

PROJECT HEARING REPORT

Project: 10-065

Park Pointe-South Elgin Healthcare & Rehab Center

October 27, 2010

On October 27, 2010, The State Agency conducted a public hearing for Project 10-065. The hearing was held at the South Elgin Village Hall, located at 10 N. Water Street, South Elgin, Illinois.

The following summarizes the attendance figures:

Individuals who registered their attendance at the hearing:	21
Individuals who registered their opposition to the project:	5
Individuals who registered their support for the project:	5
Total individuals registered:	31

This report contains letters from the following individuals/groups:

Dave Zaruba, Administrator, The Arlington Rehabilitation & Living Center, Long Grove*
Whitney Arado, Executive Director, Addison Rehabilitation & Living Center, Elgin*
Ted O'Brien, Administrator, Aurora Rehabilitation & Living Center, Aurora*
27 Employees, Aurora Rehabilitation & Living Center, Aurora*
15 Employees, Aurora Supportive Living Senior Housing, Aurora*
Anthony Tirtilli, Director of Development, Prism Healthcare Management Group
Joli Koch, Regional Operations Manager, Rosewood Care Centers*

*Identifies letters of opposition

**Illinois Health Facilities Planning Board
PUBLIC HEARING REGISTER**

Site: South Elgin Village Hall

PROJECT # 10-065

Date: October 27, 2010

Address: 10 N. Water St.
South Elgin, IL 60177

NAME: Park Pointe-South
Elgin Healthcare & Rehab Ctr.

Time: 9:00 am

TESTIMONY TO SUPPORT PROJECT

#	NAME (Please Print)	AGENCY, ORGANIZATION OR INSTITUTION REPRESENTED (PLEASE PRINT)	CITY (Please Print)	ORAL, WRITTEN OR BOTH (PLEASE PRINT)
✓ 1	Lenny Bossell MD	Prism HealthCare Group		Oral/Written
✓ 2	Anthony Trastilli	"	Westmont	Oral/Written
✓ 3	Dean Kelley	Abbotland Investment Corp	Bartlett	Oral
✓ 4	Kym Westermann	Prism Healthcare	Westmont	Oral
✓ 5	Amanda Hamilton	Alinda	Ottawa	Oral
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**Illinois Health Facilities Planning Board
PUBLIC HEARING REGISTER**

Site: South Elgin Village Hall

PROJECT # 10-065

Date: October 27, 2010

Address: 10 N. Water St.
South Elgin, IL 60177

NAME: Park Pointe -South
Elgin Healthcare & Rehab Ctr.

Time: 9:00am

TESTIMONY TO OPPOSE PROJECT

#	NAME (Please Print)	AGENCY, ORGANIZATION OR INSTITUTION REPRESENTED (PLEASE PRINT)	CITY (Please Print)	ORAL, WRITTEN OR BOTH (PLEASE PRINT)
✓ 1	Whitney Arado	Addison Rehab	Elgin	oral, written
✓ 2	Ted D'Zaki	Aurora Rehab	Aurora	oral, written
✓ 3	Debi Koch	Rosewood Care Center	St. Charles	written
✓ 4	FRED KRUM	ALLWAY SUP. CO.	ALLWAY	written/own
✓ 5	Paul A. Schenbanner	Rosewood Care Center	Elgin	written
6	Katherine Kozicki	Aurora		
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**Illinois Health Facilities Planning Board
PUBLIC HEARING REGISTER**

Site: South Elgin Village Hall PROJECT # 10-065 Date: October 27, 2010

Address: 10 N. Water St. NAME: Park Pointe-South Elgin Time: 9:00 am
South Elgin, IL 60177 Healthcare & Rehab Ctr.

