

**ILLINOIS HEALTH FACILITIES AND SERVICES REVIEW BOARD
APPLICATION FOR PERMIT**

SECTION I. IDENTIFICATION, GENERAL INFORMATION, AND CERTIFICATION

This Section must be completed for all projects.

Facility/Project Identification

Facility Name: Marshall Square Dialysis		
Street Address: 2950 West 26 th Street		
City and Zip Code: Chicago, Illinois 60623		
County: Cook	Health Service Area: 6	Health Planning Area:

Applicant(s) [Provide for each applicant (refer to Part 1130.220)]

Exact Legal Name: DaVita Inc.
Street Address: 2000 16 th Street
City and Zip Code: Denver, Colorado 80201
Name of Registered Agent: Corporation Service Company
Registered Agent Street Address: 251 Little Falls Drive
Registered Agent City and Zip Code: Wilmington, Delaware 19808
Name of Chief Executive Officer: Javier J. Rodriguez
CEO Street Address: 2000 16 th Street
CEO City and Zip Code: Denver, Colorado 80201
CEO Telephone Number: 303-405-2100

Type of Ownership of Applicants

☐ Non-profit Corporation	☐ Partnership	
☒ For-profit Corporation	☐ Governmental	
☐ Limited Liability Company	☐ Sole Proprietorship	☐ Other
- o Corporations and limited liability companies must provide an Illinois certificate of good standing. - o Partnerships must provide the name of the state in which they are organized and the name and address of each partner specifying whether each is a general or limited partner.		
APPEND DOCUMENTATION AS ATTACHMENT 1 IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.		

Primary Contact [Person to receive ALL correspondence or inquiries]

Name: Kara Friedman/Anne Cooper
Title: Attorney
Company Name: Polsinelli PC
Address: 150 North Riverside Plaza, Suite 3000
Telephone Number: 312-873-3639/312-873-3606
E-mail Address: kfriedman@polsinelli.com/acooper@polsinelli.com
Fax Number:

Additional Contact [Person who is also authorized to discuss the application for permit]

Name: Rahul Kapoor
Title: Divisional Vice President
Company Name: DaVita Inc.
Address:
Telephone Number:
E-mail Address: rahul.kapoor@davita.com
Fax Number:

Facility/Project Identification

Facility Name: Marshall Square Dialysis		
Street Address: 2950 West 26 th Street		
City and Zip Code: Chicago, Illinois 60623		
County: Cook	Health Service Area: 6	Health Planning Area:

Applicant(s) [Provide for each applicant (refer to Part 1130.220)]

Exact Legal Name: East Oaks Dialysis, LLC d/b/a Marshall Square Dialysis
Street Address: 2000 16 th Street
City and Zip Code: Denver, Colorado 80202
Name of Registered Agent: Illinois Corporation Services Company
Registered Agent Street Address: 801 Adlai Stevenson Drive
Registered Agent City and Zip Code: Springfield, Illinois 62703
Name of Chief Executive Officer: Javier J. Rodriguez
CEO Street Address: 2000 16 th Street
CEO City and Zip Code: Denver, Colorado 80201
CEO Telephone Number: 303-405-2100

Type of Ownership of Applicants

☐ Non-profit Corporation	☐ Partnership	
☐ For-profit Corporation	☐ Governmental	
☒ Limited Liability Company	☐ Sole Proprietorship	☐ Other

o Corporations and limited liability companies must provide an **Illinois certificate of good standing**.

o Partnerships must provide the name of the state in which they are organized and the name and address of each partner specifying whether each is a general or limited partner.

APPEND DOCUMENTATION AS ATTACHMENT 1 IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

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Fax Number:

Additional Contact [Person who is also authorized to discuss the application for permit]

Name: Rahul Kapoor
Title: Divisional Vice President
Company Name: DaVita Inc.
Address:
Telephone Number:
E-mail Address: rahul.kapoor@davita.com
Fax Number:

Post Permit Contact

[Person to receive all correspondence after permit issuance-**THIS PERSON MUST BE EMPLOYED BY THE LICENSED HEALTH CARE FACILITY AS DEFINED AT 20 ILCS 3960**]

Name: Kara Friedman/Anne Cooper
Title: Attorney
Company Name: Polsinelli PC
Address: 150 North Riverside Plaza, Suite 3000
Telephone Number: 312-873-3639/312-873-3606
E-mail Address: kfriedman@polsinelli.com / acooper@polsinelli.com
Fax Number:

Site Ownership

[Provide this information for each applicable site]

Exact Legal Name of Site Owner: Dr. Chong Lee
Address of Site Owner: 6295 Whitedale Drive, Coopersburg, Pennsylvania 18036
Street Address or Legal Description of the Site: 2950 West 26 th Street, Chicago, Illinois 60623 Proof of ownership or control of the site is to be provided as Attachment 2. Examples of proof of ownership are property tax statements, tax assessor's documentation, deed, notarized statement of the corporation attesting to ownership, an option to lease, a letter of intent to lease, or a lease.
APPEND DOCUMENTATION AS ATTACHMENT 2, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

Operating Identity/Licensee

[Provide this information for each applicable facility and insert after this page.]

Exact Legal Name: East Oaks Dialysis, LLC d/b/a Marshall Square Dialysis			
Address: 2000 16 th Street, Denver, Colorado 80201			
☐	Non-profit Corporation	☐	Partnership
☐	For-profit Corporation	☐	Governmental
☒	Limited Liability Company	☐	Sole Proprietorship
		☐	Other
- o Corporations and limited liability companies must provide an Illinois Certificate of Good Standing. - o Partnerships must provide the name of the state in which organized and the name and address of each partner specifying whether each is a general or limited partner. - o Persons with 5 percent or greater interest in the licensee must be identified with the % of ownership.			
APPEND DOCUMENTATION AS ATTACHMENT 3, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.			

Organizational Relationships

Provide (for each applicant) an organizational chart containing the name and relationship of any person or entity who is related (as defined in Part 1130.140). If the related person or entity is participating in the development or funding of the project, describe the interest and the amount and type of any financial contribution.

APPEND DOCUMENTATION AS ATTACHMENT 4, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

Flood Plain Requirements

[Refer to application instructions.]

Provide documentation that the project complies with the requirements of Illinois Executive Order #2006-5 pertaining to construction activities in special flood hazard areas. As part of the flood plain requirements, please provide a map of the proposed project location showing any identified floodplain areas. Floodplain maps can be printed at www.FEMA.gov or www.illinoisfloodmaps.org. **This map must be in a readable format.** In addition, please provide a statement attesting that the project complies with the requirements of Illinois Executive Order #2006-5 (<http://www.hfsrb.illinois.gov>). **NOTE:** A SPECIAL FLOOD HAZARD AREA AND 500-YEAR FLOODPLAIN DETERMINATION FORM has been added at the conclusion of this Application for Permit that must be completed to deem a project complete.

APPEND DOCUMENTATION AS ATTACHMENT 5, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

Historic Resources Preservation Act Requirements

[Refer to application instructions.]

Provide documentation regarding compliance with the requirements of the Historic Resources Preservation Act.

APPEND DOCUMENTATION AS ATTACHMENT 6, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

DESCRIPTION OF PROJECT**1. Project Classification**

[Check those applicable - refer to Part 1110.20 and Part 1120.20(b)]

Part 1110 Classification :

- ☒ Substantive
- ☐ Non-substantive

2. Narrative Description

In the space below, provide a brief narrative description of the project. Explain **WHAT** is to be done in **State Board defined terms**, **NOT WHY** it is being done. If the project site does NOT have a street address, include a legal description of the site. Include the rationale regarding the project's classification as substantive or non-substantive.

DaVita Inc. and East Oaks Dialysis, LLC (collectively, the “Applicants” or “DaVita”) seek authority from the Illinois Health Facilities and Services Review Board (the “State Board”) to discontinue its 12 station in-center hemodialysis center located at 2950 West 26th Street, Chicago, Illinois.

DaVita anticipates Marshall Square Dialysis will be permanently discontinued as soon as practicable after State Board approval but no later than June 1, 2024. Project completion will occur soon after.

The project constitutes a substantive project because it proposes the discontinuation of a health care facility.

Project Costs and Sources of Funds

Complete the following table listing all costs (refer to Part 1120.110) associated with the project. When a project or any component of a project is to be accomplished by lease, donation, gift, or other means, the fair market or dollar value (refer to Part 1130.140) of the component must be included in the estimated project cost. If the project contains non-reviewable components that are not related to the provision of health care, complete the second column of the table below. Note, the use and sources of funds must be equal.

Project Costs and Sources of Funds			
USE OF FUNDS	CLINICAL	NONCLINICAL	TOTAL
Preplanning Costs			
Site Survey and Soil Investigation			
Site Preparation			
Off Site Work			
New Construction Contracts			
Modernization Contracts			
Contingencies			
Architectural/Engineering Fees			
Consulting and Other Fees			
Movable or Other Equipment (not in construction contracts)			
Bond Issuance Expense (project related)			
Net Interest Expense During Construction (project related)			
Fair Market Value of Leased Space or Equipment			
Other Costs to Be Capitalized			
Acquisition of Building or Other Property (excluding land)			
TOTAL USES OF FUNDS	\$0	\$0	\$0
SOURCE OF FUNDS	CLINICAL	NONCLINICAL	TOTAL
Cash and Securities			
Pledges			
Gifts and Bequests			
Bond Issues (project related)			
Mortgages			
Leases (fair market value)			
Governmental Appropriations			
Grants			
Other Funds and Sources			
TOTAL SOURCES OF FUNDS	\$0	\$0	\$0
NOTE: ITEMIZATION OF EACH LINE ITEM MUST BE PROVIDED AT ATTACHMENT 7, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.			

Related Project Costs

Provide the following information, as applicable, with respect to any land related to the project that will be or has been acquired during the last two calendar years:

Land acquisition is related to project ☐ Yes ☒ No Purchase Price: \$ _____ Fair Market Value: \$ _____
The project involves the establishment of a new facility or a new category of service ☐ Yes ☒ No If yes, provide the dollar amount of all non-capitalized operating start-up costs (including operating deficits) through the first full fiscal year when the project achieves or exceeds the target utilization specified in Part 1100. Estimated start-up costs and operating deficit cost is \$ _____.

Project Status and Completion Schedules

For facilities in which prior permits have been issued please provide the permit numbers.
Indicate the stage of the project's architectural drawings: ☒ None or not applicable ☐ Preliminary ☐ Schematics ☐ Final Working
Anticipated project completion date (refer to Part 1130.140): <u>June 1, 2024</u>
Indicate the following with respect to project expenditures or to financial commitments (refer to Part 1130.140): NOT APPLICABLE ☐ Purchase orders, leases or contracts pertaining to the project have been executed. ☐ Financial commitment is contingent upon permit issuance. Provide a copy of the contingent "certification of financial commitment" document, highlighting any language related to CON Contingencies ☐ Financial Commitment will occur after permit issuance.
APPEND DOCUMENTATION AS <u>ATTACHMENT 8</u>, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

State Agency Submittals [Section 1130.620(c)]

Are the following submittals up to date as applicable? ☐ Cancer Registry NOT APPLICABLE ☐ APORS NOT APPLICABLE ☒ All formal document requests such as IDPH Questionnaires and Annual Bed Reports been submitted ☒ All reports regarding outstanding permits Failure to be up to date with these requirements will result in the application for permit being deemed incomplete.
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Cost Space Requirements – NOT APPLICABLE

Provide in the following format, the **Departmental Gross Square Feet (DGSF)** or the **Building Gross Square Feet (BGSF)** and cost. The type of gross square footage either **DGSF** or **BGSF** must be identified. The sum of the department costs **MUST** equal the total estimated project costs. Indicate if any space is being reallocated for a different purpose. Include outside wall measurements plus the departments or area's portion of the surrounding circulation space. **Explain the use of any vacated space.**

Not Reviewable Space [i.e., non-clinical]: means an area for the benefit of the patients, visitors, staff, or employees of a health care facility and not directly related to the diagnosis, treatment, or rehabilitation of persons receiving services from the health care facility. "Non-clinical service areas" include, but are not limited to, chapels; gift shops; newsstands; computer systems; tunnels, walkways, and elevators; telephone systems; projects to comply with life safety codes; educational facilities; student housing; patient, employee, staff, and visitor dining areas; administration and volunteer offices; modernization of structural components (such as roof replacement and masonry work); boiler repair or replacement; vehicle maintenance and storage facilities; parking facilities; mechanical systems for heating, ventilation, and air conditioning; loading docks; and repair or replacement of carpeting, tile, wall coverings, window coverings or treatments, or furniture. Solely for the purpose of this definition, "non-clinical service area" does not include health and fitness centers. [20 ILCS 3960/3]

Dept. / Area	Cost	Gross Square Feet		Amount of Proposed Total Gross Square Feet That Is:			
		Existing	Proposed	New Const.	Modernized	As Is	Vacated Space
REVIEWABLE							
Medical Surgical							
Intensive Care							
Diagnostic Radiology							
MRI							
Total Clinical							
NON-REVIEWABLE							
Administrative							
Parking							
Gift Shop							
Total Non-clinical							
TOTAL							

APPEND DOCUMENTATION AS **ATTACHMENT 9**, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

Facility Bed Capacity and Utilization – NOT APPLICABLE

Complete the following chart, as applicable. Complete a separate chart for each facility that is a part of the project and insert the chart after this page. Provide the existing bed capacity and utilization data for the latest **Calendar Year for which data is available. Include observation days in the patient day totals for each bed service.** Any bed capacity discrepancy from the Inventory will result in the application being deemed **incomplete**.

FACILITY NAME:		CITY:			
REPORTING PERIOD DATES:					
		From:		to:	
Category of Service	Authorized Beds	Admissions	Patient Days	Bed Changes	Proposed Beds
Medical/Surgical					
Obstetrics					
Pediatrics					
Intensive Care					
Comprehensive Physical Rehabilitation					
Acute/Chronic Mental Illness					
Neonatal Intensive Care					
General Long-Term Care					
Specialized Long-Term Care					
Long Term Acute Care					
Other ((identify)					
TOTALS:					

CERTIFICATION

The Application must be signed by the authorized representatives of the applicant entity. Authorized representatives are:

- in the case of a corporation, any two of its officers or members of its Board of Directors.
- in the case of a limited liability company, any two of its managers or members (or the sole manager or member when two or more managers or members do not exist).
- in the case of a partnership, two of its general partners (or the sole general partner, when two or more general partners do not exist).
- in the case of estates and trusts, two of its beneficiaries (or the sole beneficiary when two or more beneficiaries do not exist); and
- in the case of a sole proprietor, the individual that is the proprietor.

This Application is filed on the behalf of DaVita Inc.* in accordance with the requirements and procedures of the Illinois Health Facilities Planning Act. The undersigned certifies that he or she has the authority to execute and file this Application on behalf of the applicant entity. The undersigned further certifies that the data and information provided herein, and appended hereto, are complete and correct to the best of his or her knowledge and belief. The undersigned also certifies that the fee required for this application is sent herewith or will be paid upon request.



SIGNATURE

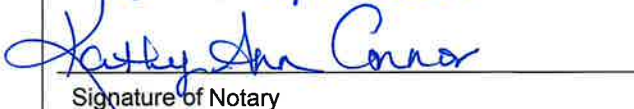
Michael D. Staffieri

PRINTED NAME

Chief Operating Officer

PRINTED TITLE

Notarization:

Subscribed and sworn to before me
this 15th day of April, 2024


Signature of Notary

Seal

Kathy Ann Connor

NOTARY PUBLIC

STATE OF COLORADO

NOTARY ID# 20064018112

MY COMMISSION EXPIRES 04/28/2025

*Insert EXACT legal name of the applicant



SIGNATURE

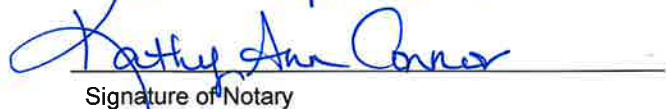
Christopher M. Berry

PRINTED NAME

Chief Accounting Officer

PRINTED TITLE

Notarization:

Subscribed and sworn to before me
this 15th day of April, 2024


Signature of Notary

Seal

Kathy Ann Connor

NOTARY PUBLIC

STATE OF COLORADO

NOTARY ID# 20064018112

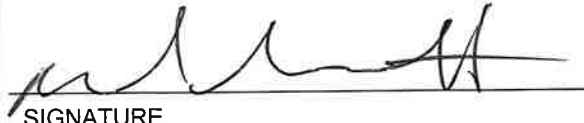
MY COMMISSION EXPIRES 04/28/2025

CERTIFICATION

The Application must be signed by the authorized representatives of the applicant entity. Authorized representatives are:

- in the case of a corporation, any two of its officers or members of its Board of Directors.
- in the case of a limited liability company, any two of its managers or members (or the sole manager or member when two or more managers or members do not exist).
- in the case of a partnership, two of its general partners (or the sole general partner, when two or more general partners do not exist).
- in the case of estates and trusts, two of its beneficiaries (or the sole beneficiary when two or more beneficiaries do not exist); and
- in the case of a sole proprietor, the individual that is the proprietor.

This Application is filed on the behalf of East Oaks Dialysis, LLC d/b/a Marshall Square Dialysis* in accordance with the requirements and procedures of the Illinois Health Facilities Planning Act. The undersigned certifies that he or she has the authority to execute and file this Application on behalf of the applicant entity. The undersigned further certifies that the data and information provided herein, and appended hereto, are complete and correct to the best of his or her knowledge and belief. The undersigned also certifies that the fee required for this application is sent herewith or will be paid upon request.



SIGNATURE

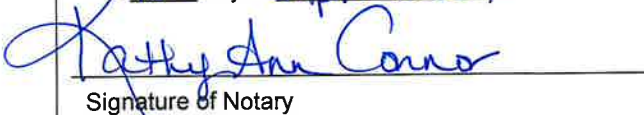
Michael D. Staffieri

PRINTED NAME

President

PRINTED TITLE

Notarization:

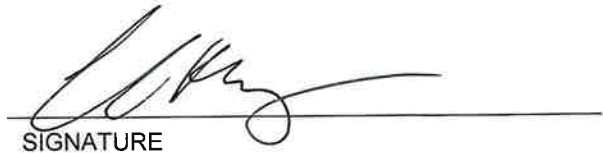
Subscribed and sworn to before me
this 15th day of April, 2024


Signature of Notary

Seal

Kathy Ann Connor
NOTARY PUBLIC
STATE OF COLORADO
NOTARY ID# 20064018112
MY COMMISSION EXPIRES 04/28/2025

*Insert EXACT legal name of the applicant



SIGNATURE

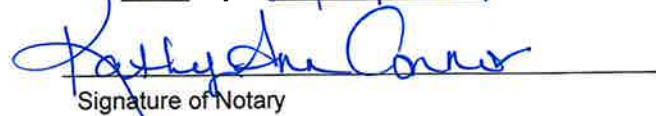
Christopher M. Berry

PRINTED NAME

Chief Accounting Officer

PRINTED TITLE

Notarization:

Subscribed and sworn to before me
this 15th day of April, 2024


Signature of Notary

Seal

Kathy Ann Connor
NOTARY PUBLIC
STATE OF COLORADO
NOTARY ID# 20064018112
MY COMMISSION EXPIRES 04/28/2025

SECTION II. DISCONTINUATION

This Section is applicable to the discontinuation of a health care facility or the discontinuation of more than one category of service in a 6-month period. If the project is solely for a discontinuation of a health care facility the **Background of the Applicant(s) and Purpose of Project MUST** be addressed. **A copy of the Notices listed in Item 7 below MUST be submitted with this Application for Discontinuation** <https://www.ilga.gov/legislation/ilcs/documents/002039600K8.7.htm>

Criterion 1110.290 – Discontinuation

READ THE REVIEW CRITERION and provide the following information:

GENERAL INFORMATION REQUIREMENTS

1. Identify the categories of service and the number of beds, if any that are to be discontinued.
2. Identify all the other clinical services that are to be discontinued.
3. Provide the anticipated date of discontinuation for each identified service or for the entire facility.
4. Provide the anticipated use of the physical plant and equipment after the discontinuation occurs.
5. Provide the anticipated disposition and location of all medical records pertaining to the services being discontinued and the length of time the records will be maintained.
6. Provide copies of the notices that were provided to the local media that would routinely be notified about facility events.
7. **For applications involving the discontinuation of an entire facility, provide copies of the notices that were sent to the municipality in which the facility is located, the State Representative and State Senator of the district in which the health care facility is located, the Director of Public Health, and the Director of Healthcare and Family Services. These notices shall have been made at least 30 days prior to filing of the application.**
8. For applications involving the discontinuation of an entire facility, certification by an authorized representative that all questionnaires and data required by HFSRB or DPH (e.g., annual questionnaires, capital expenditures surveys, etc.) will be provided through the date of discontinuation, and that the required information will be submitted no later than 90 days following the date of discontinuation.

REASONS FOR DISCONTINUATION

The applicant shall state the reasons for the discontinuation and provide data that verifies the need for the proposed action. See criterion 1110.290(b) for examples.

IMPACT ON ACCESS

1. Document whether the discontinuation of each service or of the entire facility will have an adverse effect upon access to care for residents of the facility's market area.
2. Document that a written request for an impact statement was received by all existing or approved health care facilities (that provide the same services as those being discontinued) located within the **geographic service area**.

APPEND DOCUMENTATION AS **ATTACHMENT 10**, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

SECTION III. BACKGROUND, PURPOSE OF THE PROJECT, AND ALTERNATIVES - INFORMATION REQUIREMENTS

This Section is applicable to all projects except those that are solely for discontinuation with no project costs.

1110.110(a) – Background of the Applicant

READ THE REVIEW CRITERION and provide the following required information:

BACKGROUND OF APPLICANT

1. A listing of all health care facilities owned or operated by the applicant, including licensing, and certification if applicable.
2. A listing of all health care facilities currently owned and/or operated in Illinois, by any corporate officers or directors, LLC members, partners, or owners of at least 5% of the proposed health care facility.
3. For the following questions, please provide information for each applicant, including corporate officers or directors, LLC members, partners, and owners of at least 5% of the proposed facility. A health care facility is considered owned or operated by every person or entity that owns, directly or indirectly, an ownership interest.
 - a. A certified listing of any adverse action taken against any facility owned and/or operated by the applicant, directly or indirectly, during the three years prior to the filing of the application.
 - b. A certified listing of each applicant, identifying those individuals that have been 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. Unless expunged, provide details about the conviction, and submit any police or court records regarding any matters disclosed.
 - c. A certified and detailed listing of each applicant or person charged with fraudulent conduct or any act involving moral turpitude.
 - d. A certified listing of each applicant with one or more unsatisfied judgements against him or her.
 - e. A certified and detailed listing of each applicant who is in default in the performance or discharge of any duty or obligation imposed by a judgment, decree, order or directive of any court or governmental agency.
4. Authorization permitting HFSRB and DPH access to any documents necessary to verify the information submitted, including, but not limited to official records of DPH or other State agencies; the licensing or certification records of other states, when applicable; and the records of nationally recognized accreditation organizations. **Failure to provide such authorization shall constitute an abandonment or withdrawal of the application without any further action by HFSRB.**
5. If, during a given calendar year, an applicant submits more than one application for permit, the documentation provided with the prior applications may be utilized to fulfill the information requirements of this criterion. In such instances, the applicant shall attest that the information was previously provided, cite the project number of the prior application, and certify that no changes have occurred regarding the information that has been previously provided. The applicant can submit amendments to previously submitted information, as needed, to update and/or clarify data.

APPEND DOCUMENTATION AS ATTACHMENT 11, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM. EACH ITEM (1-4) MUST BE IDENTIFIED IN ATTACHMENT 11.

