16-011

ILLINOIS HEALTH FACILITIES AND SERVICES REVIEW BOARD
APPLICATION FOR PERMIT

RECEIVED
FEB 23 2016
HEALTH FACILITIES & SERVICES REVIEW BOARD

SECTION I. IDENTIFICATION, GENERAL INFORMATION, AND CERTIFICATION

This Section must be completed for all projects.

Facility/Project Identification

Facility Name: **Northbrook Behavioral Hospital**		
Street Address: **4201 Lake Cook Road**		
City and Zip Code: **Northbrook, IL 60062**		
County: **Cook**	Health Service Area **7**	Health Planning Area: **A-8**

Applicant /Co-Applicant Identification
[Provide for each co-applicant [refer to Part 1130.220].

Exact Legal Name: **V Covington Realty, LLC**
Address: **32 East 57th Street, 17th Floor, New York, NY 10022**
Name of Registered Agent: **C T Corporation System**
Name of Chief Executive Officer: **Richard Kresch, M.D.**
CEO Address: **32 East 57th Street, 17th Floor, New York, NY 10022**
Telephone Number: **(212) 243-5565**

Type of Ownership of Applicant/Co-Applicant

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

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

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: **John P. Kniery**
Title: **Health Care Consultant**
Company Name: **Foley & Associates, Inc.**
Address: **133 South 4th Street, Suite 200, Springfield, Illinois 62701**
Telephone Number: **(217) 544-1551**
E-mail Address: **jkniery@foleyandassociates.com**
Fax Number: **(217) 544-3615**

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

Name: **Charles H. Foley, MHSA**
Title: **Health Care Consultant**
Company Name: **Foley and Associates, Inc.**
Address: **133 South 4th Street, Suite 200, Springfield, Illinois 62701**
Telephone Number: **(217) 544-1551**
E-mail Address: **cfoley@foleyandassociates.com**
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Title: **Health Care Consultant**
Company Name: **Foley & Associates, Inc.**
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County: **Cook**	Health Service Area **7**	Health Planning Area: **A-8**

Applicant /Co-Applicant Identification
[Provide for each co-applicant [refer to Part 1130.220].

Exact Legal Name: **US HealthVest, LLC**
Address: **32 East 57th Street, 17th Floor, New York, NY 10022**
Name of Registered Agent: **C T Corporation System**
Name of Chief Executive Officer: **Richard Kresch, M.D.**
CEO Address: **32 East 57th Street, 17th Floor, New York, NY 10022**
Telephone Number: **(212) 243-5565**

Type of Ownership of Applicant/Co-Applicant

☐	Non-profit Corporation	☐	Partnership		
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Primary Contact
[Person to receive ALL correspondence or inquiries)

Name: **John P. Kniery**
Title: **Health Care Consultant**
Company Name: **Foley & Associates, Inc.**
Address: **133 South 4th Street, Suite 200, Springfield, Illinois 62701**
Telephone Number: **(217) 544-5115**
E-mail Address: **jkniery@foleyandassociates.com**
Fax Number: **(217) 544-3615**

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

Name: **Charles H. Foley, MHSA**
Title: **Health Care Consultant**
Company Name: **Foley & Associates, Inc.**
Address: **133 South 4th Street, Suite 200, Springfield, Illinois 62701**
Telephone Number: **(217) 544-1551**
E-mail Address: **cfoley@foleyandassociates.com**
Fax Number: **(217) 544-3615**

Post Permit Contact

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

Name: **Martina Sze**
Title: **Executive Vice President**
Company Name: **US HealthVest, LLC**
Address: **32 East 57th Street, 17th Floor, New York, NY 10022**
Telephone Number: **(212) 243-5565**
E-mail Address: **msze@ushealthvest.com**
Fax Number: **(212) 243-1099**

Site Ownership

[Provide this information for each applicable site]

Exact Legal Name of Site Owner: **V Covington Realty, LLC**
Address of Site Owner: **32 East 57th Street, 17th Floor, New York, NY 10022**
Street Address or Legal Description of Site: **Proof of ownership or control of the site is to be provided as Attachment 2. Examples of proof of ownership are property tax statement, 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: **V Covington, LLC**
Address: **32 East 57th Street, 17th Floor, New York, NY 10022**
☐ 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 co-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 #2005-5 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 #2005-5 **(http://www.hfsrb.illinois.gov)**.

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 1110.40 and Part 1120.20(b)]

Part 1110 Classification:

☒ Substantive

☐ Non-substantive

2. Narrative Description

Provide in the space below, 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.

US HealthVest, LLC is proposing through its solely owned entities, **V Covington Realty, LLC** (owner) and **V Covington, LLC** (Operator) are proposing the establishment of an acute mental illness (AMI) facility to be known as Northbrook Behavioral Hospital (NBH). The patient care facility will be developed through the renovation of an existing non-licensed freestanding building.

The specific renovation of the 3-story, 66,635 gross square foot structure includes: Top two floors will be built out to house 100 patient beds in semi-private rooms. There will be 2 secured nursing units per floor with nursing stations, day rooms, group rooms and other support spaces. Patients are permitted to have free movement inside the unit. Access and exit from the units are secured and accompanied by staff. First floor will be built out to provide patient intake, dietary services, additional patient group rooms and activity spaces for therapy, Pharmacy, medical records, business and administration suite, and building support spaces such as housekeeping and medical supply storage. A maintenance shop will also be located on the first floor. Building systems will be upgraded to meet federal and state regulations for hospital design. This will include new HVAC units with fully ducted supply and return system, new electrical distribution with emergency generator and automatic transfer switches. The building structure will be upgraded to meet required fire resistance rating by fireproofing all structural elements: columns, beams and underside of floor decks. The existing building exterior will remain intact including the front two story lobby, elevator shafts and stairwells.

This is a "substantive" project in accordance with the rules of the 77 Illinois Administrative Code, Part 1110 of Subpart A, Section 1110.40 as the project is for the establishment of a health care facility and category of service.

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 equal.

Project Costs and Sources of Funds			
USE OF FUNDS	**CLINICAL**	**NONCLINICAL**	**TOTAL**
Preplanning Costs	$9,761	$2,739	$12,500
Site Survey and Soil Investigation	$3,904	$1,096	$5,000
Site Preparation	$58,565	$16,435	$75,000
Off Site Work	$0	$0	$0
New Construction Contracts	$0	$0	$0
Modernization Contracts	$10,406,600	$2,920,400	$13,327,000
Contingencies	$520,330	$146,020	$666,350
Architectural/Engineering Fees	$520,330	$146,020	$666,350
Consulting and Other Fees	$370,130	$103,870	$474,000
Movable or Other Equipment (not in construction contracts)	$390,433	$109,567	$500,000
Bond Issuance Expense (project related)	$0	$0	$0
Net Interest Expense During Construction (project related)	$0	$0	$0
Fair Market Value of Leased Space or Equipment	$12,176,440	$3,417,069	$15,593,509
Other Costs To Be Capitalized	$0	$0	$0
Acquisition of Building or Other Property (excluding land)	$0	$0	$0
TOTAL USES OF FUNDS	**$24,456,493**	**$6,863,216**	**$31,319,709**
SOURCE OF FUNDS	**CLINICAL**	**NONCLINICAL**	**TOTAL**
Cash and Securities	$10,718,322	$3,007,878	$13,726,200
Pledges	$0	$0	$0
Gifts and Bequests	$0	$0	$0
Bond Issues (project related)	$0	$0	$0
Mortgages	$0	$0	$0
Leases (fair market value)	$12,176,440	$3,417,069	$15,593,509
Governmental Appropriations	$0	$0	$0
Grants	$0	$0	$0
Other Funds and Sources	$1,561,732	$438,268	$2,000,000
TOTAL SOURCES OF FUNDS	**$24,456,493**	**$6,863,216**	**$31,319,709**
NOTE: ITEMIZATION OF EACH LINE ITEM MUST BE PROVIDED AT ATTACHMENT-7, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.			

*** Appended as APPENDIX-7A, is a further breakdown of project cost to include FF&E costs specifically.**

2nd Level Capital Costs

Preplanning costs		
Phase I		5,000
Building Inspection		7,500
	Total	12,500
Site Survey		
Survey		5,000
	Total	5,000
Site Preparation		
Planting low level shrubs, slight parking lot revision to incl mechanical equipment		75,000
	Total	75,000
Modernization		
Construction contract		13,327,000
Contingencies		666,350
	Total	13,993,350
Architectural		666,350
	Total	666,350
Consulting and Other Fees		
Building and other permits		100,000
CON consultant		70,000
Illinois HFSRB Review Fees and other review fees		79,000
Zoning and other regulatory		50,000
Legal		100,000
Other fees		75,000
	Total	474,000
Moveable equipment (see list for breakdown of items)		500,000
	Total	500,000
TOTAL, excl FMV Lease		**15,726,200**

Moveable Equipment List
100-Bed Facility

Quantity	Description
	Patient Rooms
100	Patient Beds
100	Patient Desks
100	Patient Chairs
100	Patient Wardrobes
	Lounge Areas/Group Rooms
140	Chairs
5	Coffee Tables
6	TV-46 inch
	Dining Area
50	Dining Chairs
26	Dining Tables (4x4)
	Administration
35	Desks
35	Chairs
75	Visitor Chairs
15	File Cabinets
15	Book Cases
1	Conference Room Table (4x8)
12	Conference Room Chairs
	Van-Patient Transport
1	12 Passenger Van

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: $ Refer to FMV of leased space provided above

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 $ **6,713,185**.

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): **December 31, 2017**

Indicate the following with respect to project expenditures or to obligation (refer to Part 1130.140):

☐ Purchase orders, leases or contracts pertaining to the project have been executed.
☐ Project obligation is contingent upon permit issuance. Provide a copy of the contingent "certification of obligation" document, highlighting any language related to CON Contingencies
☒ Project obligation will occur after permit issuance.

APPEND DOCUMENTATION AS ATTACHMENT-8, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

State Agency Submittals

Are the following submittals up to date as applicable:

☐ Cancer Registry
☐ APORS
☒ 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.

Cost Space Requirements

Provide in the following format, the department/area **DGSF** or the building/area **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 department's or area's portion of the surrounding circulation space. **Explain the use of any vacated space.**

		Gross Square Feet		Amount of Proposed Total Gross Square Feet That Is:			
Department/Area	Cost	Existing	Proposed	New Const.	Modernized	As Is	Vacated Space
CLINICAL							
First Floor	$3,970,720	8448	8,448	0	8448	0	0
Second Floor	$10,025,973	21331	21,331	0	21331	0	0
Third Floor	$10,025,973	21331	21,331	0	21331	0	0
Lobby	$433,827	923	923	0	923	0	0
Total Clinical	$24,456,493	52,033	52,033	0	52033	0	0
NON-CLINICAL							
First Floor	$6,324,574	13456	13,456	0	13456	0	0
Second Floor	$269,321	573	573	0	573	0	0
Third Floor	$0	573	573	0	573	0	0
Lobby	$0	0	0	0	0	0	0
Total Non-clinical	$6,593,895	14602	14,602	0	14602	0	0
TOTAL	**$31,050,388**	**66,635**	**66,635**	**0**	**66,635**	**0**	**0**

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

Facility Bed Capacity and Utilization

Complete the following chart, as applicable. Complete a separate chart for each facility that is a part of the project and insert following this page. Provide the existing bed capacity and utilization data for the latest **Calendar Year for which the data are 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: Northbrook Behavioral Hospital		**CITY: Northbrook**			
REPORTING PERIOD DATES:		**From: Present**		**to: December 2017**	
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	**0**	**N/A**	**N/A**	**+100**	**100**
Neonatal Intensive Care					
General Long Term Care					
Specialized Long Term Care					
Long Term Acute Care					
Other ((identify)					
TOTALS:	**0**	**N/A**	**N/A**	**+100**	**100**

CERTIFICATION

The application must be signed by the authorized representative(s) of the applicant entity. The authorized representative(s) 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 manger 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 for Permit is filed on the behalf of V Covington Realty, LLC * **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 for permit 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 permit application fee required for this application is sent herewith or will be paid upon request.**

SIGNATURE	SIGNATURE
RICHARD A. KRESCH	
PRINTED NAME	PRINTED NAME
MANAGER	
PRINTED TITLE	PRINTED TITLE
Notarization: Subscribed and sworn to before me this 4th day of February 2016	Notarization: Subscribed and sworn to before me this _____ day of _____
Signature of Notary	Signature of Notary
Seal	Seal

JACQUELINE PLANAS
Notary Public, State of New York
No. 01PL6240430
Qualified in New York County
Commission Expires April 28, 2019

*Insert EXACT legal name of the applicant

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- 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 for Permit is filed on the behalf of VCOVINGTON, LLC* **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 for permit 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 permit application fee required for this application is sent herewith or will be paid upon request.**

SIGNATURE	SIGNATURE
RICHARD A. KRAUCH	
PRINTED NAME	PRINTED NAME
MANAGER	
PRINTED TITLE	PRINTED TITLE
Notarization: Subscribed and sworn to before me this 4th day of February 2016	Notarization: Subscribed and sworn to before me this _____ day of _____
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JACQUELINE PLANAS
Notary Public, State of New York
No. 01PL6240430
Qualified in New York County
Commission Expires April 28, 2019

*Insert EXACT legal name of the applicant

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- in the case of a sole proprietor, the individual that is the proprietor.

This Application for Permit is filed on the behalf of US HealthVest, LLC * **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 for permit 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 permit application fee required for this application is sent herewith or will be paid upon request.**

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RICHARD A. KRESCH	
PRINTED NAME	PRINTED NAME
MANAGER	
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No. 01PL6240430
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*Insert EXACT legal name of the applicant

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.

Criterion 1110.230 – Background, Purpose of the Project, and Alternatives

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 certified listing of any adverse action taken against any facility owned and/or operated by the applicant during the three years prior to the filing of the application.
3. 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.**
4. 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 the information has been 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 is able to 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.

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, per the applicant's definition.
3. Identify the existing problems or issues that need to be addressed, as applicable and appropriate for the project. [See 1110.230(b) for examples of documentation.]
4. Cite the sources of the information provided as 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 age and condition and 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 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.

ALTERNATIVES

1) Identify **ALL** of the alternatives to the proposed project:

Alternative options **must** include:

A) Proposing a project of greater or lesser scope and cost;

B) Pursuing a joint venture or similar arrangement with one or more providers or entities to meet all or a portion of the project's intended purposes; developing alternative settings to meet all or a portion of the project's intended purposes;

C) Utilizing other health care resources that are available to serve all or a portion of the population proposed to be served by the project; and

D) Provide the reasons why the chosen alternative was selected.

2) Documentation shall consist of a comparison of the project to alternative options. The comparison shall address issues of total costs, patient access, quality and financial benefits in both the short term (within one to three years after project completion) and long term. This may vary by project or situation. **FOR EVERY ALTERNATIVE IDENTIFIED THE TOTAL PROJECT COST AND THE REASONS WHY THE ALTERNATIVE WAS REJECTED MUST BE PROVIDED.**

3) The applicant shall provide empirical evidence, including quantified outcome data that verifies improved quality of care, as available.

APPEND DOCUMENTATION AS ATTACHMENT-13, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

SECTION IV - PROJECT SCOPE, UTILIZATION, AND UNFINISHED/SHELL SPACE

Criterion 1110.234 - Project Scope, Utilization, and Unfinished/Shell Space

READ THE REVIEW CRITERION and provide the following information:

SIZE OF PROJECT:

1. Document that the amount of physical space proposed for the proposed project is necessary and not excessive. **This must be a narrative.**

2. If the gross square footage exceeds the BGSF/DGSF standards in Appendix B, justify the discrepancy by documenting one of the following::

   a. Additional space is needed due to the scope of services provided, justified by clinical or operational needs, as supported by published data or studies;

   b. The existing facility's physical configuration has constraints or impediments and requires an architectural design that results in a size exceeding the standards of Appendix B;

   c. The project involves the conversion of existing space that results in excess square footage.

Provide a narrative for any discrepancies from the State Standard. A table must be provided in the following format with Attachment 14.

SIZE OF PROJECT				
DEPARTMENT/SERVICE	PROPOSED BGSF/DGSF	STATE STANDARD	DIFFERENCE	MET STANDARD?
Clinical	52,033 GSF = 520 GSF/Bed	<560 Gsf/Bed	-40 GSF/Bed	Yes

APPEND DOCUMENTATION AS ATTACHMENT-14, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

PROJECT SERVICES UTILIZATION:

This criterion is applicable only to projects or portions of projects that involve services, functions or equipment for which HFSRB has established utilization standards or occupancy targets in 77 Ill. Adm. Code 1100.

Document that in the second year of operation, the annual utilization of the service or equipment shall meet or exceed the utilization standards specified in 1110.Appendix B. **A narrative of the rationale that supports the projections must be provided.**

A table must be provided in the following format with Attachment 15.