ATTENDANCE/NO TESTIMONY ON PROJECT

✓ #	NAME (Please Print)	AGENCY, ORGANIZATION OR INSTITUTION REPRESENTED (PLEASE PRINT)	CITY (Please Print)	ORAL, WRITTEN OR BOTH (PLEASE PRINT)
1	RITA BONVICI-BROSBURN	TRISM HEALTHCARE	WESTMONT	SUPPORT
2	Laura Basselina Jr	Prison Healthcare	Westmont	Support
3	Kathleen Kozisek	Aurora Health	Aurora	oppose-
4	LINDSEY SILBERSCHMIDT	ADDISON RAMMO	ELGIN	oppose.
5	Steve Supac	Village of S. S.	S. S.	
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1	Whitney A			
2	Alfredo Gonzalez Sr	Aurora Supportive Living	Aurora	written oppor
3	Patricia Adams	Aurora Supportive Living	Aurora	written oppor
4	Kimberly Hulek	Aurora Supportive Living	Aurora	written oppor
5	Katie Dehman	Aurora Rehab + Living Center	Aurora	written oppor
6	Mary Kasner	Wyndham Deerpoint Homes	South Elgin	Support
7	Richard Gerard	Lyndora DePaula F	South Elgin	Support written
8	Donna Elischer	Citizen	Bartlett	written
9	Tammy Kwiatkoski	Citizen	Elgin	Support.
10	Brian Lamsu	ABBOTT AND + INVESTMENT	Bartlett	written
11	Carolyn Clark	Howard Care Center	Elgin	Support
12	Rosanna Taylor	PRISM Healthcare Group	Westmont	Support
13	William Melitney	PRISM HEALTHCARE GROUP	WESTMONT	Support
14	Joe Bersalino	PRISM Healthcare Group	Westmont	Support
15	Michael Bersalino	PRISM Healthcare Group	Westmont	Support.

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PUBLIC HEARING REGISTER**

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1	Darrelle Spasi	Arlighter Rehab & wing center	Long	
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The
Arlington

Rehabilitation & Living Center

My name is Dave Zaruba the administrator at The Arlington Rehabilitation Center and Living Center in Long Grove. I am writing in opposition to the proposed construction of Park Point. There are 25 existing nursing facilities within the 30 minute market that are occupied at an average rate of 83.2%. And there are 2 projects that have been granted new permits for construction.

I encourage you to disapprove this application. Thank you for your time.

Yours truly,

Dave Zaruba
Administrator

Addison

Rehabilitation & Living Center

I am Whitney Arado and I am an Executive Director of HealthCare Development for The Addison. The Addison has already received it's CON and we will be breaking ground on this building early next year. The Addison Rehabilitation & Living Center shall offer high end, hotel style amenities with above market standard clinical outcomes, first-rate care and comfort.

The Addison will offer one on one therapy with personalized attention 7 days a week. Our in house therapy staff, working in a cutting edge therapy gym, will work closely with the patient, family, physician and clinical nurse specialist to increase independence and ensure ones recovery to the maximum level of functioning. Our therapy gym will feature a home management suite, car for transfer and training, studio apartment setting, laundry room and a functional kitchen, where residents will prepare and cook meals in weekly cooking classes. At the Addison, patients will practice real life skills prior to returning to the community. The facility will have a physiatrist that will round on our patients weekly. We will maintain a minimum of 12 full time therapists. The facility will feature an outdoor therapy track with different surfaces for training.

The facility will offer expert care and sophisticated technology. The residents will be offered chef prepared cuisine, a full service Bistro, the blissful delights of a salon and an attentive concierge to cater to our patients every need. These particular amenities will create a homelike environment as opposed to the traditional nursing home facility.

We will offer 120 private rooms, which goes above and beyond the current guidelines, which require 3% of a facilities rooms to be private. Each room will feature a Private bathroom with a barrier free shower, radiant heated flooring, state of the art technology, laptop computers with WIFI, large flat screen televisions, private phone lines, refrigerators and individual thermostats. A separate entrance into the rehab unit, private dining room, library and theatre room will greatly add to the quality of life our residents will enjoy.

The mission of the facility is to promote the quality, value and optimal outcomes of services enhancing the lives of persons served in a homelike atmosphere.

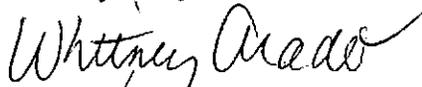
We will be within a mile of the new Sherman Hospital and offer residents in Elgin and surrounding areas a premier facility of choice.

The facility will define a new standard for skilled nursing care and uncompromising service. The beautifully appointed facility will set the stage for extraordinary quality found within our impeccably appointed suites. The facility will offer a new level of exclusivity and elegance not currently found in the traditional nursing homes currently found Elgin area.

In conclusion, The Addison will demonstrate we are committed to service outcomes and customer satisfaction.

We are extremely excited to be able to provide this level of care and therapy services for the community. In conclusion, The Addison strongly opposes Park Pointe.

Yours very truly,



Whitney Arado, MA
Executive Director

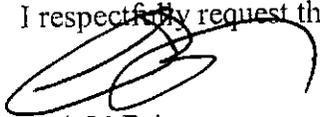


My name is Ted O' Brien, I am the administrator at Aurora Rehabilitation & Living Center. The utilization rate in my primary marketing area is 83.2%. We also own and manage a Supportive Living building on this campus, which has apartments, which also has underutilized rooms. My facility's current utilization is currently at 67.7% and the influx of additional long-term care beds will place undue hardship on the residents in my facility as well as residents in the primary marketing area who call their current facilities home.