Criterion 1110.110(b) & (d)**PURPOSE OF PROJECT**

1. Document that the project will provide health services that improve the health care or well-being of the market area population to be served.
2. Define the planning area or market area, or other relevant area, per the applicant's definition.
3. Identify the existing problems or issues that need to be addressed as applicable and appropriate for the project.
4. Cite the sources of the documentation.
5. Detail how the project will address or improve the previously referenced issues, as well as the population's health status and well-being.
6. Provide goals with quantified and measurable objectives, with specific timeframes that relate to achieving the stated goals **as appropriate**.

For projects involving modernization, describe the conditions being upgraded, if any. For facility projects, include statements of the age and condition of the project site, as well as regulatory citations, if any. For equipment being replaced, include repair and maintenance records.

NOTE: Information regarding the "Purpose of the Project" will be included in the State Board Staff Report.

APPEND DOCUMENTATION AS ATTACHMENT 12, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM. EACH ITEM (1-6) MUST BE IDENTIFIED IN ATTACHMENT 12.

SECTION X. SAFETY NET IMPACT STATEMENT

SAFETY NET IMPACT STATEMENT that describes all the following must be submitted for ALL SUBSTANTIVE PROJECTS AND PROJECTS TO DISCONTINUE HEALTH CARE FACILITIES [20 ILCS 3960/5.4]:

1. The project's material impact, if any, on essential safety net services in the community, **including the impact on racial and health care disparities in the community**, to the extent that it is feasible for an applicant to have such knowledge.
2. 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.
3. How the discontinuation of a facility or service might impact the remaining safety net providers in each community, if reasonably known by the applicant.

Safety Net Impact Statements shall also include all the following:

1. For the 3 fiscal years prior to the application, a certification describing the amount of charity care provided by the applicant. The amount calculated by hospital applicants shall be in accordance with the reporting requirements for charity care reporting in the Illinois Community Benefits Act. Non-hospital applicants shall report charity care, at cost, in accordance with an appropriate methodology specified by the Board.
2. For the 3 fiscal years prior to the application, a certification of the amount of care provided to Medicaid patients. Hospital and non-hospital applicants shall provide Medicaid information in a manner consistent with the information reported each year to the Illinois Department of Public Health regarding "Inpatients and Outpatients Served by Payor Source" and "Inpatient and Outpatient Net Revenue by Payor Source" as required by the Board under Section 13 of this Act and published in the Annual Hospital Profile.
3. Any information the applicant believes is directly relevant to safety net services, including information regarding teaching, research, and any other service.

A table in the following format must be provided as part of Attachment 37.

Safety Net Information per PA 96-0031			
CHARITY CARE			
Charity (# of patients)	Year	Year	Year
Inpatient			
Outpatient			
Total			
Charity (cost in dollars)	Year	Year	Year
Inpatient			
Outpatient			
Total			
MEDICAID			
Medicaid (# of patients)	Year	Year	Year
Inpatient			
Outpatient			
Total			
Medicaid (revenue)	Year	Year	Year
Inpatient			

	Outpatient				
	Total				

APPEND DOCUMENTATION AS ATTACHMENT 38, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

SECTION X. CHARITY CARE INFORMATION

Charity Care information **MUST** be furnished for **ALL** projects [1120.20(c)].

1. All applicants and co-applicants shall indicate the amount of charity care for the latest three **audited** fiscal years, the cost of charity care and the ratio of that charity care cost to net patient revenue.
2. If the applicant owns or operates one or more facilities, the reporting shall be for each individual facility located in Illinois. If charity care costs are reported on a consolidated basis, the applicant shall provide documentation as to the cost of charity care; the ratio of that charity care to the net patient revenue for the consolidated financial statement; the allocation of charity care costs; and the ratio of charity care cost to net patient revenue for the facility under review.
3. If the applicant is not an existing facility, it shall submit the facility's projected patient mix by payer source, anticipated charity care expense and projected ratio of charity care to net patient revenue by the end of its second year of operation.

Charity care" means care provided by a health care facility for which the provider does not expect to receive payment from the patient or a third-party payer (20 ILCS 3960/3). Charity Care **must** be provided at cost.

A table in the following format must be provided for all facilities as part of Attachment 39.

CHARITY CARE			
	Year	Year	Year
Net Patient Revenue			
Amount of Charity Care (charges)			
Cost of Charity Care			

APPEND DOCUMENTATION AS **ATTACHMENT 39**, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

Section I, Identification, General Information, and Certification
Applicants

Certificates of Good Standing for DaVita Inc. and East Oaks Dialysis, LLC (collectively, the “Applicants” or “DaVita”) are attached at Attachment – 1.

East Oaks Dialysis, LLC is the operator of Marshall Square Dialysis. Marshall Square Dialysis is a trade name of East Oaks Dialysis, LLC and is not separately organized.

As the person with final control over the operator, DaVita Inc. is named as an applicant for this CON application. DaVita Inc. does not do business in the State of Illinois. A Certificate of Good Standing for DaVita Inc. from the state of its incorporation, Delaware, is attached.

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DAVITA INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINTH DAY OF SEPTEMBER, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DAVITA INC." WAS INCORPORATED ON THE FOURTH DAY OF APRIL, A.D. 1994.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



2391269 8300

SR# 20223483981

You may verify this certificate online at corp.delaware.gov/authver.shtml

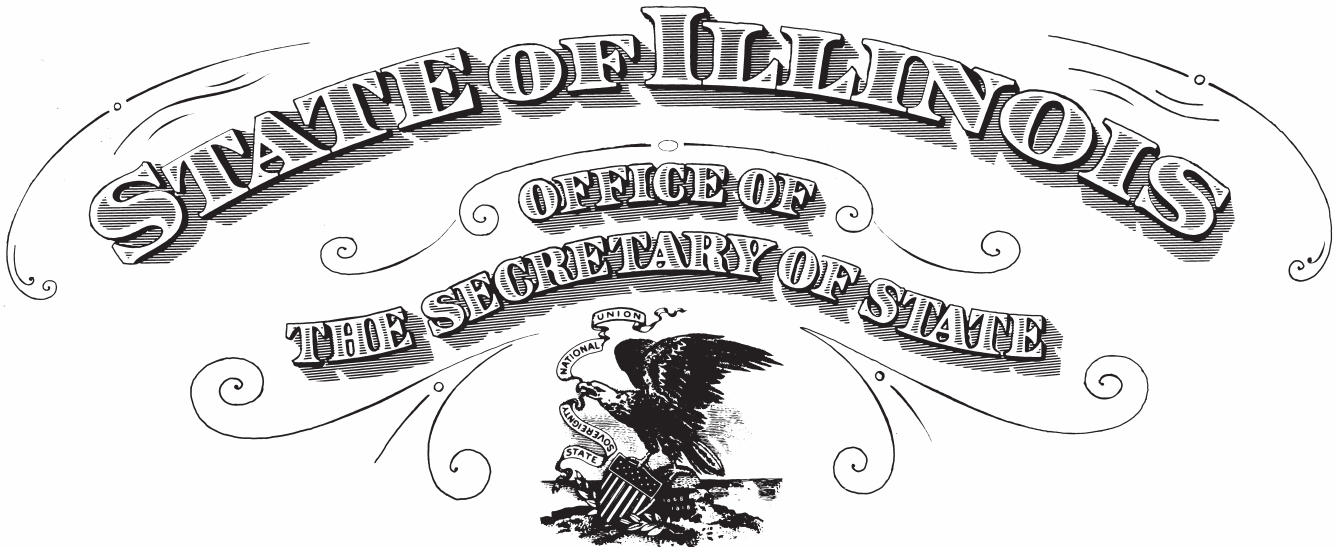
A handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 204354660

Date: 09-09-22

File Number

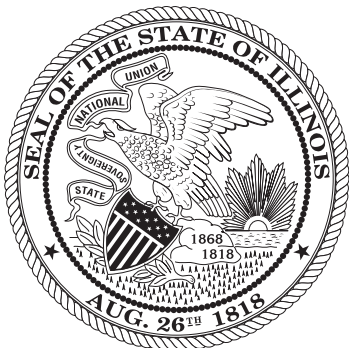
0638887-6



To all to whom these Presents Shall Come, Greeting:

I, Alexi Giannoulas, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

EAST OAKS DIALYSIS, LLC, A DELAWARE LIMITED LIABILITY COMPANY HAVING OBTAINED ADMISSION TO TRANSACT BUSINESS IN ILLINOIS ON OCTOBER 13, 2017, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A FOREIGN LIMITED LIABILITY COMPANY ADMITTED TO TRANSACT BUSINESS IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 19TH day of APRIL A.D. 2024 .

Authentication #: 2411003580 verifiable until 04/19/2025

Authenticate at: <https://www.ilsos.gov>

Alexi Giannoulas

SECRETARY OF STATE

Section I, Identification, General Information, and Certification
Site Ownership

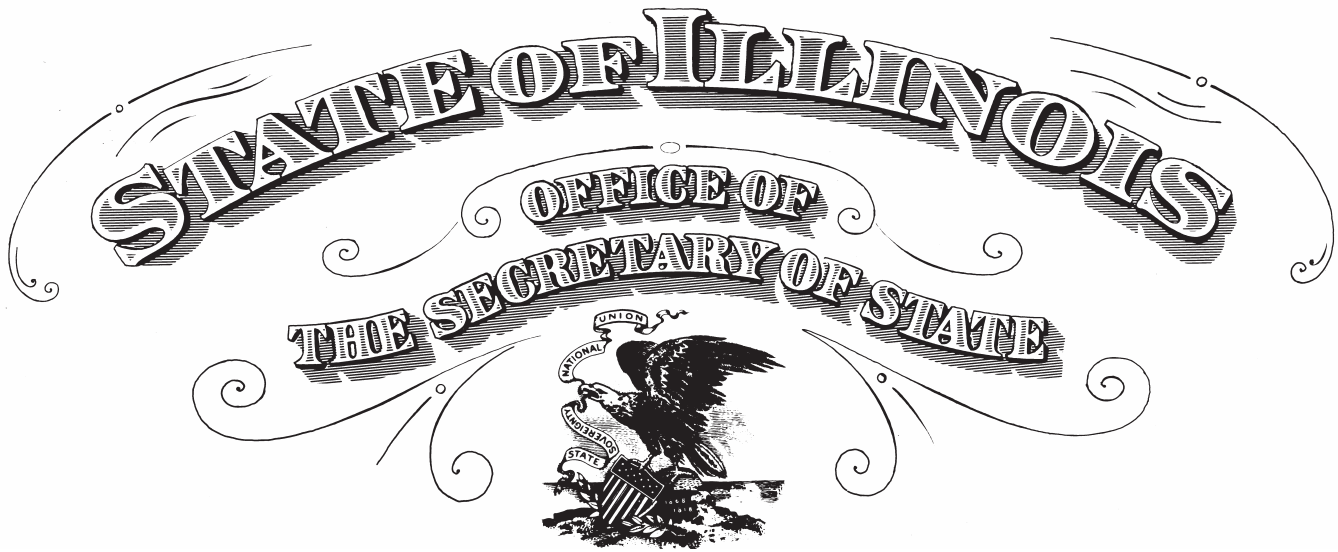
By signing the certification pages within this application, the Applicants attest they control the site located at 2950 West 26th Street, Chicago, Illinois.

Section I, Identification, General Information, and Certification
Operating Entity/Licensee

The Illinois Certificate of Good Standing for East Oaks Dialysis, LLC is attached at Attachment – 3.

File Number

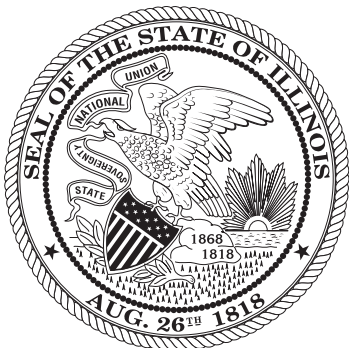
0638887-6



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EAST OAKS DIALYSIS, LLC, A DELAWARE LIMITED LIABILITY COMPANY HAVING OBTAINED ADMISSION TO TRANSACT BUSINESS IN ILLINOIS ON OCTOBER 13, 2017, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A FOREIGN LIMITED LIABILITY COMPANY ADMITTED TO TRANSACT BUSINESS IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 19TH day of APRIL A.D. 2024 .

Authentication #: 2411003580 verifiable until 04/19/2025

Authenticate at: <https://www.ilsos.gov>

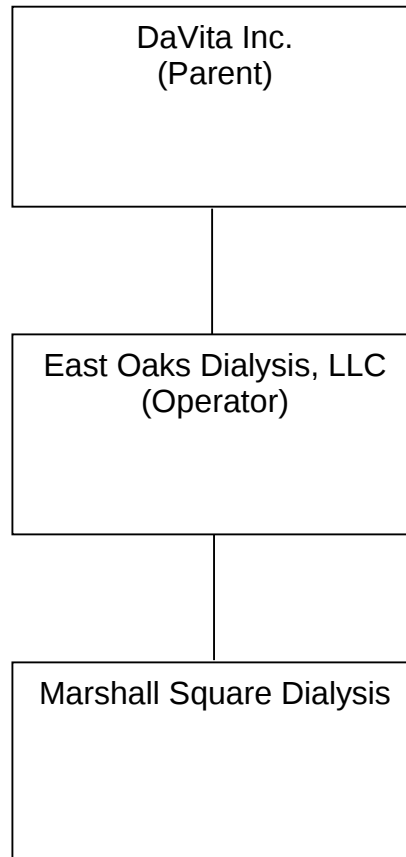
Alexi Giannoulas

SECRETARY OF STATE

Section I, Identification, General Information, and Certification
Organizational Relationships

The organizational chart for DaVita Inc., East Oaks Dialysis, LLC, and Marshall Square Dialysis is attached at Attachment – 4.

Marshall Square Dialysis Organization Chart



Section I, Identification, General Information, and Certification
Flood Plain Requirements

This project does not involve construction or modernization of a health care facility. Accordingly, this criterion is not applicable.

Section I, Identification, General Information, and Certification
Historic Resources Preservation Act Requirements

This project does not involve construction or modernization of a health care facility. Accordingly, this criterion is not applicable.

Section I, Identification, General Information, and Certification
Project Costs and Sources of Funds

This project involves no costs. Accordingly, this criterion is not applicable.

Section II, Discontinuation
Criterion 1110.290(a), General

1. DaVita will discontinue its 12-station in-center hemodialysis center located at 2950 West 26th Street, Chicago, Illinois.
2. No other clinical services will be discontinued as a result of this project.
3. Anticipated Discontinuation Date: June 1, 2024.
4. The Applicants lease space from a third-party landlord. As a result, DaVita will have no control over the use of the space after discontinuation of Marshall Square Dialysis.
5. The medical records of Marshall Square Dialysis will be transferred to another nearby DaVita dialysis center location.
6. A copy of the notice of the discontinuation of Marshall Square Dialysis published on April 22, 2024, is attached at Attachment – 10A1.
7. DaVita provided notice of its intent to file a certificate of need application to discontinue Marshall Square Dialysis to the following state and local officials: (a) Honorable Brandon Johnson, Mayor, City of Chicago; (b) Illinois State Senator Celina Villanueva; (c) Illinois State Representative Edgar Gonzalez, Jr.; (d) Director Sameer Vohra, M.D., J.D., M.A., Illinois Department of Public Health; (e) Director Elizabeth Whitehorn, Illinois Department of Healthcare and Family Services; and (f) John Kniery, Administrator, Illinois Health Facilities and Services Review Board. Copies of the notices are attached at Attachment – 10A2.
8. Attached at Attachment – 10A3 is the certification by Michael D. Staffieri, Chief Operating Officer of DaVita that all questionnaires and data required by HFSRB or IDPH (e.g., annual questionnaires, capital expenditure surveys, etc.) will be provided through the date of discontinuation and that the required information will be submitted no later than 90 days following the date of discontinuation.

Sold To:
Anne M. Cooper - CU80179403
150 N. Riverside Plaza Suite 3000
Chicago, IL 60606

Bill To:
Anne M. Cooper - CU80179403
150 N. Riverside Plaza Suite 3000
Chicago, IL 60606

Classified Advertising: 7623203
Purchase Order: 7623203 Marshall Square Legal

Certificate of Publication:

State of Illinois - Cook

Chicago Tribune Media Group does hereby certify that it is the publisher of the Chicago Tribune. The Chicago Tribune is a secular newspaper, has been continuously published Daily for more than fifty (50) weeks prior to the first publication of the attached notice, is published in the City of Chicago, State of Illinois, is of general circulation throughout that county and surrounding area, and is a newspaper as defined by 715 IL CS 5/5.

This is to certify that a notice, a true copy of which is attached, was published 1 time(s) in the Chicago Tribune, namely one time per week or on 1 successive weeks. The first publication of the notice was made in the newspaper, dated and published on 4/22/2024, and the last publication of the notice was made in the newspaper dated and published on 4/22/2024.

This notice was also placed on a statewide public notice website as required by 715 ILCS 5/2. 1.

On the following days, to-wit: **Apr 22, 2024.**

Executed at Chicago, Illinois on this

23rd Day of April, 2024, by

Chicago Tribune Company



Jeremy Gates

CLOSURE OF MARSHALL SQUARE DIALYSIS
DaVita Inc. and East Oaks Dialysis, LLC (collectively, "DaVita") intend to discontinue Marshall Square Dialysis after approval to do so is issued by the Illinois Health Facilities and Services Review Board ("HFSRB"). DaVita will file the required Certificate of Need application with the HFSRB on or about April 26, 2024. The expected closure date will be June 1, 2024. A copy of the application will be available on the HFSRB website (<https://www2.illinois.gov/sites/hfsrb/Pages/default.aspx>) after the application has been deemed complete by the HFSRB.
April 22, 2024 - 7623203



150 N. Riverside Plaza, Suite 3000, Chicago, IL 60606-1599 • 312.819.1900

March 27, 2024

Via Certified Mail

Anne M. Cooper
312.873.3606
312.276.4317 Fax
acooper@polsinelli.com

The Honorable Brandon Johnson
Mayor
City of Chicago
121 North Clark Street
Chicago, Illinois 60602

Re: Marshall Square Dialysis

Dear Mayor Johnson:

This office represents DaVita Inc. and East Oaks Dialysis LLC d/b/a Marshall Square Dialysis (collectively, "DaVita"). Pursuant to 20 Ill. Comp. Stat. 3960/8.7(a), I am writing on behalf of DaVita to notify you that DaVita intends to file a certificate of need application with the Illinois Health Facilities and Services Review Board (the "State Board") to discontinue, in its entirety, its 12-station dialysis center known as Marshall Square Dialysis (the "Dialysis Center") located at 2950 West 26th Street, Chicago, Illinois (the "Project").

The Project will result in the discontinuation of all of the Dialysis Center's authorized stations. On August 17, 2020, the Dialysis Center received its Medicare Certification and became fully operational. During the three years of operation, census peaked at 11 patients (or 15% utilization). As a result of the low utilization, DaVita temporarily discontinued operations on June 1, 2023, to evaluate options on how to best serve dialysis patients in Marshall Square. DaVita operates 8 dialysis centers in the Dialysis Center's 5-mile geographic service area. Average utilization of these dialysis centers is below the State Board's target occupancy of 80%. As these facilities have sufficient capacity to accommodate the Dialysis Center's patients, DaVita decided to discontinue the Dialysis Center. DaVita anticipates the Dialysis Center will permanently close as soon as practicable after State Board approval but no later than June 1, 2024.

All patients have transferred to DaVita dialysis centers. Therefore, the discontinuation of the Dialysis Center will not affect access to hemodialysis services in the health service area.



Mayor Brandon Johnson
March 27, 2024
Page 2

If you have any questions about DaVita's plans to discontinue Marshall Square Dialysis, please feel free to contact Rahul Kapoor at rahul.kapoor@davita.com.

Sincerely,

A handwritten signature in blue ink that reads 'Anne M. Cooper'.

Anne M. Cooper

cc: Rahul Kapoor, DaVita Inc.



150 N. Riverside Plaza, Suite 3000, Chicago, IL 60606-1599 • 312.819.1900

March 27, 2024

Via Certified Mail

Anne M. Cooper
312.873.3606
312.276.4317 Fax
acooper@polsinelli.com

The Honorable Celina Villanueva
Illinois State Senator, 12th District
2501 South Central Park Avenue, Front Suite
Chicago, Illinois 60623

Re: Marshall Square Dialysis

Dear Senator Villanueva:

This office represents DaVita Inc. and East Oaks Dialysis LLC d/b/a Marshall Square Dialysis (collectively, "DaVita"). Pursuant to 20 Ill. Comp. Stat. 3960/8.7(a), I am writing on behalf of DaVita to notify you that DaVita intends to file a certificate of need application with the Illinois Health Facilities and Services Review Board (the "State Board") to discontinue, in its entirety, its 12-station dialysis center known as Marshall Square Dialysis (the "Dialysis Center") located at 2950 West 26th Street, Chicago, Illinois (the "Project").

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Senator Celina Villanueva
March 27, 2024
Page 2

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Sincerely,

A handwritten signature in blue ink that reads "Anne M. Cooper".

Anne M. Cooper

cc: Rahul Kapoor, DaVita Inc.



150 N. Riverside Plaza, Suite 3000, Chicago, IL 60606-1599 • 312.819.1900

March 27, 2024

Via Certified Mail

Anne M. Cooper
312.873.3606
312.276.4317 Fax
acooper@polsinelli.com

The Honorable Edgar Gonzalez, Jr.
Illinois State Representative, 23rd District
3202 West 26th Street
Chicago, Illinois 60623

Re: Marshall Square Dialysis

Dear Representative Gonzalez:

This office represents DaVita Inc. and East Oaks Dialysis LLC d/b/a Marshall Square Dialysis (collectively, "DaVita"). Pursuant to 20 Ill. Comp. Stat. 3960/8.7(a), I am writing on behalf of DaVita to notify you that DaVita intends to file a certificate of need application with the Illinois Health Facilities and Services Review Board (the "State Board") to discontinue, in its entirety, its 12-station dialysis center known as Marshall Square Dialysis (the "Dialysis Center") located at 2950 West 26th Street, Chicago, Illinois (the "Project").

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Representative Edgar Gonzalez
March 27, 2024
Page 2

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Sincerely,

A handwritten signature in blue ink that reads 'Anne M. Cooper'.

Anne M. Cooper

cc: Rahul Kapoor, DaVita Inc.



150 N. Riverside Plaza, Suite 3000, Chicago, IL 60606-1599 • 312.819.1900

March 27, 2024

Via Certified Mail

Anne M. Cooper
312.873.3606
312.276.4317 Fax
acooper@polsinelli.com

Sameer Vohra, M.D., J.D., M.A.
Director
Illinois Department of Public Health
525 West Jefferson Street,
Springfield, Illinois 62761
Re: Marshall Square Dialysis

Dear Dr. Vohra:

This office represents DaVita Inc. and East Oaks Dialysis LLC d/b/a Marshall Square Dialysis (collectively, "DaVita"). Pursuant to 20 Ill. Comp. Stat. 3960/8.7(a), I am writing on behalf of DaVita to notify you that DaVita intends to file a certificate of need application with the Illinois Health Facilities and Services Review Board (the "State Board") to discontinue, in its entirety, its 12-station dialysis center known as Marshall Square Dialysis (the "Dialysis Center") located at 2950 West 26th Street, Chicago, Illinois (the "Project").

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Dr. Sameer Vohra

March 27, 2024

Page 2

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Sincerely,

A handwritten signature in blue ink that reads "Anne M. Cooper".

Anne M. Cooper

cc: Rahul Kapoor, DaVita Inc.



150 N. Riverside Plaza, Suite 3000, Chicago, IL 60606-1599 • 312.819.1900

March 27, 2024

Via Certified Mail

Anne M. Cooper
312.873.3606
312.276.4317 Fax
acooper@polsinelli.com

Elizabeth Whitehorn
Director
Illinois Department of Healthcare and Family
Services
Prescott Bloom Building
201 South Grand Avenue, East
Springfield, Illinois 62763

Re: Marshall Square Dialysis

Dear Director Whitehorn:

This office represents DaVita Inc. and East Oaks Dialysis LLC d/b/a Marshall Square Dialysis (collectively, "DaVita"). Pursuant to 20 Ill. Comp. Stat. 3960/8.7(a), I am writing on behalf of DaVita to notify you that DaVita intends to file a certificate of need application with the Illinois Health Facilities and Services Review Board (the "State Board") to discontinue, in its entirety, its 12-station dialysis center known as Marshall Square Dialysis (the "Dialysis Center") located at 2950 West 26th Street, Chicago, Illinois (the "Project").