UTILIZATION					
	DEPT./ SERVICE	HISTORICAL UTILIZATION (PATIENT DAYS) (TREATMENTS) ETC.	PROJECTED UTILIZATION	STATE STANDARD	MET STANDARD?
CY-2018	AMI	15,165	41.5%	85%	No
CY-2019	AMI	31,297	85.7%	85%	Yes

APPEND DOCUMENTATION AS ATTACHMENT-15, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

UNFINISHED OR SHELL SPACE: **NOT APPLICABLE**

Provide the following information:

1. Total gross square footage of the proposed shell space;
2. The anticipated use of the shell space, specifying the proposed GSF tot be allocated to each department, area or function;
3. Evidence that the shell space is being constructed due to
   a. Requirements of governmental or certification agencies; or
   b. Experienced increases in the historical occupancy or utilization of those areas proposed to occupy the shell space.
4. Provide:
   a. Historical utilization for the area for the latest five-year period for which data are available; and
   b. Based upon the average annual percentage increase for that period, projections of future utilization of the area through the anticipated date when the shell space will be placed into operation.

APPEND DOCUMENTATION AS ATTACHMENT-16, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

ASSURANCES: **NOT APPLICABLE**

Submit the following:

1. Verification that the applicant will submit to HFSRB a CON application to develop and utilize the shell space, regardless of the capital thresholds in effect at the time or the categories of service involved.
2. The estimated date by which the subsequent CON application (to develop and utilize the subject shell space) will be submitted; and
3. The anticipated date when the shell space will be completed and placed into operation.

APPEND DOCUMENTATION AS ATTACHMENT-17, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

SECTION VII - SERVICE SPECIFIC REVIEW CRITERIA

C. Criterion 1110.730 - Acute Mental Illness and Chronic Mental Illness

1. Applicants proposing to establish, expand and/or modernize Acute Mental Illness and Chronic Mental Illness category of service must submit the following information:

2. Indicate bed capacity changes by Service: Indicate # of beds changed by action(s):

Category of Service	# Existing Beds	# Proposed Beds
☒ Acute Mental Illness	0	100
☐ Chronic Mental Illness		

3. READ the applicable review criteria outlined below and **submit the required documentation for the criteria:**

APPLICABLE REVIEW CRITERIA	Establish	Expand	Modernize
1110.730(b)(1) - Planning Area Need - 77 Ill. Adm. Code 1100 (formula calculation)	X		
1110.730(b)(2) - Planning Area Need - Service to Planning Area Residents	X	X	
1110.730(b)(3) - Planning Area Need - Service Demand - Establishment of Category of Service	X		
1110.730(b)(4) - Planning Area Need - Service Demand - Expansion of Existing Category of Service		X	
1110.730(b)(5) - Planning Area Need - Service Accessibility	X		
1110.730(c)(1) - Unnecessary Duplication of Services	X		
1110.730(c)(2) - Maldistribution	X		
1110.730(c)(3) - Impact of Project on Other Area Providers	X		
1110.730(d)(1) - Deteriorated Facilities			X
1110.730(d)(2) - Documentation			X
1110.730(d)(3) - Documentation Related to Cited Problems			X
1110.730(d)(4) - Occupancy			X
1110.730(e(1)) - Staffing Availability	X	X	
1110.730(f) - Performance Requirements	X	X	X
1110.730(g) - Assurances	X	X	X

APPEND DOCUMENTATION AS ATTACHMENT-22, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

The following Sections DO NOT need to be addressed by the applicants or co-applicants responsible for funding or guaranteeing the funding of the project if the applicant has a bond rating of A- or better from Fitch's or Standard and Poor's rating agencies, or A3 or better from Moody's (the rating shall be affirmed within the latest 18 month period prior to the submittal of the application):

- **Section 1120.120 Availability of Funds – Review Criteria**
- **Section 1120.130 Financial Viability – Review Criteria**
- **Section 1120.140 Economic Feasibility – Review Criteria, subsection (a)**

VIII. - 1120.120 - Availability of Funds

The applicant shall document that financial resources shall be available and be equal to or exceed the estimated total project cost plus any related project costs by providing evidence of sufficient financial resources from the following sources, as applicable: **Indicate the dollar amount to be provided from the following sources:**

$13,726,200	a) Cash and Securities – statements (e.g., audited financial statements, letters from financial institutions, board resolutions) as to: 1) the amount of cash and securities available for the project, including the identification of any security, its value and availability of such funds; and 2) interest to be earned on depreciation account funds or to be earned on any asset from the date of applicant's submission through project completion;
_____	b) Pledges – for anticipated pledges, a summary of the anticipated pledges showing anticipated receipts and discounted value, estimated time table of gross receipts and related fundraising expenses, and a discussion of past fundraising experience.
_____	c) Gifts and Bequests – verification of the dollar amount, identification of any conditions of use, and the estimated time table of receipts;
_____	d) Debt – a statement of the estimated terms and conditions (including the debt time period, variable or permanent interest rates over the debt time period, and the anticipated repayment schedule) for any interim and for the permanent financing proposed to fund the project, including: 1) For general obligation bonds, proof of passage of the required referendum or evidence that the governmental unit has the authority to issue the bonds and evidence of the dollar amount of the issue, including any discounting anticipated; 2) For revenue bonds, proof of the feasibility of securing the specified amount and interest rate; 3) For mortgages, a letter from the prospective lender attesting to the expectation of making the loan in the amount and time indicated, including the anticipated interest rate and any conditions associated with the mortgage, such as, but not limited to, adjustable interest rates, balloon payments, etc.; 4) For any lease, a copy of the lease, including all the terms and conditions, including any purchase options, any capital improvements to the property and provision of capital equipment; 5) For any option to lease, a copy of the option, including all terms and conditions.
_____	e) Governmental Appropriations – a copy of the appropriation Act or ordinance accompanied by a statement of funding availability from an official of the governmental unit. If funds are to be made available from subsequent fiscal years, a copy of a resolution or other action of the governmental unit attesting to this intent;
_____	f) Grants – a letter from the granting agency as to the availability of funds in terms of the amount and time of receipt;
$17,593,509	g) All Other Funds and Sources – verification of the amount and type of any other funds that will be used for the project. - **FMV (Present Value) of the Leased land and building shell $15,593,509 + $2,000,000 in Lease Hold Improvements**
$31,319,709	**TOTAL FUNDS AVAILABLE**

APPEND DOCUMENTATION AS ATTACHMENT-36, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

IX. 1120.130 - Financial Viability

All the applicants and co-applicants shall be identified, specifying their roles in the project funding or guaranteeing the funding (sole responsibility or shared) and percentage of participation in that funding.

Financial Viability Waiver

The applicant is not required to submit financial viability ratios if:

1. **"A" Bond rating or better**
2. **All of the projects capital expenditures are completely funded through internal sources**
3. **The applicant's current debt financing or projected debt financing is insured or anticipated to be insured by MBIA (Municipal Bond Insurance Association Inc.) or equivalent**
4. **The applicant provides a third party surety bond or performance bond letter of credit from an A rated guarantor.**

See Section 1120.130 Financial Waiver for information to be provided

APPEND DOCUMENTATION AS ATTACHMENT-37, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

The applicant or co-applicant that is responsible for funding or guaranteeing funding of the project shall provide viability ratios for the latest three years for which **audited financial statements are available and for the first full fiscal year at target utilization, but no more than two years following project completion.** When the applicant's facility does not have facility specific financial statements and the facility is a member of a health care system that has combined or consolidated financial statements, the system's viability ratios shall be provided. If the health care system includes one or more hospitals, the system's viability ratios shall be evaluated for conformance with the applicable hospital standards.

NOT APPLICABLE DUE TO COMPLIANCE WITH FINANCIAL VIABILITY WAIVER

Provide Data for Projects Classified as:	**Category A or Category B (last three years)**			**Category B (Projected)**
Enter Historical and/or Projected Years:				
Current Ratio				
Net Margin Percentage				
Percent Debt to Total Capitalization				
Projected Debt Service Coverage				
Days Cash on Hand				
Cushion Ratio				

Provide the methodology and worksheets utilized in determining the ratios detailing the calculation and applicable line item amounts from the financial statements. Complete a separate table for each co-applicant and provide worksheets for each.

2. Variance

Applicants not in compliance with any of the viability ratios shall document that another organization, public or private, shall assume the legal responsibility to meet the debt obligations should the applicant default.

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

X. 1120.140 - Economic Feasibility

This section is applicable to all projects subject to Part 1120.

A. Reasonableness of Financing Arrangements

The applicant shall document the reasonableness of financing arrangements by submitting a notarized statement signed by an authorized representative that attests to one of the following:

1) That the total estimated project costs and related costs will be funded in total with cash and equivalents, including investment securities, unrestricted funds, received pledge receipts and funded depreciation; or

2) That the total estimated project costs and related costs will be funded in total or in part by borrowing because:

   A) A portion or all of the cash and equivalents must be retained in the balance sheet asset accounts in order to maintain a current ratio of at least 2.0 times for hospitals and 1.5 times for all other facilities; or

   B) Borrowing is less costly than the liquidation of existing investments, and the existing investments being retained may be converted to cash or used to retire debt within a 60-day period.

B. Conditions of Debt Financing

This criterion is applicable only to projects that involve debt financing. The applicant shall document that the conditions of debt financing are reasonable by submitting a notarized statement signed by an authorized representative that attests to the following, as applicable:

1) That the selected form of debt financing for the project will be at the lowest net cost available;

2) That the selected form of debt financing will not be at the lowest net cost available, but is more advantageous due to such terms as prepayment privileges, no required mortgage, access to additional indebtedness, term (years), financing costs and other factors;

3) That the project involves (in total or in part) the leasing of equipment or facilities and that the expenses incurred with leasing a facility or equipment are less costly than constructing a new facility or purchasing new equipment.

C. Reasonableness of Project and Related Costs

Read the criterion and provide the following:

1. Identify each department or area impacted by the proposed project and provide a cost and square footage allocation for new construction and/or modernization using the following format (insert after this page).

COST AND GROSS SQUARE FEET BY DEPARTMENT OR SERVICE

Department (list below)	A	B	C	D	E	F	G	H	Total Cost (G + H)
	Cost/Square Foot New	Cost/Square Foot Mod.	Gross Sq. Ft. New Circ.*		Gross Sq. Ft. Mod.	Gross Sq. Ft. Circ.*	Const. $ (A x C)	Mod. $ (B x E)	
Clinical	$0	$200	0		52,033		$0	$10,406,600	$10,406,600
Contingency	$0	$10	0		52,033		$0	$520,330	$520,330
TOTALS	$0	$210	0		52,033		$0	$10,926,930	$10,926,930

* Include the percentage (%) of space for circulation

D. Projected Operating Costs

The applicant shall provide the projected direct annual operating costs (in current dollars per equivalent patient day or unit of service) for the first full fiscal year at target utilization but no more than two years following project completion. Direct cost means the fully allocated costs of salaries, benefits and supplies for the service.

E. Total Effect of the Project on Capital Costs

The applicant shall provide the total projected annual capital costs (in current dollars per equivalent patient day) for the first full fiscal year at target utilization but no more than two years following project completion.

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

XI. Safety Net Impact Statement

SAFETY NET IMPACT STATEMENT that describes all of the following must be submitted for ALL SUBSTANTIVE AND DISCONTINUATION PROJECTS:

1. The project's material impact, if any, on essential safety net services 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 a given community, if reasonably known by the applicant.

Safety Net Impact Statements shall also include all of 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 43.

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

Medicaid (revenue)			
Inpatient			
Outpatient			
Total			

APPEND DOCUMENTATION AS ATTACHMENT-40, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

XII. Charity Care Information

Charity Care information MUST be furnished for ALL projects.

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 44.

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

APPEND DOCUMENTATION AS ATTACHMENT-41, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

After paginating the entire, completed application, indicate in the chart below, the page numbers for the attachments included as part of the project's application for permit:

INDEX OF ATTACHMENTS

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1	Applicant/Coapplicant Identification including Certificate of Good Standing	26 -29
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3	Persons with 5 percent or greater interest in the licensee must be identified with the % of ownership.	35-37
4	Organizational Relationships (Organizational Chart) Certificate of Good Standing Etc.	38-40
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6	Historic Preservation Act Requirements	44-48
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14	Size of the Project	107
15	Project Service Utilization	108-135
16	Unfinished or Shell Space	N/A
17	Assurances for Unfinished/Shell Space	N/A
18	Master Design Project	N/A
19	Mergers, Consolidations and Acquisitions	N/A
	Service Specific:	
20	Medical Surgical Pediatrics, Obstetrics, ICU	N/A
21	Comprehensive Physical Rehabilitation	N/A
22	Acute Mental Illness	136-215
23	Neonatal Intensive Care	N/A
24	Open Heart Surgery	N/A
25	Cardiac Catheterization	N/A
26	In-Center Hemodialysis	N/A
27	Non-Hospital Based Ambulatory Surgery	N/A
28	Selected Organ Transplantation	N/A
29	Kidney Transplantation	N/A
30	Subacute Care Hospital Model	N/A
31	Children's Community-Based Health Care Center	N/A
32	Community-Based Residential Rehabilitation Center	N/A
33	Long Term Acute Care Hospital	N/A
34	Clinical Service Areas Other than Categories of Service	N/A
35	Freestanding Emergency Center Medical Services	N/A
	Financial and Economic Feasibility:	
36	Availability of Funds	216-274
37	Financial Waiver	275
38	Financial Viability	N/A
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41	Charity Care Information	283

SECTION III – BACKGROUND, PURPOSE OF THE PROJECT, AND ALTERNATIVES – INFORMATION REQUIREMENTS Continued i

Applicant /Co-Applicant Identification
[Provide for each co-applicant [refer to Part 1130.220].

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

The Applicants for the proposed project, Northbrook Behavioral Hospital, are **V Covington Realty, LLC** (Owner) and **V Covington, LLC** (Operator/Licensee). The owner of both the ownership and operating entities is **US HealthVest, LLC**. Collectively, these entities are the Applicant. The entities' Illinois Certificates of Good Standing are appended as **ATTACHMENT-1A**.

ATTACHMENT-1

File Number 0552778-3

STATE OF ILLINOIS

OFFICE OF THE SECRETARY OF STATE

To all to whom these Presents Shall Come, Greeting:

I, Jesse White, 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

V COVINGTON REALTY, LLC, A DELAWARE LIMITED LIABILITY COMPANY HAVING OBTAINED ADMISSION TO TRANSACT BUSINESS IN ILLINOIS ON JANUARY 12, 2016, 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* 4TH *day of* FEBRUARY *A.D.* 2016 .

Authentication #: 1603501388 verifiable until 02/04/2017
Authenticate at: http://www.cyberdriveillinois.com

Jesse White

SECRETARY OF STATE

ATTACHMENT-1A

File Number 0552780-5

STATE OF ILLINOIS

OFFICE OF THE SECRETARY OF STATE

To all to whom these Presents Shall Come, Greeting:

I, Jesse White, 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

V COVINGTON, LLC, A DELAWARE LIMITED LIABILITY COMPANY HAVING OBTAINED ADMISSION TO TRANSACT BUSINESS IN ILLINOIS ON JANUARY 12, 2016, 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* 4TH *day of* FEBRUARY *A.D.* 2016 .

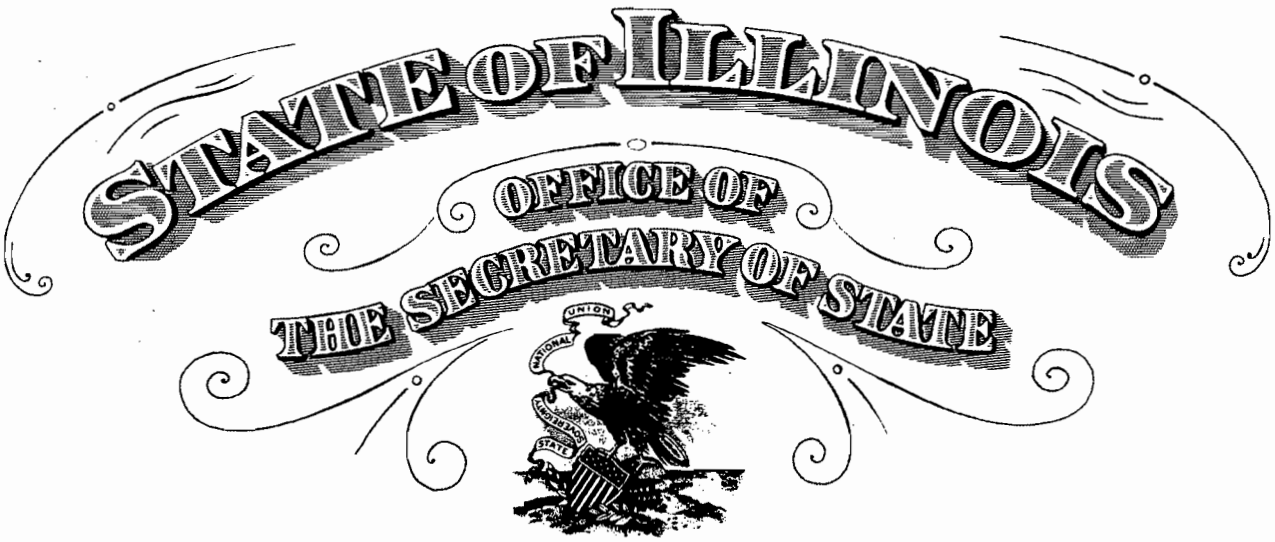
Authentication #: 1603501344 verifiable until 02/04/2017
Authenticate at: http://www.cyberdriveillinois.com

Jesse White

SECRETARY OF STATE

ATTACHMENT-1A

File Number 0493499-7



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, 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

U S HEALTHVEST, LLC, A DELAWARE LIMITED LIABILITY COMPANY HAVING OBTAINED ADMISSION TO TRANSACT BUSINESS IN ILLINOIS ON OCTOBER 06, 2014, 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* 4TH *day of* FEBRUARY *A.D.* 2016 .