An additional nursing facility will tax a critical shortage of licensed staff. The shortage of staff will affect the provision of care. The facilities in the county are currently well below the targeted occupancy rate of 90%.

We believe that by allowing another proposed center will have devastating effects for all ECF's in Kane county.

I respectfully request that this project be denied.



Ted O' Brien
Administrator

Aurora

Rehabilitation & Living Center

To Whom It May Concern:

As an employee of Aurora Rehabilitation & Living Center we oppose the need for a new extended care facility in our market area.

Based on the data provided in Park Pointe's CON (certificate of need) application the utilization in the primary market area is currently at 83.2% which is below the threshold set forth by the Illinois Health Facilities Review Board of 90%.

A new skilled nursing facility would place economic hardship on existing facilities forcing them to use agency staffing and jeopardize quality of care by reducing continuity of care.

We oppose this project.

Respectfully,

Cecil Ash

Bill Hoyle

Via Martez

K. Hoyle

Francisco J. Ramos

[Signature]

Yolanda Anaya

Carlton Altman

Katie Brennan

Norma S. Garcia

Francisco Pavele

Teresa Jimenez

Gloria Rico

Angelina Ramirez

Alma Esparza

Delia Delgado

H. M.

Dana Tennill

Barb Eckenbusch

Ruby Watson

~~Danise Herrera~~

Norma Lopez

Jayra Mallory

Prenda Adams

[Signature]

Maria Spears

Jeannie Kim



AURORA

*Supportive Living
Senior Housing*

October 22, 2010

To Whom It May Concern:

As an Employee of Aurora Supportive Living Senior Housing, we do not feel any need for a new extended care facility in our market area. Based on the data provided in Park Point's CON application the utilization in the primary market area is currently at 83.2% which is below the threshold set forth by the Illinois Health Review Board of 90%. A new facility would place economic hardship on facilities forced to use staffing agency and jeopardize quality of care by reducing continuity of care.

We oppose this project.



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Senior Housing

October 22, 2010

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We oppose this project.

Cecil Ash

Gabe Fulmer

Beatrix Hernandez



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We oppose this project.

Kimberly R. Hucek



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We oppose this project.

Jusan Favone
Karen Harbin
Kurt
Corazon C. Micasio
Jim Gilleguan
Sue
Linda
Astrid



AURORA

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We oppose this project.



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We oppose this project.

My name is Anthony Tiritilli and I am the Director of Development for Prism Healthcare Management Group. I was principally responsible for preparing the Certificate of Need Application that was filed with the Health Facilities Services and Review Board.

The proposed project being discussed here today is the establishment of a 120 bed skilled nursing facility which will be part of a larger senior campus which will ultimately include 60 assisted units and 60 memory care units for a combined total of 240 total beds.

The location of the proposed project came about after Prism had conducted a comprehensive analysis of bed need within the immediate marketplace. While there were numerous potential sites that met the criteria for one of our campuses, the 12 acre parcel situated at the SWC of Route 25 and Middle Street in South Elgin was determined to be the optimal location. The primary factor in this decision was the sites strategic location at the intersection of 3 Illinois Counties – Kane, Cook and DuPage, which also happen to be the demarcation of 3 major Planning Areas: Planning Area 8-(Kane County), Planning Area 7-A (West Cook County) and Planning Area 7-C (DuPage County). So close is the subject property to the cited planning areas that if one were to walk only 1000 yards in either a northeasterly or southeasterly direction they would be standing in another county and more importantly another planning area.

The subject site is technically located within Planning Area 8 – Kane County, which has a current state-calculated bed need of 30 beds. However, the abutting Planning Areas 7.A – Cook County has a bed need of 891 beds and 7.C – DuPage County has a bed need of 614 beds. The combined total bed need is then 1,535 beds which far exceeds our request of 120 total skilled beds. (Please refer to the exhibit)

While I have just outlined the technical, State calculated bed need within the primary market area of the proposed facility, it is important to consider, certainly for a group such as ours that is about to invest over 50 million dollars into this location, that the State's bed need calculations are predicated largely upon demographics. Demographics, while very important, don't always tell the whole story. There are many other variables that exist in the skilled nursing marketplace today that may not be accurately reflected in the bed need calculations. For instance, what does the modern consumer expect from long term care providers today? Based upon our experience, we believe the consumer expects, the option for a private room or a larger semi-private room with private bathrooms. The days of sharing a room with 3 and 4 beds are over. They want more space to socialize, to have private visits with their family members. They want smaller less institutional dining facilities, where they have chose over their meals and not a take it or leave option. They want their new homes to actually feel more like their homes and less like "mini-hospitals". These amenities are not just what the market is demanding, there is evidence that single bed rooms can actually reduce infection rates, improve recovery times and increase physical and emotional well-being.