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Director Elizabeth Whitehorn
Page 2

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Sincerely,

A handwritten signature in blue ink that reads 'A. M. Cooper'.

Anne M. Cooper

cc: Rahul Kapoor, DaVita Inc.



150 N. Riverside Plaza, Suite 3000, Chicago, IL 60606-1599 • 312.819.1900

March 27, 2024

Via Certified Mail

Anne M. Cooper
312.873.3606
312.276.4317 Fax
acooper@polsinelli.com

John Kniery
Administrator
Illinois Health Facilities and Services Review
Board
525 West Jefferson Street, 2nd Floor
Springfield, Illinois 62761

Re: Marshall Square Dialysis

Dear Mr. Kniery:

This office represents DaVita Inc. and East Oaks Dialysis LLC d/b/a Marshall Square Dialysis (collectively, "DaVita"). Pursuant to 20 Ill. Comp. Stat. 3960/8.7(a), I am writing on behalf of DaVita to notify you that DaVita intends to file a certificate of need application with the Illinois Health Facilities and Services Review Board (the "State Board") to discontinue, in its entirety, its 12-station dialysis center known as Marshall Square Dialysis (the "Dialysis Center") located at 2950 West 26th Street, Chicago, Illinois (the "Project").

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Mr. John Kniery
Page 2

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Sincerely,

A handwritten signature in blue ink that reads 'Anne M. Cooper'.

Anne M. Cooper

cc: Rahul Kapoor, DaVita Inc.

U.S. Postal Service® CERTIFIED MAIL® RECEIPT <i>Domestic Mail Only</i>		
USPS® ARTICLE NUMBER		
9414 7266 9904 2133 9157 68		
Certified Mail Fee	\$	\$0.00
Return Receipt (Hardcopy)	\$	\$0.00
Return Receipt (Electronic)	\$	\$0.00
Certified Mail Restricted Delivery	\$	\$6.00
Postage	\$	
Total Postage and Fees	\$	
Sent to:		
The Honorable Brandon Johnson City of Chicago 121 N Clark St. Chicago, IL 60602-7808		
Reference Information		
A.Cooper 064628-594463		

PS Form 3800, Facsimile, July 2015

U.S. Postal Service® CERTIFIED MAIL® RECEIPT <i>Domestic Mail Only</i>		
USPS® ARTICLE NUMBER		
9414 7266 9904 2133 9157 82		
Certified Mail Fee	\$	\$0.00
Return Receipt (Hardcopy)	\$	\$0.00
Return Receipt (Electronic)	\$	\$0.00
Certified Mail Restricted Delivery	\$	\$6.00
Postage		
Total Postage and Fees	\$	
Sent to: The Honorable Celina Villanueva Illinois State Senator, 12 th District 2501 S Central Park Ave, Front Suite Chicago, IL 60623		
<u>Reference Information</u> A.Cooper 064628-594463		

PS Form 3800, Facsimile, July 2015

U.S. Postal Service® CERTIFIED MAIL® RECEIPT <i>Domestic Mail Only</i>		
USPS® ARTICLE NUMBER		
9414 7266 9904 2133 9157 99		
Certified Mail Fee	\$	\$0.00
Return Receipt (Hardcopy)	\$	\$0.00
Return Receipt (Electronic)	\$	\$0.00
Certified Mail Restricted Delivery	\$	\$6.00
Postage	\$	
Total Postage and Fees	\$	
Sent to: The Honorable Edgar Gonzalez, Jr. Illinois State Representative, 23 rd District 3202 W 26 th St. Chicago, IL 60623		
Reference Information A.Cooper 064628-594463		

PS Form 3800, Facsimile, July 2015

Return Receipt (Form 3811) Barcode		COMPLETE THIS SECTION ON DELIVERY	
 9590 9266 9904 2133 9157 92		A. Signature ☒ Agent ☐ Addressee	
1. Article Addressed to: The Honorable Edgar Gonzalez, Jr. Illinois State Representative, 23 rd District 3202 W 26 th St. Chicago, IL 60623		B. Received by (Printed Name) C. Date of Delivery	
2. Certified Mail (Form 3800) Article Number 9414 7266 9904 2133 9157 99		D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	
3. Service Type: ☒ Certified Mail ☐ Certified Mail Restricted Delivery		Reference Information Cooper 064628-594463	

PS Form 3811, Facsimile, July 2015

Domestic Return Receipt

U.S. Postal Service® CERTIFIED MAIL® RECEIPT Domestic Mail Only		
USPS® ARTICLE NUMBER		
9414 7266 9904 2133 9158 05		
Certified Mail Fee	\$	\$0.00
Return Receipt (Hardcopy)	\$	\$0.00
Return Receipt (Electronic)	\$	\$0.00
Certified Mail Restricted Delivery	\$	\$6.00
Postage	\$	
Total Postage and Fees	\$	
Sent to: Sameer Vohra, M.D., J.D., M.A. Director Illinois Department of Public Health 525 W Jefferson St. Springfield, IL 62761		
Reference Information STORE 6000-5908		
PS Form 3800, Facsimile, July 2015		

Return Receipt (Form 3811) Barcode	COMPLETE THIS SECTION ON DELIVERY
 9590 9266 9904 2133 9158 08	A. Signature ☐ Agent ☒ Addressee B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No R. MARTIN
1. Article Addressed to: Sameer Vohra, M.D., J.D., M.A. Director Illinois Department of Public Health 525 W Jefferson St. Springfield, IL 62761	3. Service Type: ☒ Certified Mail ☐ Certified Mail Restricted Delivery Reference Information Cooper 064628-594463
2. Certified Mail (Form 3800) Article Number 9414 7266 9904 2133 9158 05	
PS Form 3811, Facsimile, July 2015	Domestic Return Receipt

U.S. Postal Service® CERTIFIED MAIL® RECEIPT <i>Domestic Mail Only</i>		
USPS® ARTICLE NUMBER		
9414 7266 9904 2133 9158 29		
Certified Mail Fee	\$	\$0.00
Return Receipt (Hardcopy)	\$	\$0.00
Return Receipt (Electronic)	\$	\$0.00
Certified Mail Restricted Delivery	\$	\$6.00
Postage	\$	
Total Postage and Fees	\$	MAK 27 2024
Sent to: Elizabeth Whitehorn Director Illinois Dep. of Healthcare and Family Services 201 S Grand Ave. East Springfield, IL 62763		
<u>Reference Information</u> 		

PS Form 3800, Facsimile, July 2015

U.S. Postal Service® CERTIFIED MAIL® RECEIPT Domestic Mail Only	
USPS® ARTICLE NUMBER	
9414 7266 9904 2133 9158 12	
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Return Receipt (Hardcopy)	\$ \$0.00
Return Receipt (Electronic)	\$ \$0.00
Certified Mail Restricted Delivery	\$ \$6.00
Postage	\$
Total Postage and Fees	\$
Sent to: John Knierly Administrator Illinois Health Facilities & Review Board 525 W Jefferson St., 2 nd Floor Springfield, IL 62761	
Reference Information 525 W Jefferson St., 2 nd Floor Springfield, IL 62761	

PS Form 3800, Facsimile, July 2015

Return Receipt (Form 3811) Barcode	COMPLETE THIS SECTION ON DELIVERY
 9590 9266 9904 2133 9158 15	A. Signature ☐ Agent ☒ Addressee B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
1. Article Addressed to: John Knierly Administrator Illinois Health Facilities & Review Board 525 W Jefferson St., 2 nd Floor Springfield, IL 62761	3. Service Type: ☒ Certified Mail ☐ Certified Mail Restricted Delivery Reference Information
2. Certified Mail (Form 3800) Article Number 9414 7266 9904 2133 9158 12	Cooper 064628-594463

PS Form 3811, Facsimile, July 2015

Domestic Return Receipt



Debra Savage
Chair
Illinois Health Facilities and Services Review Board
525 West Jefferson Street, 2nd Floor
Springfield, Illinois 62761

Dear Chair Savage:

I hereby certify under penalty of perjury as provided in § 1-109 of the Illinois Code of Civil Procedure, 735 ILCS 5/1-109, and pursuant to 77 Ill. Admin Code § 1110.290(a)(6) that DaVita Inc. and East Oaks Dialysis, LLC. (collectively, "DaVita") will complete all questionnaires and data required by the Illinois Health Facilities and Services Review Board or the Illinois Department of Public Health (IDPH) (e.g., annual questionnaires, capital expenditures surveys, etc.) will be provided through the date of discontinuation and that the required information will be submitted no later than 60 days following the date of discontinuation.

Sincerely,

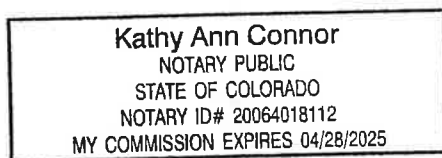
A handwritten signature in black ink, appearing to read "Michael D. Staffieri".

Print Name: Michael D. Staffieri
Its: Chief Operating Officer, DaVita Inc.
President, East Oaks Dialysis, LLC

Subscribed and sworn to me

This 15th day of April, 2024

A handwritten signature in blue ink, appearing to read "Kathy Ann Connor".

Notary Public

Section II, Discontinuation**Criterion 1110.290(b), Reason for Discontinuation**

DaVita seeks authority from the State Board to discontinue its 12-station in-center hemodialysis center located at 2950 West 26th Street, Chicago, Illinois. On August 17, 2020, the Marshall Square received its Medicare Certification and became fully operational. During the three years of operation, census peaked at 11 patients (or 15% utilization). As a result of the low utilization, DaVita temporarily discontinued operations on June 1, 2023, to evaluate options on how to best serve dialysis patients in Marshall Square. DaVita operates 8 dialysis centers in the Marshall Square 5-mile geographic service area. Average utilization of these dialysis centers is below the State Board's target utilization of 80%. As these facilities have sufficient capacity to accommodate Marshall Square's patients, DaVita decided to discontinue the Marshall Square. DaVita anticipates Marshall Square will permanently close as soon as practicable after State Board approval but no later than June 1, 2024.

As of January 31, 2024, HSA 6 had an excess of 113 dialysis stations. The discontinuation of Marshall Square will reduce the station excess.

Section II, Discontinuation**Criterion 1110.290(c), Impact on Access**

The discontinuation of Marshall Square will not affect access to dialysis services in the geographic service area. As of December 31, 2023, there were 27 dialysis centers in the geographic service area with average utilization of 52 percent, and only two dialysis centers operating above the State Board's utilization standard. Accordingly, there is sufficient capacity in the geographic service area to accommodate the Marshall Square patients.

Section II, Discontinuation
Criterion 1110.290(d), Notice to Other Providers

Attached at Attachment – 10D is the notice of discontinuation to all non-DaVita dialysis clinics within 5 miles of Marshall Square.



150 N. Riverside Plaza, Suite 3000, Chicago, IL 60606-1599 • 312.819.1900

April 23, 2024

Via Certified Mail

Anne M. Cooper
(312) 873-3606
(312) 276-4317 Direct Fax
acooper@polsinelli.com

Facility Administrator
Fresenius Kidney Care Austin
4800 West Chicago Avenue, Suite 2A
Chicago, Illinois 60651

Re: Notice of Planned Closure of Marshall Square Dialysis

Dear Facility Administrator:

I am writing on behalf of DaVita Inc. and East Oaks Dialysis, LLC (collectively, "DaVita") to inform you of the proposed discontinuation of Marshall Square Dialysis, a 12-station dialysis clinic located at 2950 West 26th Street, Chicago, Illinois.

In accordance with 77 Ill. Admin. Code 1110.290(d), we are notifying all in-center hemodialysis centers located within 5 miles of Marshall Square Dialysis of the proposed discontinuation. You are receiving this letter because your in-center hemodialysis center is located within 5 miles of Marshall Square Dialysis.

Discontinuation will occur as soon as practicable after State Board approval but no sooner than June 1, 2023.

The number of patients treated at the Marshall Square Dialysis in the recent two years is provided in the table below.

Year	Stations	Patients	Treatments	Utilization	Target Utilization
2022	12	14	1,275	11%	80%
2023 ¹	12	18	579	5%	80%

¹ Marshall Square temporarily suspended services on June 1, 2023.



Facility Administrator
April 23, 2024
Page 2

With the discontinuation of Marshall Square Dialysis, we anticipate patients historically treated there will transfer to area DaVita dialysis clinics. This discontinuation should not adversely impact care for patients in the area or any other area dialysis providers.

Thank you for your time and attention to this matter. If you have any questions or concerns, please feel free to contact me.

Sincerely,

A handwritten signature in blue ink that reads "Anne M. Cooper".

Anne M. Cooper



150 N. Riverside Plaza, Suite 3000, Chicago, IL 60606-1599 • 312.819.1900

April 23, 2024

Anne M. Cooper
(312) 873-3606
(312) 276-4317 Direct Fax
acooper@polsinelli.com

Via Certified Mail

Facility Administrator
Fresenius Kidney Care Bridgeport
825 West 35th Street
Chicago, Illinois 60609

Re: Notice of Planned Closure of Marshall Square Dialysis

Dear Facility Administrator:

I am writing on behalf of DaVita Inc. and East Oaks Dialysis, LLC (collectively, "DaVita") to inform you of the proposed discontinuation of Marshall Square Dialysis, a 12-station dialysis clinic located at 2950 West 26th Street, Chicago, Illinois.

In accordance with 77 Ill. Admin. Code 1110.290(d), we are notifying all in-center hemodialysis centers located within 5 miles of Marshall Square Dialysis of the proposed discontinuation. You are receiving this letter because your in-center hemodialysis center is located within 5 miles of Marshall Square Dialysis.

Discontinuation will occur as soon as practicable after State Board approval but no sooner than June 1, 2023.

The number of patients treated at the Marshall Square Dialysis in the recent two years is provided in the table below.

Year	Stations	Patients	Treatments	Utilization	Target Utilization
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Facility Administrator
April 23, 2024
Page 2

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Thank you for your time and attention to this matter. If you have any questions or concerns, please feel free to contact me.

Sincerely,

A handwritten signature in blue ink that reads 'Anne M. Cooper'.

Anne M. Cooper



150 N. Riverside Plaza, Suite 3000, Chicago, IL 60606-1599 • 312.819.1900

April 23, 2024

Anne M. Cooper
(312) 873-3606
(312) 276-4317 Direct Fax
acooper@polsinelli.com

Via Certified Mail

Facility Administrator
Fresenius Kidney Care Chicago
1806 West Hubbard Avenue
Chicago, Illinois 60622

Re: Notice of Planned Closure of Marshall Square Dialysis

Dear Facility Administrator:

I am writing on behalf of DaVita Inc. and East Oaks Dialysis, LLC (collectively, "DaVita") to inform you of the proposed discontinuation of Marshall Square Dialysis, a 12-station dialysis clinic located at 2950 West 26th Street, Chicago, Illinois.

In accordance with 77 Ill. Admin. Code 1110.290(d), we are notifying all in-center hemodialysis centers located within 5 miles of Marshall Square Dialysis of the proposed discontinuation. You are receiving this letter because your in-center hemodialysis center is located within 5 miles of Marshall Square Dialysis.

Discontinuation will occur as soon as practicable after State Board approval but no sooner than June 1, 2023.

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Facility Administrator
April 23, 2024
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Thank you for your time and attention to this matter. If you have any questions or concerns, please feel free to contact me.

Sincerely,

A handwritten signature in blue ink that reads 'Anne M. Cooper'.

Anne M. Cooper



150 N. Riverside Plaza, Suite 3000, Chicago, IL 60606-1599 • 312.819.1900

April 23, 2024

Via Certified Mail

Anne M. Cooper
(312) 873-3606
(312) 276-4317 Direct Fax
acooper@polsinelli.com

Facility Administrator
Fresenius Kidney Care Cicero
3000 South Cicero Avenue
Cicero, Illinois 60804

Re: Notice of Planned Closure of Marshall Square Dialysis

Dear Facility Administrator:

I am writing on behalf of DaVita Inc. and East Oaks Dialysis, LLC (collectively, "DaVita") to inform you of the proposed discontinuation of Marshall Square Dialysis, a 12-station dialysis clinic located at 2950 West 26th Street, Chicago, Illinois.

In accordance with 77 Ill. Admin. Code 1110.290(d), we are notifying all in-center hemodialysis centers located within 5 miles of Marshall Square Dialysis of the proposed discontinuation. You are receiving this letter because your in-center hemodialysis center is located within 5 miles of Marshall Square Dialysis.

Discontinuation will occur as soon as practicable after State Board approval but no sooner than June 1, 2023.

The number of patients treated at the Marshall Square Dialysis in the recent two years is provided in the table below.

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Facility Administrator
April 23, 2024
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Thank you for your time and attention to this matter. If you have any questions or concerns, please feel free to contact me.

Sincerely,

A handwritten signature in blue ink that reads 'Anne M. Cooper'.

Anne M. Cooper



150 N. Riverside Plaza, Suite 3000, Chicago, IL 60606-1599 • 312.819.1900

April 23, 2024

Anne M. Cooper
(312) 873-3606
(312) 276-4317 Direct Fax
acooper@polsinelli.com

Via Certified Mail

Facility Administrator
Fresenius Kidney Care Garfield
5401 South Wentworth Avenue, Suite 1B
Chicago, Illinois 60609

Re: Notice of Planned Closure of Marshall Square Dialysis

Dear Facility Administrator:

I am writing on behalf of DaVita Inc. and East Oaks Dialysis, LLC (collectively, "DaVita") to inform you of the proposed discontinuation of Marshall Square Dialysis, a 12-station dialysis clinic located at 2950 West 26th Street, Chicago, Illinois.

In accordance with 77 Ill. Admin. Code 1110.290(d), we are notifying all in-center hemodialysis centers located within 5 miles of Marshall Square Dialysis of the proposed discontinuation. You are receiving this letter because your in-center hemodialysis center is located within 5 miles of Marshall Square Dialysis.

Discontinuation will occur as soon as practicable after State Board approval but no sooner than June 1, 2023.

The number of patients treated at the Marshall Square Dialysis in the recent two years is provided in the table below.

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Facility Administrator
April 23, 2024
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Thank you for your time and attention to this matter. If you have any questions or concerns, please feel free to contact me.

Sincerely,

A handwritten signature in blue ink that reads "Anne M. Cooper".

Anne M. Cooper



150 N. Riverside Plaza, Suite 3000, Chicago, IL 60606-1599 • 312.819.1900

April 23, 2024

Via Certified Mail

Anne M. Cooper
(312) 873-3606
(312) 276-4317 Direct Fax
acooper@polsinelli.com

Facility Administrator
Fresenius Kidney Care Humboldt Park
3520 West Grand Avenue
Chicago, Illinois 60651

Re: Notice of Planned Closure of Marshall Square Dialysis

Dear Facility Administrator:

I am writing on behalf of DaVita Inc. and East Oaks Dialysis, LLC (collectively, "DaVita") to inform you of the proposed discontinuation of Marshall Square Dialysis, a 12-station dialysis clinic located at 2950 West 26th Street, Chicago, Illinois.

In accordance with 77 Ill. Admin. Code 1110.290(d), we are notifying all in-center hemodialysis centers located within 5 miles of Marshall Square Dialysis of the proposed discontinuation. You are receiving this letter because your in-center hemodialysis center is located within 5 miles of Marshall Square Dialysis.

Discontinuation will occur as soon as practicable after State Board approval but no sooner than June 1, 2023.

The number of patients treated at the Marshall Square Dialysis in the recent two years is provided in the table below.

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Facility Administrator
April 23, 2024
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Thank you for your time and attention to this matter. If you have any questions or concerns, please feel free to contact me.

Sincerely,

A handwritten signature in blue ink that reads 'Anne M. Cooper'.

Anne M. Cooper



150 N. Riverside Plaza, Suite 3000, Chicago, IL 60606-1599 • 312.819.1900

April 23, 2024

Anne M. Cooper
(312) 873-3606
(312) 276-4317 Direct Fax
acooper@polsinelli.com

Via Certified Mail

Facility Administrator
Fresenius Kidney Care Marquette Park
6535 South Western Avenue
Chicago, Illinois 60636

Re: Notice of Planned Closure of Marshall Square Dialysis

Dear Facility Administrator:

I am writing on behalf of DaVita Inc. and East Oaks Dialysis, LLC (collectively, "DaVita") to inform you of the proposed discontinuation of Marshall Square Dialysis, a 12-station dialysis clinic located at 2950 West 26th Street, Chicago, Illinois.

In accordance with 77 Ill. Admin. Code 1110.290(d), we are notifying all in-center hemodialysis centers located within 5 miles of Marshall Square Dialysis of the proposed discontinuation. You are receiving this letter because your in-center hemodialysis center is located within 5 miles of Marshall Square Dialysis.

Discontinuation will occur as soon as practicable after State Board approval but no sooner than June 1, 2023.

The number of patients treated at the Marshall Square Dialysis in the recent two years is provided in the table below.

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Facility Administrator
April 23, 2024
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Thank you for your time and attention to this matter. If you have any questions or concerns, please feel free to contact me.

Sincerely,

A handwritten signature in blue ink that reads 'Anne M. Cooper'.

Anne M. Cooper



150 N. Riverside Plaza, Suite 3000, Chicago, IL 60606-1599 • 312.819.1900

April 23, 2024

Via Certified Mail

Anne M. Cooper
(312) 873-3606
(312) 276-4317 Direct Fax
acooper@polsinelli.com

Facility Administrator
Fresenius Kidney Care New City
4616 South Bishop Street
Chicago, Illinois 60609

Re: Notice of Planned Closure of Marshall Square Dialysis

Dear Facility Administrator:

I am writing on behalf of DaVita Inc. and East Oaks Dialysis, LLC (collectively, "DaVita") to inform you of the proposed discontinuation of Marshall Square Dialysis, a 12-station dialysis clinic located at 2950 West 26th Street, Chicago, Illinois.

In accordance with 77 Ill. Admin. Code 1110.290(d), we are notifying all in-center hemodialysis centers located within 5 miles of Marshall Square Dialysis of the proposed discontinuation. You are receiving this letter because your in-center hemodialysis center is located within 5 miles of Marshall Square Dialysis.

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Facility Administrator
April 23, 2024
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Thank you for your time and attention to this matter. If you have any questions or concerns, please feel free to contact me.

Sincerely,

A handwritten signature in blue ink that reads 'Anne M. Cooper'.

Anne M. Cooper



150 N. Riverside Plaza, Suite 3000, Chicago, IL 60606-1599 • 312.819.1900

April 23, 2024

Anne M. Cooper
(312) 873-3606
(312) 276-4317 Direct Fax
acooper@polsinelli.com

Via Certified Mail

Facility Administrator
Fresenius Kidney Care Polk
557 West Polk Street
Chicago, Illinois 60607

Re: Notice of Planned Closure of Marshall Square Dialysis

Dear Facility Administrator:

I am writing on behalf of DaVita Inc. and East Oaks Dialysis, LLC (collectively, "DaVita") to inform you of the proposed discontinuation of Marshall Square Dialysis, a 12-station dialysis clinic located at 2950 West 26th Street, Chicago, Illinois.

In accordance with 77 Ill. Admin. Code 1110.290(d), we are notifying all in-center hemodialysis centers located within 5 miles of Marshall Square Dialysis of the proposed discontinuation. You are receiving this letter because your in-center hemodialysis center is located within 5 miles of Marshall Square Dialysis.

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Facility Administrator
April 23, 2024
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Thank you for your time and attention to this matter. If you have any questions or concerns, please feel free to contact me.

Sincerely,

A handwritten signature in blue ink that reads "Anne M. Cooper".

