

ILLINOIS HEALTH FACILITIES
AND SERVICES REVIEW BOARD
PUBLIC HEARING

REPORT OF PROCEEDINGS had at the hearing in
the above-entitled cause before MR. GEORGE ROATE,
Hearing Officer, in the Board Council Room, Village Of
Barrington, Barrington, Illinois, on July 10, 2024,
commencing at 1:30 p.m.

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3 MR. ROATE: Good Afternoon. My name is George
4 Roate. I'm accompanied by Ms. Blanca Dominguez, board
5 legal counsel, and Mr. Don Jones, tenure board legal
6 staff. We are from the Illinois Department of Public
7 Health and represent the Illinois Health Facilities and
8 Services Review Board.

9 We are here to conduct a public hearing on the
10 proposed project known as project 24-015 Advocate Good
11 Shepherd Hospital, Barrington. As per the rules of the
12 Illinois Health Facilities and Services Review Board, I
13 would like to read the legal notice into the record.

14 In accordance with the requirements of the
15 Illinois Health Facilities Planning Act, notice is given
16 of receipt of a request for a public hearing for project
17 24-015 Advocate Good Shepherd Hospital for the
18 relocation and modernization of the laboratory and
19 pharmacy departments at Advocate Good Shepherd Hospital
20 located at 450 West Highway 22, Barrington, Illinois.
21 The project cost is \$26.4 million.

22 A public hearing will be conducted by the
23 staff of the Illinois Health Facilities and Services
24 Review Board on Wednesday, July 10th, 2024, beginning at

1 1:30 p.m. at the Village of Barrington, Board Council
2 Room, 200 Hough Street, Barrington, Illinois.

3 The public hearing is to be held by the
4 Illinois Department of Public Health pursuant to the
5 Illinois Health Facilities Planning Act. The hearing is
6 open to the public and will afford an opportunity for
7 all parties with interest to present written and/or
8 verbal comment relevant to the project.

9 All allegations or assertions should be
10 relevant to the need for the proposed project and be
11 supported with two copies of documentation or materials
12 that are printed or typed on paper, size 8 1/2 by 11
13 inches. Consideration by the State Board has been
14 tentatively scheduled for the August 8th, 2024 Illinois
15 Health Facilities and Services Review Board meeting.

16 If you have not done so, please sign in using
17 the appropriate registration forms. One form is for
18 individuals who want to provide testimony in favor or
19 opposition to the project. The other form is for
20 individuals to register their attendance who do not wish
21 to testify.

22 To ensure that the Illinois Health Facilities
23 and Services Review Board's public hearings protect the
24 privacy and maintain the confidentiality of an

1 individual's health information, covered entities as
2 defined by the Health Insurance Portability Act of 1996,
3 such as facilities, hospital providers, health plans,
4 and health care clearinghouses, submitting oral or
5 written testimony that discloses protected health
6 information of the individuals shall have a valid
7 written authorization from that individual. The
8 authorization shall allow the covered entity to share
9 the individual's protected health information at this
10 hearing.

11 Those of you who came with prepared text for
12 your presentation may choose to submit that text without
13 giving testimony. However, if you are giving oral
14 testimony, please limit each oral presentation to three
15 minutes.

16 As per the legal notice, I would appreciate
17 two copies of your testimony. When you make your
18 presentation, please give the court reporter the
19 spelling of your complete name.

20 If there's a chief spokesperson for the
21 applicant, we would like that individual to make the
22 first presentation. The remaining testimony will be
23 taken in the order of the names on the registry. Please
24 hold your questions until all testimony is presented.

1 And I believe we have our -- we have our speakers lined
2 up. Give me one second.

3 Okay. First, the Board would like to call
4 Myndee Balkan. Please speak into the microphone and
5 give the correct --

6 MS. BALKAN: Good afternoon. My name is Myndee,
7 M-y-n-d-e-e, B-a-l-k-a-n. I'm the Health Facilities
8 Planning Manager for Advocate Health Care and I'm
9 working on this project for Advocate Good Shepherd
10 Hospital.