This facility has been designed from the ground up to address these market demands, we have increased the average size of the units, we have changed our typically unit mix to address the market demand for private rooms. This facility will have 120 beds in 96 rooms of which 72 are private rooms with a private bath. We have three separate dining rooms, activity spaces inside and out, private

lounges for family visitations, TV and reading rooms, beauty salon, gift shop, spa bathing areas, all the while providing the highest quality of nursing care a patient possible require.

The design of this facility allows us to also address another market shift affecting skilled facilities today and that is the pressure hospitals are under to seek earlier discharges. They need beds for short term stays. Our facility has its own 30 unit wing dedicated to post acute short term stay patients. This wing includes a 3,000 sf cutting edge, professionally staffed and fully equipped inpatient and outpatient rehabilitation center.

Currently, NONE of the post acute utilization of skilled care is included in the states bed need formula.

Another area that will undoubtedly be brought up here today by our competitors will be Utilization Rates. Why would the state approve another facility, even if there were bed need, while the Utilization Rates are below the state standard of 90%? Good question.

According to the latest data available, the 30 minute drive time PMA has a utilization rate slightly below 85%. So why is there bed need and yet utilization rates are not at 90%. It's our opinion and our actual experience that the reasons for this aberration are several, all of which skew the actual utilization rates and thus results in an unreliable measure of true market demand. We believe some of the issues affecting the accuracy of the utilization rates are.

1. Under the current system of bed need licensing an operator may be unwilling to decertify un-used beds for fear that they will (A) need them in the future and not be able to get them back or (B) they will be penalized financially at the time of sale or disposition of the property as skilled facilities typically trade on a per bed price. Therefore, by not decertifying beds that are no longer in use, the utilization rate appears lower than it is on an effective basis.
2. Under the current system of reporting utilization rates do not accurately reflect beds that cannot be occupied due to isolation cases. If a semi-private room has a resident requiring isolation, then the other bed is now unable to be occupied. This problem is magnified in older facilities that have 3 and sometimes 4 beds per room.
3. Under the current system of reporting utilization rates do not accurately account for the beds that need to be set-aside to handle the high turnover associated with short term care patients.

We are by NO means here today to take aim at the state bed need calculation formula or how it gathers utilization rate data. We are just explaining why area utilization rates indicate excess capacity, yet the state formula and our research and experience indicates substantial bed need in the market place.

We believe there is strong Bed Need in this market but it's for the "right kind of bed, not just any skilled bed".

Thank You

October 27, 2010

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

Attention: Mr. Mike Constantino, Supervisor, Projects Review Section

Project: CON Application for Park Pointe-South Elgin Healthcare and Rehabilitation Center (10-065)

Dear Health Facilities and Services Review Board:

Please accept this correspondence as an initial expression of opposition to South Elgin Real Estate Holdings I,LLC and South Elgin Healthcare and Rehabilitation Center, LLC's application to construct a 120 bed skilled nursing facility as part of a 240 bed senior community also offering Alzheimer's and assisted living care. Based upon the CON application, South Elgin Healthcare and Rehabilitation Center LLC's seeks to construct 60 assisted living units (ALF) and 60 memory care units (ALZ) for an additional 120 beds on a senior campus with the proposed 120 skilled nursing facility.

As I am sure you will find through other correspondence and data from other concerned area providers, the average utilization rate for 2009 for even the 17 mile primary market area referenced in the CON does not meet the Board's 90% target occupancy rate to support the proposed project. An occupancy rate of only 83.9% in this area alone reflects no supported need for the project with an additional 562 skilled nursing facility beds already approved or in final stages of construction in the area. Of the 562 beds, Church Creek Station (Claremont of Hanover Park) is scheduled to open its 150 bed skilled nursing facility before the end of the year.