Anne M. Cooper



150 N. Riverside Plaza, Suite 3000, Chicago, IL 60606-1599 • 312.819.1900

April 23, 2024

Anne M. Cooper
(312) 873-3606
(312) 276-4317 Direct Fax
acooper@polsinelli.com

Via Certified Mail

Facility Administrator
Fresenius Kidney Care Prairie
1717 South Wabash Avenue
Chicago, Illinois 60616

Re: Notice of Planned Closure of Marshall Square Dialysis

Dear Facility Administrator:

I am writing on behalf of DaVita Inc. and East Oaks Dialysis, LLC (collectively, “DaVita”) to inform you of the proposed discontinuation of Marshall Square Dialysis, a 12-station dialysis clinic located at 2950 West 26th Street, Chicago, Illinois.

In accordance with 77 Ill. Admin. Code 1110.290(d), we are notifying all in-center hemodialysis centers located within 5 miles of Marshall Square Dialysis of the proposed discontinuation. You are receiving this letter because your in-center hemodialysis center is located within 5 miles of Marshall Square Dialysis.

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Facility Administrator
April 23, 2024
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Thank you for your time and attention to this matter. If you have any questions or concerns, please feel free to contact me.

Sincerely,

A handwritten signature in blue ink that reads "Anne M. Cooper".

Anne M. Cooper



150 N. Riverside Plaza, Suite 3000, Chicago, IL 60606-1599 • 312.819.1900

April 23, 2024

Anne M. Cooper
(312) 873-3606
(312) 276-4317 Direct Fax
acooper@polsinelli.com

Via Certified Mail

Facility Administrator
Fresenius Kidney Care West Metro
1044 North Mozart Street
Chicago, Illinois 60622

Re: Notice of Planned Closure of Marshall Square Dialysis

Dear Facility Administrator:

I am writing on behalf of DaVita Inc. and East Oaks Dialysis, LLC (collectively, "DaVita") to inform you of the proposed discontinuation of Marshall Square Dialysis, a 12-station dialysis clinic located at 2950 West 26th Street, Chicago, Illinois.

In accordance with 77 Ill. Admin. Code 1110.290(d), we are notifying all in-center hemodialysis centers located within 5 miles of Marshall Square Dialysis of the proposed discontinuation. You are receiving this letter because your in-center hemodialysis center is located within 5 miles of Marshall Square Dialysis.

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Facility Administrator
April 23, 2024
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Thank you for your time and attention to this matter. If you have any questions or concerns, please feel free to contact me.

Sincerely,

A handwritten signature in blue ink that reads "Anne M. Cooper".

Anne M. Cooper



150 N. Riverside Plaza, Suite 3000, Chicago, IL 60606-1599 • 312.819.1900

April 23, 2024

Anne M. Cooper
(312) 873-3606
(312) 276-4317 Direct Fax
acooper@polsinelli.com

Via Certified Mail

Facility Administrator
Fresenius Kidney Care Chicago Westside
1340 South Damen Avenue
Chicago, Illinois 60608

Re: Notice of Planned Closure of Marshall Square Dialysis

Dear Facility Administrator:

I am writing on behalf of DaVita Inc. and East Oaks Dialysis, LLC (collectively, “DaVita”) to inform you of the proposed discontinuation of Marshall Square Dialysis, a 12-station dialysis clinic located at 2950 West 26th Street, Chicago, Illinois.

In accordance with 77 Ill. Admin. Code 1110.290(d), we are notifying all in-center hemodialysis centers located within 5 miles of Marshall Square Dialysis of the proposed discontinuation. You are receiving this letter because your in-center hemodialysis center is located within 5 miles of Marshall Square Dialysis.

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Facility Administrator
April 23, 2024
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Sincerely,

A handwritten signature in blue ink that reads "Anne M. Cooper".

Anne M. Cooper



150 N. Riverside Plaza, Suite 3000, Chicago, IL 60606-1599 • 312.819.1900

April 23, 2024

Anne M. Cooper
(312) 873-3606
(312) 276-4317 Direct Fax
acooper@polsinelli.com

Via Certified Mail

Facility Administrator
Mount Sinai Hospital Medical Center Renal
Unit
2652 West Ogden Avenue
Chicago, Illinois 60608

Re: Notice of Planned Closure of Marshall Square Dialysis

Dear Facility Administrator:

I am writing on behalf of DaVita Inc. and East Oaks Dialysis, LLC (collectively, "DaVita") to inform you of the proposed discontinuation of Marshall Square Dialysis, a 12-station dialysis clinic located at 2950 West 26th Street, Chicago, Illinois.

In accordance with 77 Ill. Admin. Code 1110.290(d), we are notifying all in-center hemodialysis centers located within 5 miles of Marshall Square Dialysis of the proposed discontinuation. You are receiving this letter because your in-center hemodialysis center is located within 5 miles of Marshall Square Dialysis.

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Facility Administrator
April 23, 2024
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Sincerely,

A handwritten signature in blue ink that reads "Anne M. Cooper".

Anne M. Cooper



150 N. Riverside Plaza, Suite 3000, Chicago, IL 60606-1599 • 312.819.1900

April 23, 2024

Anne M. Cooper
(312) 873-3606
(312) 276-4317 Direct Fax
acooper@polsinelli.com

Via Certified Mail

Facility Administrator
SAH Dialysis Center at 26th Street
3059 West 26th Street
Chicago, Illinois 60623

Re: Notice of Planned Closure of Marshall Square Dialysis

Dear Facility Administrator:

I am writing on behalf of DaVita Inc. and East Oaks Dialysis, LLC (collectively, "DaVita") to inform you of the proposed discontinuation of Marshall Square Dialysis, a 12-station dialysis clinic located at 2950 West 26th Street, Chicago, Illinois.

In accordance with 77 Ill. Admin. Code 1110.290(d), we are notifying all in-center hemodialysis centers located within 5 miles of Marshall Square Dialysis of the proposed discontinuation. You are receiving this letter because your in-center hemodialysis center is located within 5 miles of Marshall Square Dialysis.

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Facility Administrator
April 23, 2024
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Sincerely,

A handwritten signature in blue ink that reads 'Anne M. Cooper'.

Anne M. Cooper



150 N. Riverside Plaza, Suite 3000, Chicago, IL 60606-1599 • 312.819.1900

April 23, 2024

Anne M. Cooper
(312) 873-3606
(312) 276-4317 Direct Fax
acooper@polsinelli.com

Via Certified Mail

Facility Administrator
Sanderling Dialysis of Chicago
1426 West Washington Boulevard
Chicago, Illinois 60607

Re: Notice of Planned Closure of Marshall Square Dialysis

Dear Facility Administrator:

I am writing on behalf of DaVita Inc. and East Oaks Dialysis, LLC (collectively, "DaVita") to inform you of the proposed discontinuation of Marshall Square Dialysis, a 12-station dialysis clinic located at 2950 West 26th Street, Chicago, Illinois.

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Facility Administrator
April 23, 2024
Page 2

With the discontinuation of Marshall Square Dialysis, we anticipate patients historically treated there will transfer to area DaVita dialysis clinics. This discontinuation should not adversely impact care for patients in the area or any other area dialysis providers.

Thank you for your time and attention to this matter. If you have any questions or concerns, please feel free to contact me.

Sincerely,

A handwritten signature in blue ink that reads 'Anne M. Cooper'.

Anne M. Cooper



150 N. Riverside Plaza, Suite 3000, Chicago, IL 60606-1599 • 312.819.1900

April 23, 2024

Anne M. Cooper
(312) 873-3606
(312) 276-4317 Direct Fax
acooper@polsinelli.com

Via Certified Mail

Facility Administrator
John H. Stroger Hospital of Cook County
1969 West Ogden Avenue #2353
Chicago, Illinois 60612

Re: Notice of Planned Closure of Marshall Square Dialysis

Dear Facility Administrator:

I am writing on behalf of DaVita Inc. and East Oaks Dialysis, LLC (collectively, "DaVita") to inform you of the proposed discontinuation of Marshall Square Dialysis, a 12-station dialysis clinic located at 2950 West 26th Street, Chicago, Illinois.

In accordance with 77 Ill. Admin. Code 1110.290(d), we are notifying all in-center hemodialysis centers located within 5 miles of Marshall Square Dialysis of the proposed discontinuation. You are receiving this letter because your in-center hemodialysis center is located within 5 miles of Marshall Square Dialysis.

Discontinuation will occur as soon as practicable after State Board approval but no sooner than June 1, 2023.

The number of patients treated at the Marshall Square Dialysis in the recent two years is provided in the table below.

Year	Stations	Patients	Treatments	Utilization	Target Utilization
2022	12	14	1,275	11%	80%
2023 ¹	12	18	579	5%	80%

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Facility Administrator
April 23, 2024
Page 2

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Sincerely,

A handwritten signature in blue ink that reads 'Anne M. Cooper'.

Anne M. Cooper



150 N. Riverside Plaza, Suite 3000, Chicago, IL 60606-1599 • 312.819.1900

April 23, 2024

Via Certified Mail

Anne M. Cooper
(312) 873-3606
(312) 276-4317 Direct Fax
acooper@polsinelli.com

Facility Administrator
University of Illinois Hospital Dialysis
1859 West Taylor Street MC 794
Chicago, Illinois 60612

Re: Notice of Planned Closure of Marshall Square Dialysis

Dear Facility Administrator:

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Facility Administrator
April 23, 2024
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Sincerely,

A handwritten signature in blue ink that reads "Anne M. Cooper".

Anne M. Cooper

USPS CERTIFIED MAIL

#24-012

Polsinelli
150 N Riverside Plaza, Suite 3000
Chicago, IL 60606



9414 8149 0305 5743 0178 25

Facility Administrator
Fresenius Kidney Care Austin
4800 W Chicago Ave
Suite 2A
Chicago, IL 60651-3226

Shipper Ref: Chicago

USPS CERTIFIED MAIL

#24-012

Polsinelli
150 N Riverside Plaza, Suite 3000
Chicago, IL 60606



9414 8149 0305 5743 0178 32

Facility Administrator
Fresenius Kidney Care
825 W 35TH ST
CHICAGO, IL 60609-1511

Shipper Ref: Chicago

USPS CERTIFIED MAIL

#24-012

Polsinelli
150 N Riverside Plaza, Suite 3000
Chicago, IL 60606



9414 8149 0305 5743 0178 49

Facility Administrator
Fresenius Kidney Care Chicago
1806 W HUBBARD ST
CHICAGO, IL 60622-6235

Shipper Ref: Chicago

USPS CERTIFIED MAIL

#24-012

Polsinelli
150 N Riverside Plaza, Suite 3000
Chicago, IL 60606



9414 8149 0305 5743 0178 56

Facility Administrator
Fresenius Kidney Care Cicero
3000 S CICERO AVE
CICERO, IL 60804-3638

Shipper Ref: Chicago

USPS CERTIFIED MAIL

#24-012

Polsinelli
150 N Riverside Plaza, Suite 3000
Chicago, IL 60606



9414 8149 0305 5743 0178 63

Facility Administrator
Fresenius Kidney Care Garfield
5401 S Wentworth Ave
Suite 1B
Chicago, IL 60609-6300

Shipper Ref: Chicago

USPS CERTIFIED MAIL

#24-012

Polsinelli
150 N Riverside Plaza, Suite 3000
Chicago, IL 60606



9414 8149 0305 5743 0178 70

Facility Administrator
Fresenius Kidney Care Humboldt Park
3520 W GRAND AVE
CHICAGO, IL 60651-4009

Shipper Ref: Chicago

USPS CERTIFIED MAIL

#24-012

Polsinelli
150 N Riverside Plaza, Suite 3000
Chicago, IL 60606



9414 8149 0305 5743 0178 87

Facility Administrator
Fresenius Kidney Care Marquette Park
6535 S WESTERN AVE
CHICAGO, IL 60636-2410

Shipper Ref: Chicago

USPS CERTIFIED MAIL

#24-012

Polsinelli
150 N Riverside Plaza, Suite 3000
Chicago, IL 60606



9414 8149 0305 5743 0178 94

Facility Administrator
Fresenius Kidney Care New City
4616 S BISHOP ST
CHICAGO, IL 60609-3240

Shipper Ref: Chicago

USPS CERTIFIED MAIL

#24-012

Polsinelli
150 N Riverside Plaza, Suite 3000
Chicago, IL 60606



9414 8149 0305 5743 0179 00

Facility Administrator
Fresenius Kidney Care Polk
557 W POLK ST
CHICAGO, IL 60607-4388

Shipper Ref: Chicago

USPS CERTIFIED MAIL

#24-012

Polsinelli
150 N Riverside Plaza, Suite 3000
Chicago, IL 60606



9414 8149 0305 5743 0179 17

Facility Administrator
Fresenius Kidney Care Prairie
1717 S WABASH AVE
CHICAGO, IL 60616-1219

Shipper Ref: Chicago

USPS CERTIFIED MAIL

#24-012

Polsinelli
150 N Riverside Plaza, Suite 3000
Chicago, IL 60606



9414 8149 0305 5743 0179 24

Facility Administrator
Fresenius Kidney Care West Metro
1044 N MOZART ST
Suite 2A
CHICAGO, IL 60622-2789

Shipper Ref: Chicago

USPS CERTIFIED MAIL

#24-012

Polsinelli
150 N Riverside Plaza, Suite 3000
Chicago, IL 60606



9414 8149 0305 5743 0179 31

Facility Administrator
Fresenius Kidney Care Chicago Westside
1340 S DAMEN AVE
CHICAGO, IL 60608-1169

Shipper Ref: Chicago

USPS CERTIFIED MAIL

#24-012

Polsinelli
150 N Riverside Plaza, Suite 3000
Chicago, IL 60606



9414 8149 0305 5743 0179 48

Facility Administrator
Mt Sinai Hospital Medical Center Renal Unit
2652 W Ogden Ave
CHICAGO, IL 60608

Shipper Ref: Chicago

USPS CERTIFIED MAIL

#24-012

Polsinelli
150 N Riverside Plaza, Suite 3000
Chicago, IL 60606



9414 8149 0305 5743 0179 55

Facility Administrator
SAH Dialysis Center at 26th Street
3059 W 26TH ST
CHICAGO, IL 60623-4131

Shipper Ref: Chicago

USPS CERTIFIED MAIL

#24-012

Polsinelli
150 N Riverside Plaza, Suite 3000
Chicago, IL 60606



9414 8149 0305 5743 0179 62

Facility Administrator
Sanderling Dialysis of Chicago
1426 W WASHINGTON BLVD
CHICAGO, IL 60607-1821

Shipper Ref: Chicago

USPS CERTIFIED MAIL

#24-012

Polsinelli
150 N Riverside Plaza, Suite 3000
Chicago, IL 60606



9414 8149 0305 5743 0179 79

Facility Administrator
John H Stroger Hospital of Cook County
1969 W OGDEN AVE
#2353
CHICAGO, IL 60612-3765

Shipper Ref: Chicago

USPS CERTIFIED MAIL

#24-012

Polsinelli
150 N Riverside Plaza, Suite 3000
Chicago, IL 60606



9414 8149 0305 5743 0179 86

Facility Administrator
University of Illinois Hospital Dialysis
1859 W Taylor St
MC794
CHICAGO, IL 60612-4319

Shipper Ref: Chicago

Section III, Background and Purpose of the Project
Criterion 1110.110(a), Background of the Applicant

1. Neither the Centers for Medicare and Medicaid Services nor the Illinois Department of Public Health ("IDPH") has taken any adverse action involving civil monetary penalties or restriction or termination of participation in the Medicare or Medicaid programs against any of the applicants, or against any Illinois health care clinics owned or operated by the Applicants, directly or indirectly, within three years preceding the filing of this application
2. A list of all health care facilities owned or operated by DaVita in Illinois is attached at Attachment – 11A. Dialysis centers are currently not subject to state licensure in Illinois.
3. Certification that no adverse action has been taken against either of the Applicants or against any health care clinics owned or operated by the Applicants in Illinois within three years preceding the filing of this application is attached at Attachment – 11B.
4. An authorization permitting the Illinois Health Facilities and Services Review Board ("State Board") and IDPH access to any documents necessary to verify information submitted, including, but not limited to: official records of IDPH or other State agencies; and the records of nationally recognized accreditation organizations is attached at Attachment – 11B.

DaVita Inc.							
Illinois Facilities							
Regulatory Name	Address 1	Address 2	City	County	State	Zip	Medicare Certification Number
Adams County Dialysis	436 N 10TH ST		QUINCY	ADAMS	IL	62301-4152	14-2711
Alton Dialysis	3511 COLLEGE AVE		ALTON	MADISON	IL	62002-5009	14-2619
Arlington Heights Renal Center	17 WEST GOLF ROAD		ARLINGTON HEIGHTS	COOK	IL	60005-3905	14-2628
Auburn Park Dialysis	7939 SOUTH WESTERN AVENUE		CHICAGO	COOK	IL	60620	
Barrington Creek	28160 W. NORTHWEST HIGHWAY		LAKE BARRINGTON	LAKE	IL	60010	14-2736
Belvidere Dialysis	1755 BELOIT ROAD		BELVIDERE	BOONE	IL	61008	14-2795
Benton Dialysis	1151 ROUTE 14 W		BENTON	FRANKLIN	IL	62812-1500	14-2608
Beverly Dialysis	8109 SOUTH WESTERN AVE		CHICAGO	COOK	IL	60620-5939	14-2638
Big Oaks Dialysis	5623 W TOUHY AVE		NILES	COOK	IL	60714-4019	14-2712
Brickyard Dialysis	2640 NORTH NARRAGANSETT		CHICAGO	COOK	IL	60639	14-2857
Brighton Park Dialysis	4729 SOUTH CALIFORNIA AVE		CHICAGO	COOK	IL	60632	14-2860
Buffalo Grove Renal Center	1291 W. DUNDEE ROAD		BUFFALO GROVE	COOK	IL	60089-4009	14-2650
Calumet City Dialysis	1200 SIBLEY BOULEVARD		CALUMET CITY	COOK	IL	60409	14-2817
Carpentersville Dialysis	2203 RANDALL ROAD		CARPENTERSVILLE	KANE	IL	60110-3355	14-2598
Ogden Dialysis	6001 Ogden Avenue		Cicero	Cook	IL	60804	14-2872
Centralia Dialysis	1231 STATE ROUTE 161		CENTRALIA	MARION	IL	62801-6739	14-2609
Chicago Heights Dialysis	177 W JOE ORR RD	STE B	CHICAGO HEIGHTS	COOK	IL	60411-1733	14-2635
Chicago Ridge Dialysis	10511 SOUTH HARLEM AVE		WORTH	COOK	IL	60482	14-2793
Churchview Dialysis	5970 CHURCHVIEW DR		ROCKFORD	WINNEBAGO	IL	61107-2574	14-2640
Cobblestone Dialysis	934 CENTER ST	STE A	ELGIN	KANE	IL	60120-2125	14-2715
Collinsville Dialysis	101 LANTER COURT	BLDG 2	COLLINSVILLE	MADISON	IL	62234	14-2822
Country Hills Dialysis	4215 W 167TH ST		COUNTRY CLUB HILLS	COOK	IL	60478-2017	14-2575
Crystal Springs Dialysis	720 COG CIRCLE		CRYSTAL LAKE	MCHENRY	IL	60014-7301	14-2716
Decatur East Wood Dialysis	794 E WOOD ST		DECATUR	MACON	IL	62523-1155	14-2599
Dixon Kidney Center	1131 N GALENA AVE		DIXON	LEE	IL	61021-1015	14-2651
Driftwood Dialysis	1808 SOUTH WEST AVE		FREEPORT	STEPHENSON	IL	61032-6712	14-2747
Edgemont Dialysis	8 VIEUX CARRE DRIVE		EAST ST. LOUIS	ST. CLAIR	IL	62203	14-2847
Edgewater Dialysis	615 HARRISON AVENUE		ROCKFORD	WINNEBAGO	IL	61104	
Effingham Dialysis	904 MEDICAL PARK DR	STE 1	EFFINGHAM	EFFINGHAM	IL	62401-2193	14-2580
Emerald Dialysis	710 W 43RD ST		CHICAGO	COOK	IL	60609-3435	14-2529

DaVita Inc.							
Illinois Facilities							
Regulatory Name	Address 1	Address 2	City	County	State	Zip	Medicare Certification Number
Evanston Renal Center	1715 CENTRAL STREET		EVANSTON	COOK	IL	60201-1507	14-2511
Ford City Dialysis	8159 S CICERO AVENUE		CHICAGO	COOK	IL	60652	14-2854
Forest City Rockford	4103 W STATE ST		ROCKFORD	WINNEBAGO	IL	61101	14-2825
Glen Dialysis	2601 Compass Road	Suite 145	Glenview	Cook	IL	60026	14-2746
Grand Crossing Dialysis	7319 S COTTAGE GROVE AVENUE		CHICAGO	COOK	IL	60619-1909	14-2728
Garfield Kidney Center	3250 WEST FRANKLIN BLVD		CHICAGO	COOK	IL	60624-1509	14-2777
Geneva Crossing Dialysis	540 South Schmale Road		Carol Stream	DuPage	IL	60188	14-2858
Granite City Dialysis Center	9 AMERICAN VLG		GRANITE CITY	MADISON	IL	62040-3706	14-2537
Harvey Dialysis	16641 S HALSTED ST		HARVEY	COOK	IL	60426-6174	14-2698
Hazel Crest Renal Center	3470 WEST 183rd STREET		HAZEL CREST	COOK	IL	60429-2428	14-2622
Huntley Dialysis	10350 HALIGUS ROAD		HUNTLEIY	MCHENRY	IL	60142	14-2828
Illini Renal Dialysis	507 E UNIVERSITY AVE		CHAMPAIGN	CHAMPAIGN	IL	61820-3828	14-2633
Irving Park Dialysis	4323 N PULASKI RD		CHICAGO	COOK	IL	60641	14-2840
Jacksonville Dialysis	1515 W WALNUT ST		JACKSONVILLE	MORGAN	IL	62650-1150	14-2581
Jerseyville Dialysis	917 S STATE ST		JERSEYVILLE	JERSEY	IL	62052-2344	14-2636
Kankakee County Dialysis	581 WILLIAM R LATHAM SR DR	STE 104	BOURBONNAIS	KANKAKEE	IL	60914-2439	14-2685
Kenwood Dialysis	4259 S COTTAGE GROVE AVENUE		CHICAGO	COOK	IL	60653	14-2717
Lake County Dialysis Services	565 LAKEVIEW PARKWAY	STE 176	VERNON HILLS	LAKE	IL	60061	14-2552
Lake Villa Dialysis	37809 N IL ROUTE 59		LAKE VILLA	LAKE	IL	60046-7332	14-2666
Lawndale Dialysis	3934 WEST 24TH ST		CHICAGO	COOK	IL	60623	14-2768
Lincoln Dialysis	2100 WEST FIFTH		LINCOLN	LOGAN	IL	62656-9115	14-2582
Lincoln Park Dialysis	2484 N ELSTON AVE		CHICAGO	COOK	IL	60647	14-2528
Litchfield Dialysis	915 ST FRANCES WAY		LITCHFIELD	MONTGOMERY	IL	62056-1775	14-2583
Little Village Dialysis	2335 W CERMAK RD		CHICAGO	COOK	IL	60608-3811	14-2668
Logan Square Dialysis	2838 NORTH KIMBALL AVE		CHICAGO	COOK	IL	60618	14-2534
Loop Renal Center	1101 SOUTH CANAL STREET		CHICAGO	COOK	IL	60607-4901	14-2505
Machesney Park Dialysis	7170 NORTH PERRYVILLE ROAD		MACHESNEY PARK	WINNEBAGO	IL	61115	14-2806
Macon County Dialysis	1090 W MCKINLEY AVE		DECATUR	MACON	IL	62526-3208	14-2584
Marengo City Dialysis	910 GREENLEE STREET	STE B	MARENGO	MCHENRY	IL	60152-8200	14-2643
Marshall Square Dialysis	2950-3010 West 26th Street		Chicago	COOK	IL	60623	14-2871
Maryville Dialysis	2130 VADALABENE DR		MARYVILLE	MADISON	IL	62062-5632	14-2634