11 I'd like to start by thanking the Health
12 Facilities and Services Review Board staff for their
13 assistance. The modernization project that we are
14 talking about is critical in order for us to continue to
15 offer complex inpatient surgical and outpatient care.
16 The pharmacy and the lab are key operations of every
17 single hospital.

18 Completion of this project will allow us to
19 address the aging infrastructure needs in the most
20 cost-efficient manner to deliver the best possible care
21 for our patients now and into the future. It will
22 create desperately needed space and technology upgrades
23 in addition to correcting infrastructure for both
24 departments to support the increased volumes our

1 pharmacy and laboratory have experienced over the past
2 few years.

3 With thoughtful planning and consideration, we
4 have identified appropriate space within the hospital
5 that will have minimal disruption to patients and
6 clinicians.

7 Thank you for the time today. I'm hopeful by
8 that through our application as well as today's
9 presentation, you'll understand how much the completion
10 of this project will enhance the ways in which we
11 provide essential services to our community. Thank you.

12 MR. ROATE: Next the Board would like to call
13 Dasha Gorkov.

14 MS. GORKOV: Hi. Good afternoon, everybody. My
15 name is Dasha Gorkov spelled D-a-s-h-a, last name
16 Gorkov, G-o-r-k-o-v. I'm the Vice President for the
17 hospital operations at Good Shepherd Hospital.

18 The Advocate Good Shepherd Hospital laboratory
19 and pharmacy departments have delivered essential
20 services to southwestern Lake and eastern McHenry County
21 for decades. Now, 46 years after construction, an
22 upgrade to our facilities is really critical to allow us
23 to continue to meet the industry standards and
24 accommodate current procedures and technology.

1 Investing in these services will enable us to continue
2 providing the very best care to our region's residents.

3 While functional, the current equipment and
4 technology utilized in our laboratory and pharmacy
5 services is nearing the end of life and does not
6 adequately support our current capacity. A technology
7 upgrade will grant us the ability to serve the community
8 through state-of-the-art infrastructure. The new
9 equipment will require significant additional space and
10 updated infrastructure.

11 Over the past few years, to meet regulatory
12 standards, we have expended our lab equipment and
13 outgrown our current footprint. If approved, the space
14 will be designed to optimize clinical workflow and
15 efficiency. This means more timely test results,
16 speedier clinician response, and ultimately seamless
17 care.

18 Thank you for your time and consideration. I
19 hope that you will strongly consider approval of this
20 project. Thank you.

21 MR. ROATE: Thank you.

22 Next the Board would like to call Mr. Roberto
23 Orozco.

24 MR. OROZCO: Good afternoon. My name is Robert

1 Orozco. That is spelled R-o-b-e-r-t-o, last name is
2 O-r-o-z-c-o, and I am Director for Design and
3 Construction for our central Chicagoland and North
4 Illinois regions. Thank you for giving me the
5 opportunity to speak on the importance of this
6 modernization project.

7 The current Advocate Good Shepherd laboratory
8 and pharmacy was constructed back in 1977. So it is
9 near 50 years old, and the infrastructure needs to be
10 modernized.

11 To give you a glimpse into just some of the
12 challenges we are currently facing in the current space,
13 the electric panels supporting the laboratory are full.
14 So when we receive new equipment or need to add
15 equipment to the facility, we have challenges there.

16 Our grossing room, the area where pathology
17 specimens are analyzed barely meets the code minimums.
18 We would like to exceed these requirements with this
19 project. Our current HVAC system is challenging with
20 aging infrastructure, which puts our sensitive equipment
21 and patient specimens at some risk. The HVAC system,
22 particularly the air-conditioning, is inadequate.

23 Plumbing and drainage issues have required
24 frequent maintenance through the past few years.

1 Addressing the infrastructure deficiencies in this
2 existing space while maintaining operations of this
3 department is simply not possible.

4 So by moving the services to our north
5 pavilion, we will be able to create the appropriate
6 mechanical, electrical, and plumbing infrastructure to
7 support the needs of the current future services while
8 also phasing the project in a way that would allow us to
9 provide the safest, high-quality care and minimize
10 disruption to our patients and staff.

