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November 25, 2014

VIA OVERNIGHT AND ELECTRONIC MAIL

Mike Constantino  
Illinois Health Facilities and Services Review Board  
525 W. Jefferson, 2nd Floor  
Springfield, IL 62761

Re: Project 14-043

Dear Mr. Constantino:

First, on behalf of St. Elizabeth's, I would like to thank you and other HFSRB staff members for your technical assistance with respect to this project. In as succinct a manner as possible, I would like to address some of the untrue and/or inaccurate statements made by opposition to date. In doing so I note that opposition comes from two sources – a relatively small number (albeit vocal number) of City of Belleville residents and Memorial Hospital Belleville.

The City of Belleville has claimed the project will have a devastating economic impact on it, even intimating that the City cannot survive without St. Elizabeth's. No supporting information for this claim has been provided and it is quite frankly untrue. Presumably most of the Hospital employees who live in Belleville will remain with the Hospital, as their average commute will only increase by 2 minutes (some will have a shorter commute). Many jobs will remain on site in Belleville, and the urgi-care clinic may result in new jobs. Quite simply, the economic impact of a project like this on Belleville is not something the HFSRB reviews as part of its overall criterion relating to consideration of a replacement hospital project. However if it were to consider same, it would naturally have to weigh the impact against the impact of a new \$253M facility in St. Clair County.

The majority of St. Elizabeth's patient base does not live in Belleville. Those who do support the replacement and will continue to do so (see letters posted to website). Only 14-17% of the Hospital's patients come from Belleville. Many of these live in locations in Belleville which place them closer by Mapquest drive time to the new location, and they will continue to access St. Elizabeth's as their provider of choice. Memorial has argued residents of Belleville will not go to St. Elizabeth's, and all of the patients seen in St. Elizabeth's emergency department will be brought to Memorial. This is not supported by St. Elizabeth's planning, patient surveys or travel studies. A few week survey showed the following regarding how patients arrived at the Hospital:

U.S. practice conducted through McDermott Will & Emery LLP.

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Private Vehicle	Public Transportation	Taxi	Walk In	Ambulance	Medicar	Other
86.8%	2.5%	0.0%	0.89%	6.5%	2.2%	1.2%

Given the fact the Hospital will be closer by drive time to a majority of its patients, they will prefer the new site. Also, via ambulance St. Elizabeth's will similarly be closer to a majority of its patients, not further away.

The Hospital is not moving further away from underserved areas. Many people have said this and have even impugned the Sisters for abandoning their mission. This could not be further from the case. The attached maps reflect the Hospital will be closer to a greater number of communities with a population at or below the federal poverty level (a criterion the Illinois Attorney General believes is important for granting patients financial assistance) than currently. This is a fact – opposition statements cannot disprove it but continue to ignore it.

Certain communities to the South of Belleville say they will lose access to care if St. Elizabeth's moves. Of course, this is not the case as St. Elizabeth's will only be a few minutes further from these communities. Also, Memorial is remaining in Belleville and people opposing St. Elizabeth's from these communities act as if it is non-existent. Interestingly, these communities account for a very small percentage of St. Elizabeth's patients. They include Smithton, Millstadt, New Athens and Freeburg. The total population of these four towns is 14,094. They are overwhelmingly white/other (the lowest percentage of this racial complement is 96% in Smithton) and the lowest median income of the four communities is \$51,465 with the highest being \$70,564. O'Fallon has approximately 29,193 residents, is the fastest growing town in St. Clair County, is approximately 76% white/other and has a median income of \$70,000. Why is it acceptable, even apparently mandatory, for St. Elizabeth's to serve these affluent communities, but not appropriate for it to serve O'Fallon?

The fact is the current Hospital campus is landlocked, located in the heart of the Belleville business district and difficult to access. The current building is outdated and does not allow for the delivery of modern hospital based health care services. Opposition continues to erroneously tell the public that St. Elizabeth's can and will re-build on site if it cannot relocate. This is not true. It will not do so. The investment of over \$350M in a tiny, inaccessible location has been determined to be in imprudent investment and more importantly poor stewardship of health care resources and not for profit dollars. The Hospital will not re-build or modernize on site. Opposition should not mislead the public in this regard.