DaVita Inc.							
Illinois Facilities							
Regulatory Name	Address 1	Address 2	City	County	State	Zip	Medicare Certification Number
Mattoon Dialysis	6051 DEVELOPMENT DRIVE		CHARLESTON	COLES	IL	61938-4652	14-2585
Melrose Village	1985 North Mannheim Road		Melrose Park	Cook	IL	60160	14-2867
Metro East Dialysis	5105 W MAIN ST		BELLEVILLE	SAINT CLAIR	IL	62226-4728	14-2527
Montclare Dialysis Center	7009 W BELMONT AVE		CHICAGO	COOK	IL	60634-4533	14-2649
Montgomery County Dialysis	1822 SENATOR MILLER DRIVE		HILLSBORO	MONTGOMERY	IL	62049	14-2813
Mount Vernon Dialysis	1800 JEFFERSON AVE		MOUNT VERNON	JEFFERSON	IL	62864-4300	14-2541
Mt. Greenwood Dialysis	3401 W 111TH ST		CHICAGO	COOK	IL	60655-3329	14-2660
North Dunes Dialysis	3113 North Lewis Avenue		Waukegan	Lake	IL	60087	14-2864
Northgrove Dialysis	2491 INDUSTRIAL DRIVE		HIGHLAND	MADISON	IL	62249	14-2866
O'Fallon Dialysis	1941 FRANK SCOTT PKWY E	STE B	O'FALLON	ST. CLAIR	IL	62269	14-2818
Oak Meadows Dialysis	5020 West 95th Street		OAK LAWN	Cook	IL	60453	14-2863
Olympia Fields Dialysis Center	4557B LINCOLN HWY	STE B	MATTESON	COOK	IL	60443-2318	14-2548
Palos Park Dialysis	13155 S LaGRANGE ROAD		ORLAND PARK	COOK	IL	60462-1162	14-2732
Park Manor Dialysis	95TH STREET & COLFAX AVENUE		CHICAGO	COOK	IL	60617	14-2831
Red Bud Dialysis	LOT 4 IN 1ST ADDITION OF EAST INDUSTRIAL PARK		RED BUD	RANDOLPH	IL	62278	14-2772
Robinson Dialysis	1215 N ALLEN ST	STE B	ROBINSON	CRAWFORD	IL	62454-1100	14-2714
Rockford Dialysis	3339 N ROCKTON AVE		ROCKFORD	WINNEBAGO	IL	61103-2839	14-2647
Roxbury Dialysis Center	622 ROXBURY RD		ROCKFORD	WINNEBAGO	IL	61107-5089	14-2665
Rushville Dialysis	112 SULLIVAN DRIVE		RUSHVILLE	SCHUYLER	IL	62681-1293	14-2620
Rutgers Park Dialysis	8455 WOODWARD AVENUE		WOODRIDGE	DUPAGE	IL	60517	14-2869
Salt Creek Dialysis	196 WEST NORTH AVENUE		VILLA PARK	DUPAGE	IL	60181	14-2855
Sauget Dialysis	2061 GOOSE LAKE RD		SAUGET	SAINT CLAIR	IL	62206-2822	14-2561
Schaumburg Renal Center	1156 S ROSELLE ROAD		SCHAUMBURG	COOK	IL	60193-4072	14-2654
Shiloh Dialysis	1095 NORTH GREEN MOUNT RD		SHILOH	ST CLAIR	IL	62269	14-2753
Silver Cross Renal Center - Morris	1551 CREEK DRIVE		MORRIS	GRUNDY	IL	60450	14-2740
Silver Cross Renal Center - New Lenox	1890 SILVER CROSS BOULEVARD		NEW LENOX	WILL	IL	60451	14-2741

DaVita Inc.							
Illinois Facilities							
Regulatory Name	Address 1	Address 2	City	County	State	Zip	Medicare Certification Number
Silver Cross Renal Center - West	1051 ESSINGTON ROAD		JOLIET	WILL	IL	60435	14-2742
South Holland Renal Center	16136 SOUTH PARK AVENUE		SOUTH HOLLAND	COOK	IL	60473-1511	14-2544
Springfield Central Dialysis	932 N RUTLEDGE ST		SPRINGFIELD	SANGAMON	IL	62702-3721	14-2586
Springfield Montvale Dialysis	2930 MONTVALE DR	STE A	SPRINGFIELD	SANGAMON	IL	62704-5376	14-2590
Springfield South	2930 SOUTH 6th STREET		SPRINGFIELD	SANGAMON	IL	62703	14-2733
Stonecrest Dialysis	1302 E STATE ST		ROCKFORD	WINNEBAGO	IL	61104-2228	14-2615
Stony Creek Dialysis	9115 S CICERO AVE		OAK LAWN	COOK	IL	60453-1895	14-2661
Stony Island Dialysis	8725 S STONY ISLAND AVE		CHICAGO	COOK	IL	60617-2709	14-2718
Sycamore Dialysis	2200 GATEWAY DR		SYCAMORE	DEKALB	IL	60178-3113	14-2639
Taylorville Dialysis	901 W SPRESSER ST		TAYLORVILLE	CHRISTIAN	IL	62568-1831	14-2587
Tazewell County Dialysis	1021 COURT STREET		PEKIN	TAZEWELL	IL	61554	14-2767
Timber Creek Dialysis	1001 S. ANNIE GLIDDEN ROAD		DEKALB	DEKALB	IL	60115	14-2763
Tinley Park Dialysis	16767 SOUTH 80TH AVENUE		TINLEY PARK	COOK	IL	60477	14-2810
TRC Children's Dialysis Center	2611 N HALSTED ST		CHICAGO	COOK	IL	60614-2301	14-2604
Vermilion County Dialysis	22 WEST NEWELL ROAD		DANVILLE	VERMILION	IL	61834	14-2812
Washington Heights Dialysis	10620 SOUTH HALSTED STREET		CHICAGO	COOK	IL	60628	14-2835
Waukegan Renal Center	1616 NORTH GRAND AVENUE	STE C	Waukegan	COOK	IL	60085-3676	14-2577
Wayne County Dialysis	303 NW 11TH ST	STE 1	FAIRFIELD	WAYNE	IL	62837-1203	14-2688
West Lawn Dialysis	7000 S PULASKI RD		CHICAGO	COOK	IL	60629-5842	14-2719
West Side Dialysis	1600 W 13TH STREET		CHICAGO	COOK	IL	60608	14-2783
Whiteside Dialysis	2600 N LOCUST	STE D	STERLING	WHITESIDE	IL	61081-4602	14-2648
Woodlawn Dialysis	5060 S STATE ST		CHICAGO	COOK	IL	60609	14-2310



Debra Savage
Chair
Illinois Health Facilities and Services Review Board
525 West Jefferson Street, 2nd Floor
Springfield, Illinois 62761

Dear Chair Savage:

I hereby certify under penalty of perjury as provided in § 1-109 of the Illinois Code of Civil Procedure, 735 ILCS 5/1-109 that no adverse action as defined in 77 Ill. Admin. Code § 1130.140 has been taken against any in-center dialysis clinic owned or operated by DaVita Inc. or East Oaks Dialysis, LLC in the State of Illinois during the three-year period prior to filing this application.

Additionally, pursuant to 77 Ill. Admin. Code § 1110.110(a)(2)(J), I hereby authorize the Health Facilities and Services Review Board ("HFSRB") and the Illinois Department of Public Health ("IDPH") access to any documents necessary to verify information submitted as part of this application for permit. I further authorize HFSRB and IDPH to obtain any additional information or documents from other government agencies which HFSRB or IDPH deem pertinent to process this application for permit.

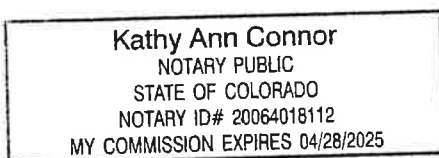
Sincerely,

A handwritten signature in black ink, appearing to read "Michael D. Staffieri".

Print Name: Michael D. Staffieri
Its: Chief Operating Officer, DaVita Inc.
President, East Oaks Dialysis, LLC

Subscribed and sworn to me
This 15th day of April, 2024

A handwritten signature in blue ink, appearing to read "Kathy Ann Connor".

Notary Public

Section III, Project Purpose, and Background – Information Requirements
Criterion 1110.110(b), Project Purpose

1. DaVita seeks authority from the State Board to discontinue its 12-station in-center hemodialysis center located at 2950 West 26th Street, Chicago, Illinois. On August 17, 2020, Marshall Square received its Medicare Certification and became fully operational. During the three years of operation, census peaked at 11 patients (or 15% utilization). As a result of the low utilization, DaVita temporarily discontinued operations on June 1, 2023, to evaluate options on how to best serve dialysis patients in Marshall Square. DaVita operates 8 dialysis centers in the Marshall Square 5-mile geographic service area. Average utilization of these dialysis centers is below the State Board's target utilization of 80%. As these facilities have sufficient capacity to accommodate Marshall Square's patients, DaVita decided to discontinue Marshall Square. DaVita anticipates Marshall Square will permanently close as soon as practicable after State Board approval but no later than June 1, 2024.

As of January 31, 2024, HSA 6 had an excess of 113 dialysis stations. The discontinuation of Marshall Square will reduce the station excess.

2. A map of the geographic service area of Marshall Square is attached at Attachment – 12. The geographic service area encompasses a 5-mile radius around the dialysis center. The boundaries of Marshall Square's geographic service area are as follows:
 - North 5 miles to Logan Square (Chicago 60647).
 - Northeast 5 miles to River North (Chicago 60610).
 - East 5 miles to Lake Michigan.
 - Southeast 5 miles to Kenwood (Chicago 60615).
 - South 5 miles to Marquette Park (Chicago 60629).
 - Southwest 5 miles to Forest View, IL.
 - West 5 miles to Berwyn, IL.
 - Northwest 5 miles to Oak Park, IL.
3. On August 17, 2020, Marshall Square received its Medicare Certification and became fully operational. During the three years of operation, census peaked at 11 patients (or 15% utilization). As a result of the low utilization, DaVita temporarily discontinued operations on June 1, 2023, to evaluate options on how to best serve dialysis patients in Marshall Square. DaVita operates 8 dialysis centers in the Marshall Square 5-mile geographic service area. Average utilization of these dialysis centers is below the State Board's target utilization of 80%. As these facilities have sufficient capacity to accommodate Marshall Square's patients, DaVita decided to discontinue the Marshall Square. DaVita anticipates Marshall Square will permanently close as soon as practicable after State Board approval but no later than June 1, 2024.
4. Given the low utilization, the discontinuation of Marshall Square will allow DaVita to better allocate resources to other DaVita clinics without effecting patient care.
5. DaVita temporarily discontinued operations on June 1, 2023, to evaluate options on how to best serve dialysis patients in Marshall Square. All patients have transferred to other DaVita clinics in the area.

Section X, Safety Net Impact Statement

1. This criterion is required for all substantive and discontinuation projects. DaVita Inc. and its affiliates are safety net providers of dialysis services to residents of the State of Illinois. DaVita is a leading provider of dialysis services in the United States and is committed to innovation, improving clinical outcomes, compassionate care, education and Kidney Smarting patients, and community outreach. A copy of DaVita's 2022 Community Care report, which details DaVita's commitment to quality, patient centric focus and community outreach is attached at Attachment – 38. As referenced in the report, DaVita led the industry in quality, with 96% of DaVita facilities scoring 3, 4, or 5 stars in CMS' Five Star Quality Rating System.

DaVita accepts and dialyzes Illinois patients with renal failure needing a regular course of hemodialysis without regard to race, color, national origin, gender, sexual orientation, age, religion, disability, or payor source. Because of the life sustaining nature of dialysis, federal government guidelines define renal failure as a condition that qualifies an individual for Medicare benefits eligibility regardless of their age and subject to having met certain minimum eligibility requirements including having earned the necessary number of work credits. Indigent ESRD patients who are not eligible for Medicare and who are not covered by commercial insurance are typically eligible for Medicaid benefits. If there are gaps in coverage under these programs during coordination of benefits periods or prior to having qualified for program benefits, grants are available to these patients from both the American Kidney Fund and the National Kidney Foundation. If none of these reimbursement mechanisms are available for a period of dialysis, financially needy patients who meet certain objective criteria for financial assistance and otherwise cooperate with DaVita to fulfill documentation requirements may qualify for assistance from DaVita in the form of free care.

A table showing the charity care and Medicaid care provided by the Applicants for the most recent three calendar years is provided below.

2. The discontinuation of Marshall Square will not impact the ability of other health care providers or health care systems to cross-subsidize safety net services. All patients of Marshall Square transferred to other DaVita facilities in the area.
3. The discontinuation of Marshall Square will not impact the ability of other health care providers or health care systems to cross-subsidize safety net services. All patients of Marshall Square transferred to other DaVita facilities in the area.
4. A table showing the charity care and Medicaid care provided by the Applicants for the most recent three calendar years is provided below.

Safety Net Information per PA 96-0031			
CHARITY CARE			
	2021	2022	2023
Charity (# of patients)	75	65	93
Charity (cost In dollars)	\$1,247,774	\$1,151,514	\$1,621,087
MEDICAID			
	2021	2022	2022
Medicaid (# of patients)	231	280	337
Medicaid (revenue)	\$5,385,982	\$6,121,583	\$8,106,003

THE DAVITA® VISION FOR
GLOBAL CITIZENSHIP

Community Care 2022





A letter from CEO, Javier Rodriguez

A community first, a company second. That's the philosophy that guides all we do at DaVita.

As one of the largest kidney care providers in the US, we've been a leader in clinical quality and innovation for more than 20 years. We own this achievement with pride. Our vision of Community Care is about even more than delivering world-class health care services. It means consistently meeting our values-based commitments to each other within DaVita, to the communities we serve and to our environment.

In this, our annual Community Care Report, we share an update on the initiatives that moved our Community Care commitments forward in 2022. It's an opportunity to celebrate great strides in every area of our Environmental, Social & Governance (ESG) framework, beginning with excellence in patient care and extending to how we engage our teammates, our stewardship of the environment, our ways of giving back, and our dedication to leading with integrity.

This report is also a chance to measure our progress against the formal ESG goals we've set out for 2025; to hold ourselves accountable to a standard of citizenship consistent with our values and the world's evolving needs.

We strive to set ambitious goals, and the hard work to achieve them is worth it. In addition to creating a stronger, more welcoming DaVita Village, we can also help support a healthier, more equitable and vibrant world for generations to come.

I'll close with a heartfelt thanks to every citizen of DaVita for all you do, every day. The honorable work reflected in these pages belongs to you.




Dow Jones Sustainability World Index

Top 6%

in Healthcare
Providers & Services

The Sustainability Yearbook

Top 10%

of the Healthcare
Industry

Unless otherwise indicated, data in this report represents 2022.

Vision, Action & Transparency

In 2021, we built upon our long-standing commitment to corporate citizenship and announced a set of goals for 2025 aligned with the five pillars of our ESG Strategy. Many of these 2025 goals are aspirational. In 2022, we built on our foundation to further our impact and increase transparency in reporting our progress.

This report provides both a portrait of how we live our ESG principles throughout the DaVita Village, and a capture of the quantitative metrics that measure our impact.

The first half of this report summarizes our overall approach to ESG and highlights key achievements of 2022. The second half provides data tables aligned with reporting recommendations from the Sustainability Accounting Standards Board (SASB) and the Taskforce on Climate-Related Financial Disclosures (TCFD) framework.

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[Progress Report: 2025 Goals](#)

[ESG Data Tables](#)

[SASB Healthcare Activity Metrics](#)

[TCFD Report](#)



Living Our Purpose

Since our founding, the principle of caring has been the heart of our organizational purpose. Today our Environmental, Social & Governance (ESG) program builds on this legacy with diligent attention to measurement and transparent reporting; activities that are essential to good corporate citizenship in today's complex and interconnected world.

We strive to care for our patients with compassion, nurture diversity and belonging throughout our DaVita Village, and to show up as good neighbors and thoughtful environmental stewards in every community we touch.

ESG Governance Structure

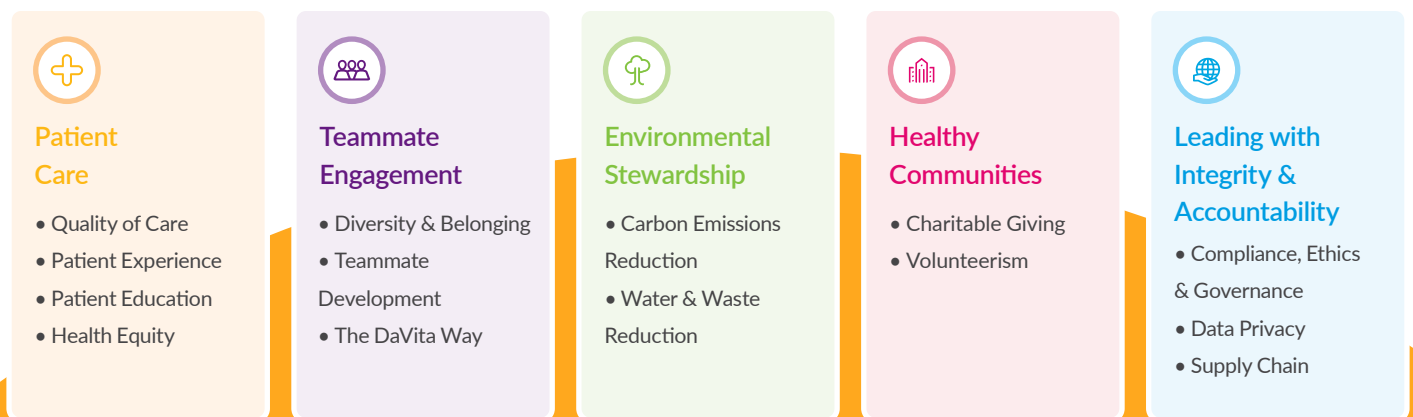
The Nominating and Governance Committee of DaVita's Board of Directors (the "Board") oversees DaVita's activities, policies and programs related to corporate environmental and social responsibility. Our management ESG Steering Committee, comprised of leaders with diverse perspectives from across the business, is responsible for aligning ESG strategy across the company.

Other essential ESG Steering Committee responsibilities include:

- Providing guidance on strategy and disclosures for ESG initiatives.
- Reporting to the Nominating and Governance Committee on a regular basis.
- Providing periodic updates to the Audit Committee on the process for ESG-related public reporting, including reporting controls.
- Providing an ESG update to the full Board no less than once per year.

ESG Strategy

In 2021 we conducted a prioritization assessment to identify the economic, environmental, and social issues that are most important to our organization and our stakeholders. We surveyed our teammates, interviewed senior leaders, benchmarked industry peers and leveraged external expertise, including the SASB recommended metrics for health care service providers, which includes investor feedback, to identify our five ESG strategic focus areas and key initiatives within each.



2022 At A Glance

We're proud to report standout achievements in each of our five ESG strategic focus areas.

Patient Care



- **7,800+** DaVita patients received a kidney transplant.
- Peritoneal dialysis (PD) and home hemodialysis (HHD) patients increasingly used connected cyclers and DaVita's patented technology, DaVita Care Connect®, enabling more **convenient access** to home treatment data and two-way communication with their care team.
- **33,600+** people participated in a Kidney Smart® class, our kidney disease education program.
- We largely see **similar outcomes across race** in core clinical metrics such as hospitalizations, readmissions and infection rates in our U.S. outpatient dialysis centers.

Teammate Engagement*



- **38,000+** teammates are a part of DaVita's new career pathways program, Clinical Ladders.
- Our overall U.S. teammate population is comprised of **78%** women and **56%** people of color as of Dec 31, 2022.
- **1,450+** teammates are pursuing or have received their nursing degree, funded by DaVita, as part of our Bridge to Your Dreams program.
- **16,000+** teammates participated in a DaVita University professional development course.

*Teammate Engagement data applies to US teammates as of 12/31/2022

Environmental Stewardship



- We committed to **net zero carbon emissions by 2050** as part of the White House / HHS Health Sector Climate Pledge.
- Our virtual power purchase agreements **produce enough renewable energy to power 100%** of our U.S. operations.
- We achieved our 2025 carbon reduction goal three years early, **reducing operational emissions by 77%** from a 2018 baseline.
- We designed and built our first **net zero dialysis clinic**, powered by solar energy.
- **382 clinics received energy efficient LED lighting upgrades** in 2022, bringing the total to ~2,500 clinics or roughly 97% of eligible U.S. clinics¹.

Healthy Communities



- The American Diabetes Association, along with DaVita, launched an interactive digital experience aimed at helping those living with diabetes **prevent and manage kidney disease**.
- **\$1.4 million** grant was awarded to the Food is Medicine Coalition by the DaVita Giving Foundation to provide medically tailored meals to people with food insecurity and medical nutrition needs, including individuals living with end stage kidney disease.

Leading with Integrity & Accountability



- **99.9%** of U.S. teammates and directors completed annual compliance training in 2022.
- We are one of only 14% of companies in the S&P 500 to have **a woman serving as the independent Board Chair**.²

¹ List of eligible clinics includes home training centers which are not included in our consolidated center count

² Spencer Stuart 2022 Board Index

Elevating Patient Experience

We support patients across the entire kidney care journey including prevention, transition, treatment and transplant. We are proud that our patients largely achieve similar outcomes across race in core clinical metrics such as hospitalizations, readmissions and infection rates in our U.S. outpatient dialysis centers.

Excellence in Care

DaVita remains a clinical leader in the government's two key performance programs, the Centers for Medicare & Medicaid Services' (CMS) Five-Star Quality Rating System and the Quality Incentive Program (QIP). Learn more about the ways DaVita provides quality care [here](#).

Advancing Home Dialysis

In 2022, more than 15% of our patients dialyzed in the comfort and convenience of home. We expanded our home dialysis care program to include new technologies to enhance patient and physician experience¹. Peritoneal dialysis (PD) and home hemodialysis (HHD) patients increasingly used connected cyclers and DaVita's patented technology, DaVita Care Connect®, enabling more convenient access to home treatment data and two-way communication with their care team.

[Kidney Smart](#) developed a Home Edition class that expanded its home modality-specific education to further address both HHD and PD modality options.

Learn more about the benefits of home dialysis [here](#).

Paving Paths to Transplantation

We empower patients to be fully informed about the kidney transplant process, offering resources such as Transplant Smart®, a multi-media patient education program.

More than 99,000 DaVita patients were referred for a transplant at least once by the end of 2022, resulting in the provider's highest referral rate ever.

During 2022, DaVita integrated MedSleuth, a [transplant software company](#) acquired at the end of 2021, to create greater connectivity among transplant candidates, transplant centers, physicians and care teams, with the aim of improving the experience and outcomes for kidney and liver transplant patients.

Learn more about transplantation [here](#).



¹ Statistics are as of December 31, 2022, and are for U.S.-based patients only. Modality selections and decisions related to a patient's care are always made by the attending nephrologist and patient, and provided pursuant to a physician's order.