11 So I echo my colleagues' sentiments and thank
12 you for the opportunity to share this information.
13 Together, we can -- we have a tremendous impact on our
14 community. And thank you for your time.

15 MR. ROATE: Thank you.

16 Next the Board would like to call Ms. Anne
17 Igoe.

18 MS. IGOE: Good afternoon. My name is Anne,
19 A-n-n-e, last name Igoe, I-g-o-e.

20 SEIU Healthcare, a union of 90,000 healthcare
21 and human service workers, opposes the \$26.4 million
22 modernization of Advocate Good Shepherd Hospital because
23 Advocate Health should prioritize investment its in
24 facilities that provide care to the medically

1 underserved communities struggling with racial and
2 economic health disparities.

3 Good Shepherd is a well-resourced hospital in
4 an affluent northwest suburban Barrington, median
5 household income is \$145,865, where most residents have
6 commercial health insurance and a life expectancy is a
7 robust 82.2 years.

8 Advocate Trinity Hospital, by contrast, is
9 Advocate's last remaining south side acute care facility
10 and is in the Calumet Heights community area where the
11 median household income is less than half of that of
12 Barrington. A disproportionate number of residents are
13 on Medicaid, and life expectancy is only 73.9 years.

14 Advocate's decision to invest in Good Shepherd
15 over Trinity is consistent with a years long pattern of
16 disproportionate investment in facilities serving
17 affluent and largely white communities over those
18 communities of color with demonstrable and persistent
19 health inequities.

20 As the following table indicates, Advocate
21 spends much more on its north side and suburban
22 hospitals than they do on Advocate Trinity.

23 The disparity in investment between Trinity
24 and Advocate's other hospitals, including and especially

1 Good Shepherd, is striking.

2 Since 2015, Advocate has invested five times
3 as much more capital at Good Shepherd as at Trinity even
4 though the two facilities are roughly the same size.
5 Advocate Good Shepherd has invested 222 million --
6 actually almost \$223 million. And in Advocate Trinity
7 it has invested in \$44.6 million.

8 Meanwhile, Trinity is currently struggling
9 with patient safety concerns that Advocate could and
10 should address with additional capital investments over
11 renovations to Good Shepherd which has already
12 benefitted from significant capital investment in recent
13 years.

14 Trinity was among the worst performing
15 hospitals of Illinois in the Leapfrog Group's two most
16 recent patient safety assessments, receiving a D grade.
17 Advocate's two south suburban facilities also received
18 D, reflecting a broader need for investment in
19 facilities serving medically underserved communities of
20 color.

21 Our union cannot endorse Advocate spending
22 upwards of \$30 million in Barrington when there's a much
23 greater demonstrable need for serving expansion at
24 Trinity and the south suburban facilities.

1 Therefore, we ask that HFSRB reject project
2 24-015 unless or until such time as Advocate Health
3 proposes an equal or greater capital investment in its
4 south side and south suburban facilities. Thank you.

5 MR. ROATE: Thank you.

6 Next the Board would like to call Ms. Lori
7 Salerno.

8 MS. SALERNO: Hello, everyone. My name is L-o-r-i,
9 last name S-a-l-e-r-n-o.

10 My name is Lori Salerno, and I'm a patient
11 care technician at Northwestern Memorial Hospital. When
12 I am not serving patients, I am the primary caretaker of
13 a close family member who has many health needs,
14 including a heart issue. Due to the lack of accessible
15 facilities in south side neighborhoods, I have to drive
16 my close family member an hour and a half away just to
17 reach a primary care physician.

18 Patients that live far away from the nearest
19 facility are known to wait, and they are very sick, to
20 seek care. In addition, because my close family member
21 does not drive, she must rely on me when she is sick.
22 Because of lack of options nearby, she is resistant to
23 seeking our care, so now she must wear a heart monitor
24 with the worsening of her heart palpitations.

1 Beyond this, her multiple health conditions
2 means that sitting in one place for an extended period
3 of time is especially bothersome for her, meaning that
4 every long drive we make to her doctor puts her more at
5 risk.