The replacement of St. Elizabeth's a few miles away from its current site will not result in a duplication of services or maldistribution. The fact is the Hospital already exists and duplicates Memorial's services in Belleville. Interestingly Belleville is among the highest over bedded cities in all of Illinois. Relocating and reducing the number of beds currently existing in the two hospital town of Belleville to O'Fallon will alleviate duplication, not cause it. Further, while there is an excess of beds in the area, the project adds no new beds and reduces total beds

throughout four categories of service. The patients who will be seen at the replacement hospital are existing patients of St. Elizabeth's. As a result of all of these facts there will be no negative impact on any area provider. In fact, Memorial is the only hospital that has claimed a negative impact. Interestingly, while the HFSRB typically views an adverse impact as one that would decrease another health care facility's utilization, Memorial is stating it will be negatively impacted because it cannot take St. Elizabeth's patients (those who allegedly may not go to it when it moves a few miles away, which the Hospital is not anticipating). By HFSRB standards, Memorial has many more ED bays than it needs – between it and its Shiloh facility it can accommodate an additional 36,000 ED visits in the area. There is no question that between St. Elizabeth's and Memorial the region will be served. Most cities Belleville's size do not have two hospitals, and some do not even have one, and yet do quite well with respect to access to healthcare services.

Lastly, the outpatient services, including the walk –in clinic planned for the current Belleville campus will continue to providing urgi-care, imaging, laboratory and primary care services in the same location as the full service hospital operates now. Those services, coupled with Memorial's hospital services, will allow Belleville residents and those living South of Belleville to access quality health care services.

In closing, St. Elizabeth's is choosing to:

- replace off an interstate closer to a majority of its patients,
- move to an area closer to a greater number of County residents living at or below the poverty level;
- investing \$253M in a new state of the art facility to provide quality care;
- move closer to Scott Air Force Base due to its being the highest Tricare provider in the area and its partnership with Scott in a family practice residency program;
- reduce beds by 159, despite other area providers unwillingness to do so and even adding beds;
- maintain services at the current levels, without adding equipment, imaging machines or ancillary services lines upon replacement; and
- invest in the future of St. Clair County

Thank you for your consideration.