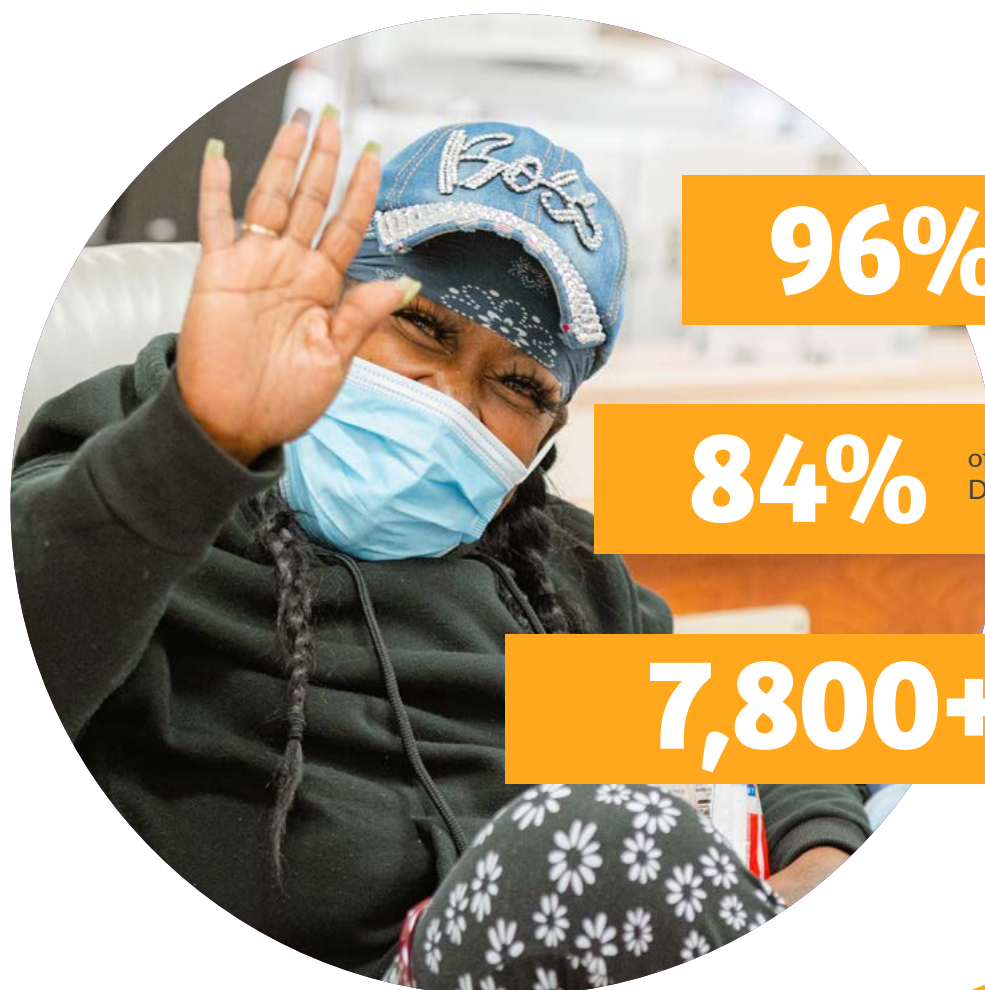
An Integrated Approach

Through DaVita® Integrated Kidney Care (DaVita IKC), patients receive comprehensive care that goes beyond kidney disease to cover comorbidities and overall health. Our vision is to provide coordinated care to help delay chronic kidney disease (CKD) progression, smooth the transition from CKD to end stage kidney disease (ESKD) and optimize ESKD treatment.

As of December 31, 2022, DaVita IKC provided integrated care and disease management services to approximately 42,000 patients in risk-based integrated care arrangements, and to an additional 15,000 patients in other integrated care arrangements. Learn more about DaVita IKC [here](#).

Earning Patient Trust

The Net Promoter Score (NPS) rating reflects patients' likelihood to recommend DaVita to others. We track this metric as a key indicator of patient positivity and trust. Our most recent NPS of 60 for our dialysis patients reflects our exceptional commitment to attentive, individualized care and support.



96%

of facilities scored 3, 4, or 5 stars in CMS's Five Star Quality Rating System.*

84%

of home dialysis patients rated Davita 9 or 10 out of 10

7,800+

Davita patients received a kidney transplant in 2022

* According to October 2020 data (for 2019 year) from the Centers for Medicare & Medicaid Services' Five-Star Quality Rating System.

Equity & Education

We are committed to enabling equity at every step of the kidney care journey. This means reducing and eliminating disparities so that all of our patients, regardless of race, socio-economics or other factors, are empowered with the awareness, education and access needed to achieve their best health outcomes.

Promoting Health Equity

Chronic kidney disease disproportionately affects many communities of color, including our Black or African American and Latino or Hispanic patient populations. Sector-wide data demonstrates that too often these disparities continue as patients advance through end-stage kidney disease. We are proud that our patients largely achieve similar outcomes across race in core clinical metrics such as hospitalizations, readmissions and infection rates in our U.S. outpatient dialysis centers. We are continuing to work to reduce other disparities at key journey points.

We are initially focused on racial inequities in access to kidney transplants, utilization of home dialysis options and upstream chronic kidney disease (CKD) education.

Our health equity strategy is focused in three ways:

- **Build the foundation** for equity by improving data insights related to health disparities, seeking to understand root causes, driving awareness and identifying and combating instances of bias.
- **Address inequities** by leading local solutions to meet patients where they are.
- **Create ripples** across healthcare by sharing learnings and collaborating with organizations like the National Kidney Foundation (NKF) to increase access to living donations and American Diabetes Association (ADA) to provide essential information about kidney disease to those who need it most.

In 2022 we are proud of:

- Launching cultural humility training to patient educators and teams to enable more culturally sensitive and personalized care.
- Hearing directly from dialysis patients and caregivers in Black and Mexican American communities across the country through DaVita Clinical Research led focus groups to help us understand the experiences and barriers on the journey to modality choice and transplant.
- Integrating MedSleuth, a transplant software company acquired at the end of 2021, that helps improve the transplant experience, including removing barriers to access and supporting patients through the transplant journey.

Kidney Smart® Education

DaVita Kidney Smart offers comprehensive kidney education at no cost to the community. Available online, by phone and in person, the program provides kidney health education and lifestyle recommendations to help at-risk individuals understand kidney disease and apply strategies to help prevent disease progression.

DaVita has educated more than 64,000 people, across 10 different languages, since January 1, 2021 as part of our five-year goal to achieve 100,000 Kidney Smart participants. Learn more about Kidney Smart [here](#).

33,600+ participants in Kidney Smart education in 2022

64,000+ participants in Kidney Smart education since 2021

A Diverse Village Anchored in Belonging

We know it takes all of us to create an environment where every teammate can thrive. Our collaborative approach engages leaders and teammates alike in realizing a shared vision to create a diverse Village where everyone belongs. Learn more about our Diversity & Belonging (D&B) commitments [here](#).

Diversity at Every Level

We strive to have strong representation of women and people of color across our organization by meeting or exceeding EEO-1 benchmarks across the full teammate population. While representation is essential at every level of our organization, we recognize that intentionally fostering leadership-level opportunities for people from historically underrepresented groups is especially important. As of December 31, 2022:

			
Our overall teammate population in the U.S. is comprised of:	Leaders with profit and loss responsibility are:	Operational managers who lead our dialysis centers are:	Our board of directors is comprised of:
78% women and 56% people of color	53% women and 30% people of color	77% women and 38% people of color	30% women and 20% people of color



We are proud to have been one of the first organizations to earn Management Leadership for Tomorrow's Black Equity at Work certification in 2021, and are now part of the inaugural cohort of employers seeking Hispanic Equity at Work certification. Launched in 2020, Management Leadership for Tomorrow's innovative program provides a rigorous framework to enable businesses to evaluate their efforts towards ensuring workplace equity.

Prioritizing Diversity in Recruiting & Development

We recognize that intentionally fostering leadership-level opportunities for people from historically underrepresented groups is especially important. By focusing on diversity-minded recruiting and intentional development programming, we ensure that pathways to leadership within the Village are visible and equitable to all.

- Across our entire suite of recruiting activities, we work to engage the full breadth of high-potential candidates, intentionally seeking out people of every gender, race and ethnicity and those with unique backgrounds.
- Our leadership development activities are many and varied, encompassing coaching, mentoring and cohort-based learning programs. Yet they all share the same strategic goal: to create an environment where high-potential individuals from every background can pursue ambitious professional growth.

A Culture of Belonging

We work to create an environment where feelings of belonging are the norm for all teammates, patients, physicians and care partners, regardless of gender, race or ethnicity, cultural affiliation or any other factor.

Our Belonging strategy is anchored in three core Belonging Behaviors that set the standard for how we work together in the Village:



**Creating Trust
and Safety**



**Respecting and
Valuing Others**



**Providing Fair and
Consistent Support**



Teammate-Reported Success:

We maintained our high scores in teammate sentiment, with 81% reporting they feel like they belong.¹

¹Per 2022 teammate survey data



Intentional Belonging Training:

92% of leaders at the VP level and above have completed an intensive, 16-hour development program to advance Inclusive Leadership skills. This unique DaVita experience focuses on unearthing unconscious bias and fostering the personal growth required for leaders to serve as effective examples of our Belonging Behaviors in action. An adaptation of this program will launch for manager and director level teammates in 2023.



Expanded DaVita University Digital Experience:

2022 marked the launch of the Champion Diversity & Belonging Channel on the DaVita University digital experience. Here, every teammate gains access to Basics of Belonging training and a wealth of supplemental resources to promote the knowledge, attitudes and behaviors that support a culture of Belonging.



Week of Belonging:

Our third annual Week of Belonging engaged 65,000 teammates from across the globe in living this important value.

Support Resources:

We now offer expanded resource groups to meet the needs of our teammates and we are proud to have Asian and Pacific Islander, Black, LGBTQ+ and Working Parents teammate resource groups. We are working with several others to launch additional teammate resource groups later this year.

A Place to Learn and Grow

We believe in a workplace where every teammate has the opportunity and support to reach their full potential. Our end-to-end career development pipeline provides financial, academic and social support to help clinical and operations teammates achieve their higher education and leadership goals, and to help managers and leaders engage in continued, career-long growth and development.

~56%

of Facility Administrators and managers have been promoted internally, as of December 31, 2022

Transparent Pathways to Success

Many people join DaVita as one of the more than 20,000 patient care technicians (PCTs) and 17,000 registered nurses (RNs) serving our nationwide network of dialysis centers where they provide lifesaving care to our patients every day. To support professional development pursuits for our teammates, we introduced Clinical Ladders in late 2021—a career-mapping model that puts teammates in the driver's seat of their career. This program provides clarity around what it takes for teammates to progress in their role and links career progression to compensation, which is in line with our pay-for-performance philosophy.

In 2022, all patient care technicians, registered nurses, licensed practical nurses (LPNs), licensed vocational nurses (LVNs) and clinical coordinators (CC) adopted Clinical Ladders—more than 38,000 teammates—and we established a plan to add remaining patient-facing teammates in the future. Outlining clear competencies and milestones creates structure and transparency that sets the stage for successful career pathing, and providing development guides for each role empowers teammates to engage in activities that help them reach their goals.

Since rolling out Clinical Ladders, we have celebrated more than 9,000 promotions among our nurse and patient care technician teammates. In addition to our field teammates, we are also committed to investing in role clarity, career progression and compensation growth for our corporate teams, which will be deployed in the coming years.

Building an Energized Nursing and Caregiving Workforce

While supporting economic mobility and career growth for every teammate, we bring particular focus to career pathing for the nurses and technicians who play a critical role on the front lines of care.

Pathways to Healthcare

Engaging local communities to expose high school students to the possibilities of a career in health care.

Bridge to Your Dreams

Providing game-changing financial support and professional mentoring to high-performing teammates in pursuit of their associate's degree in nursing.

Nurse Residency Program

Supporting new graduate nurses with clinical and leadership development programming.

1,450+

teammates have enrolled in Bridge to Your Dreams to seek their nursing degrees since 2018

Supporting Lifelong Learning

Through DaVita University (DVU), teammates at every level have access to a proprietary suite of personal and professional educational resources. In 2022, we expanded our digital course offerings to reach even more teammates with a new DaVita University Digital Experience platform. This platform provides teammates access to new skill development and career growth by using AI-driven features to connect learners to curated learning journeys and new content sources, including LinkedIn Learning and TED@Work. The addition of external content sources creates access to development resources for over 38,000 skills in topics such as business, technology, leadership, and diversity and belonging with best-in-class content taught by industry experts. The phased deployment of the DaVita University platform will reach all U.S. teammates by mid-2023.

16,000+

More than 16,000 teammates participated in personal and professional development in 2022

32,700+

More than 32,700 total DVU course completions were logged on our learning platform in 2022

Flexible Scholarships and Tuition Reimbursement

We recognize that every person's professional goals and life circumstances are unique. Therefore, in addition to more structured programs, we offer tuition reimbursement benefits that meet teammates where they are, and empower them to pursue more through nursing, business, social work, and dietetics/nutrition.



\$3.5M

invested in tuition reimbursement, supporting 1,400+ teammates' academic ambitions in 2022



Benefits Reflecting Our Culture of Care

We define our culture as “The DaVita Way,” which means caring for each other with the same intensity with which we care for our patients. We look to teammate engagement surveys as one among many ways to assess our teammates’ experience of The DaVita Way, and are proud to have achieved an engagement score of 78% in 2022.



Nurturing a Healthy Village

- Our wellness platform provides a one-stop-shop for all of DaVita’s wellness programming and is designed to support teammates’ wellbeing through activities and challenges.
- Our Teammate Assistance Program provides a network of licensed counselors and professional services to teammates and their household members, covering the cost of 10 counseling sessions to support with life’s challenges.
- All teammates receive free access to the Headspace app for digital meditation and mindfulness.
- In 2022, more than 2,400 total participants in Omada program and their loved ones have participated in our diabetes and hypertension prevention and treatment program. These two disease states are among the leading causes of End-Stage Kidney Disease.
- In 2022, we awarded 100 teammates with the We Are Well Award, a recognition supporting teammates who share their stories of physical, emotional and financial wellness. Winners received fully-paid teammate DaVita medical insurance premiums for the upcoming year.



Helping Families Thrive

- We provide access to Bright Horizons Advantage Family Care programs, which include backup childcare, access to college coaching, and support for parents of children with special needs.
- We offer a milk-delivery service for nursing moms who travel for work.
- Families receive access to a Little Star financial gift or additional paid leave for eligible parents upon the birth or adoption of a child.
- DaVita Village Network (DVN) is our teammate-funded program enabling teammates to support each other during times of hardship.



Healthiest 100 Workplaces in America Award

2022 Nomination Period.

Doing Our Part for the Planet

At DaVita, we know that true dedication to health care includes caring for the health of our planet. In 2022, we continued to build on our strong foundation of environmental commitments with a range of voluntary initiatives. Our reporting aligns with the Task Force on Climate-Related Financial Disclosures (TCFD), a leading authority on environmental reporting. Details on our progress to date and supporting data can be found in our TCFD Executive Summary and Data Tables, available on page 23 of this document.

An Energy Milestone: 100% Renewable in the US

In 2022 we achieved our 100% renewable energy goal for our U.S. locations for the entire year by utilizing two power purchase agreements. Our agreements to purchase energy from wind and solar farms match the amount of electricity we use in our U.S. operations. Expanding upon this commitment, DaVita strives to be 100% renewable across its global operations by 2025.

Achieving the first of our Verified, Science-Based Climate Goals

A review by the Science Based Targets initiative (SBTi) verifies our climate targets are in line with the scale of reductions required to keep global warming from rising more than 1.5 degrees Celsius from pre-industrial levels. To meet these ambitious commitments, we're continually improving the energy efficiency of our clinics and sourcing renewable energy.

We are proud that we have achieved our first science-based target focused on our Scope 1 & 2 emissions three years earlier than an accelerated target of 2025. Initially we set this goal to be completed by 2030.





Energy Reduction

We completed 380+ LED lighting retrofits projects in 2022

2,500+

centers with LED lighting to date

2,290+

centers with smart building controls to date



Water Reduction

Water is an important input to the dialysis process and we are committed to being good stewards of this resource. Our continued focus on water reduction throughout our operations included a water optimization and Top Water Users targeted reduction program.

Through these initiatives, we have saved more than 65 million gallons of water in 2022.



Net Zero Commitments

We joined the White House and HHS health care sector commitment to net zero scope 1 and 2 emissions by 2050.

We also built our first-ever net zero dialysis clinic, which features all-electric systems and solar panels on the rooftop and parking lot. Learn more about our net zero clinic [here](#).

Recognized for Leadership

Our sustainability practices have earned recognition from leading institutions.

- DaVita ranks number 28 on the Green Power Partnership Fortune 500® Partners List for renewable energy procurement, as of January 2023.
- We disclose our Climate Change and Water Security impacts through CDP, formerly known as the Carbon Disclosure Project — a global nonprofit that runs the world's leading environmental disclosure platform. Our climate change score of "B" is above average for all sectors, including the healthcare services industry.
- DaVita is a member of RE100, a global corporate renewable energy initiative bringing together hundreds of large and ambitious businesses committed to 100% renewable electricity.
- DaVita is a member of the DOE (Department of Energy) Better Climate Challenge, which challenges organizations to set ambitious, portfolio-wide GHG emission reduction goals.

Caring for Communities

Our network of care reaches communities in every corner of the US and 11 countries around the world. In every community we touch, we are committed not only to giving outstanding health care service — but also to giving back.

Collaborating with The American Diabetes Association

We continued our support for the **American Diabetes Association (ADA)**:

- Awarded 1,600 ADA Professional memberships to DaVita patient care technicians and nurses to network and learn leading practices on diabetes management
- Launched an interactive digital experience to help those living with diabetes prevent and manage kidney disease
- Jointly published two diabetes and CKD-friendly cookbooks
- Collaborated on Kidney Disease Awareness Month and American Diabetes Awareness Month on educational activities
- For more information visit diabetes.org/kidney

The DaVita Giving Foundation

The DaVita Giving Foundation is a national, impact-driven foundation focused on health care, social determinants of health and kidney disease. In alignment with our core values and larger ESG goals, the DaVita Giving Foundation is yet another way we work to extend the reach of our positive influence on human health.

In 2022, the Foundation awarded a \$1.4 million grant to the **Food is Medicine Coalition** to provide medically tailored meals to people with food insecurity and medical nutrition needs, including individuals living with end stage kidney disease.

Volunteering: Teammates in Action

At multiple touchpoints throughout the year, DaVita teammates gave back by volunteering to help causes aligned to DaVita's work and mission.

- DaVita dietitians volunteered to review kidney-friendly recipes to share with ADA's online community
- Teammates lent their skills in the fight to stop diabetes and kidney disease through awareness, prevention and management activities
- In celebration of the 150th National Arbor Day, worked with the **Arbor Day Foundation** to coordinate four tree-planting and distribution events around the country.

26,900+

hours volunteered by DaVita teammates in 2022

Minority Lending Initiative

In 2021, we made a \$15 million Transformational Deposit into HOPE Credit Union, which provides banking services and loans to underserved communities. In 2022, we continued our investment with HOPE, which supports home and small business ownership for thousands of residents historically lacking financial service access in the southeastern United States. We also donate back the interest earned on the deposit back to HOPE to further support its impact lending.

Beyond Our Borders

Bridge of Life

Bridge of Life, an independent 501(c)(3) public charity founded by DaVita Inc., is an international nonprofit organization working to strengthen healthcare globally through sustainable programs that prevent and treat chronic disease. Bridge of Life works to empower local staff, community health workers and patients through training and education to make sustainable changes to healthcare.

2022 Highlights

- Improved dialysis treatment and care for more than 800 new dialysis patients in four countries.
- Placed 21 AV fistulas for 21 children in Guatemala resulting in safer treatment and improved quality of life.
- Trained more than 160 community health workers in five countries to screen more than 4,000 people and provide ongoing support and education to more than 900 individuals identified with hypertension, diabetes or CKD.
- Launched a new program to provide home dialysis treatment for children in Guatemala that increases quality of life and eligibility for a kidney transplant.

Read more about the impactful work of Bridge of Life [here](#).

Bridge of Life and DaVita Poland teammates assisted hospitals and clinics in Ukraine with securing dialysis supplies. DaVita also provided dialysis treatments to Ukrainian patients crossing the border as a result of the war.



Doing What's Right

We are committed to doing the right thing and conducting business activities with the highest standards of integrity. We are committed to compliance with our policies and applicable laws and regulations. Learn more about our [code of conduct](#).

Not only does DaVita's compliance program help teammates navigate regulations, but it also helps teammates keep compliance top of mind and hold themselves accountable to certain ethical standards. For example, in 2022 we communicated to teammates about compliance and ethics topics over 300 times, using over 25 different channels. In addition, 48 of those communications focused explicitly on ethics and our commitment to doing the right thing.

DaVita also added two new questions to our teammate engagement survey to assess teammate perception of DaVita's culture of compliance. The results of the fall 2022 survey were strong:

- Over 80% of respondents indicated they feel comfortable reporting non-compliant behavior without fear of retaliation.
- Over 80% of respondents indicated they believe DaVita is committed to compliant business practices.

While we are pleased with these results, we will continue to work to promote our culture of compliance to all of our teammates and continue to measure the results.

Training & Transparency

All teammates, guest teammates, medical directors, joint venture partners, select vendors and other third parties, as required by contractual obligation, must complete DaVita's compliance training every year. This training is a critical foundation of our compliance program.

In 2022 DaVita administered its first learning assessment to all teammates at the end of general compliance training. The compliance department then used this data for targeted education to individual teammates who demonstrated gaps in key compliance proficiencies, providing personalized learning aids to supplement their compliance knowledge and awareness.

99,300+

hours of compliance-related trainings completed by teammates in 2022

Our Commitment to Human Rights

DaVita is committed to respecting human rights across our value chain, as defined by the UN Guiding Principles on Business and Human Rights.

In 2022, we worked with a third-party expert consultancy to conduct a human rights impact assessment to learn more about the potential opportunities and risks relating to human rights within our global operations. The corporate-wide assessment covered the full scope of DaVita's supply chain, products and services, and operations.

Our assessment methodology included desk-based research, internal and external stakeholder interviews, and detailed analysis of salient issues and management processes. We have identified the following key groups across our value chain: our patients, teammates, third party workers, our supply chain, community and society, and clinical trial participants.

We used the assessment to inform our continued efforts in support of human rights across our value chain. Moving forward, we plan to continue to implement our strategic roadmap and are committed to continuously improving our efforts relating to human rights. Learn more about our [human rights commitment](#).

Progress Report: Our 2025 Goals

In 2021, we published a series of ESG goals to achieve by 2025, many of which are aspirational, and the hard work it will take to meet them has only begun. While we recognize that it may be difficult to achieve some of these ambitious goals during the timeframe, we believe there is value in striving for them. The table below provides transparent disclosure of our achievements to date.

Category	2025 Goal	2022 Progress
 Patient Care Provide industry-leading care so that our patients can live their best lives	Lead the industry in external quality ratings	96% of DaVita facilities were rated a 3-, 4-, or 5-Star clinic ¹
	25% of patients choose to dialyze at home ²	Over 15% of patients are dialyzing at home, as of December 31, 2022
	Achieve greater health equity for our patients	Developed data-driven dashboards to track outcomes by race and other demographics. Launched Cultural Humility training to patient educators and teams across Davita
	Patient Net Promoter score (NPS) of 50 or higher	NPS score of 60 from dialysis patients
	Educate more than 100,000 patients in a Kidney Smart class	33,600+ people attended a Kidney Smart class in 2022; ~64,000 people have attended a Kidney Smart class since 2021
1. According to October 2020 data (for 2019 year), the most currently available data, from the Centers for Medicare & Medicaid Services' Five-Star Quality Rating System 2. Modality selections and decisions related to a patient's care are always made by the attending nephrologist and patient, and provided pursuant to a physician's order.		
 Teammate Engagement Be recognized as a best-in-class employer of choice	Teammate engagement score of 84% or higher	Our 2022 average teammate engagement score was 78%
	Sustain equal pay for equal work	We continue to invest in a proactive approach to equitable pay. We systematically define, monitor and act upon outliers within our aligned pay structures as we strive to ensure equitable pay over time.
	Meet or exceed EEO-1 benchmarks for all levels	We meet or exceed 68% of EEO-1 benchmarks ¹
1. Data is aggregated and reported out to align with our organizational structure, where we create differentiation between managers and directors. We hold each of those populations to the same EEO-1 benchmark standard.		