Jesse White

SECRETARY OF STATE

Authentication #: 1603501402 verifiable until 02/04/2017
Authenticate at: http://www.cyberdriveillinois.com

ATTACHMENT-1A

Site Ownership

Proof of ownership or control of the site is to be provided as Attachment 2. Examples of proof of ownership are property tax statement, 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.

The ownership entity for the proposed project, Northbrook Behavioral Hospital, is **V Covington Realty, LLC**. An Illinois Certificate of Good Standing for this entity is appended as **ATTACHMENT-2A**. The Letter-of-Intent for the lease of the proposed building and site documenting site control is appended as **ATTACHMENT-2B**.

ATTACHMENT-2

File Number 0552778-3

STATE OF ILLINOIS

OFFICE OF THE SECRETARY OF STATE

To all to whom these Presents Shall Come, Greeting:

I, Jesse White, 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

V COVINGTON REALTY, LLC, A DELAWARE LIMITED LIABILITY COMPANY HAVING OBTAINED ADMISSION TO TRANSACT BUSINESS IN ILLINOIS ON JANUARY 12, 2016, 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* 4TH *day of* FEBRUARY *A.D.* 2016 .

Authentication #: 1603501388 verifiable until 02/04/2017

Authenticate at: http://www.cyberdriveillinois.com

Jesse White

SECRETARY OF STATE

ATTACHMENT-2A

CROSSROADS
PARTNERS

1300 E. Woodfield Rd.
Suite 150
Schaumburg, IL 60173
Phone: 847.259.0932
Fax: 847.239.7520
www.xrdevelopment.com

January 28, 2016

Mike Wilson
Avison Young
One South Wacker Drive
Suite 3000
Chicago, Illinois 60606

Re: **US HealthVest Letter of Intent – 4201 Lake Cook Road, Northbrook**

Dear Mike:

On behalf of ownership ("Landlord"), I am pleased to submit the following Letter of Intent ("LOI") for your client, US HealthVest ("Tenant"), to lease space at 4201 Lake Cook Road under the following terms and conditions:

➢ **LESSEE:**	V Covington Realty, LLC
➢ **GUARANTEE:**	US HealthVest shall guarantee the full amount of the lease for the entire duration of the lease term except per assignment.
➢ **BUILDING ADDRESS:**	4201 Lake Cook Road Northbrook, Illinois 60062
➢ **LESSOR:**	Crossroads Northbrook, LLC
➢ **PREMISES:**	Full building consisting of approximately 66,000 usable M.S. ~~rentable~~ square feet
➢ **LEASE COMMENCEMENT:**	Upon receipt of Lessee's final, non-appealable Certificate of Need from the Illinois Health Facilities and Services Review Board and final zoning approval for Lessee's use
➢ **RENT COMMENCEMENT:**	The earlier of Lessee obtaining a Certificate of Occupancy or one year from the date of zoning approval.
➢ **TERM:**	Thirty (30) years
➢ **OPTION TO RENEW:**	Lessor shall provide Lessee with two (2) options to renew the term of the lease for an additional ten (10) years for each option. Lessee shall provide Lessor written notice of intent to renew their lease no less than twenty four (24) months prior to the expiration of the term
➢ **INITIAL RENT:**	$1,075,000 annually, paid to Lessors in twelve (12) equal portions monthly
➢ **ESCALATIONS:**	The rent shall escalate two percent (2%) annually on the anniversary of the Rent Commencement date
➢ **TENANT IMPROVEMENT**	Lessor shall provide to Lessee up to Two Million and 00/100 Dollars

ALLOWANCE: ($2,000,000.00) toward leasehold Improvements to the Premises. The Initial Rent shall increase Sixty Six Thousand and 00/100 Dollars ($66,000.00) annually if Lessee elects to utilize the full Tenant Improvement Allowance. Should Lessee elect to utilize only a portion of the Tenant Improvement Allowance, the increase in Initial Rent shall be proportionate to the percentage of the Tenant Improvement Allowance utilized.

- **SECURITY DEPOSIT** A Security Deposit worth six (6) months' rent to be deposited with Landlord upon Lease Commencement. If Lessee is in compliance with lease terms, one half (1/2) of the Security Deposit to be returned to Lessee at the beginning of year 2. Remaining (1/2) to be returned at the beginning of year 5. M.S.
- **ZONING:** R1 (Residential). The building will require a change in use. Landlord shall corporate with Lessee in obtaining use approvals
- **CONFIDENTIALITY:** Lessor and Lessee and their representatives acknowledge that the terms of this Letter of Intent are confidential and are related to matters solely between Lessor and Lessee, and that this Letter of Intent and its terms and conditions have only been, and will only be divulged to the parties' attorneys and others with a genuine need to know to complete the transaction contemplated by this Letter of Intent or otherwise may be required by law or compelled by judicial mandate

The terms of this LOI are subject to Lender approval. This LOI is not intended as, and does not constitute, a binding agreement by any party, nor an agreement by any party to enter into a binding agreement but is merely intended to specify some of proposed terms and conditions of the transaction contemplated herein. Neither party may claim any legal rights against the other by reason of the signing of this letter or by taking any action in reliance thereon. Each party hereto fully understands that no party shall have any legal obligations to the other, or with respect to the proposed transaction, unless and until all of the terms and conditions of the proposed transaction have been negotiated, agreed to by all parties and set forth in a definitive agreement which has been signed and delivered by all parties. The only legal obligations, which any party shall have, shall be those contained in such signed and delivered definitive agreement referred to above. Landlord is free to change or withdraw any of the terms described in this letter and to lease space described in this letter to any other parties and upon any terms as Landlord deems fit. The terms and conditions of this offer shall expire and shall be withdrawn if not accepted within ten (10) days from the date of this LOI.

Lessor and Lessee shall enter into a lease within thirty days ~~during which time~~ M.S., Landlord shall not sell, contract to sell, lease or otherwise transfer the Land or any part of it or grant an option to any third party to acquire or lease all or any portion of the Building until the Lease is executed. M.S

Please call me if you have any questions regarding this LOI. I look forward to working with you on this transaction.

Sincerely,

CROSSROADS PARTNERS
AS AGENT

Zachary W. Fox
Senior Vice President

Agreed & Accepted for Lessee:	**Agreed & Accepted for Lessor:**
V Covington Realty, LLC	*Crossroads Northbrook, LLC*
By:	By:
Its: EVP	Its: Manager
Date: 2/3/16	Date: 1/28/16

Operating Identity/Licensee

- Corporations and limited liability companies must provide an Illinois Certificate of Good Standing.

Persons with 5 percent or greater interest in the licensee must be identified with the % of ownership.

The Operator/Licensee of the proposed Northbrook Behavioral Hospital will be **V Covington, LLC**. The entity's Illinois Certificate of Good Standing is appended as **ATTACHMENT-3A.** Please note that the sole shareholder is **US HealthVest, LLC**. An Illinois Certificate of Good Standing is appended as **ATTACHMENT-3B**.

ATTACHMENT-3

File Number 0552780-5

STATE OF ILLINOIS

OFFICE OF THE SECRETARY OF STATE

To all to whom these Presents Shall Come, Greeting:

I, Jesse White, 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

V COVINGTON, LLC, A DELAWARE LIMITED LIABILITY COMPANY HAVING OBTAINED ADMISSION TO TRANSACT BUSINESS IN ILLINOIS ON JANUARY 12, 2016, 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* 4TH *day of* FEBRUARY *A.D.* 2016 .

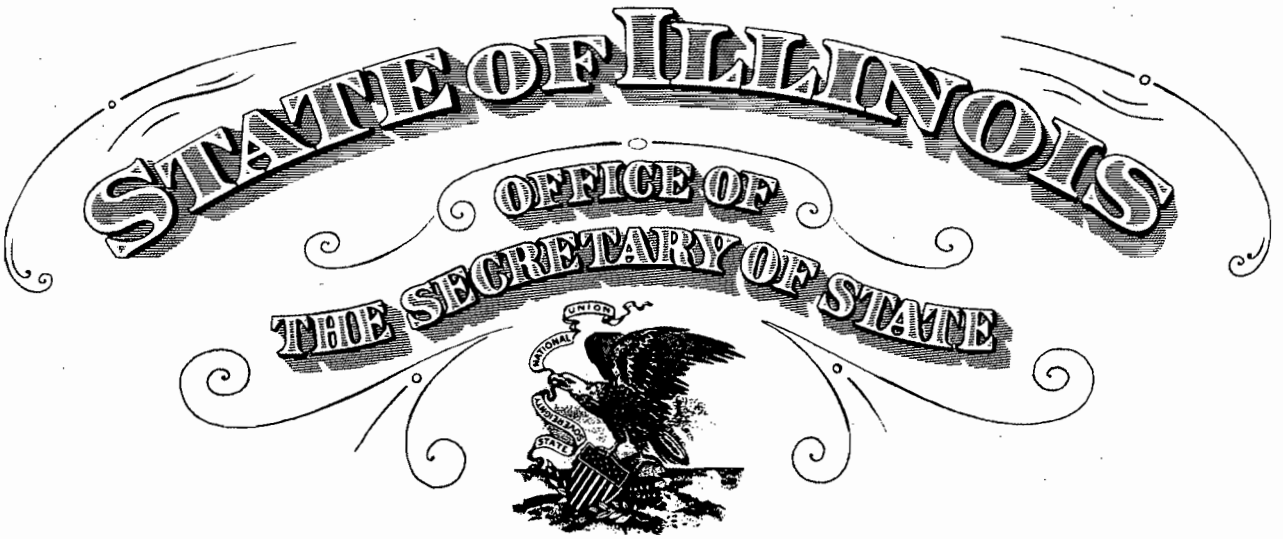
Authentication #: 1603501344 verifiable until 02/04/2017
Authenticate at: http://www.cyberdriveillinois.com

Jesse White

SECRETARY OF STATE

ATTACHMENT-3A

File Number 0493499-7



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, 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

U S HEALTHVEST, LLC, A DELAWARE LIMITED LIABILITY COMPANY HAVING OBTAINED ADMISSION TO TRANSACT BUSINESS IN ILLINOIS ON OCTOBER 06, 2014, 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* 4TH *day of* FEBRUARY *A.D.* 2016 .

Jesse White

SECRETARY OF STATE

Authentication #: 1603501402 verifiable until 02/04/2017
Authenticate at: http://www.cyberdriveillinois.com

ATTACHMENT-3B

Organizational Relationships

Provide (for each co-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.

Appended as **ATTACHMENT-4A,** is the organizational chart for this project. It should be known that the ownership and operating/licensee entities have no history. The Parent will be the sole financial contributor to the proposed project. The only related facility in Illinois in which the Parent has interest is Chicago Behavioral Hospital. Appended as **ATTACHMENT-4B,** is the Illinois Certificate of Good Standing for **US HealthVest, LLC**, who is considered a Co-Applicant.

ATTACHMENT-4

Northbrook Behavioral Hospital
Organizational Chart

US HEALTHVEST, LLC

Northbrook Behavioral Hospital	**Chicago Behavioral Hospital**
V Covington, LLC *d/b/a Northbrook Behavioral Hospital*	*2014 Health, LLC* *d/b/a Chicago Behavioral Hospital*
V Covington Realty, LLC	*2014 Health Realty, LLC*

File Number 0493499-7

STATE OF ILLINOIS

OFFICE OF THE SECRETARY OF STATE

To all to whom these Presents Shall Come, Greeting:

I, Jesse White, 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

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In Testimony Whereof, *I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this* 4TH *day of* FEBRUARY *A.D.* 2016 .

Authentication #: 1603501402 verifiable until 02/04/2017
Authenticate at: http://www.cyberdriveillinois.com

Jesse White

SECRETARY OF STATE

ATTACHMENT-4B

SECTION III – BACKGROUND, PURPOSE OF THE PROJECT, AND ALTERNATIVES – INFORMATION REQUIREMENTS Continued v

Flood Plain Requirements

Provide documentation that the project complies with the requirements of Illinois Executive Order #2005-5 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 #2005-5 **(http://www.hfsrb.illinois.gov).**

Appended as **ATTACHMENT-5A** is a letter from Miroslav Petrovic, Architect, dated February 2, 2016, as well as a FIRM Map printed from www.FEMA.gov, providing documentation that the proposed project site is not within a special flood hazard area.

ATTACHMENT-5

US HealthVest

February 2, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

Dear Ms. Avery,

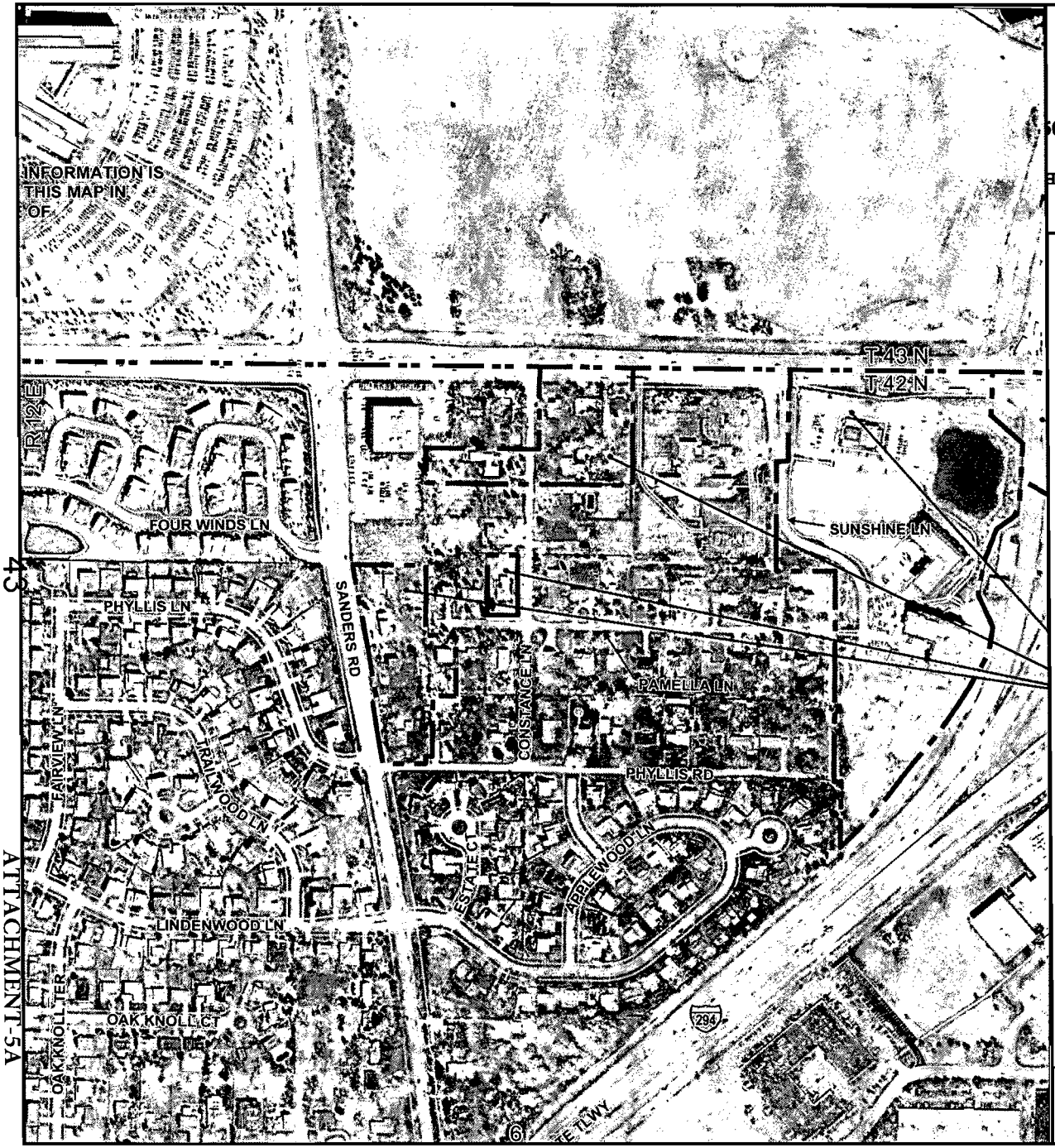
I hereby certify that the proposed site of 4201 Lake Cook Road in Northbrook, Illinois is not located within a special flood hazard area and that the project will be developed consistent with the requirements of Illinois Executive Order #2005-5.