6 The lack of quality facilities that can treat
7 chronic conditions to our community has been detrimental
8 to her health. Folks in Barrington already have quality
9 health care options, and Advocate should match their
10 investments in the west side and the south side. My
11 family deserves to live comfortably and receive quality
12 care. Thank you.

13 MR. ROATE: Thank you. Next the Board would like
14 to call Jarrell Patterson.

15 MR. PATTERSON: Good afternoon, ladies and
16 gentlemen. I'm J-a-r-r-e-l-l, last name
17 P-a-t-t-e-r-s-o-n.

18 My name is Jarrell Patterson. I'm a
19 behavioral health tech at the University of Chicago
20 Medicine Ingalls Memorial, a south side hospital
21 facility. I live in a low income area of the south
22 suburbs. We have a minimal amount of healthcare
23 facilities that are limited by the type of insurance
24 they accept.

1 Advocate -- facilities like Advocate invest in
2 hospitals that are money makers, and privately owned
3 insurance and patients that have premium health care.
4 But my family cannot afford premium health insurance, so
5 we rely on state/government insurance plan.

6 Advocate will never outright say it, but they
7 restrict government insurance plans because they don't
8 make as much money off of it. Because of where we live,
9 because of our government insurance, my family has to
10 travel throughout Chicagoland and go to many different
11 facilities for treatment just to get covered.

12 My son has autism. He has to travel on the
13 north shore just to get any kind of care. He has to
14 travel all over the city to get any kind of help from
15 any kind of facilities. We have to travel an hour
16 across just to get any other special needs that my son
17 needs as he has autism.

18 My community, my son deserves investment.
19 Because right now, there is no nearby health facilities
20 that caters to our insurance or the special needs that
21 my son needs. Advocate has the money to do it. The
22 hospital in Barrington, they have the money to -- they
23 can afford to invest in a facility that is already there
24 in the low income communities. Thank you.

1 MR. ROATE: Thank you.

2 Next the board would like to call Ms. Bernice
3 Toney.

4 MS. TONEY: Good afternoon. My name is Bernice
5 Toney. B-e-r-n-i-c-e, last name Toney, T-o-n-e-y.
6 Thank you.

7 My name is Bernice, and I'm a secretary at
8 Northwestern Memorial Hospital. Every day I have the
9 privilege of welcoming families and quality care into
10 our center. I understand firsthand how life changes.
11 It can be when a family is treated and respected with
12 dignity as soon as they walk through the doors.

13 Because when my family found out that my mom
14 had cancer, we were not treated with the care we
15 deserved. My mom's sickness forced her to leave her
16 job, leaving her without insurance, and with a
17 devastating and costly disease. My family was forced
18 into a situation no family should ever have to be forced
19 in: finding the money for my mom to live.

20 As we all know, the cost of cancer treatment
21 is outrageous and there is a lack of quality, affordable
22 hospitals, and outpatient clinics on the west and south
23 sides of Chicago. So I picked up shifts at McDonald's
24 to help my mom get the money for the care she deserved.

1 If my family had access to quality, affordable
2 care in our neighborhood, our lives would be improved in
3 a time of need. Thank you.

4 MR. ROATE: Thank you. Next the board calls
5 Mr. Dave Mikos.

6 MR. MIKOS: Thank you. First name is David, last
7 name is Mikos, M-i-k-o-s. I'm here as a resident of
8 Barrington. My address is 683 Old Barrington Road, and
9 I'm here to support the program. Good Shepherd Hospital
10 is the hospital we go to, especially for emergency care
11 and everything else. And my wife and I are here to
12 support the project. Thank you.

13 MR. ROATE: Thank you. Next the Board would like
14 to call Mr. Trent Gordon.

15 MR. GORDON: I'll default.

16 MR. ROATE: Okay. Do you have any commentary you'd
17 like to provide to the Board?

18 MR. GORDON: No.

19 MR. ROATE: Okay. Thank you. Next the Board calls
20 Crystal Olsen.

21 MS. OLSEN: Good afternoon. I'm Crystal Olsen,
22 C-r-y-s-t-a-l, O-l-s-e-n.

23 Esteemed staff, thank you for the opportunity
24 to speak today. And thank you to those of you that

1 spoke earlier. I respect the parents, the caregivers
2 that spoke. We appreciate your comments. My name is
3 Crystal Olsen. I'm the area vice president for
4 government affairs for Advocate Health Care.

