,914	\$1,083,667	\$1,123,564
Total Assets	\$4,179,357	\$4,534,317	\$4,100,832
Current Liabilities	\$653,545	\$811,017	\$887,502
Total Liabilities	\$1,954,697	\$2,219,013	\$2,305,054
Patient Service Revenue	\$2,548,487	\$2,331,509	\$2,048,957
Other	\$436,961	\$457,645	\$497,747
Total Revenue	\$2,985,448	\$2,789,154	\$2,546,704
Operating Expenses	\$2,903,167	\$2,669,969	\$2,496,769
Operating Income in Excess of Expenses	\$82,281	\$119,191	\$50,915
Revenue and Gains in Excess of Expenses and Losses	-\$71,959	\$509,588	\$75,558

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

Only the reviewable costs are considered in this analysis. Itemization of the cost in which the State Board does not have standard is included at the end of this report.

Site Preparation Costs total \$485,440 and are 13.94% of new construction costs of \$3,481,914. This appears HIGH when compared to the State Board Standard of 5% or \$174,096. The Applicant exceeds the State Board Standard by \$311,344 [\$174,096-\$485,440 = \$311,344].

New Construction and Contingency Costs total \$3,481,914 or \$304 per GSF. This appears reasonable when compared the State Board Standard of \$337.

Modernization and Contingency Costs total \$4,911,863 or \$757 per GSF. This is HIGH when compared the State Board Standard of \$254 per GSF.

Architectural and Engineering Fees total \$380,994 or 4.66% of new construction, modernization, and contingencies. This appears reasonable when compared to the State Board Standard of 9.82%.

The State Board does not have a standard for the costs listed below.

Consulting and Other Fees	\$528,924
Movable or Other Equipment	\$7,061,203
Net Interest Expense During Construction	\$667,410
Other Costs to Be Capitalized	\$283,343

F) Criterion 1120.140 (d) - Direct Operating Costs

The total direct operating cost per MRI PET and Exam visits is \$251. The State Board does not have a Standard for these costs.

G) Criterion 1120.140 (e) - Total Effect of the Project on Capital Costs

The total effect of the Project on Capital costs is \$1.61 per day. The State Board does not have a Standard for these costs.

APPENDIX ONE Charity Care Expense and Medicaid Revenue FY 2020 – FY 2022			
	FY 2020	FY 2021	FY 2022
Net Patient Revenue	\$1,746,725,000	\$2,000,232,997	\$2,188,854,056
Charity Patients			
Inpatient	940	340	460
Outpatient	21,192	14,870	10,012
Total	22,132	15,210	10,472
Charity cost			
Inpatient	\$17,320,551	\$3,505,779	\$13,413,005
Outpatient	\$24,157,208	\$16,982,180	\$13,541,260
Total	\$41,477,759	\$20,487,959	\$26,954,265
% Of Net Patient Revenue	2.37%	1.02%	1.23%
Medicaid Patients			
Inpatient	11,635	12,335	12,617
Outpatient	147,940	138,695	159,040
Total	159,575	151,030	171,657
Medicaid Revenue			
Inpatient	\$334,038,769	\$409,276,752	\$447,645,408
Outpatient	\$88,188,976	\$143,646,625	\$167,306,485
Total	\$422,227,745	\$552,923,377	\$614,951,893
% Of Net Patient Revenue	24.17%	27.64%	28.09%

APPENDIX II
Cost Space Requirements

	Permit #21-033			Revised Amounts		Difference			
Reviewable	Cost	Existing	Proposed	Cost	Proposed GSF	Cost	Proposed GSF	% Cost Increase	% GSF Increase
Outpatient Clinics	\$7,853,496	19,501	12,370	\$9,033,423	14,163	\$1,179,927	1,793	15.02%	14.49%
Infusion Therapy	\$0	7,171	0	\$0	0	\$0	0	0.00%	0.00%
Radiation Oncology	\$0	5,994	0	\$0	0	\$0	0	0.00%	0.00%
Diagnostic Imaging	\$6,947,558	11,085	3,614	\$8,767,668	4,116	\$1,820,110	502	26.20%	13.89%
Total Reviewable	\$14,801,054	43,751	15,984	\$17,801,091	18,279	\$3,000,037	2,295	20.27%	14.36%
Non-Reviewable									
Administrative	\$1,374,710	1,593	2,282	\$1,216,664	1,993	-\$158,046	-289	-11.50%	-12.66%
Public	\$1,274,505	7,465	2,633	\$913,507	2,001	-\$360,998	-632	-28.32%	-24.00%
Staff Support	\$759,040	1,992	1,537	\$594,839	1,338	-\$164,201	-199	-21.63%	-12.95%
Mechanical	\$321,459	2,375	664	\$328,229	1,007	\$6,770	343	2.11%	51.66%
Space to be leased	\$0	14,196	0	\$0	0	\$0	0	0.00%	0.00%
Parking Deck	\$0	132,000	0	\$0	0	\$0	0	0.00%	0.00%
Total Non-Reviewable	\$3,729,714	159,621	7,116	\$3,053,239	6,339	-\$676,475	-777	-18.14%	-10.92%
Project Total	\$18,530,768	203,372	23,100	\$20,854,330	24,618	\$2,323,562	1,518	12.54%	6.57%