Sincerely,

Miroslav Petrovic
Architect
Illinois Registration #001.022857

32 East 57th Street
17th Floor
New York, New York 10022
T 212.243.5565 · F 212.243.1099
www.ushealthvest.com

ATTACHMENT-5A



MAP SCALE 1" = 500'

0 500 1000 FEET

METE

NFIP NATIONAL FLOOD INSURANCE PROGRAM

PANEL 0069J

FIRM

FLOOD INSURANCE RATE MAP

COOK COUNTY, ILLINOIS

AND INCORPORATED AREAS

PANEL 69 OF 832

(SEE MAP INDEX FOR FIRM PANEL LAYOUT)

CONTAINS:

COMMUNITY	NUMBER	PANEL	SUFFIX
COOK COUNTY	170054	0069	J
DEERFIELD, VILLAGE OF	170361	0069	J
NORTHBROOK, VILLAGE OF	170132	0069	J
WHEELING, VILLAGE OF	170173	0069	J

Notice to User: The **Map Number** shown below should be used when placing map orders; the **Community Number** shown above should be used on insurance applications for the subject community.

MAP NUMBER
17031C0069J

MAP REVISED
AUGUST 19, 2008

Federal Emergency Management Agency

This is an official copy of a portion of the above referenced flood map. It was extracted using F-MIT On-Line. This map does not reflect changes or amendments which may have been made subsequent to the date on the title block. For the latest product information about National Flood Insurance Program flood maps check the FEMA Flood Map Store at www.msc.fema.gov

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ATTACHMENT-5A

Historic Resources Preservation Act Requirements

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

Appended as **ATTACHMENT-6A**, is the Applicant's submission to the Illinois Historic Preservation Agency (HPA) documenting compliance with the requirements of the Historic Resources Preservation Act. The response from HPA on this submission will be forwarded upon receipt.

FOLEY & ASSOCIATES, INC.

Charles H. Foley, MHSA
cfoley@foleyandassociates.com
ONLINE SUBMITTAL

John P. Kniery
jkniery@foleyandassociates.com

February 3, 2016

Rachel Leibowitz, Ph.D.
Deputy State Historic Preservation Officer
Illinois Historic Preservation Agency
Preservation Service Division
Old State Capitol
Springfield, Illinois 62701

Re: **Northbrook Behavioral Health**

Dear Ms. Leibowitz:

The Applicants are proposing (through the Certificate of Need process) to establish an Acute/Chronic Mental Illness facility to be located at 4201 Lake Cook Road, Northbrook, Cook County, Illinois. The proposed A/CMI facility will consist of 100 beds.

The required information is as follows:

a. General project address: **4201 Lake Cook Road, Northbrook, Cook County, Illinois.**

b. Map showing the general location of the project: **See Attachment A.**

c. Photographs of any standing building/structures within the project area: **See Attachment A.**

d. Addresses for buildings/structures if present: **There are no additional buildings on the property.**

e. Total acres of project: **4.0**

f. List of other federal or state agencies which potentially would be involved in funding, licensing permitting or official support/approval: **Medicare, Medicaid, Tricare, Joint Commission, State, Federal.**

g. Requested HARGIS map: **Upon search of the above general project address, no records were found in the HARGIS map database. See Attachment B.**

According to the Illinois State Agency Historic Resources Preservation Act (20 ILCS 3420et.seq) and other applicable Illinois laws, it is my understanding that you will review the attached information and provide evaluation comments, with respect to any historic resources. If you have any questions or need additional information, please do not hesitate to contact myself or John P. Kniery.

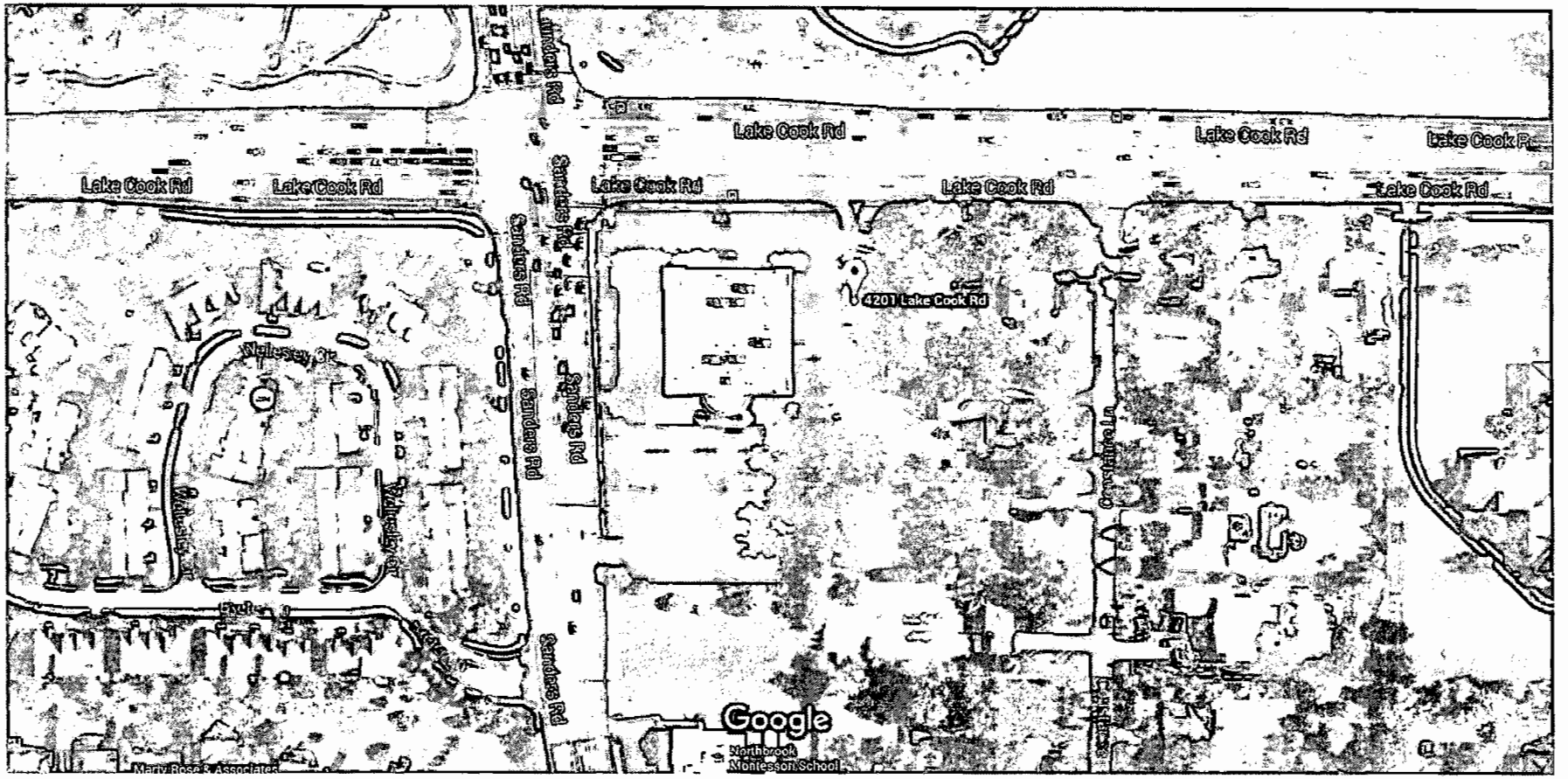
Sincerely,

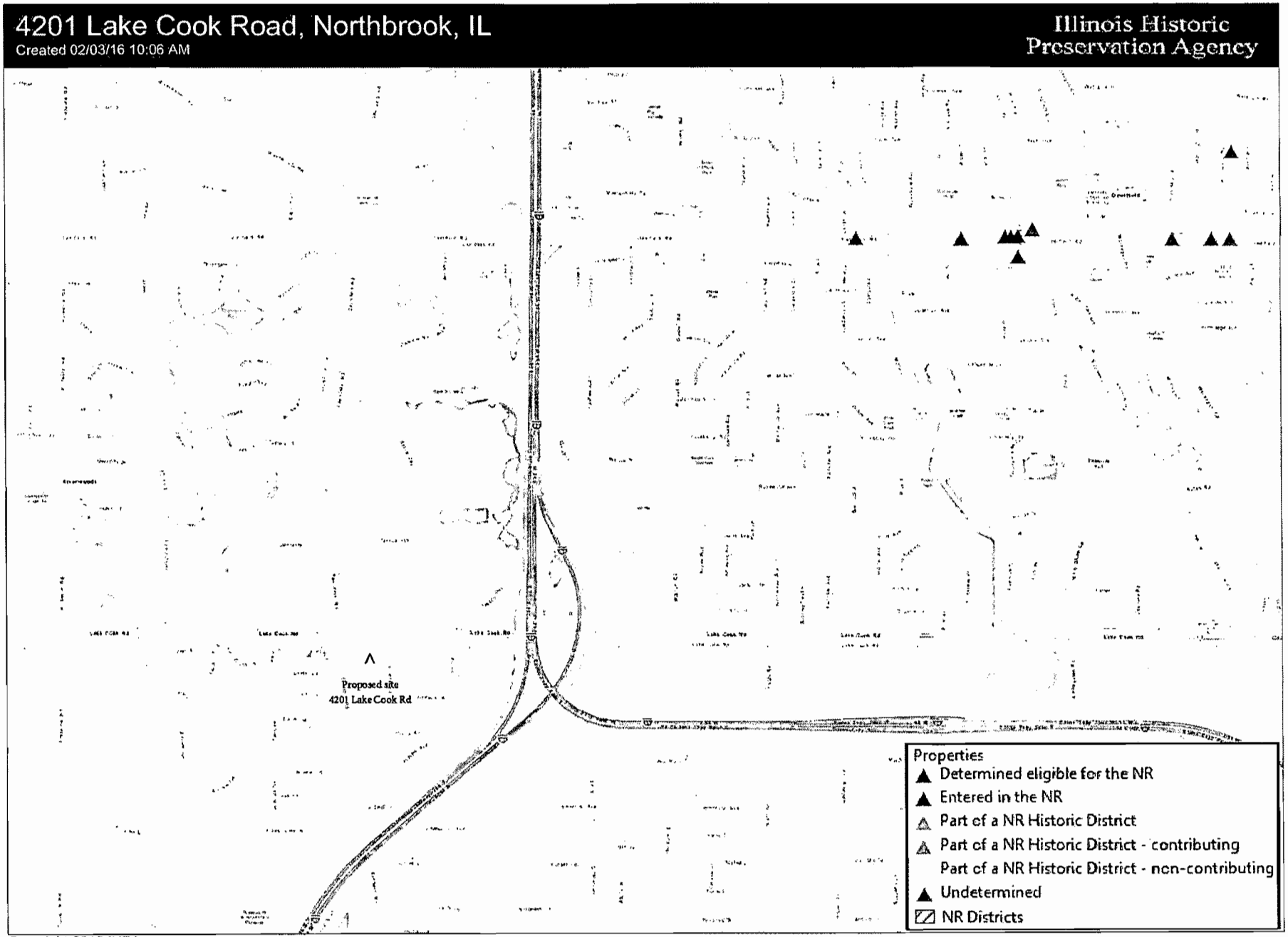
Kathy Harris

Enclosures

Health Care Consulting
133 South Fourth Street, Suite 200 • Springfield, IL 62701
Office: 217/544-1551
foley@foleyandassociates.com
Fax: 217/544-3615

Google Maps 4201 Lake Cook Rd





ATTACHMENT-6A

Kathy Harris

From: Kathy Harris
Sent: Wednesday, February 03, 2016 3:49 PM
To: 'HPA.ProjectsBox@Illinois.gov'
Subject: Northbrook Behavioral Health
Attachments: Historic Preservation Request - Northbrook Behavioral Health 2.3.16.pdf

Kathy Harris

Foley & Associates, Inc.
133 South Fourth Street, Suite 200
Springfield, Illinois 62701
217.544.1551 - Office
217.544.3615 - Facsimile
foley@foleyandassociates.com

CONFIDENTIALITY NOTICE

This transmission and the attachments accompanying it contain confidential information belonging to the sender that is legally privileged. The information is intended only for the use of the individual or entity named above. The authorized recipient of this information is prohibited from disclosing this information to any other party and is required to destroy the information after its stated need has been fulfilled unless otherwise required by law. If you have received this transmission in error, please notify the sender immediately and destroy all copies of this message including any attachments. If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution or publication of this message, or the taking of any action based on it is strictly prohibited. The sender hereby reserves all legal rights it has in this message and all rights to take action to protect it or obtain damages for unauthorized disclosure copying, distribution, publication or use.

Criterion 1110.230 – Background, Purpose of the Project, and Alternatives
BACKGROUND OF APPLICANT

1. A listing of all health care facilities owned or operated by the applicant, including licensing, and certification if applicable.

The Owner and Operating entities, respectively **V Covington Realty, LLC** and **V Covington, LLC**, do not own or operate any licensed health care facilities. The Co-applicant/parent entity, **US HealthVest, LLC**, has within its organization 1 other freestanding Acute/Chronic Mental Illness facility in the state of Illinois, Chicago Behavioral Hospital. A copy of this related facility license and certifications as applicable are appended under **ATTACHMENT-11A.**

2. A certified listing of any adverse action taken against any facility owned and/or operated by the applicant during the three years prior to the filing of the application.

The required documentation with regards to adverse action, as required under 1125.520, c) 2, is appended as **ATTACHMENT-11B**. It should be noted that the ownership and operating entities of the proposed Northbrook Behavioral Hospital do not have any adverse action taken against them.

3. 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.**

The above requested authorization for the Health Facilities and Services Review Board and the Department of Public Health access to information is appended as **ATTACHMENT-11C.**

4. 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 the information has been 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 is able to submit amendments to previously submitted information, as needed, to update and/or clarify data.

   This item is not applicable.

Illinois Department of
PUBLIC HEALTH

HF109379

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

The person, firm or corporation whose name appears on this certificate has complied with the provisions of the Illinois statutes and/or rules and regulations and is hereby authorized to engage in the activity as indicated below.

Nirav D. Shah, M.D., J.D.
Director

Issued under the Authority of the Illinois Department of Public Health

EXPIRATION DATE	CATEGORY	ID NUMBER
11/2/2016		0005934

Psychiatric Hospital

Effective: 11/03/2015

Chicago Behavioral Hospital
555 Wilson Lane
Des Plaines, IL 60016

The face of this license has a colored background. Printed by Authority of the State of Illinois • P.O. #4012320 10M 3/12

US HealthVest

January 11, 2016

Ms. Courtney Avery
Administrator
Health Facilities and Services Review Board
525 West Jefferson Street, 2nd Floor
Springfield, Illinois 62761

Dear Ms. Avery:

Please be advised that no Adverse action as defined under 1110.230.a).3)B has been taken against the Applicant or against any health care facility owned or operated by the Applicant, directly or indirectly, within three years preceding the filing of the Certificate of Need Application.

Sincerely,

Martina Sze
Executive Vice President

Notarization:
Subscribed and sworn to before me
this 12th day of February 2016

Signature of Notary
Seal

DAVID LEVER
Notary Public, State of New York
No. 01LE6166345
Qualified in New York County
Commission expires May 21, 2019

32 East 57th Street
17th Floor
New York, New York 10022
T 212.243.5565 · F 212.243.1099
www.ushealthvest.com

ATTACHMENT-11B

US HealthVest

January 11, 2016

Ms. Courtney Avery
Administrator
Health Facilities and Services Review Board
525 West Jefferson Street, 2nd Floor
Springfield, Illinois 62761

Dear Ms. Avery:

I hereby authorize the Health Facilities Planning Board and the Illinois Department of Public Health (IDPH) access to any documents necessary to verify the information submitted, including, but not limited to: official records of IDPH or other State agencies; the licensing or certification records of other states, when applicable; and the records of nationally recognized accreditation organizations. I further authorize the Illinois Department of Public Health to obtain any additional documentation or information that said agency deems necessary for the review of this Application as it pertains to 1110.230.a).3)C.

Sincerely,

Martina Sze
Executive Vice President

32 East 57th Street
17th Floor
New York, New York 10022
T 212.243.5565 · F 212.243.1099
www.ushealthvest.com

ATTACHMENT-11C

SECTION III – BACKGROUND, PURPOSE OF THE PROJECT, AND ALTERNATIVES – INFORMATION REQUIREMENTS Continued ix

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.

The purpose of the project is to improve the ability of the area residents to access the acute mental illness (hereafter referred to as AMI) inpatient services that are needed as illustrated by the need for additional beds and services from the State's Inventory of Health Care Facilities and Services and Need Determinations, 2015, Hospital Services for AMI care and treatment in adjacent Planning Areas 7-A-08 and 8-A-09 as well as the overwhelming need experienced by the Applicant's related facility Chicago Behavioral Hospital (hereafter referred to as CBH).

CBH is the closest area provider of AMI services to the proposed project. In the 14-months that CHB has been operating the facility since its purchase, the facility has filled its operating and set-up beds, renovated and modernized the upper two floors, opening them in January of this year. In total since CBH acquired the facility, they have deflected some 672 patient referrals. One hundred and eleven of these referrals are from the qualifying northern suburban geographic area of the proposed NBH, i.e., 45-minute travel time. However, due to the relatively close proximity of CBH to NBH (13.8 adjusted minutes travel time) and the apparent overwhelming demand for inpatient AMI services, conceivably all deflected referrals could be referred to the proposed project. Together with the need for additional services identified by the State in the Applicants' market area (7-A-08 and 8-A-09) and the overwhelming demand for beds and services as experienced by CBH, this project will improve the health care and well-being of the market to be served.