Category	2025 Goal	2022 Progress
 Teammate Engagement Be recognized as a best-in-class employer of choice	Provide learning and development programs to more than 95% of teammates each year	~99% of teammates attended a learning and development program through our online suite of courses
	Increase participation to 50% of teammates participating in health and well-being programming	Approximately 47% of teammates participated in a health and well-being program in 2022
	Maintain focus and leadership on belonging	Our 2022 Belonging score was 81%, based on our 2022 surveys. Our third annual Week of Belonging was held in November 2022.

Note: Data from Teammate Engagement section above includes U.S. teammates only

 Environmental Stewardship Reduce our carbon footprint in alignment with Science-Based Targets	100% powered by renewable energy globally ¹	U.S. operations are 100% powered by renewable energy. Global operations are 90% powered by renewable energy.
	Reduce carbon emissions by 50% ²	77% reduction of scope 1 and 2 emissions, as of December 31, 2022
	Save 240 million gallons of water	More than 65 million gallons of water saved in 2022 ³
	Implement recycling at 100% of U.S. facilities ⁴	Recycling is implemented at more than 42% of our U.S. facilities ⁵
	Vendors representing 70% of supply chain emissions set climate change goals	Vendors representing 13% of our scope 3 emissions have set a science-based target
	Teammates to complete 70,000 Green Actions	9,700+ Green Actions were completed in 2022; ~14,500 Green Actions completed since 2021 ⁶

1. Via on-site renewable energy and/or virtual Power Purchase Agreements
2. As compared to 2018 baseline
3. Calculated based on gallons per treatment savings from clinics with water efficiency projects implemented
4. Where local recycling is available and permitted at our premises
5. Includes domestic kidney care centers with confirmed recycling services
6. A Green Action is complete when any global teammate does something to improve the environment, reduce environmental impact, and/or learn something new or educate others about sustainability. 1 volunteer hour equates to 1 Green Action.

Category	2025 Goal	2022 Progress
 Healthy Communities Spread ripples of citizen leadership throughout our local communities	125,000 hours of volunteerism	26,900+ volunteer hours were completed in 2022; 35,900+ hours have been completed from 2021 through 2022.
	Enhance our impact through strategic giving focus areas	DaVita Giving Foundation supports strategic giving. The foundation focuses in the areas of health care, social determinants of health and kidney disease.
 Leading with Integrity and Accountability Do the right thing by operating from a foundation of compliance and ethics	Ensure that compliance remains an enterprise priority by maintaining a strong culture of compliance ¹	Results from DaVita's fall 2022 teammate engagement survey: Over 80% of teammate respondents indicated they feel comfortable reporting non-compliant behavior without fear of retaliation. Over 80% of teammate respondents indicated they believe DaVita is committed to compliant business practices.
	Continue to ensure that teammates and directors complete compliance training and review code of conduct annually.	99.9% of teammates and directors completed annual compliance training. 99.9% of teammates reviewed the code of conduct.
	Continue to ensure that new teammates complete compliance training and review code of conduct within 60 days of hire.	98.9% of new teammates and directors completed compliance training within 60 days of hire. 99.1% of new teammates reviewed the code of conduct within 60 days of hire.
	Continue to ensure that all medical directors and joint venture partners receive annual compliance training.	96.1% of medical directors and joint venture partners completed annual compliance training.
1. New addition to 2025 goal list		

Our 2025 ESG Goals reflect our voluntary alignment with several of the Sustainable Development Goals (SDGs) adopted by all United Nations Member States in 2015. The SDGs are a call for action by all countries to promote prosperity while protecting the planet. They are part of the United Nations' 2030 Agenda for Sustainable Development, which sets out a 15-year plan to achieve the SDGs. As a global citizen, DaVita is committed to helping reach these goals. Accordingly, our 2025 goals align with several of the SDGs, including Goal 3: Good Health and Well-Being, Goal 8: Decent Work and Economic Growth and Goal 13: Climate Action.

2022 ESG Data Tables

SASB Metrics & TCFD Report



SASB Healthcare Activity Metrics

DaVita (NYSE: DVA) is a comprehensive kidney care provider focused on transforming care to improve the quality of life for patients globally. The company is one of the largest providers of kidney care services in the U.S. and has been a leader in clinical quality and innovation for more than 20 years. DaVita is working to help increase equitable access to care for patients at every stage and setting along their kidney health journey—from slowing the progression of kidney disease to streamlining the transplant process, from acute hospital care to dialysis at home. As of December 31, 2022, DaVita served approximately 199,400 patients at 2,724 outpatient dialysis centers in the U.S. The company operated an additional 350 outpatient dialysis centers located in 11 countries outside of the U.S. DaVita has reduced hospitalizations, improved mortality and worked collaboratively to propel the kidney care community to adopt an equitable, high quality standard of care for all patients, everywhere. To learn more [DaVita.com/About](https://www.davita.com/About).

About This Report

In addition to providing wide-ranging disclosure on our website regarding our approach to environmental, social and governance factors, we are providing the following disclosures, aligned with the SASB Health Care Delivery industry standard. Unless otherwise indicated, the data included in this report is presented as of December 31, 2022 and refers to our U.S. operations. We undertake no obligation to update this information, except as may be required by law. More data can be found at [davitacommunitycare.com](https://www.davitacommunitycare.com).

Quality of Care and Patient Satisfaction	2022	SASB Code
Average Hospital Value-Based Purchasing Total Performance Score and domain score, across all facilities	Not applicable – DaVita provides dialysis and lab services, and is not a hospital	HC-DY-250a.1
Number of Serious Reportable Events (SREs) as defined by the National Quality Forum (NQF)	Not applicable – DaVita provides dialysis and lab services, and is not a hospital	HC-DY-250a.2
Hospital-Acquired Condition (HAC) Score per hospital	Not applicable – DaVita provides dialysis and lab services, and is not a hospital	HC-DY-250a.3
Excess readmission ration per hospital	Not applicable – DaVita provides dialysis and lab services, and is not a hospital	HC-DY-250a.4
Magnitude of readmissions payment adjustment as part of the Hospital Readmissions Reduction Program (HRRP)	Not applicable – DaVita provides dialysis and lab services, and is not a hospital	HC-DY-250a.5

DaVita remained a clinical leader in the government's two key performance programs, the Centers for Medicare & Medicaid Services' (CMS) Five-Star Quality Rating System and the Quality Incentive Program (QIP) in 2022.

Five-Star Quality Rating System: The Five-Star Quality Rating System is a mechanism created by CMS to give consumers access to clinical quality information and to help them make informed and educated decisions about where to receive dialysis care. These ratings are composed of two scores: the Quality of Patient Care Star Rating and the Patient Experience Rating.

Quality of Patient Care Star Rating: DaVita remains a clinical leader in quality of patient care.* To learn more about the CMS' Five-Star Quality Rating System, refer to these [frequently asked questions](#).

Patient Experience Rating: The Patient Experience Rating reflects patient experience scores from the CMS In-Center Hemodialysis Consumer Assessment of Healthcare Providers and Systems survey. The optional survey is given twice a year to eligible dialysis patients (patients who received in-center hemodialysis at the center for at least 3 consecutive months, are at least 18 years old, and are not living in a skilled nursing facility or other long-term facility such as a jail or prison). For a center to receive a Patient Experience Rating, at least 30 patients had to complete the survey over the course of the year. Only about half of the centers across the industry met the eligibility requirements to receive this rating.

96% of DaVita facilities scored 3, 4 or 5 stars in CMS's Five Star Quality Rating System.*

Quality Incentive Program: QIP is a pay-for-performance rating system also developed by CMS to encourage dialysis centers to meet or exceed certain performance standards. Centers that do not meet these standards are penalized between 0.5 percent and 2 percent on their Medicare reimbursement. DaVita centers outperform the industry in the top clinical performance tier.

We are an industry leader in the Quality Incentive Program (QIP), which promotes high-quality services in outpatient dialysis facilities treating patients with ESRD.

To learn more about the ways DaVita provides quality care visit [DaVita Better Care](#) today.

* According to October 2020 data (for 2019 year), the most recent available data, from the Centers for Medicare & Medicaid Services' Five-Star Quality Rating System.

Access for Low Income Patients	2022	SASB Code
Discussion of strategy to manage the mix of patient insurance status	See description below	HC-DY-240a.1
Amount of Medicare Disproportionate Share Hospital (DSH) adjustment payments received	Not applicable – DaVita provides dialysis and lab services, and is not a hospital	HC-DY-240a.2

DaVita aims to empower patients to make the insurance choice patients deem to be right for themselves by providing objective and fact-based education on available insurance options. While DaVita teammates do not make insurance recommendations to patients, DaVita social workers and insurance educators do provide patients with information, tools and resources to enable patients to conduct their own research and make well-informed insurance decisions.

Providing care for uninsured patients: Each year, thousands of individuals without health insurance receive dialysis care from DaVita. As a DaVita patient, these individuals receive in-depth information from DaVita social workers and insurance educators regarding all potentially available insurance options. As of 2021, over 75% of these patients are able to subsequently secure health insurance coverage during their course of treatment at DaVita.

Providing charity/indigent care programs: Using consistent and well-established patient financial criteria, DaVita provides low-cost or no-cost care to patients who are unable to afford copays, coinsurance, or other insurance cost-sharing elements. Through DaVita's "Patient Financial Evaluation" program, DaVita establishes affordable and consistent payment plans for patients.

Helping connect patients with government and non-profit resources: DaVita social workers and insurance educators help educate and connect patients with local, state, and national programs aimed at providing insurance education and support. These include organizations such as State Health Insurance Assistance Programs, the Social Security Administration, state Medicaid programs, insurance marketplaces, and charitable organizations. By doing so, patients are empowered to perform their own research into insurance plans and support programs that patients determine best meet their individual needs and preferences.

Educating patients on available insurance options: Depending on individual patient circumstances, patients may gain or lose eligibility for certain forms of insurance while receiving care at DaVita. For instance, most patients who do not already have Medicare become eligible for Medicare as dialysis patients. At times, patients may lose access to Medicaid or employment-based commercial insurance coverage. DaVita social workers and insurance educators follow consistent processes to ensure patients who gain or lose access to insurance during their course of treatment at DaVita receive timely information on available insurance options and actions to take if patients choose to enroll in new insurance.

Patient Privacy & Electronic Health Records	2022 Data	SASB Code
Percentage of patient records that are Electronic Health Records that meet "meaningful use" requirements	Not applicable for our dialysis services	HC-DY-230a.1
Description of policies and practices to secure customers' protected health information (PHI) records and other personally identifiable information (PII)	DaVita has an overarching principles-based (see next section below) global enterprise privacy policy that governs DaVita's collection, use, and sharing of employee, customer, and patient PII and PHI. DaVita also has privacy policies and procedures in place that flow from the enterprise privacy policy. These policies and procedures inform employees and contractors how to access, manage, and secure PII and PHI in compliance with DaVita's standards and applicable laws. See below for more information	HC-DY-230a.2
1) Number of data breaches, (2) percentage involving (a) personally identifiable information (PII) only and (b) protected health information (PHI), (3) number of customers affected in each category, (a) PII only and (b) PHI	DaVita reports information regarding privacy or cybersecurity incidents to individuals and to state, federal and international data protection regulators as required by applicable laws	HC-DY-230a.3
Total amount of monetary losses as a result of legal proceedings associated with data security and privacy	DaVita reports information regarding privacy or cybersecurity incidents to state, federal, and international data protection regulators as required by applicable laws.	HC-DY-230a.4

DaVita Privacy Principles

DaVita's Enterprise Privacy Policy sets the minimum standards for the handling of Personal Information (as defined therein) under DaVita's custody or control. DaVita has adopted the following privacy principles that guide our policies, procedures and practices:

Accountability: We define, document, communicate, and assign responsibility for our privacy and data protection policies and procedures. We provide regular training and education for our employees on relevant state and federal regulations including, but not limited to, HIPAA, GDPR, and CCPA.

Notice: We provide notice regarding our privacy practices and we identify the purposes for which Personal Information is collected, used, retained and disclosed.

Choice and Consent: We provide individuals with the opportunity to reasonably determine whether and how we use Personal Information, and with whom it can be disclosed. We describe the choices available to the individual, and where appropriate, we obtain implicit or explicit consent with respect to the collection, use and disclosure of Personal Information.

Collection, Use & Disclosure: We limit the collection, use and disclosure of Personal Information to that which is relevant for the purpose(s) needed/required.

Data Retention and Disposal: We retain Personal Information in accordance with DaVita's Records Retention Policy and Schedule. Personal Information is thereafter appropriately disposed of in accordance with our secure disposal procedures.

Access & Correction: We provide individuals with access to Personal Information about them for review, correction, or deletion, if inaccurate.

Transfer & Disclosure to Third Parties: We apply the Privacy Principles wherever Personal Information is transferred to, including across national borders, to third parties who support our business, and to partners with whom we do business.

Security for Privacy: We protect Personal Information against loss, misuse, or unauthorized access, use, disclosure, alteration, or destruction by using reasonable and appropriate technical, physical and administrative safeguards.

Data Integrity: We strive to ensure that Personal Information is accurate, complete and relevant for the purpose for which it is to be used.

Monitoring and Enforcement: We monitor, test, and remediate evidence of non-compliance with our privacy policies and procedures, and we follow documented procedures to address privacy- and security-related incidents, complaints and disputes.

Additional Privacy & Data Security Information

Information Security Policies and Systems Audit: External independent audits are conducted at least once every two years.

Governance: One of the primary responsibilities of the Audit Committee is to oversee our policies and programs with respect to enterprise risk assessment and enterprise risk management, including the risks related to privacy and data security (including, for the avoidance of doubt, cybersecurity). Other cross-functional internal groups and committees assist and oversee in the governance of privacy and security practices at DaVita, such as DaVita's Enterprise Governance Committee (EGC), which is a cross-departmental forum that includes the Privacy, Information Security, Information Governance, and Enterprise Risk (Audit) functions. The EGC is focused on enterprise policies and governance, which in turn helps manage risk by cascading new policies, among other things.

Training: All teammates (employees), including contractors, receive annual training on data security and privacy-related risks and procedures. All teammates are required to take an annual training on HIPAA best practices that tests their knowledge on safeguarding PHI in addition to other important aspects of the HIPAA Privacy and Security Rules. In addition, some teammates are required to participate in further trainings that cover general privacy awareness and principles. Training is mandatory for all new hires, and for teammates thereafter on an annual basis. Training completion is monitored and tracked for each teammate, and appropriate corrective action is taken if not completed.

Management of Controlled Substances	2022 Data	SASB Code
Description of policies and practices to manage the number of prescriptions issued for controlled substances	Not applicable - At this time, DaVita does not administer controlled substances in its clinics	HC-DY-260a.1
Percentage of controlled substance prescriptions written for which a prescription drug monitoring program (PDMP) database was queried	Not applicable - At this time, DaVita does not administer controlled substances in its clinics	HC-DY-260a.2
Pricing & Billing Transparency	2022 Data	SASB Code
Description of policies or initiatives to ensure that patients are adequately informed about price before undergoing a procedure	Billing and Insurance FAQs	HC-DY-270a.1
Discussion of how pricing information for services is made publicly available	Billing and Insurance FAQs	HC-DY-270a.2
Number of the entity's 25 most common services for which pricing information is publicly available, percentage of total services performed (by volume) that these represent	Not applicable	HC-DY-270a.3
Fraud & Unnecessary Procedures	2022 Data	SASB Code
Total amount of monetary losses as a result of legal proceedings associated with Medicare and Medicaid Fraud under the False Claims Act	DaVita discloses all material settlements in its periodic and/or current reports, as applicable, which are required to be filed with the U.S. Securities and Exchange Commission under applicable rules and regulations. For the reporting period, DaVita did not incur material monetary losses as a result of legal proceedings associated with Medicare and Medicaid Fraud under the False Claims Act.	HC-DY-510a.1

Employee Health and Safety	2022	SASB Code
(1) Total recordable incident rate (TRIR) and (2) days away, restricted, or transferred (DART) rate	DaVita is not publicly reporting this information at this time	HC-DY-0320a.1
Description of Occupational Health and Safety (OHS) management system	DaVita is committed to supporting the health and safety of our teammates, contractors and other individuals under our supervision. We aim to continually improving our OHS performance, by regularly evaluating our program for effectiveness, and making changes to the program as needed to maintain a safe and healthy workplace. Our senior leaders endorse the implementation of our OHS commitment and provide support for this important work. Our OHS system includes the following components: • Risk and hazard assessments • Prioritization and integration of action plans • Integration of actions to prepare for and respond to emergency situations • Evaluation of progress and program effectiveness in reducing health issues • Internal monthly inspections • Seeking third party consultation for safety program compliance and effectiveness • Procedures to investigate work-related injuries, ill health, diseases and incidents • OHS training provided to new and existing teammates to raise awareness and reduce operational health and safety incidents • Communication and data accessibility with both center managers and senior leadership on safety program components and awareness around injury loss drivers For more information please see our code of conduct	

Employee Health and Safety	2020	2021	2022	SASB Code
(1) Voluntary and (2) involuntary turnover rate for: (a) physicians, (b) non-physician health care practitioners, and (c.) all other employees	DaVita is not publicly reporting this information at this time			HC-DY-330a.1

Employee Health and Safety	2020	2021	2022	SASB Code
Description of talent recruitment and retention efforts for health care practitioners	See our 10-K Human Capital Management section and our Community Care site “Caring for Each Other” page for more information, and metrics below.	See our 10-K Human Capital Management section and the Teammate Engagement section above and metrics below.	See our 10-K Human Capital Management section and the Teammate Engagement section above and metrics below.	HC-DY-330a.2
Employee engagement scores	86% data coverage: 73% of U.S. teammates	84% data coverage: 71% of U.S. teammates	78% data coverage: 69% of U.S. teammates	
Number of teammates who participated in a DaVita University development program	11,916	12,663	16,500	
Average training hours per employee	16.7 hours	24.7 hours	26.7 hours	
Number of new employee hires	13,800	17,900	22,800	

Diversity and Belonging		2021	2022	
EEO-1 Report		Link	Link	
Learn more information about our commitment to Diversity and Belonging here .				

Teammate & Family Benefits and Wellness Programs

We provide an extensive platform of support programs and benefits to help teammates thrive. Highlights include:

- **Teammate Assistance Program** offering a broad range of counseling services for health and life challenges.
- **Short & Long term disability** for full-time and part-time teammates and Life/AD&D coverage at both the basic and supplemental levels.
- **Flexible work schedules and telecommuting options** may be available, dependent upon position and at the discretion of the supervisor.
- **Family support programs** that include family care programs for backup child and elder care through our partnership with Bright Horizons. Teammates can use one of our contracted network providers and are offered 10 days of back-up care, per family, in a calendar year. The back-up care program includes using Bright Horizons centers or having a caregiver come to a teammate's home. DaVita also offers ongoing care discounts of 10%-20% at selected providers.
- **Parental leave programs:** In addition to FMLA, teammates can receive six weeks paid leave at 80% (up to \$1000 a week), or benefits-eligible teammates can choose to receive a \$2,500 cash gift instead of taking leave. The leave can be taken intermittently in one week increments with manager approval, and teammates can choose to supplement PTO up to 100% of pay.
- **Additional family support programs** include access to educational and financial advising for teammates' children heading to college through College Coach, support for parents with a range of educational, developmental and social challenges, and Milk Stork, a milk-delivery service for nursing moms who travel for work.

Environmental Stewardship

Energy Management	2020	2021	2022	SASB Code
Total Energy Consumed (MWh)	923,293	955,204	884,946 Data coverage: 100% of global operations	HC-DY-130a.1
MWh from fuel	309,588	341,700	303,823	
MWh from purchased or acquired electricity	612,962	612,761	580,259	
MWh from self-generated renewable electricity	743	743	864	
Percentage of total energy from renewable sources	15%	35%	59%	HC-DY-130a.1
MWh from non-renewable sources	783,091	623,118	361,140	
MWh from renewable sources	140,202	332,086	523,806	

Waste Management	2020	2021	2022	SASB Code
Total amount of Medical Waste	71,395,201 lbs.	68,897,371 lbs.	67,451,743 lbs.	HC-DY-150a.1
% medical waste incinerated	4%	4%	3%	
% medical waste recycled or treated	0%	0%	0%	
% medical waste landfilled	96%	96%	97%	
Total amount of hazardous pharmaceutical waste	397 lbs.	82 lbs.	0 lbs.	HC-DY-150a.2
Total amount of non-hazardous pharmaceutical waste	5,363 lbs.	2,741lbs.	97lbs.	
% pharmaceutical waste incinerated	100%	100%	100%	
% pharmaceutical waste recycled / treated	0%	0%	0%	
% pharmaceutical waste landfilled	0%	0%	0%	
Total waste output (tons)	110,052 short tons* *Data coverage: 60% of U.S. operations	111,637 short tons* *Data coverage: 74% of U.S. operations	119,757 short tons** Data coverage: 68% of U.S. operations	
Water Management	2020	2021	2022	SASB Code
Total water withdrawals (megaliters)	4,976,152,751 gal 22,622 megaliters	4,745,052,455 gal 17,960 megaliters	3,876,937,359 gal; 14,674 megaliters	
Greenhouse Gas Emissions	2020	2021	2022	SASB Code
Scope 1 emissions (metric tons of CO2 equivalents)	60,753	66,959	60,589	HC-DY-150a.1
Scope 2 emissions (metric tons of CO2 equivalents)	Location-based: 229,252 Market-based: 161,076	Location-based: 217,975 Market-based: 110,687	Location-based: 211,606 Market-based: 18,561	
Scope 3 emissions (metric tons of CO2 equivalents)	1,316,324	1,303,046	891,799	

Climate Change Impacts on Human Health & Infrastructure	2021	2022	SASB Code
Description of policies and practices to address: (1) the physical risks due to an increased frequency and intensity of extreme weather events and (2) changes in the morbidity and mortality rates of illnesses and diseases, associated with climate change	See description below and our CDP response for more information.		HC-DY-450a.1
Percentage of health care facilities that comply with the Centers for Medicare and Medicaid Services (CMS) Emergency Preparedness Rules	100%	99.9%	HC-DY-450a.2

DaVita Emergency Management assists with emergency preparedness and emergency response for the enterprise. DaVita Emergency Management works with facilities and employees to develop and test emergency plans, and provide support, as needed, during an emergency event. DaVita Emergency Management works to ensure that DaVita's facilities and employees are prepared to operate in a number of situations and takes an all hazards approach. Maintaining continuity of care for the patients is vital.

Many of DaVita's services are essential, including dialysis, which is a life-sustaining treatment for patients experiencing ESKD. As such, DaVita works to mitigate risks that may cause a disruption or delay in this treatment. As the climate changes and community tensions and unrest become more prolific, DaVita Emergency Management will continue to work to improve DaVita's vulnerability and response to hazards.

DaVita Emergency Management's primary objectives include:

- Emergency planning by identifying and mitigating our vulnerability to hazards
- Preparedness through comprehensive policy and procedures, training, and tools
- Providing integrated and coordinated response to emergency and disaster situations maintaining continuity of care for our patients
- Long-term recovery of services by working to restore normalcy and addressing the needs of our teammates, patients and community

DaVita Emergency Management authors and manages policies and procedures around hazards that are environmental, technological, and human-made. These include events that may create a disruption in dialysis treatment services, such as severe weather, wildfires, civil unrest, public health emergencies, utility shutdowns, and community infrastructure failure.

DaVita Emergency Management utilizes an integrated response to events and carefully coordinates patient care when significant events occur. In addition to event response, DaVita Emergency Management works to test and train DaVita's care providers. This includes:

- Developing training programs that result in demonstrated knowledge of emergency procedures
- Implementing drills and exercises to test emergency plans. These are facility specific as well as multi-agency, multijurisdictional, and multidisciplinary exercises.