5 Advocate has 11 hospitals in the state of
6 Illinois including two children's campuses. We have a
7 long-standing commitment to these communities we are
8 privileged to serve. From Libertyville to Elgin,
9 Downers Grove, to Hazel Crest, as well as the south side
10 of Chicago.

11 Our commitment to these communities is
12 unwavering. In 2023, we invested \$1.2 billion in
13 Chicago area communities to remove barriers to care in
14 underserved communities and help address the factors
15 that influence health and wellness.

16 Advocate is also the number one provider of
17 Medicaid in the State of Illinois. We are expanding
18 access to care within our communities. Just this year
19 we opened a new \$15 million office building and an
20 Immediate Care Center in South Elgin, and a new primary
21 care facility in Lincolnshire.

22 Later this year we are opening a new
23 outpatient center in Lakemoor, and a medical office
24 building in Hoffman Estates. We are also building a

1 surgery center in Chicago, a multi-specialty ambulatory
2 location in Westmont, and another facility in
3 Naperville.

4 In addition, we have added a behavioral health
5 unit to Advocate South Suburban Hospital to increase
6 much needed access to behavioral health care services.
7 And Advocate has invested millions of dollars over the
8 last couple years at the Advocate Trinity Hospital
9 Emergency Department.

10 We are also in the midst of a robust community
11 listening session and focus groups that will inform
12 major investment on the south side of Chicago. By
13 proactively seeking the community's input, we are able
14 to develop a plan that will ensure health and wellness
15 on the south side for generations to come. We hope to
16 have more to share on that later this year.

17 It is also important to note that we are
18 continually assessing and adjusting how best to meet the
19 needs of our patients in the communities. We believe
20 that by working collaboratively with stakeholders, we
21 determine the need and invest appropriately to create
22 lasting improvements and help the quality of life for
23 all, including our teammates.

24 Thank you for the opportunity to provide

1 additional details around our commitment to our
2 patients, communities, physicians, nurses, and
3 teammates. Thanks so much.

4 MR. ROATE: Thank you.

5 Is there anyone who wishes to testify who has
6 not had an opportunity? Seeing none, is there anyone
7 who has testified who wishes to provide additional
8 testimony?

9 I would remind everyone to submit your written
10 comments to us so that we may have this information for
11 the record.

12 Also, this project is scheduled for
13 consideration by the Illinois Health Facilities and
14 Services Review Board at its August 8th, 2024 meeting.
15 This will be held at the Double Tree Hotel, 10 Brickyard
16 Drive, Bloomington, Illinois.

17 The public has until July 19th, 2024 to submit
18 written comments. These comments can be sent to my
19 attention at the Illinois Health Facilities and Services
20 Review Board, care of the Illinois Department of Public
21 Health, 525 West Jefferson Street, Second Floor,
22 Springfield, Illinois, 62761-0001.

23 If you prefer, you may e-mail your comments.
24 Our e-mail address is dph.hfsrb@Illinois.gov.

1 Are there any questions? Seeing that there
2 are no additional questions or comments, I deem this
3 public health hearing adjourned. Thank you.

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5 (Which were all the proceedings
6 had in the above-entitled cause
7 on this date.)

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1 STATE OF ILLINOIS)

) SS:

2 COUNTY OF C O O K)

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5 I, GINA M. TOMASONE, a Certified Shorthand
6 Reporter of the State of Illinois and Notary Public of
7 the County of Cook, do hereby certify that I caused the
8 proceedings in the above-captioned cause to be reported
9 in shorthand and that the foregoing is a true, complete,
10 and correct transcript of said proceedings as appears
11 from my stenographic notes so taken and transcribed
12 under my personal direction.

13 IN WITNESS WHEREOF I do hereunto set my hand and
14 affix my notarial seal at Chicago, Illinois, this
15 day of , 20 .

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Gina M. Tomasone

GINA M. TOMASONE, CSR

C.S.R. License No. 084-003763

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Notary Public, Cook County, Illinois

21

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Magna

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