2. Define the planning area or market area, or other, per the applicant's definition.

In accordance with the State's required travel time contour, the proposed market area is the forty-five minute drive time contour adjusted per the 77 Illinois Administrative Code,

ATTACHMENT-12

Chapter II, Subchapter a, Section 1100.510(d). As the site is on Lake Cook Road, the dividing line between Planning Areas HSA 7, A-08 and HSA 8, A-09, both are included and in the Applicant's definition of market area.

3. Identify the existing problems or issues that need to be addressed, as applicable and appropriate for the project. [See 1110.230(b) for examples of documentation.]

There is an identified need for 29 additional AMI beds in Planning Area HSA 7 - Area A-08 and 24 additional AMI beds in Planning Area HSA 8 – Area A-09. This project addresses that existing identified need and the resultant and overwhelming demand experienced by related facility Chicago Behavioral Hospital as well as that of the area referral sources. This project, in addressing the above seeks to improve accessibility to AMI services within the 45-minute travel time contour.

4. Cite the sources of the information provided as documentation.

Appended as **ATTACHMENT-12A**, is the State's 2015 IDPH Inventory of Health Care Facilities and Need Determinations, Hospital Services summary of Acute Mental Illness category of service, Planning Area HSA 7 - Area A-08 and Planning Area HSA 8 – Area A-09.

Appended as **ATTACHMENT-12B,** is the Update to Inventory dated February 17, 2016 to the 2015 IDPH Inventory of Health Care Facilities and Need Determinations, Hospital Services, Acute Mental Illness category of Service.

Appended as **ATTACHMENT-12C,** is the Microsoft MapPoint North America 2009 map identifying the location of the proposed facility, the 45-minute market contour, location of other Acute/Chronic Mental Illness (A/CMI) facilities, and the zip code areas.

Appended as **ATTACHMENT-12D,** is a summary listing of A/CMI facilities identified as within the adjusted market area contour, their number of licensed beds, and travel times to the proposed site.

ATTACHMENT-12

Appended as **ATTACHMENT-12E** is a list of the 45-minute Travel Time Population & Zip Codes.

Appended as **ATTACHMENT-12F** is a support/referral letter from Chicago Behavioral Hospital.

Appended as **ATTACHMENT-12G**, are 21 referral letters. These letters support the project and serve as an indicator of need to appropriately utilize the facility. The 21-referral letters from Ivy Fishman, Administrator, Abbott House; Alfa Murphy, Practice Manager, Associates in Behavioral Science; Blaise J. Wolfrum, MD, FAPA, Behavioral Health Care Associates; Kenji Oyasu, MD, Brightside Clinic; Tina Cooper, Director of Resident Services, Brookdale Northbrook Senior Living; Kasia Wereszczynska, MA, LCPC, RYT, Clinical Therapist, Counseling Speaks, LLC; David Bawden, MD; Edgar Ramos, PsyD, Licensed Psychologist, Maryville Academy; Savannah Alderink, Executive Director, Harbor House; Mark D. Parisi, PsyD, Licensed Clinical Psychologist, Administrator/Owner; Renee Shopp, RN, CADC, Practice Manager, Mathers Clinic; Nancy Meier Brown, President, Meier Clinics; Bright Fellowes, PsyD, President and Licensed Clinical Psychologist, Mental Health Solutions; Ashley Pasen Shields, Director, Mental Health Solutions; Syed Rahim, MD, ABPN, Board Certified Psychiatrist, Mind Care Clinic; Dr. Anne H. Levin, PsyD, Licensed Clinical Psychologist, North Shore Psychology Specialists, PC; Susan Eckstein, LCSW, Program Director of Clinical Services, The Josselyn Center; Thodur Ranganathan, MD, Psychiatrist; Jill Hollederer, MA, BCBA, Clinical Director, KGH Consultation & Treatment, Inc.; Eugene Kwon, MD, Psychiatrist; Amy Saltzman, Administrator, Rosewood Care Center of Northbrook.

Appended as **ATTACHMENT-12H** are two Chicago mental health needs articles, one from Cranes Chicago Business Journal and the other from the Chicago Tribune,

ATTACHMENT-12

discussing the mental health needs of the City of Chicago. Appended as **ATTACHMENT-12I** are the facility's Program descriptions for Adult Psychiatric, Senior Adult, Child and Adolescents, Women Only, Extra Mile Veteran Care, Faith Based Mental Health and Dual-Diagnosis programs.

5. Detail how the project will address or improve the previously referenced issues, as well as the population's health status and well-being.

The project will address the AMI needs by working with the area mental health providers to accommodate the unmet need for services as identified by CBH and the 21-area referral sources. These letters document 3,591-3,977.4 annual referrals. This reflects a range for the average length of stay of between 7.8 days to 8.6 days when maintaining the State's target use rate of 85%. This is well within the area use rates documenting that there referrals are more than enough to justify and fill the facility.

The Applicant proposes to offer programs for adult psychiatric, Senior Adult, child and adolescent, women only, veterans, faith based and dual diagnosis patients. Each program will be separate from each other keeping children, women, veterans, and faith based patients apart and individual programming and treatment. Through these referrals and programs, the mental health and well-being for the population will be addressed.

6. Provide goals with quantified and measurable objectives, with specific timeframes that relate to achieving the stated goals **as appropriate.**

This project's goal is to serve and provide care and services to the Acute Mental Illness population of those within the 45-minute travel time contour including Planning Areas A-08 and A-09. The goal will be measured by the Applicant's ability to continuously fill its beds and provide the proposed services.

ATTACHMENT-12

SECTION III – BACKGROUND, PURPOSE OF THE PROJECT, AND ALTERNATIVES – INFORMATION REQUIREMENTS Continued xiii

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

Although this project involves modernization of an existing structure, it is not modernizing an existing service. The modernization will allow for the build-out of existing space for the purpose of establishing the proposed AMI service. Therefore, this item is not applicable.

ATTACHMENT-12

Acute Mental Illness Planning Area: A-06

Hospital	City	Beds	2013 Utilization Admissions	2013 Utilization Patient Days
Loyola Health System at Gottlieb	Melrose Park	12	235	3,564
5/14/2013 E-012-13 **Received exemption for change of ownership.**				
MacNeal Hospital	Berwyn	62	2,676	17,630
9/24/2013 13-044 **Received permit for Change of Ownership.**				
Riveredge Hospital	Forest Park	210	2,968	40,317
Westlake Hospital	Melrose Park	50	1,043	11,867
2/8/2013 Bed Change **Added 17 beds to existing category of service; facility now has 50 authorized Acute Mental Illness beds.**				
9/24/2013 13-042 **Received permit for Change of Ownership.**				
	Planning Area Totals	**334**	**6,922**	**73,378**

Estimated 2013 Total Population	Minimum Beds per 1,000	Minimum AMI Bed Need	Experienced AMI Use Rate	Projected 2018 Total Population	Projected Patient Days	Days in Year 2018	Projected Average Daily Census	Target Occupancy Rate	Calculated Bed Need	Planned Bed Need	Excess Beds
493,350	0.11	54	148.7	494,940	73,614	365	201.7	0.85	237	237	97

Acute Mental Illness Planning Area: A-07

Hospital	City	Beds	2013 Utilization Admissions	2013 Utilization Patient Days
Alexian Brothers Behavioral Health Hospital	Hoffman Estates	141	6,138	47,359
Alexian Brothers Medical Center	Elk Grove Village	25	0	0
12/17/2013 13-062 **Permit issued to establish a 25 bed Acute Mental Illness category of service.**				
Chicago Behavioral Health Hospital	Des Plaines	125	891	13,479
Lutheran General Hospital - Advocate	Park Ridge	55	1,330	10,763
Northwest Community Hospital	Arlington Heights	32	1,269	8,489
Streamwood Hospital	Streamwood	178	2,547	38,372
9/1/2014 Bed Change **Added 16 Acute Mental Illness beds to existing category of service; facility now has 178 Acute Mental Illness beds.**				
	Planning Area Totals	**556**	**12,175**	**118,462**

Estimated 2013 Total Population	Minimum Beds per 1,000	Minimum AMI Bed Need	Experienced AMI Use Rate	Projected 2018 Total Population	Projected Patient Days	Days in Year 2018	Projected Average Daily Census	Target Occupancy Rate	Calculated Bed Need	Planned Bed Need	Excess Beds
631,360	0.11	70	187.6	631,840	118,552	365	324.8	0.85	382	382	174

Acute Mental Illness Planning Area: A-08

Hospital	City	Beds	2013 Utilization Admissions	2013 Utilization Patient Days
Evanston Hospital	Evanston	21	1,079	6,677
	Planning Area Totals	**21**	**1,079**	**6,677**

Estimated 2013 Total Population	Minimum Beds per 1,000	Minimum AMI Bed Need	Experienced AMI Use Rate	Projected 2018 Total Population	Projected Patient Days	Days in Year 2018	Projected Average Daily Census	Target Occupancy Rate	Calculated Bed Need	Planned Bed Need	Beds Needed
453,490	0.11	50	14.7	451,330	6,645	365	18.2	0.85	21	50	**29**

ATTACHMENT-12A

Acute Mental Illness Planning Area: A-09

Hospital	City	Beds	2013 Utilization Admissions	2013 Utilization Patient Days
Highland Park Hospital	Highland Park	13	661	3,381
Vista Medical Center West	Waukegan	46	1,452	9,420
	Planning Area Totals	**59**	**2,113**	**12,801**

Estimated 2013 Total Population	Minimum Beds per 1,000	Minimum AMI Bed Need	Experienced AMI Use Rate	Projected 2018 Total Population	Projected Patient Days	Days in Year 2018	Projected Average Daily Census	Target Occupancy Rate	Calculated Bed Need	Planned Bed Need	Beds Needed
705,050	0.11	83	18.2	751,690	13,648	365	37.4	0.85	44	83	**24**

Acute Mental Illness Planning Area: A-10

Hospital	City	Beds	2013 Utilization Admissions	2013 Utilization Patient Days
Centegra Hospital - Woodstock	Woodstock	34	0	0
4/22/2014 14-004	**Received permit to establish Acute Mental Illness category of service with 34 authorized beds.**			
Centegra Specialty Hospital - Woodstock	Woodstock	0	940	6,904
4/22/2014 14-003	**Received permit to discontinue Acute Mental Illness category of service; 36 AMI beds removed from inventory.**			
11/12/2014 14-039	**Received permit for total discontinuation of hospital.**			
	Planning Area Totals	**34**	**940**	**6,904**

Estimated 2013 Total Population	Minimum Beds per 1,000	Minimum AMI Bed Need	Experienced AMI Use Rate	Projected 2018 Total Population	Projected Patient Days	Days in Year 2018	Projected Average Daily Census	Target Occupancy Rate	Calculated Bed Need	Planned Bed Need	Beds Needed
308,010	0.11	37	22.4	337,710	7,570	365	20.7	0.85	24	37	**3**

Acute Mental Illness Planning Area: A-11

Hospital	City	Beds	2013 Utilization Admissions	2013 Utilization Patient Days
Presence Saint Joseph Hospital - Elgin	Elgin	30	1,249	6,761
	Planning Area Totals	**30**	**1,249**	**6,761**

Estimated 2013 Total Population	Minimum Beds per 1,000	Minimum AMI Bed Need	Experienced AMI Use Rate	Projected 2018 Total Population	Projected Patient Days	Days in Year 2018	Projected Average Daily Census	Target Occupancy Rate	Calculated Bed Need	Planned Bed Need	Beds Needed
397,800	0.11	48	17.0	436,360	7,416	365	20.3	0.85	24	48	**18**

Acute Mental Illness Planning Area: A-12

Hospital	City	Beds	2013 Utilization Admissions	2013 Utilization Patient Days
Presence Mercy Medical Center	Aurora	95	2,739	16,823
	Planning Area Totals	**95**	**2,739**	**16,823**

Estimated 2013 Total Population	Minimum Beds per 1,000	Minimum AMI Bed Need	Experienced AMI Use Rate	Projected 2018 Total Population	Projected Patient Days	Days in Year 2018	Projected Average Daily Census	Target Occupancy Rate	Calculated Bed Need	Planned Bed Need	Excess Beds
366,890	0.11	45	45.9	405,330	18,586	365	50.9	0.85	60	60	35

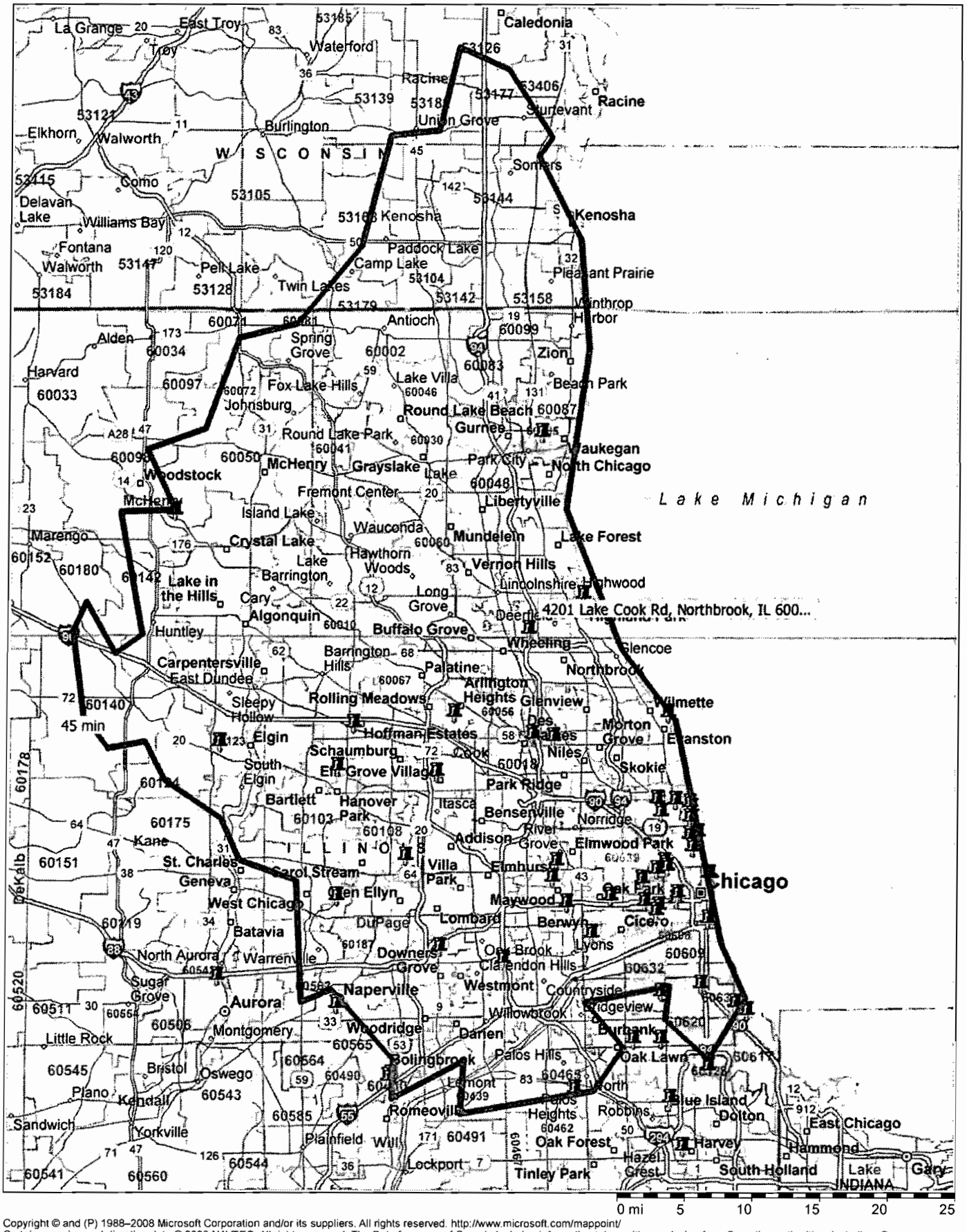
ATTACHMENT-12A

ILLINOIS DEPARTMENT OF PUBLIC HEALTH
STATE SUMMARY
REVISED BED NEED DETERMINATIONS
2/17/2016

ACUTE MENTAL ILLNESS

ACUTE MENTAL ILLNESS PLANNING AREAS	APPROVED EXISTING BEDS	CALCULATED BEDS NEEDED	ADDITIONAL BEDS NEEDED	EXCESS AMI BEDS
PLANNING AREA 1	66	77	11	0
PLANNING AREA 2	136	96	0	40
PLANNING AREA 3	242	173	0	69
PLANNING AREA 4	214	142	0	72
PLANNING AREA 5	69	67	0	2
PLANNING AREAS 6 & 7				
6 A-1	416	313	0	103
6 A-2	729	516	0	213
6 A-3	234	113	0	121
6 & 7 A-4	195	130	0	65
7 A-5	275	233	0	42
7 A-6	334	237	0	97
7 A-7	556	382	0	174
7 A-8	21	50	29	0
AREA 6 & 7 TOTALS	2,760	1,974	29	815
PLANNING AREA				
8 A-9	59	83	24	0
8 A-10	34	37	3	0
8 A-11	30	48	18	0
8 A-12	95	60	0	35
AREA 8 TOTALS	218	228	45	35
PLANNING AREA				
9 A-13	75	91	16	0
9 A-14	89	52	0	37
AREA 9 TOTALS	164	143	16	37
PLANNING AREA 10	54	44	0	10
PLANNING AREA 11	150	99	0	51
ILLINOIS AMI TOTALS	4,073	3,043	101	1,131