Description of Selected Policies and Internal Resources:

- Facility Emergency Management Plan (EMP): This plan outlines the governing mechanisms required to establish and maintain a facility specific emergency management plan designed to manage the consequences of emergencies and disasters, including extreme weather events that may disrupt the facility's ability to provide care.
- Facility Hazard Vulnerability Analysis Tool: This tool is a needs assessment that identifies any potential hazards that may affect the operation of the facility and surrounding community, including extreme weather events. The tool is reviewed and updated annually by a location's facility administrator.
- Scenario Exercise Templates: These exercises assess the effectiveness of the facility EMP conducted as a full-scale exercise with local emergency management agency that is community-based. Exercise scenarios include extreme weather events.
- Facility Emergency Preparedness Checklist: Step-by-step guide to help facilities align practices with the CMS Emergency Preparedness Rules. Includes an overview of available policies and resources for centers.
- Facility Incident Management Tool: This tool is a compendium of role specific checklists for multiple hazards, including severe weather related events. It includes copies of various health and safety policies and procedures, emergency response flowcharts, and plans to address the treatment of patients in an emergency.

More details on our environmental disclosures can be found in our public [CDP response](#).

TCFD Report

About This Report

DaVita has prepared this report to disclose its actions around climate governance, strategy, risk management, and metrics and targets in line with the recommendations of the Task Force on Climate-related Financial Disclosures (TCFD). This TCFD report includes results of DaVita's geographic risk screening exercise against physical and transition risks to our global outpatient dialysis centers and key suppliers. DaVita has approved science-based targets to ensure that our GHG emissions reductions targets are in line with global commitments to help the world's efforts to limit global warming to 1.5 degrees Celsius or less.

Executive Summary

DaVita recognizes our responsibility to be an active contributor to global climate efforts, including deep decarbonization and investments in the resiliency of our facilities and communities. We have prepared this TCFD report as part of a company-wide initiative to proactively assess, identify and manage climate-related risks and identify and pursue opportunities to improve operational resiliency.

Governance

The Nominating and Governance Committee of the Board reviews and oversees DaVita's activities, policies and programs related to environmental sustainability and governance matters, including climate-related risks and opportunities. In addition, the Audit Committee of the Board reviews significant risk areas for DaVita, which may include climate related risks to the extent material. The management Environmental, Social and Governance (ESG) Steering Committee regularly reports to the Nominating and Governance Committee and gives the full Board an ESG update at least annually. Management also reports on enterprise risks to the Audit Committee on a quarterly basis, and to the full Board annually. Management periodically updates the Audit Committee on the process for ESG-related public reporting, including reporting controls.

Strategy

DaVita believes it is well positioned to manage through the energy transition necessary to meet global climate goals given that it has adopted approved science-based targets for its Scope 1, 2, and 3 Greenhouse Gas (GHG) emissions. Our emissions targets are in line with global commitments that are intended to help the world limit global warming to 1.5 degrees Celsius or less. Through a third party analysis, DaVita has identified important risks for management based on a portfolio risk assessment of our more than 2,700 U.S. and 300 international outpatient dialysis centers (as of 12/31/21) and key supply chain partners:

Time Horizon	Most Important Physical Risks for Active Management
Short Term (0-2 years)	Flooding from extreme rain, coastal floods, and hurricanes; wildfires and air quality issues
Medium (2-10) and Long Term (10-30 years)	Acute: Extreme weather (e.g., wildfires) Chronic: Sea level rise/coastal flooding and heat waves

Management

DaVita has been proactively managing and measuring GHG emissions for several years, and has management strategies and plans in place to help achieve our emissions reduction targets. Similarly, several years ago Emergency Management identified climate-related factors as emerging risks for management to monitor. Emergency Management works proactively on issues in the context of climate change, including mitigation of the impact of future emergencies such as water shortages, power outages, and high water events that may be increased in severity by climate change.

DaVita uses findings of its climate-related risk assessments to help support active management of climate-related risks. For example, flooding from extreme rain, coastal floods, and hurricanes represents a short-term potential risk. Accordingly, we plan to explore flood resilient design options for treatment centers, as well as lower cost interventions such as backflow prevention devices, to determine the effectiveness of these and other strategies. Proactive and comprehensive flood risk management can help reduce missed treatments during severe weather events and help to support continued care for our patients.

Metrics and Targets

DaVita tracks several climate-related metrics and targets, including approved science-based targets. More detail is available in the metrics and targets section of this report.

Governance

Disclose the organization's governance around climate-related risks and opportunities.

A. Describe the Board's oversight of climate-related risks and opportunities.

DaVita is committed to elevating the health and quality of life of patients around the world. Many of DaVita's services are essential, including dialysis, which is a life-sustaining treatment for patients experiencing End Stage Kidney Disease (ESKD). As such, DaVita works to mitigate risks that may cause a disruption or delay in this treatment. The Nominating and Governance Committee of the Board reviews and oversees DaVita's activities, policies and programs related to environmental sustainability and governance matters, including climate-related risks and opportunities. In addition, the Audit Committee of the Board reviews significant risk areas for DaVita, which may include climate related risks to the extent material. The management Environmental, Social and Governance (ESG) Steering Committee regularly reports to the Nominating and Governance Committee and gives the full Board an ESG update at least annually. Management also reports on enterprise risks to the Audit Committee on a quarterly basis, and to the full Board annually. Management periodically updates the Audit Committee on the process for ESG-related public reporting, including reporting controls.

B. Describe management's role in assessing and managing climate-related risks and opportunities.

The management ESG Steering Committee provides guidance on strategies and disclosures for our ESG initiatives. The committee is comprised of leaders across the business to represent various perspectives and stakeholders, and aligns strategies across the company.

DaVita's Energy and Sustainability Department oversees DaVita's environmental goals and the strategies and initiatives implemented in conjunction with many other teams, including Facilities, Biomedical, Construction and Design and others. This includes management of climate-related risks and opportunities. We have established two key performance indicators for 2025 that are verified science-based targets, in addition to a goal to be 100% powered by renewable energy, including through the use of virtual power purchase agreements. Progress against these targets, along with full accounting of Scope 1, 2, and 3 emissions, is reported within our ESG report and to the Carbon Disclosure Project (CDP) annually.

Members of our Energy and Sustainability Department prepare and provide project updates, goal progress measurement, and other relevant information to be reviewed by the Board. The Executive Sponsor of the ESG Steering Committee presents information gathered by the energy and sustainability department to the Board.

DaVita's Business Continuity (BC), Emergency Management (EM), and Facilities teams are responsible for the management of physical risks across DaVita's outpatient centers.

Strategy

Disclose the actual and potential impacts of climate-related risks and opportunities on the organization's businesses, strategy, and financial planning.

A. Describe the climate-related risks and opportunities the organization has identified over the short, medium, and long term.

The DaVita management teams described above have identified several climate-related risks and opportunities for the company, including through the third party analysis and assessment described herein. Climate and weather-related physical stresses on facilities and infrastructure are growing as the world continues to exhibit the growing impact of climate change; if not properly managed, these stresses may impact DaVita's ability to consistently deliver quality patient care. Further, heat-related illnesses may impact DaVita's patients in the long term. Finally, we recognize the risk of social unrest and disruption as a potential impact of climate change that may affect business operations and work to develop emergency management plans for such events.

DaVita believes that the energy transition necessary to achieve global climate goals represents an opportunity for the business. We have set a goal to transition our facilities to 100% renewable energy by 2025 and already completed said transition for facilities located in the United States ("U.S.") in 2021. In 2021 DaVita U.S. reached its goal to be 100% powered by renewable energy. Through a virtual power purchase agreement, our agreements to purchase energy from wind and solar farms now create as much clean energy annually as the amount of electricity we use in our U.S. operations. DaVita aims to accomplish 100% renewable energy procurement at all facilities worldwide by 2025.

For the purposes of this TCFD assessment, DaVita defines the short term as the next 24 months; medium term as 2-10 years from now; and long-term as 10-30 years from now. Business planning horizons beyond 10 years are more challenging to forecast for DaVita given the difficulty of planning for unknown market, health, and regulatory environments. As such, we focused our first assessment of risks and opportunities on targeted geographic screening of assets and supply chain against physical and transition risks, knowing that the existing trajectory of physical climate impacts is largely locked in for the next 20-30 years regardless of global emissions scenarios.

Over the short term, DaVita's most important climate-related risks include, among others:

1. Acute physical risks: flood impacts from extreme rain, coastal flooding, and hurricanes may impact the operations of or access to our centers, the operations of our clinical laboratory or the operations of our central business offices. Wildfires and the resulting air quality issues may also impact our operations. The potential consequence associated with impacts from these risks is expected to grow over time.

2. Regulatory transition risks: almost half of our U.S. locations are located in a state or city with local GHG reduction or renewable energy goals; and over half of international locations are in countries with ambitious national GHG reduction targets. Therefore, our portfolio is highly exposed to existing and future GHG regulations, which we expect will increase costs on businesses without stated and effective GHG management programs.

In the medium and long term, DaVita's most important climate-related risks for active management include, among others:

1. Acute physical risks: as the effects of climate change continue to grow, DaVita's exposure to the acute physical risks described in the short term will expand across its locations. The cumulative impact of repetitive damage may start to influence patient behavior and demographics (through climate-related migration and other factors) and may impact our ability to deliver services effectively. The growing prevalence of extreme weather events will likely place additional strain on electric power grids and physical infrastructure, disrupting the delivery of power, water, and sanitation to our locations. We expect that weather events such as hurricanes and wildfires will manifest in locations where risk to these hazards was historically low and there may not be sufficient capabilities or infrastructure to withstand the impact of such hazards.

2. Chronic physical risks: While we consider acute physical risks to be the "shocks" of anticipated extreme weather, chronic physical risks represent stressors to the system over time. In particular, extreme heat and sea level rise represent important chronic physical risks to DaVita. According to the National Institutes of Health, extreme heat may accelerate patient comorbidities due to the effects of heat stress, which may be a particular concern for dialysis patients. While DaVita's locations are largely unexposed to coastal flood hazards today, expected sea level rise will change this picture in the future. Daily tidal flooding in coastal areas will likely reduce the ability for patients to reach DaVita locations, even in DaVita's physical locations that are less exposed to this risk.

DaVita's climate-related opportunities align with our long-standing commitment to our Trilogy of Care: caring for our patients, each other and the world, and represent an area of strength for the company. DaVita has identified two areas of climate-related opportunity, among others:

1. Emissions Reduction Activities: Reduce GHG emissions consistent with approved science-based targets; specifically, reducing 50% of operational emissions and ensuring that supply chain partners representing 70% of Scope 3 emissions set climate change goals by 2025. These commitments could help the world limit warming to 1.5 degrees Celsius.

2. Facility Resilience: Through ongoing evaluation of climate-related risks to our facilities, DaVita is positioned to improve continuity of care through better informed emergency and risk management and investments in resiliency. In the past year, DaVita has experienced impacts to our facilities primarily driven by extreme rain events, which overwhelm local stormwater systems and cause flooding within facilities. Using the results of the facility climate risk assessment, EM and DaVita will determine how best to align operational protocols and facility capital improvements in order to help mitigate identified vulnerabilities.

B. Describe the impact of climate-related risks and opportunities on the organization's businesses, strategy, and financial planning.

To date, acute physical risks such as flooding from extreme rain have resulted in facility damage and business interruption costs for DaVita. When extreme rain events or hurricanes damage and flood our facilities, resulting facility downtime may impact the ability for patients to receive treatments. If there is limited ability to accommodate patients at other facilities or through home dialysis programs, the increased frequency of flood events could result in diminished health outcomes for patients and adverse financial impacts for DaVita. Based on current estimates, we do not expect the costs of potential facility damage and missed treatments resulting from flooding from extreme rain events and hurricanes to have a material adverse effect on DaVita's business, financial condition, results of operation or cash flows over the next five years.

We see opportunities in addressing transition risks and reducing our global emissions footprint. GHG emissions reduction projects reduce the organization's exposure to fluctuations in the costs and availability of fossil fuels. Further, there are opportunities to enhance our operational resiliency as we help to ensure that supply chain partners are managing their own risk exposure to help prevent future supply chain disruptions.

These and other risks associated with delivery of essential medical supplies are considered in our procurement strategy: our procurement team evaluates a vendor's ability to provide medical supplies in a range of situations with climate-related risks, including pandemics exacerbated by climate change and severe weather events. Our procurement team works closely with Emergency Management to help ensure that supplies are available for centers effected by severe weather events including flooding, fires, and severe storms.

We have evaluated climate-related impacts for key suppliers to determine where we may need to build additional redundancy in our supply chain going forward. The COVID-19 pandemic has caused unprecedented challenges to supply chains. While many global supply chain challenges can be linked to the COVID-19 pandemic, others result from acute or chronic physical impacts such as winter storms, extreme rain and flood events, and tornadoes, among other things. We are assessing ways to build additional redundancy in our supply chain to help better prepare for extreme weather events or other global events similar to the COVID-19 pandemic. In addition, we are working towards having suppliers representing 70% of our scope 3 emissions have also set GHG emissions targets. This goal is part of our approved science-based target and represents an opportunity for DaVita and its suppliers to be market leaders and help ensure that our strategy is resilient against future regulations and evolving market expectations.

We believe that other identified potential financial impacts resulting from climate change are of lesser magnitude at this point in time, but include, among others:

- Increasing water costs due to water stress and drought; and
- Increased supplier costs due to carbon taxes such as the EU carbon border tax on incoming supplies.

Managing Climate Change Risk

Disclose how the organization identifies, assesses, and manages climate-related risks.

A. Describe the organization's processes for identifying and assessing climate-related risks.

In 2021, DaVita engaged a third party to conduct a risk assessment of over 2,700 U.S. and 300 international outpatient dialysis centers and key supply chain partners. The third party assessed each DaVita asset against existing physical risks, including water stress, riverine/inland flooding, coastal flooding, and other extreme weather events such as heat and cold waves. The third party also analyzed all locations for regulatory transition risks related to GHG reduction commitments (including local net-zero targets) as well as carbon pricing regimes. Finally, DaVita evaluated the relative importance of the risk findings by assessing past consequences from various risks and forecasted the potential financial impacts of physical and transition risks on our enterprise.

A summary of our estimated short term exposure to physical risks is below, as a percentage of patient treatment centers exposed to each risk*:

Risk	US sites exposed	International sites exposed
Tornadoes	33%	N/A (not in scope)
Heat Waves	18%	
Riverine and Inland Flooding	13%	3%
Coastal Floods and Hurricanes	9%	1%
Cold Waves	7%	N/A (not in scope)
Wildfires	2%	
Drought/Water Stress	1%	10%

* as of 2021

While we believe that it is important for our facilities to be aware of their individual physical risk exposure and plan accordingly, we assign relative importance to each risk based on known past facility impacts, which is how we determined the most important potential risks for active management, detailed below.

Time Horizon	US sites exposed
Short Term	Flooding from extreme rain, coastal floods, and hurricanes; wildfires and air quality issues
Medium and Long Term	Acute: Extreme weather (e.g., wildfires) Chronic: Sea level rise/coastal flooding and heat waves

In addition to the geographic risk screening, DaVita conducted a qualitative assessment of three climate scenarios based on the Intergovernmental Panel on Climate Change's (IPCC) Fifth Assessment Report:

1. (IPCC) Representative Concentration Pathway (RCP) 2.6: in this scenario, countries and organizations deliver on ambitious emissions reduction commitments to keep global warming well below 2 degrees Celsius by 2100. We believe that we are well-positioned for this scenario given our robust, science-based GHG reduction goals that are consistent with this global outcome. However, the physical risks that we face today will continue to increase even under the most ambitious IPCC scenario and we expect that we will need to continue to invest in risk mitigation measures for our outpatient facilities.
2. IPCC RCP 4.5: in this scenario, a transition to a lower-carbon economy is delayed and global warming is limited to between 2 and 3 degrees Celsius by 2100. DaVita's GHG targets position us as a "first mover" in this scenario. In this scenario, physical risks significantly increase over time for DaVita, with more locations becoming susceptible to the impacts of heat waves, cold waves, and hurricanes. We believe that we will need to increase resiliency investments in this scenario, particularly in flood prevention and the installation of backup power.
3. IPCC RCP 8.5: in this scenario, a "hot house world" is realized as countries and organizations continue the status quo; emission reduction targets are not realized and global warming reaches 4-5 degrees Celsius by 2100. According to the IPCC, this level of warming will have disastrous consequences for sea level rise and severely impact agricultural productivity, water availability, wildfires, and flooding. In this scenario, it is possible that we will need to consider human migration patterns and ultimately divest the riskiest assets that sustain repeated damage. In this high-emissions world, we expect that companies that have reduced their emissions will continue to reap reputational benefits from emissions reduction activities, even if those benefits are not matched by changes in the regulatory landscape. In this scenario, the physical risk consequences play out.

B. Describe the organization's processes for managing climate-related risks.

We believe that it is important to leverage existing programs and new strategies to manage our most important climate-related risks.

Transition risks: We believe that our existing emissions reduction strategies and approved science-based targets position us well to manage transition risks across our physical asset portfolio and our supplier base. We expect that our investments in renewable energy, building efficiency, and process improvements will help us achieve our targets, and our robust supplier engagement programs will help our partners establish and achieve their emissions reduction targets.

Physical risks: DaVita's Business Continuity (BC), Emergency Management (EM), and Facilities teams are responsible for the management of physical risks across DaVita's outpatient centers. These teams' deep engagement across our facilities has helped DaVita mitigate physical risks at treatment centers and provide continuity of care for years. BC considers climate-related vulnerabilities at each facility and has robust community partnerships in place with local Emergency Operations Centers (EOCs) to prepare for acute and chronic physical risks. The BC Steering Committee, led by the BC team and comprised of senior leaders, including the GVP of Real Estate, Development and Facilities, reviews risk assessments and incorporates the findings into operational plans as appropriate.

We expect that our existing programs to mitigate climate-related risks will continue to evolve. Informed by our risk assessment, we are evaluating potential areas for engagement between 2022 and 2025. We believe that potential facility damage and disruption from flooding and other extreme weather events is one of DaVita's most important physical risks in the short term. We plan to explore the effectiveness of potential mitigation measures at facilities identified as having higher risk exposure from extreme weather. The primary goal of physical risk mitigation will be to reduce facility downtime and increase the resiliency of our treatment centers.

C. Describe how processes for identifying, assessing and managing climate-related risks are integrated into the organization's overall risk management.

A review conducted by the Centers for Disease Control and Prevention (CDC) in 2020 concluded that climate-related events such as loss of electricity and clean water, blocked roads, and mass evacuations could lead to the closure of dialysis centers and missed dialysis sessions. Studies cited by the CDC noted that missed or delayed dialysis sessions have been linked to increased hospitalizations and mortality for dialysis patients. As a result, climate-related risks are part of our broader risk management strategy.

BC is aligned with our Enterprise Risk Services (ERS) team on assessing supply chain risk and business continuity plans for various departments. Additionally, BC provides periodic updates to the Audit Committee of the Board on Business Continuity no less than once annually.

To help mitigate physical climate risks, BC assists with emergency preparedness and emergency response for the enterprise. We work with every facility to develop and test emergency plans and provide support as needed during a real event. We develop an integrated response to potential hazards and carefully coordinate patient care when significant events occur. In addition to event response, DaVita BC works to test and train DaVita's care providers. This includes: developing training programs that result in demonstrated knowledge of emergency procedures and implementing drills and exercises to test emergency plans. Risks related to climate and weather are identified and assessed before developing and stress testing these plans and procedures.

BC works proactively on issues in the context of climate change, working to mitigate the impact of potential future emergencies such as water shortages, power outages, and high water events that may be increased in severity by climate change. We also engage local emergency operations centers (EOC's) and public health agencies across the United States with the goal of creating a more resilient healthcare community and being proactive in identifying disasters risks across the U.S.

Leadership in BC and the ESG Steering Committee also coordinate with DaVita's Enterprise Risk Management (ERM) and management Disclosure Committee to incorporate ESG related issues, including climate change, into DaVita's broader ERM and corporate disclosure processes, respectively.

Metrics and Targets

Disclose the metrics and targets used to assess and manage relevant climate-related risks and opportunities.

A. Disclose the metrics used by the organization to assess climate-related risks and opportunities in line with its strategy and risk management process.

DaVita produces an annual ESG report which details the climate-related metrics in use by the organization. DaVita finds the following metrics to be the most useful in driving meaningful organizational climate-related action:

Indicator	Metrics Tracked	2022 KPIs
GHG Emissions	Absolute Scope 1, 2, and 3 emissions	Detailed in (b) below
Transition Risks	Facilities in jurisdictions with carbon taxes proposed or in place, national or local GHG reduction targets, and jurisdictions with other GHG regulations in place.	• 38% of US locations in city or state with net-zero emissions target or 100% clean electricity target, as of 2021 • 55% of international locations in countries with existing or expected GHG regulations, as of 2021
Physical Risks	• % of facilities exposed to: water stress, extreme weather, coastal flooding, and inland flooding (for international locations); drought, coastal flooding, inland flooding, hurricanes, tornadoes, cold waves, heat waves, and wildfires (US locations) • Most important risks to operations - which risks DaVita will actively manage.	Results summarized in “managing climate risk”
Remuneration	Climate-related factors that contribute to the Short Term Incentive pay structure for Named Executive Officers	DaVita’s Named Executive Officers, Group Vice President of Real Estate, Development and Facilities, and Senior Director of Energy and Sustainability are incentivized financially, and through recognition, to meet or exceed certain environmental KPIs and targets. Depending on the executive, this can include the enterprise’s 2025 environmental goals, progress towards our science-based targets, and/or various projects that target resource use and waste output reduction, for example.
Climate-Related Opportunities	Percentage of renewable electricity across its operations in service of its 100% renewable 2025 goal. Reduce carbon emissions by 50% through initiatives such as: • Onsite renewable energy projects • Install electric vehicle charging stations at business offices • Pursue LEED certification for offices where possible	DaVita’s U.S. locations are now powered by 100% renewable energy, through the use of virtual power purchase agreements, among other things. 2022 Highlights • 2,500+ clinics have received energy efficient LED lighting upgrades through 2022*. • We designed and built our first net zero energy dialysis clinic

*List of eligible clinics includes home training centers which are not included in our consolidated center count

B. Disclose Scope 1, Scope 2 and, if appropriate, Scope 3 greenhouse gas (GHG) emissions and the related risks.

GHG Emissions (metric tons of CO2 equivalents)	2020	2021	2022	2021-22 % Change
Scope 1 emissions	60,753	66,959	60,589	-10%
Scope 2 emissions	Location-based: 229,252 Market-based: 161,076	Location-based: 217,975 Market-based: 110,687	Location-based: 211,606 Market-based: 18,561	-3% -83%
Scope 3 emissions	1,316,324	1,303,046	891,799	-32%
Scope 1+2 emissions per treatment	Location-based: 0.009 mtCO2e/tx	Location-based: 0.008 mtCO2e/tx Market-based: 0.005 mtCO2e/tx	Location-based: 0.008 mtCO2e/tx Market-based: 0.002 mtCO2e	-4% -58%

Discussion of the opportunities and risks associated with our GHG emissions is included in the Strategy and Management sections of this disclosure.

C. Describe the targets used by the organization to manage climate-related risks and opportunities and performance against targets.

DaVita has approved science-based targets to help reduce organizational emissions 50% by 2025 and to help ensure that suppliers representing 70% of scope 3 emissions have also set targets.

See our full list of 2025 environmental goals and 2022 progress on page 21.



Our Vision

To build the greatest health care community the world has ever seen

Our Mission

To be the provider, partner and employer of choice

Our Core Values

Service Excellence
Integrity
Team
Continuous Improvement
Accountability
Fulfillment
Fun

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Section XI, Charity Care Information

The table below provides charity care information for all DaVita dialysis facilities located in the State of Illinois that are owned or operated by the Applicants.

CHARITY CARE			
	2021	2022	2023
Net Patient Revenue	\$414,744,253	\$398,035,885	\$390,359,018
Amount of Charity Care (charges)	\$1,247,774	\$1,151,514	\$1,621,087
Cost of Charity Care	\$1,247,774	\$1,151,514	\$1,621,087

After paginating the entire completed application indicate, in the chart below, the page numbers for the included attachments:

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