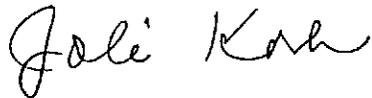
An analysis of the 36 skilled nursing facilities within the 30 minute drive time area also revealed an average occupancy of 79.5% in 2008, which also remains well below the 90% targeted occupancy rate. It should be mentioned that of the 36 facilities, Assisi Clare Oaks showed an occupancy rate of 17.9% in 2008 after having opened that year. After a full year of operation, Assisi Clare Oaks showed an occupancy of 50.34% for 2009 and still only 59% (71/120) on 3/4/10 at the time of their most recent annual survey. Assisi Clare Oaks having opened as a new state of the art 120 bed skilled nursing facility and part of a new CCRC in 2008 has only continued to struggle to fill its beds along with many other area providers including Rosewood Care Center of St. Charles and Rosewood Care Center of Inverness which maintained average occupancy levels of 73% and 67.8% respectively in 2008. The 79.5% overall occupancy of the 36 facilities in the 30 minute drive time and Assisi Clare Oaks' current census occupancy levels clearly demonstrate that despite the growing number of seniors, many factors exist that impact the overall occupancy levels of skilled nursing facilities including the growing availability of

alternatives to nursing home care that did not exist thirty years ago. These alternatives include home health care and community programs to promote the ability of seniors to remain in their homes which only show increased utilization levels and are only expected to increase. These trends are currently not factored into the CON application process but do pose an impact on the actual need for long term nursing care beds in any given planning area.

Further complicating the validity of the CON application is that the proposed site is technically located in Kane County in Health Service Area 8, which has a current calculated need of 30 beds. Although the applicants maintain that the project site is in a "unique location" within close proximities to Planning Areas 7A (Northwest Cook County) and 7C (Dupage County), it is currently understood that the Illinois Health Facilities and Services Review Board (HFSRB) "recognizes that some long-term care facilities may have a primary market area that is not contained within the planning area in which the facility is located. Placement in long term care facilities may be influenced by such factors as, but not limited to: location of next of kin or relatives; seeking services of a specialized nature such as treatment for various diseases or disabilities; or seeking services related to religious, ethnic, or fraternal needs. Because of the significant degree of mobility that is exercised in seeking long term services, HFSRB shall not allocate portions of a facility's beds and services to more than one planning area."

Given these requirements, it is contested how any portion of Park Pointe- South Elgin Healthcare and Rehabilitation Center's proposed beds could be allocated to the 7A and 7C Planning Areas. For these reasons, and those stated above, it is respectfully requested that the proposed CON application for Park Pointe- South Elgin Healthcare and Rehabilitation Center be denied.

Sincerely,



Joli Koch, Regional Operations Manager
Rosewood Care Centers

FACILITIES LOCATED WITHIN 30 MINUTE DRIVE TIME TO PARK POINT
 2008 CENSUS OCCUPANCY RATES

NAME OF FACILITY	NUMBER OF BEDS	OCCUPANCY RATE
SOUTH ELGIN	90	62.60%
ASSISI CLARE OAKS	120	17.90%
HERITAGE MANOR ELGIN	94	88.60%
TOWER HILL	206	89.30%
MANOR CARE ELGIN	88	80.10%
ROSEWOOD CARE CENTER OF ST. CHARLES	109	73.00%
ASTA CARE OF ELGIN	102	87.50%
PROVENA PINEVIEW	120	78.60%
MAPLEWOOD CARE	203	96.60%
SHERMAN WEST COURT	120	78.20%
APOSTOLIC CHRISTIAN WESTHAVEN	50	97.50%
LEXINGTON STREAMWOOD	214	78.60%
ROSEWOOD CARE CENTER OF ELGIN	139	84.80%
PROVENA GENEVA CARE CENTER	107	85.20%
ALDEN POPLAR CREEK REHAB CARE	217	78.90%
WOOD GLEN NURSING AND REHAB CENTER	207	97.10%
BATAVIA REHAB AND HEALTHCARE CENTER	63	79.80%
COVENANT HEALTHCARE CENTER	99	64.60%
WEST CHICAGO TERRACE	120	99.70%
WINDSOR PARK MANOR	80	75.50%
ABBINGTON REHAB AND NURSING CENTER	82	79.60%
ALDEN ESTATES OF BARRINGTON	150	72.80%
FRIENDSHIP VILLAGE OF SCHAUMBURG	250	87.10%
ALDEN VALLEY RIDGE REHAB	207	85.80%
AURORA REHAB AND LIVING CENTER	195	87.80%
DUPAGE CONVALESCENT CENTER	508	64.00%
LEXINGTON OF SCHAUMBURG	214	88.90%
MANOR CARE OF ELK GROVE VILLAGE	190	91.90%
LEXINGTON OF BLOOMINGDALE	166	86.00%
NORTH AURORA CARE CENTER	129	66.70%
WYNSCAPE	209	66.70%
ROSEWOOD CARE CENTER OF INVERNESS	142	67.80%
WEST SUBURBAN NURSING CENTER	259	72.50%
WINFIELD WOODS	138	95.40%
WHEATON CARE CENTER	123	90.20%
PRAIRIEVIEW AT THE GARLANDS	20	64.70%
TOTAL / AVERAGE	5530	79.50%