4201 Lake Cook Road, Northbrook - 45 min travel time AMI



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ATTACHMENT-12C

Northbrook Behavioral Hospital
4201 Lake Cook Road, Northbrook, Cook County
45-min Adj Drive Time

KEY	NAME	STREET	CITY	ZIP	Drive Distance	Adjusted Travel Time	Authorized CON AMI Beds
34	Maryville Academy / Scott A. Nolan Center (1)	555 Wilson Lane	Des Plaines	60016-0000	9.2	13.8	125
7	Advocate Lutheran General Hospital	1775 Dempster Street	Park Ridge	60068-0000	10.1	14.95	55
23	Highland Park Hospital (2)	718 Glenview Avenue	Highland Park	60035-0000	7	18.4	13
78	Vista Medical Center West	2615 West Washington	Waukegan	60085-0000	24	21.62	46
41	Northwest Community Hospital	800 West Central Road	Arlington Heigh	60005-0000	14.6	27.6	32
79	Alexian Brothers Medical Center	800 Biesterfield Road	Elk Grove Villa	60007-0000	19.6	32.2	0
15	Evanston Hospital	2650 Ridge Avenue	Evanston	60201-0000	16.7	35.65	21
8	Alexian Brothers Behavioral Health Hospital	1650 Moon Lake Boulevard	Hoffman Estates	60194-0000	22.4	39.1	141
42	Northwestern Memorial Hospital	251 East Huron St.	Chicago	60611-000	28.4	41.4	29
							462

(1) 08/27/14 Exemption Approval for change of ownership to 2014 Health LLC d/b/a Chicago Behavioral Health;
11/18/14 received written notice of exemption completion and supporting documentation.
(2) Profile address & Website address: 777 Park Ave West. Glenview address is adjacent to Park Ave West

Sources:
2014 Annual Hospital Questionnaire, Illinois Department of Public Health, Health Systems Development
Inventory of Health Care Facilities and Services and Need Determinations - 2015 - Hospital Services
Microsoft MapPoint 2009
www.mapquest.com

ATTACHMENT-12D

Northbrook Behavioral Hospital
45-Minute Zip Codes

ZIP Code	Population
53104	no info
53142	no info
53143	no info
53144	no info
53158	no info
53177	no info
53179	no info
60002	24,305
60004	50,222
60005	30,462
60007	33,830
60008	22,402
60010	44,416
60012	11,313
60013	26,241
60014	48,379
60015	27,373
60016	61,369
60018	29,027
60020	10,246
60021	5,724
60022	8,383
60025	39,263
60026	13,775
60029	478
60030	36,563
60031	37,920
60035	29,837
60037	no info
60040	5,400
60041	8,655
60042	8,556
60043	2,648
60044	9,683
60045	20,516
60046	34,859
60047	42,221
60048	29,284
60050	32,253
60051	24,787
60053	23,424
60056	55,617
60060	37,947
sub-total	927,378

ZIP Code	Population
60061	26,144
60062	40,211
60064	15,898
60067	38,303
60068	37,511
60069	8,301
60070	16,033
60071	3,482
60072	881
60073	60,970
60074	39,010
60076	32,764
60077	27,822
60081	9,963
60082	no info
60083	10,382
60084	15,867
60085	71,112
60087	26,374
60088	13,417
60089	41,584
60090	37,912
60091	27,345
60093	19,385
60096	6,910
60099	31,717
60101	39,709
60102	32,670
60103	42,426
60104	19,081
60106	20,150
60107	41,155
60108	23,105
60110	39,204
60118	15,442
60120	50,154
60123	49,054
60124	20,447
60126	46,823
60130	14,202
60131	18,103
60133	38,377
60136	7,276
sub-total	1,176,676

ZIP Code	Population
60137	38,418
60139	35,000
60140	14,509
60141	157
60142	27,077
60143	10,198
60148	52,833
60153	24,157
60154	16,839
60155	7,947
60156	28,842
60157	2,020
60160	25,590
60162	8,139
60163	5,219
60164	22,287
60165	4,959
60169	34,154
60171	10,305
60172	24,695
60173	12,108
60176	11,842
60177	22,810
60181	28,898
60184	2,424
60185	36,259
60187	28,544
60188	42,614
60190	10,614
60191	14,389
60192	16,637
60193	40,210
60194	19,596
60195	4,294
60201	42,722
60202	32,560
60203	4,460
60208	no info
60301	2,174
60302	32,137
60304	17,677
60305	11,211
60402	64,256
sub-total	891,781

ZIP Code	Population
60415	14,358
60439	23,209
60455	16,560
60457	14,117
60458	14,437
60464	9,512
60465	17,610
60480	5,190
60482	11,040
60501	11,971
60513	19,039
60514	10,187
60515	28,811
60516	27,565
60517	32,533
60521	17,678
60523	9,916
60525	31,675
60526	13,613
60527	28,372
60532	27,235
60534	10,650
60546	15,959
60555	13,533
60558	13,066
60559	24,752
60561	23,155
60563	36,554
60601	10,894
60602	1,429
60603	1,002
60604	419
60605	25,938
60606	2,840
60607	25,927
60608	78,952
60609	62,405
60610	38,482
60612	35,598
60613	49,292
60614	68,573
60615	41,141
60616	49,914
sub-total	1,015,103

ZIP Code	Population
60618	96,230
60619	64,245
60620	71,907
60621	32,619
60622	54,607
60623	87,836
60624	39,706
60625	78,586
60626	49,237
60630	56,978
60631	27,995
60632	91,357
60634	73,119
60636	40,164
60637	48,851
60638	56,812
60639	92,339
60640	64,599
60641	72,460
60644	49,615
60645	46,290
60646	28,367
60647	87,339
60651	60,938
60653	31,038
60654	16,244
60656	28,895
60657	69,444
60659	38,788
60660	41,380
60661	8,838
60666	no info
60706	23,259
60707	42,958
60712	12,653
60714	30,091
60804	84,481
sub-total	1,900,265
TOTAL	**5,911,203**

Sources:

Microsoft MapPoint 2009

American Fact Finder, United States Census Bureau (www.factfinder.census.gov)

Northbrook Behavioral Hospital
Hospital/Physician Referral Letters

Facility Name	Signed by:	historical 1 yr		projected 24 months		projected monthly	
		min	max	min	max	min	max
Abbott House	Ivy Fishman	24.00	24.00	50.00	50.00	2.08	2.08
Associates in Behavioral Science	Alfa Murphy	468.00	468.00	840.00	840.00	35.00	35.00
Behavioral Health Care Associates	Blaise J Wolfrum, MD, FAPA	400.00	400.00	400.00	400.00	16.67	16.67
Brightside Clinic	Kenji Oyasu MD	60.00	72.00	60.00	72.00	2.50	3.00
Brookdale Northbrook Senior Living	Tina Cooper	14.00	14.00	24	28	1.00	1.17
Chicago Behavioral Hospital	Anthony DeJoseph, PsyD	672.00	672.00	1152.00	1200.00	48.00	50.00
counseling speaks	Kasia Wereszczynska, MA, LCPC, RYT	Does not track		720.00	960.00	30.00	40.00
David Bawden MD	David Bawden MD	30.00	30.00	60.00	60.00	2.50	2.50
Eugene Kwon, MD,	Eugene Kwon, MD	104.00	156.00	120.00	120.00	5.00	5.00
Harbor House	Savannah Alderink	3.00	3.00	24.00	24.00	1.00	1.00
Mark D Parisi, PsyD & Associates	Mark D Parisi, PsyD	36.00	36.00	72.00	72.00	3.00	3.00
Maryville Academy	Edgar Ramos, PsyD	150.00	150.00	240.00	360.00	10	15
Mathers Clinic	Renee Shopp RN, CADC	Does not track		840.00	840.00	35.00	35.00
Meier Clinics	Nancy Meier Brown	66.00	66.00	122.00	122.00	5.08	5.08
Mental Health Solutions	Bright Fellowes, PsyD	50.00	50.00	100.00	100.00	4.17	4.17
Mental Health Solutions	Ashley Pasen Shields						
Mind Care Clinic	Sayed Rahim MD ABPN	Does not track		480.00	480.00	20.00	20.00
North Shore Psychology Specialists, PC	Dr Anne H Levin, Psy D	Does not track		72.00	144.00	3	6
The Josselyn Center	Susan Eckstein, LCSW	10.00	10.00	24.00	48.00	1	2
Thodur Ranganathan, MD	Thodur Ranganathan, MD	2280.00	2280.00	1680.00	1920.00	70.00	80.00
XGH Consultation & Treatment, Inc.	Jill Hollederer MA, BCBA	4.00	4.00	24.00	24.00	1.00	1.00
Rosewood Care Center of Northbrook	Amy Saltzman	4.00	4.00	1	2		
		4375.00	4439.0	7105.0	7866.0	296.0	327.7
						3552.0	3932.4

ATTACHMENT-12F

February 8, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am the CEO of Chicago Behavioral Hospital in Des Plaines, Illinois and I am writing this letter in support of US HealthVest's Certificate of Need application for a behavioral hospital in Northbrook. US HealthVest acquired Chicago Behavioral Hospital ("CBH") on November 3, 2014 from Maryville Academy. Due to renovations that were in process prior to the acquisition, only 78 of the 125 licensed beds were available for use. We expanded services to adults and senior adults and grew from a census in the single digits at the time of the acquisition to full capacity (80%+) in under a year.

In 2015, we deflected 672 patients referred to our hospital in 2015 because we did not have a bed available. While we it is difficult to track where these deflected patients have gone for care, we understand that many have either gone without care or have experienced significant wait times and have had to travel great distances for care. Professional referral sources often verbalize having difficulty with placement because "everyone is full". It has not been unusual for them to note that they have had significant delays finding alternate beds for patients because other hospitals in the area run full. In 2016, we gained access to our newly renovated units and once again see rapid bed occupancy.

Of the 672 deflected patients, 111 patients were from planning areas A-08 and A-09 or zip codes 60016, 60026, 60010, 60030, 60035, 60045, 60046, 60048, 60061, 60085, 60076, 60202 and 60645.

The distribution of beds clearly slights the northern suburbs. Having a relationship with over 50 emergency departments, we know from nurses, crisis workers and physicians in these settings that patients have had to wait long periods in emergency rooms in order to access care. This is something that common and routine problem in many parts of Illinois.

Today, area hospitals that are within a 45 minute drive from CBH and similarly to the Northbrook project, continue to send a significant number of referrals due to their own psychiatric units being full, not treating particular types of patients or not having inpatient psychiatric care. In looking at data from the last ten months since starting adult services, some examples of the numbers of these referrals come from: Evanston Northshore Hospital (52), Advocate Good Shepherd (91), Northwest Community (92), Linden Oaks (82), Community First Hospital (60), Condell Medical Center (32), Northwestern Medicine Central DuPage Hospital (52), Alexian Brothers Behavioral Health Hospital (39), Advocate Lutheran General (115) and Palos Community Hospital (44). The total of referrals coming from hospitals only within 45 minutes travel has been 1,099 for this past ten month period.

MENTAL HEALTH & CHEMICAL DEPENDENCY SERVICES
555 WILSON LANE • DES PLAINES, ILLINOIS 60016
P: 847-768-5430 • F: 847-768-5478
WWW.CHICAGOBH.COM

ATTACHMENT-12F

CBH
CHICAGO
BEHAVIORAL HOSPITAL

Our occupancy at CBH has grown to 87%, 86%, 84%, and 81% in September, October, November and December of 2015 respectively, without the aforementioned plans to increase marketing, and we expect even greater growth this spring. Chicago Behavioral Hospital would also need to deflect patients to a Northbrook Hospital. Our growth projections conservatively reach 84% in April and 90% in May of 2016. We expect our growth trajectory to continue beyond our 125 beds at CBH by the mid 2016 and that we will again have the dilemma of deflecting patients due to bed availability. This would be well before the Northbrook facility could conceivably be opened.

With all of the deflections, marketing efforts, new lines of service development and practices that we are attracting, we are projecting significant referrals to Northbrook Behavioral Hospital from CBH. We believe with our experience of 15% deflections from the Northbrook catchment area Zip Codes, as well as our deflections from other underserved geographies, that CBH alone will refer a total of 48-50 patients per month to Northbrook which will be from 576 to 600 annually. We do not see this need reducing and believe it will be very consistent throughout the years to come.

The information I've included here has not been used to support any other pending or approved CON application for a behavioral health hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services in the north suburban areas of Illinois.

Sincerely,

Anthony DeJoseph

Anthony DeJoseph, Psy.D.
CEO
Chicago Behavioral Hospital

Subscribed and sworn before me this 18th day of February 2016

Joanne M Rossman

OFFICIAL SEAL
JOANNE M ROSSMAN
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:10/15/17

MENTAL HEALTH & CHEMICAL DEPENDENCY
555 WILSON LANE • DES PLAINES, ILLINOIS 60016
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ATTACHMENT-12F

Abbott House

personal attention in a homelike setting

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, IL 62761

RE: US Health Vest's Certificate of Need Application for a behavioral hospital in Northbrook.

Dear Ms. Avery,

I am writing this letter in support of US Health Vest's Certificate of Need application for a behavioral hospital in Northbrook.

As a mental health professional, administrator of Abbott House Nursing Home, LLC, located in Highland Park, my consumers have experienced frequent delays in accessing local inpatient psychiatric care mainly due to bed shortages for mental health patients. There have also been many occasions when local hospitals have returned patients, our consumers, who were actively psychotic and suicidal to our facility without treatment.

Over the last year our facility has referred 24 consumers for inpatient behavioral healthcare to Chicagoland hospitals. We have not been able to refer consumers to a local hospital for inpatient behavioral healthcare as there is not a facility near the 60035 zip code which accepts psychiatric inpatient behavioral healthcare. Our facility estimates that the number of consumers that would be referred for inpatient behavioral healthcare would be at least 50 consumers in a 24 month period.

The information I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US Health Vest's application for Northbrook Behavioral Hospital. Approval of US Health Vest's application will increase access to these much needed and important services.

Sincerely,

Ivy K Fish

Ivy Fishman
Administrator
Abbott House Nursing Home, LLC

OFFICIAL SEAL
B GHASWALA
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:07/09/16

B Ghaswala
1/29/16

847.432.6080 847.432.3255

www.abbotthousenursing.com

ATTACHMENT-12G

Associates in Behavioral Science
ABS
Since 1989

Quality Behavioral Healthcare
6201 W. Cermak Road, Berwyn, IL 60402 · (ph.) 708.788.8808 (fax) 708.788.8549

January 15, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a large interdisciplinary psychiatric practice that works across five hospitals in the Chicago area, we have found that there is very poor access to psychiatric care in the northern suburbs very near Northbrook, and a project of this nature would be quite helpful for accessibility, and in solving the bed shortage in the northern area of Illinois. Patients from this area often have to wait to access care, and quite frankly it's really not available in Northbrook and its surrounding suburbs. Patients characteristically have to be taken out of that area, either down into Chicago or into the far western suburbs for care. There is simply no options available, and we know this because we receive referrals from this area that we are forced to hospitalize very far from our North suburban referral sources.

We hospitalize well over 2000 patients per year, and the fairly significant portion of them come from the north suburban area of which Northbrook is a part. Zip codes for this total are from across the state and too numerous to list. However, with regard to the number of patients that we've had to hospitalize away from their home from that area, whom would be better served in a hospital in Northbrook, we have had approximately 468 admissions from Zip Codes 60089, 60714, 60202, 60076 and 60026. To put this in perspective, we have had to take patients from these ZIP Codes, all of which either border or are surrounding Northbrook, and treat them as far as 30-35 miles away. It would make more sense to treat people near their own community.

Accordingly, we would estimate being able to refer the majority of those 468 patients at the Northbrook Behavioral Hospital, and given that it is not likely that 100% (39) of this group would end up there, we would approximate some 35 of these patients to be hospitalized at the site per month.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these geographically and gravely needed services.

Sincerely,

Alfa Murphy
Practice Manager
ABS

Signed before me this 15th day of January, 2016 in Cook County

OFFICIAL SEAL
JOANNE M ROSSMAN
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:10/15/17

Joanne M Rossman

ATTACHMENT-12G

Behavioral Health Care Associates

1375 E. Schaumburg Rd, Suite 260
Schaumburg, IL 60194

484 N. Lee Street
Des Plaines, IL 60016

Phone (847) 895-4540 Fax (847) 895-4544 Ans. Service (847) 758-2892

Schaumburg Des Plaines Chicago Park Ridge Hoffman Estates Elk Grove Village

January 20, 2016

Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook, Illinois.