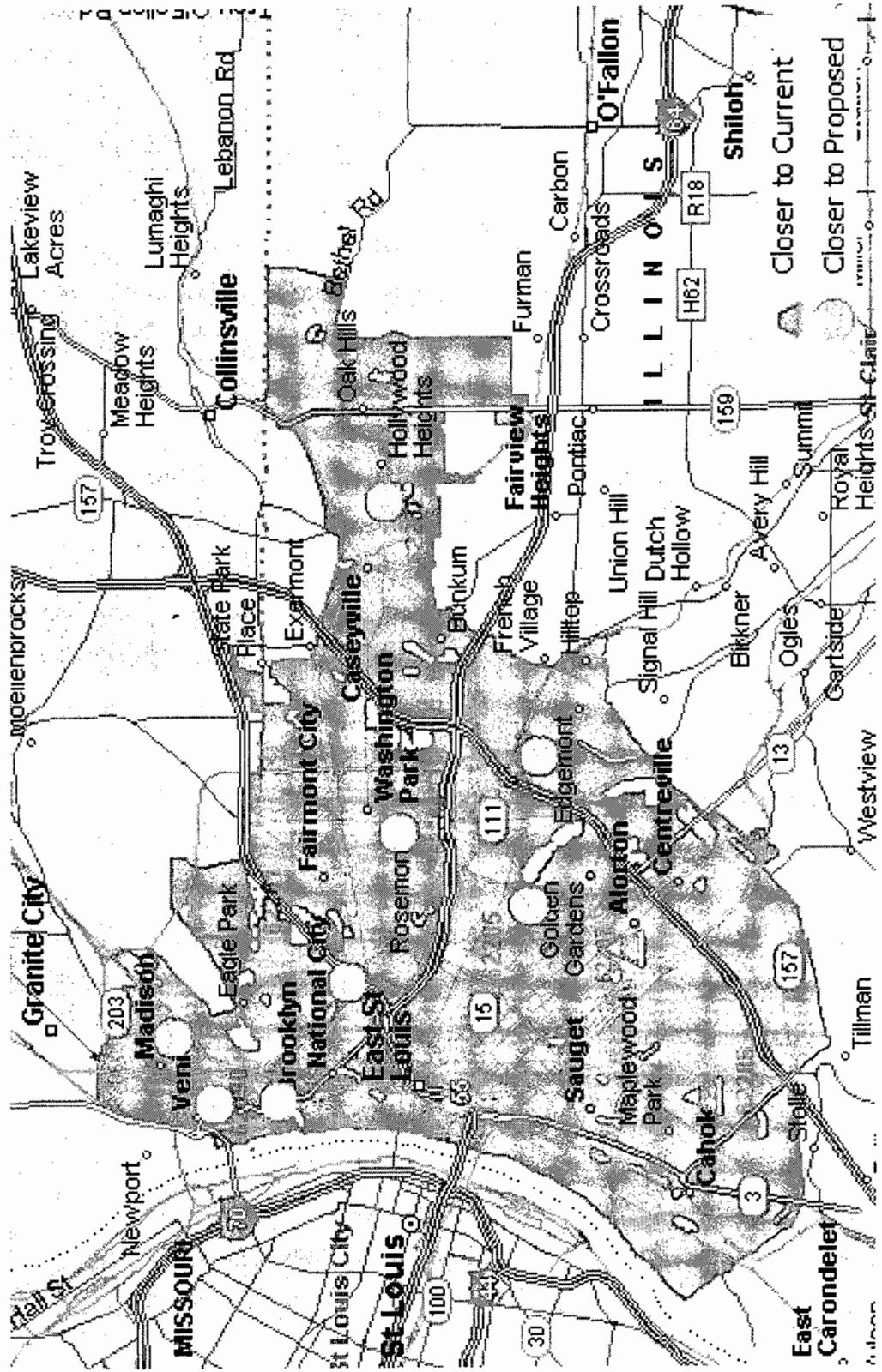
Sincerely,



Clare Connor Ranalli

cc: Courtney Avery  
Susan Beeler

Figure 1:  
Top 10 Zip Codes with Populations Living Below the Poverty Level  
(St. Clair County and St. Elizabeth's PSA/SSA)  
Source: Claritas 2012



**Table 1:**  
**Top 10 Zip Codes with Populations Living Below the Poverty Level**  
**(St. Clair County and St. Elizabeth's PSA/SSA)**  
**Source: Claritas 2012**

<b>Ranks</b>	<b>Zip Code</b>	<b>City</b>	<b>% of Population Living Below Poverty Level</b>
1	62201	East St. Louis	73.0%
2	62059	Brooklyn	68.6%
3	62204	East St. Louis	65.5%
4	62090	Venice	56.9%
5	62207	East St. Louis	52.3%
6	62206	East St. Louis	37.0%
7	62060	Madison	36.2%
8	62205	East St. Louis	32.2%
9	62203	East St. Louis	32.0%
10	62232	Caseyville	14.4%

**Table 2: Drive Time for Zip Codes within St. Elizabeth's PSA/SSA**

Source	CON Defined Service Area (Databay)	Databay	Drive time to SEB (min, MapQuest 2014)	
			Belleville Campus	Proposed Campus
Zip	City	2014 Population Est		
62208	FAIRVIEW HEIGHTS	17,808	13	8
62220	BELLEVILLE	19,843	4	17
62221	BELLEVILLE/SHILOH	26,705	10	8
62223	BELLEVILLE	17,291	8	16
62225	SCOTT AIR FORCE BASE	5,434	13	11
62226	SWANSEA/BELLEVILLE	30,365	6	13
62254	LEBANON	6,618	25	13
62258	MASCOUTAH	9,537	19	15
62269	O FALLON	32,794	18	5
62034	GLEN CARBON	13,741	31	27
62060	MADISON	4,806	26	20
62062	MARYVILLE	7,721	28	23
62090	VENICE	1,188	26	21
62201	EAST SAINT LOUIS	8,441	21	15
62203	EAST SAINT LOUIS	8,274	15	13
62204	EAST SAINT LOUIS	7,810	19	14
62205	EAST SAINT LOUIS	9,005	17	15
62206	EAST SAINT LOUIS	16,181	18	20
62207	EAST SAINT LOUIS	8,629	15	17
62230	BREESE	6,397	41	29
62232	CASEYVILLE	7,406	20	13
62234	COLLINSVILLE	33,096	22	15
62243	FREEBURG	5,916	14	20
62249	HIGHLAND	16,251	42	30
62255	LENZBURG	1,101	29	36
62257	MARISSA	3,585	32	35
62260	MILLSTADT	7,344	11	26
62264	NEW ATHENS	3,410	20	26
62265	NEW BADEN	5,186	27	18
62278	RED BUD	6,788	27	40
62281	SAINT JACOB	2,270	34	22
62285	SMITHTON	4,510	13	26
62286	SPARTA	6,883	46	53
62293	TRENTON	4,615	31	19
62294	TROY	14,206	30	18
62298	WATERLOO	16,779	28	38
Total PSA/SSA Population		397,934	799	755
Total PSA/SSA Population with Decreased Drive			249,309	
Percentage of PSA/SSA Population with Decreased Drive				63%