I am a psychiatrist in practice on the northwest side of Chicago and suburbs for the past two decades over which time I have seen several psychiatric facilities close their doors leading to patients having to wait longer at a general medical facility for transfer or being turned away at the admissions office due to lack of beds. My patients now experience this delay on a routine basis. The area is now in short supply and we could use an additional facility managed by US Health Vest who has many decades of experience in psychiatric hospital facility construction and development of quality programs.

Our group practice has referred over 400 patients for inpatient admission and over 600 for partial hospitalization in the past year from our practice locations in zip codes 60631, 60194 and 60016. We estimate that this number will increase to 500 inpatients in 2016 and that once the new hospital is open in Northbrook about two hundred of these in need patients would benefit from an admission to this new state of the art facility for mental health and substance abuse care. These patients live primarily in the following zip code areas. 60015, 16, 22, 25, 26, 29,56, 62, 70, 90, 91, 93, 02, 10, 11, 15, 20 30, 35, 37, 40, 41, 42, 43, 44, 45, 46, 47, 48, 53, 60, 61, 64, 69, 73, 75, 76, 77, 79, 83, 84, 85, 86, 87, 88, 89, 91, 93, 96, 99, 60201, 02, 03, 04 ,08, 09, 60626, 45, 59 60712, 14.

The above information has not been used to support any other facilities pending or approved CON application.

Please register my support for the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will improve the quality of care and increase access to these necessary services.

"OFFICIAL SEAL"
LISA N. KANE
Notary Public, State of Illinois
My Commission Expires 09-14-2019

Sincerely,

Blaise J. Wolfrum, MD, FAPA
Sworn to and subscribed before me this 21 day of January, 2016, county of Cook.
State of Illinois

BRIGHTSIDE

January 21, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a emergency room physician on staff at multiple sites in the Chicago metro area, my patients have experienced frequent delays in accessing inpatient psychiatric care mainly due to bed shortages. There have been many times patients have had to wait to access care. Not uncommonly patients wait over 24 hrs further congesting the emergency room for other medical emergencies.

In addition to my emergency medicine practice I have opened an out patient Opiate Addiction Treatment clinic in Northbrook Ill. (333 Skokie Blvd Suite 112 Northbrook Il 60062). Many, if not all of my patients suffer from dual diagnosis situations depression or anxiety in conjunction with substance abuse. We have had to refer a minimum of 5-6 patients per month outside of the local area for inpatient stabilization prior to outpatient treatment. (Zip codes not available as our system does not track them) Given the recent climate in addiction and its comorbid psychiatric illnesses we expect that this metric will continue. As our clinic continues to grow this number will increase.

A new facility will provide a necessary resources and help keep the patients closer to their families. Mental health patients in the northern Chicago suburbs and its surrounding communities will greatly benefit form a new facility.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

Sincerely,

Kenji Oyasu

Kenji Oyasu MD
Chicago Area Emergency Physician
Executive Medical Director
BRIGHTSIDE Clinic
333 Skokie Blvd., Suite 112
Northbrook, IL 60062
224-205-7866 o 847-341-9907 c
http://www.brightsideclinic.com

Signed by Kenji Oyasu
on this 22nd day of January
2016

Joanne M Rossman

OFFICIAL SEAL
JOANNE M ROSSMAN
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:10/15

ATTACHMENT-12G

BROOKDALE
NORTHBROOK
SENIOR LIVING SOLUTIONS
ALL THE PLACES LIFE CAN GO™

January 27, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a healthcare provider at Brookdale Northbrook Senior Living located in Northbrook IL, our patients have experienced frequent delays in accessing inpatient psychiatric care mainly due to bed shortages. There have been many times patients have had to wait to access care, or have been sent many miles away for an available bed.

Over the past year we have had 14 patients all from this facility, area code 60062, that were in need of Behaviorial Health Services and they have had to go as far away as Oak Lawn and Elk Grove Village for the needed care. This is very stressful for both patients and families and takes the patients away from their healthcare network here in Northbrook, which does not provide good continuity of care.

We estimate that we would consistently have 12 to 14 patients that we would be referring to Northbrook Behavioral Health annually and more if availability is closer to their home.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

Sincerely,

Tina Cooper

Tina Cooper
Director of Resident Services
Brookdale Northbrook Senior Living

1/27/2016

OFFICIAL SEAL
EGBERT V. ASHLEY
Notary Public - State of Illinois
My Commission Expires Apr 07, 2016

4501 Concord Lane · Northbrook, IL 60062
Telephone (847) 803-7100 · Fax (847) 803-7101
brookdale.com

ATTACHMENT-12G

counselingspeaks
1580 N Northwest # 305D
Park Ridge, IL 60068
(331) 240-0044
counselingspeaks@gmail.com
www.counselingspeaks.com

January 26, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a mental health professional at counseling speaks, LLC located in Park Ridge, my patients have experienced frequent delays in accessing inpatient psychiatric care mainly due to bed shortages. There have been many times patients have had to wait to access care.

counseling speaks, LLC estimates referring a number in the area of 30-40 patients to Northbrook Behavioral Hospital on a monthly basis for hospitalization and would expect to continue to refer this over a 24-month period. This could be for an evaluation, referrals or admission for mental health or addiction care. I do not track my patients by zip code, but the fact that many of them come from suburbs north of our office places them in the service area of the proposed Northbrook Behavioral Hospital.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

Sincerely,

Kasia Wereszczynska, MA, LCPC, RYT
Clinical Therapist
counseling speaks, LLC

Signed before me this 26th day of January 2016 in Cook County, IL
Joanne M Rossman

OFFICIAL SEAL
JOANNE M ROSSMAN
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:10/15/17

DAVID GEORGE BAWDEN, M.D.
4711 Golf Road
Suite 1200
Skokie, Illinois 60076-1200
847-446-7911

January18 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a psychiatrist at Chicago Behavioral hospital located in Des Plains and Lutheran General Hospital located in Park Ridge, my patients have experienced frequent delays in accessing inpatient psychiatric care mainly due to bed shortages. There have been many times patients have had to wait to access care.

Over the past year I have referred approximately 30 inpatients from zip codes 60714, 60047, 61107 & 60062 for inpatient evaluation. I would expect a similar or larger volume equaling about 3 to 4 per month and approximately 60 in 24 months. These could be for an evaluation or admission for mental health or addiction care.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

Sincerely,

David Bawden, M.D.

Signed before me this 18th day of January.
2016 in Cook County, Illinois

OFFICIAL SEAL
JOANNE M ROSSMAN
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:10/15/17

Joanne M Rossman

ATTACHMENT-12G

Maryville Academy

1150 North River Road
Des Plaines, IL 60016
(847) 294-1999

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a clinical psychologist and supervisor at Maryville Academy in Des Plaines, which is very close to the proposed location in Northbrook, my patients have not only experienced delays in accessing inpatient psychiatric care due to bed shortages, but have often had to be sent all across the state, far from their home because of this. We clearly need more beds in this north suburban area which Northbrook is a part of, and accessibility there would make far more sense than what we have to work with at present. We have many problems and delays in accessing care because of a lack of an adequate number of beds in this area.

We have sent over 150 children for hospitalization in the past year spread across numerous hospitals and would prefer to be able to keep them closer to Maryville than has been possible. They are all from the 60016 zip code, as we are residential.

I would estimate that we would send between 10-15 referrals monthly for inpatient psychiatric care at a facility in Northbrook whenever we have access to it. Our referrals are consistent and steady in number year after year, due to the nature of our organization.

The information that I have included here has not been used to support any other pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase the access to these important services that we so desperately need in the northern suburbs surrounding Northbrook...

Sincerely,

Edgar Ramos, Psy.D.
Licensed Psychologist
Maryville Academy

Notarized this 18th of January 2016 before me

Joanne M Rossman

OFFICIAL SEAL
JOANNE M ROSSMAN
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:10/15/17

ATTACHMENT-12G

HARBOR HOUSE

January 26, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a Dementia Care Facility at Harbor House located in Wheeling, my patients have experienced frequent delays in accessing inpatient psychiatric care mainly due to bed shortages. There have been many times patients have had to wait to access care.

Over the last year we have had three referrals for behavioral healthcare from our facility in 60090 to local hospitals. We may refer one patient a month, twelve a year, to Northbrook Behavioral Hospital for evaluation, referrals or admission for mental health care.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

Sincerely,

Savannah Alderink
Executive Director

Harbor House
Dementia Care Facility
760 McHenry Road
Wheeling, IL 60090

To Be Completed by a Notary Republic

I, Amy Bable, attest that this letter was signed by the afore mentioned party on this 26th day of January, 2016.

Signature of Notary Republic

AMY BABLE
OFFICIAL SEAL
Notary Public, State of Illinois
My Commission Expires
September 25, 2019

MARK D. PARISI, PSY.D. & ASSOCIATES, P.C.
Serving the Behavioral Healthcare Needs of Metro Chicago Since 2000

January 19, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a Clinical Psychologist and Administrator / Owner of two large group private practices headquartered in Mount Prospect with satellite offices near Evanston, Illinois, my patients have experienced frequent delays in accessing inpatient psychiatric care mainly due to bed shortages. There have been many times patients have had to wait to access care.

In the past year, we have had occasion to refer, on average, about three clients per month for inpatient or intensive outpatient-based treatment – the type of services that will be offered by Northbrook Behavioral Hospital. While we do not track client zip codes for these referrals, I can tell you that there are few, if any, options for this type of treatment near my office in Chicago located in zip code 60646. My clients often must travel to Chicago Behavioral Hospital in Des Plaines, Alexian Brothers' Behavioral Hospital in Hoffman Estates, or Northwest Community Hospital in Arlington Heights – none of which are especially close to my office. I would expect to channel a majority of these referrals – perhaps as many as 72 over a twenty-four month period – to Northbrook Behavioral Hospital and would expect on-going utilization of their services if they are allowed to build this much-needed behavioral health hospital.

The information included in this Certificate of Need letter has not been included in support of any other pending or approved application for a behavioral healthcare hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

800 E. Northwest Highway, Suite 106, Mount Prospect, Illinois 60056
Tel. (847) 909-9858 / Fax. (847) 299-4952

Very Truly Yours,

Mark D Parisi, Psy.D.

MARK D. PARISI, PSY.D.
Licensed Clinical Psychologist 071-005598
Administrator / Owner

NOTARY PUBLIC ATTESTATION

State of Illinois County of Cook

By signature and seal below, I attest to the authenticity of this Certificate of Need letter composed by the above individual.

Lisa N Kane

(signature of Duly Licensed Notary Public)

LISA N Kane

(printed name of Notary Public)

"OFFICIAL SEAL"
LISA N. KANE
Notary Public, State of Illinois
My Commission Expires 09-14-2019

SEAL OF NOTARY PUBLIC

State of Illinois, County of Cook
Signed and attested before me on 1/26/16
by Mark D. Parisi

800 E. Northwest Highway, Suite 106, Mount Prospect, Illinois 60056
Tel. (847) 909-9858 / Fax. (847) 299-4952

January 27, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

Mathers Clinic is a mental health and substance abuse practice in Rockford, Woodstock, Crystal Lake and Elgin. We also provide psychiatric services to 14 Assisted Living/Nursing Homes. Our patients have experienced ongoing delays in accessing inpatient psychiatric care mainly due to bed shortages. There have been multiple times when patients have to wait to access care.

We do not have a report that tracks inpatient referrals or zip codes of inpatients. We do have a list of patient zip codes that would benefit from the new location in Northbrook. Our patients come from Northbrook 60062, Prospect Heights 60070, Wheeling 60090, Barrington Hills 60010 and 60011, Fox Lake 60020, Grayslake 60030, Garnee 60031, Highland Park 60035, Ingleside 60041, Island Lake 60042, Lake Bluff 60044, Kildeer 60047, Libertyville 60048, Mundelein 60060, Vernon Hills 60061, North Chicago 60064, Round Lake 60073, Waukegan 60079, Buffalo Grove 60089, Zion 60099, and Niles 60714.

As a provider we estimate an average of 35 patients would be referred on a monthly basis to Northbrook Behavioral Hospital and would expect to refer over a 24-month period. This could be for an evaluation, referrals or admission for mental health or addiction care.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

Sincerely,

Subscribed & Sworn to
Before me this 27th day
of Jan, 2016.

Notary Public

OFFICIAL SEAL
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES

Renee Shopp RN, CADC
Practice Manager
Mathers Clinic

MATHERS CLINIC
The Center for Counseling Services

Crystal Lake: 145 South Virginia Street, Suite C ~ Crystal Lake, IL 60014 Fax: 815.356.6680 www.themathersclinic.com
Rockford: 6090 Strathmoor Drive, Suite 1 ~ Rockford, IL 61107 Fax: 815.397.2712
Woodstock: 715 West Judd Street ~ Woodstock, IL 60098 Fax: 815.338.7728 815.444.9999
Elgin: 585 North Tollgate Road, Suite E ~ Elgin, IL 60123 Fax: 847.628.6064
www.elginmethadoneclinic.com 847.462.6099

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One of the most trusted names in Christian Counseling

January 22, 2016

Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US Healthvest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery:

I am writing this letter in support of US HealthVest's Certficate of Need application for a behavioral hospital in Northbrook.

Meier Clinics provide mental health services in eleven states, including locations in Illinois in Northbrook, Wheaton, Chicago and Geneva. It is not unusual for our patients to experience frequent delays in accessing inpatient psychiatric care, often due to bed shortages or lack of services.

I solicited feedback from the following clinical staff regarding inpatient referrals:

Gary A. Casaccio, M.D., Illinois Medical Director
Steve Lee, M.D., Director of Breakaway
Kim Lurvey, LCSW, Northbrook Clinic Director
Christine Zielinski, LCSW, National Intake Coordinator

They reported that they have referred approximately 66 people to inpatient care over the past 12 months. This is not reflective of the total number we have referred as we have over 50 clinical staff in Illinois, so the above is a very conservative figure. The estimated number of potential referrals over a 24-month period after the project is completed would conservatively be 122 people.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US Health Vest's application will increase access to much needed services.

Sincerely,

Nancy Meier Brown

Nancy Meier Brown
President
Meier Clinics

State of Illinois County of DuPage

This instrument was acknowledged before me on Jan. 22, 2016 by Nancy Meier Brown.

SANDRA K. NEWPORT
OFFICIAL SEAL
Notary Public - State of Illinois
My Commission Expires
September 17, 2017

Signature of Notary Public: Sandra K. Newport

mhs
MENTAL HEALTH SOLUTIONS

Bright Fellowes, PsyD
Mental Health Solutions
PO Box 684
Mundelein, IL 60060

Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest Certificate of Need Application, Northbrook Behavioral Hospital

January 26, 2016

Dear Ms. Avery,

This letter comes to you in support of US Healthvest's Certificate of Need application for the inpatient behavioral healthcare facility they have proposed building in Northbrook, IL.

As a Licensed Clinical Psychologist and President of a multidisciplinary private, group, behavioral healthcare practice with offices throughout the northern suburbs of Chicago, I can attest to the shortage of nearby facilities offering immediate inpatient care to area residents, specifically in Lake County and Cook County. We find that many current and potential clients are unable to find open beds at nearby inpatient psychiatric and behavioral health facilities and are forced to wait on prohibitively long wait lists for treatment, or else travel great distances to find openings at out-of-state facilities. Others are simply unable to obtain necessary treatment.

I would estimate that as a practice, Mental Health Solutions' providers have referred upwards of fifty clients within the last year to local hospitals and inpatient facilities. These clients are residents of ZIP codes ranging as far south as Chicago and as far north as the Wisconsin boarder, reaching from Norshore suburbs such as Northbrook as far west as Rockford, IL.

I would anticipate that an increase in the availability of inpatient mental healthcare in the area would positively impact my own practice's ability to meet the needs of a growing number of clients, such that over the first twenty four months following its opening, we might refer in excess of one hundred clients (about five clients per month, on average) for evaluation and/or admission.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's behavioral hospital, and I thank you for your assistance in providing access to care to the residents of your area.

Sincerely,

, PsyD

Bright Fellowes, PsyD
Mental Health Solutions, President and Licensed Clinical Psychologist

Signed On: this 26th day of Jan, 2016 before me June R Emrich

Signature

OFFICIAL SEAL
JUNE R EMRICH
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:04/13/18

Barrington Courte
101 Lions Drive
Suite 115
Barrington, IL
60010

201 E. Park Street
Unit B
Mundelein, IL
60060

Phone: (847) 566 – 0164

Fax: (847) 566 – 0375

www.MHShelps.com

ATTACHMENT-12G

mhs
MENTAL HEALTH SOLUTIONS

Ashley Pasen Shields
Mental Health Solutions
PO Box 684
Mundelein, IL 60060

Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest Certificate of Need Application, Northbrook Behavioral Hospital

January 26, 2016

Dear Ms. Avery,

I'm writing you today to support US Healthvest's Certificate of Need application for the inpatient behavioral healthcare facility they have proposed building in Northbrook, IL.

As the Director of a multidisciplinary private, group, behavioral healthcare practice with offices throughout the northern suburbs of Chicago, I can attest to the shortage of nearby facilities offering immediate inpatient care to area residents, specifically in Lake County and Cook County. We find that many current and potential clients are unable to find open beds at nearby inpatient psychiatric and behavioral health facilities and are forced to wait on prohibitively long wait lists for treatment, or else travel great distances to find openings at out-of-state facilities. Others are simply unable to obtain necessary treatment.

Based on the calculationsof myself and my partner Dr. Bright Fellowes, Licensed Clinical Psychologist and President of Mental Health Solutions, we estimate that our team of behavioral health professionals have referred upwards of fifty clients within the last year to local hospitals and inpatient facilities. These clients are residents of ZIP codes ranging as far south as Chicago and as far north as the Wisconsin boarder, reaching from Norshore suburbs such as Northbrook as far west as Rockford, IL.

I believe that an increase in the availability of inpatient mental healthcare in the area would positively impact my own practice's ability to meet the needs of a growing number of clients, such that over the first twenty four months following its opening, we might refer in excess of one hundred clients (about five clients per month, on average) for evaluation and/or admission to the proposed facility.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's behavioral hospital, and I thank you for your assistance to the residents of your area by providing access to care.

Sincerely,
Ashley Pasen Shields
Ashley Pasen Shields, Director
Mental Health Solutions

Signed On: 1/26/2016 before me B. Paio

Signature

B. Paio
NOTARY PUBLIC
Comm. No. 06-361
STATE OF HAWAII

Barrington Courte
101 Lions Drive
Suite 115
Barrington, IL
60010

201 E. Park Street
Unit B
Mundelein, IL
60060

Phone: (847) 566 – 0164

Fax: (847) 566 – 0375

www.MHShelps.com

NOTARY PUBLIC CERTIFICATION

Document Date: 1/26/2016 **# pgs :** 1
Notary Name: B Paio **First Circuit**
Doc. Description: US HealthVest Certificate of Need Application, Northbrook Behavioral Hospital

Notary Signature — Date: 1/26/2016

B. PAIO
NOTARY PUBLIC
Comm. No. 06-361
STATE OF HAWAII

B. Paio
My Commission Expires: June 18, 2018

ATTACHMENT-12G

MIND CARE CLINIC
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January 25, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a psychiatrist at Lincolwood Medical Center located in Lincolnwood-IL, my patients have experienced frequent delays in accessing inpatient psychiatric care mainly due to bed shortages. There have been many times patients have had to wait to access care.

1) We expect about 20 of referrals for behavioral healthcare from the various zip codes of the northern Cook county including the city of Chicago of Chicago and the northern suburbs where most of my patients reside in those zip codes.
2) An estimated number of 20 patients may be refer to Northbrook Behavioral Hospital on a monthly basis and would expect to continue to refer over a 24-month period. This could be for an evaluation, referrals or admission for mental health or addiction care.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

Sincerely,

Syed Rahim, MD, ABPN
Board Certified Psychiatrist
Mind Care Clinic,
Lincolnwood Medical Center

"OFFICIAL SEAL"
LISA N. KANE
Notary Public, State of Illinois
My Commission Expires 09-14-2019

State of Illinois, County of Cook
Signed and attested before me on 1/26/16
by Syed A Rahim
Lisa N Kane

Lincolnwood Medical Center, 6501 N. Lincoln Avenue, , Lincolnwood, IL 60712 • Tel: 847.242.1001 Ext. 6463 (MIND) • Fax: 847.739.7275

North Shore Psychology Specialists PC

ANNE HACHMEISTER LEVIN, Psy.D.
7798 Dada Dr.
Gurnee, Illinois 60031
Phone: 847 355 5041
FAX: 847 948-5262
E-mail: AHLPSYDOC@ sbcglobal.net

January 28 , 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 W. Jefferson St.
Springfield, Illinois 62761

RE; US Health Vest's Certificate of Need Applications for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of need for a behavioral hospital in Northbrook, Illinois.

As a Clinical Psychologist at Brookdale Northbrook, in Northbrook, Illinois, my patients have experienced frequent delays in accessing inpatient psychiatric care mainly due to bed shortages. There have been a number of instances when patients have had to wait an unreasonable time to access care.

Recently I have had three patients, all residing in the zip code 60092, who experienced significant delays in receiving inpatient psychiatric care due to a significant lack of psychiatric beds in the area. As a result one patient was sent to Oak Lawn, Illinois, effectively causing her to be prevented from receiving out patient follow-up. The long term consequences of her inability to secure follow up care have been quite detrimental

I anticipate, based upon recent history, that three to six patients per month would be referred by me for either admission, medication management/ evaluation. In this area there is a notable shortage of psychiatrists willing to treat residents in long term care facilites, and as a consequence having reasonable proximity to a behavioral health hospital is critical for this population.

My practice focuses on providing psychotherapy, evaluation and consultation to Senior Living facilities in the Chicago NorthShore suburbs.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital

I urge you to support the approval of US Health Vest's application for Northbrook Behavioral Hospital Approval of US HealthVest's application to increase access to these critical services.

Very truly yours,

Dr. Anne H. Levin , Psy D.
Licensed Clinical Psychologist

Sword to me this 28th day
of January, 2016

OFFICIAL SEAL
EGBERT V. ASHLEY
Notary Public - State of Illinois
My Commission Expires Apr 07, 2016

THE JOSSELYN CENTER
Excellence in Community Behavioral Health

405 Central Avenue
Northfield, IL 60093
847/441-5600
Fax 847/441-7968
www.josselyn.org

Susan B. Resko, M.B.A.
President

January 26, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a Licensed Clinical Social Worker, and Program Director of Clinical Services at The Josselyn Center located at 405 Central Avenue, in Northfield, Illinois our patients have often experienced delays in accessing inpatient psychiatric care while being assessed in a hospital emergency room, mainly due to bed shortages that accept Medicaid clients.

We provide outpatient mental health care to clients from 60 communities. We have referred approximately 10 clients for emergency room assessments in the past year. Client zip codes are not available because our system does not track them.

We as a provider may refer one client per month to the Northbrook Behavioral Hospital, and could expect to continue to refer two a month over a 24-month period; this would be for an evaluation, referral or admission for mental health or addiction care.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

Sincerely,

Suzan Eckstein LCSW

Suzan Eckstein, LCSW
Program Director of Clinical Services
The Josselyn Center

OFFICIAL SEAL
DENISE M PAEZ
Notary Public - State of Illinois
My Commission Expires Feb 2, 2019

Denise M. Paez
1.26.2016

Thodur Ranganathan, M.D.
Adult Psychiatry
(773) 947-7500

January 22, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US HealthVest's Certificate of Need application for a behavioral hospital in Northbrook.

I am an independently practicing psychiatrist working in three different hospitals in Chicago and its suburbs. I am very aware of the need for more psychiatric hospital beds in the greater Chicagoland area and have experienced difficulty finding available beds, and delays for patients in emergency department settings in finding beds for them to be transferred to. Emergency departments in Illinois have seen a great rise in presentation of psychiatric patients but not a corresponding increase in availability of appropriate, accessible care. We need more beds in Illinois as well as a more appropriate distribution of them for better accessibility. For instance, I often treat patients in the west suburban hospital I am on staff at who have come from hours away due to having no care in their areas. The north suburban area seems to be one of those weaknesses, so I believe a hospital in Northbrook would be well received and utilized.

My partner and I hospitalize approximately 100 patients per month at one of our hospitals in the western suburbs and at least 90 at the other in the city. The third hospital does not have psychiatry but I perform all the consults there. We also maintain a very large base of patients from the northern suburbs where this project is proposed, because my partner had built a very large population of patients out of his Des Plaines office, when he was medical director of Forest Hospital; and we have maintained them. These patients come from Des Plaines, Glenview, Niles, Morton Grove, Wilmette, Evanston, Skokie, Mount Prospect and Highland Park to name a few. I am certain that these suburbs are in that catchment area even though I do not know the Zip Codes.

I not only will refer to Northbrook Behavioral Hospital but I have already discussed coming to practice there myself in caring for these patients; should this hospital open. I would easily estimate my referrals to this hospital will be between 70-80 per month on a permanent basis, as our volume remains highly consistent, year after year.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

Sincerely,

T Ranganathan

Thodur Ranganathan, M.D.
Psychiatrist

Signed before me this 22nd day of January 2016
Joanne M Rossman

OFFICIAL SEAL
JOANNE M ROSSMAN
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:10/15/17

7531 S. Stony Island, Chicago, IL. 60649

ATTACHMENT-12G

KGH
Consultation & Treatment, Inc.
Helping Kids Reach Their Potential
Educating Families Along The Way.
Pediatric Center

KGH
Consultation & Treatment, Inc
Teen & Young Adult Center

January 28, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a mental health professional at KGH Consultation & Treatment, Inc. located in Northbrook, IL my patients have experienced frequent delays in accessing inpatient psychiatric care mainly due to bed shortages. There have been many times patients have had to wait to access care.

Within the past year, KGH Consultation & Treatment, Inc. has referred 4 patients for behavioral healthcare. Patient zip codes are not available because our system does not track them.

KGH Consultation & Treatment, Inc. estimates that we could refer 1 patient to Northbrook Behavioral Hospital on a monthly basis and would expect to continue to refer over a 24-month period. This could be for an evaluation, referrals or admission for mental health care.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

Sincerely,

Jill Holleder M.A., BCBA
Clinical Director
KGH Consultation & Treatment, Inc.

State of Illinois, County of Cook
Signed and attested before me on 2/2/16
by Jill M. Holleder-er

"OFFICIAL SEAL"
LISA N. KANE
Notary Public, State of Illinois
My Commission Expires 09-14-2019

Lisa N Kane

January 19, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Ms. Avery:

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a psychiatrist at St. Francis Hospital located in Evanston, Illinois, my patients have experienced frequent delays in accessing inpatient psychiatric care mainly due to bed shortages. There have been many times patients have had to wait to access care.

My service refers about 2-3 patients per week for inpatient psychiatric treatment. Though I do not formally track the zip codes of my patients, the overwhelming majority of my patients reside in the normal catchment area for St. Francis Hospital which serves Evanston, Illinois and the neighboring communities. The ZIP code for the hospital is 60202.

I would anticipate referring about 5 patients per month to Northbrook Behavioral Hospital for a 24 month total of 120 patients.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

Sincerely,

Eugene Kwon, M.D.
Psychiatrist

SUSAN NEWTON
Official Seal
Notary Public - State of Illinois
My Commission Expires Jul 1, 2019

01/25/2016

ATTACHMENT-12G

rosewood
CARE CENTERS

February 4, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a Nursing Home Administrator at Rosewood Care Center of Northbrook , the residents have experienced frequent delays in accessing inpatient psychiatric care mainly due to bed shortages. There have been many times patients have had to wait to access care.

Over the last year, the number of referrals for behavioral healthcare from RCC-NOR was 4 and they were all from 60062 zip code.

An estimated number of patients that RCC-NOR may refer to Northbrook Behavioral Hospital on a monthly basis would be 1 and we would expect to continue to refer 1 to 2 patients over a 24 –month period.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

Sincerely,

Amy Saltzman
Administrator
Rosewood Care Center of Northbrook

State of Illinois, County of Lake
Signed and attested before me on 2-4-16
by Amy Ann Saltzman

OFFICIAL SEAL
ELENI BOTINIS
Notary Public - State of Illinois
My Commission Expires Apr 17, 2016

CRAIN'S CHICAGO BUSINESS. Print Story Printed from ChicagoBusiness.com

New fight over city mental health clinics

By Greg Hinz February 03, 2016

The city's largest employees union and Chicago aldermen today unveiled a plan they said would expand services at the city's remaining mental health clinics without costing city taxpayers money—potentially steering some troubled youth to treatment rather than street confrontations with police.

But the city says it won't work and, in fact, would be "counterproductive," according to Dr. Julie Morita, the city health commissioner.

Under the plan submitted by Ald. Jason Ervin and 20 colleagues, and backed by the American Federation of State, County and Municipal Employees, treatment options would be expanded in needy, often crime-plagued neighborhoods by expanding community outreach and hiring more staff at the city's six mental health clinics.

"The six mental health clinics have the capacity to serve many more clients," sponsors said in a written summary.

The plan would be funded by requiring the city's Department of Public Health to join three managed-care networks that reimburse mental health care, using the Medicaid program.

But according to Morita, the plan wouldn't pay its own costs, much less get the city new money.

Each psychiatric visit to a city clinic costs about $450, but Medicaid reimburses only $75, she said. And the federal system comes with so much red tape that the city's ability to get a better price from vendors would be harmed, leaving the city worse off than it is now.

AFSCME spokesman Anders Lindall termed that response "a red herring," since many of the medical personnel who would be used already are on the city payroll. But the group's own statement said the intent is to "treat more people."

Emanuel set off huge protests earlier in his tenure when **he closed six other mental health clinics** in a cost-cutting move. That storm never has quieted, and in fact has picked up recently with suggestions that some of those involved in police shootings were unable to get needed mental health treatment.

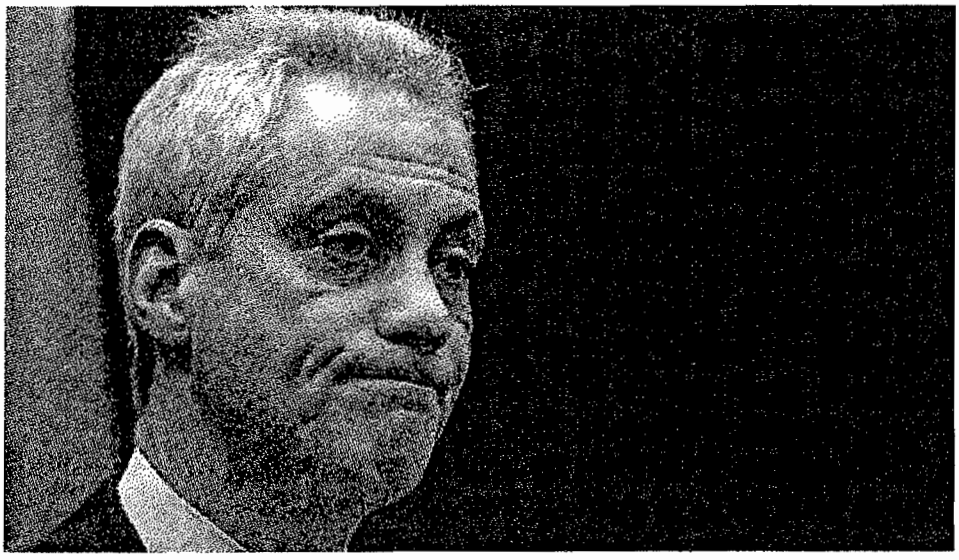
Lindall denied that AFSCME's intent in today's move is to reopen the clinics.

Ervin Mh Ordinance

ATTACHMENT-12H

News / Local news / Clout Street

Aldermen to Emanuel: Step up mental health services



Mayor Rahm Emanuel (Zbigniew Bzdak / Chicago Tribune)

By **Hal Dardick · Contact Reporter**
Chicago Tribune

FEBRUARY 3, 2016, 5:26 PM

A group of aldermen on Wednesday urged Mayor Rahm Emanuel to step up services for the mentally ill, saying many patients have fallen through the cracks since the administration closed half of the city's mental health clinics four years ago.

But the mayor's top public health official rejected the plan, saying the administration already is moving forward with its own changes.

The need for the additional services has been highlighted by the controversy surrounding recent police shootings, said Ald. Jason Ervin, 28th. He's the sponsor of an ordinance designed to beef up city mental health services, one that's backed by dozens of aldermen and the American Federation of State, County and Municipal Employees Council 31, the union for workers at the clinics.

"When we look at why we need to do this, it is very clear: The last set of incidents in our city, namely Laquan McDonald and the Quintonio LeGrier incident, were clearly issues where mental health was definitely the reason why these calls were made," Ervin said.

McDonald, a troubled 17-year-old, was carrying a small knife and had PCP in his system when Officer Jason Van Dyke shot him 16 times in October 2014. The disturbing police dashboard-camera video of the shooting death, released 13 months later at the order of a judge, showed the teen walking away from officers when Van Dyke opened fire.

As the controversy raged in December over the Emanuel administration's handling of the shooting, LeGrier, a troubled 19-year-old college student, was shot and killed by an officer responding to a call of domestic trouble at his father's home. Bystander Bettie Jones, a 55-year-old mother of five, also was accidentally shot and killed, police said.

"Our inappropriateness in handling those incidents have led and will lead to multimillion-dollar settlements on behalf of the taxpayers, which are definitely funds we could be using elsewhere to help our communities and better our city," Ervin said.

The West Side alderman's "Mental Health Safety Net" ordinance would require city mental health clinics to join three managed-care networks that fall under the umbrella of the federal Affordable Care Act. That would allow them to accept Medicaid-insured patients.

The group also wants the city's health department to hire more psychiatrists, ensure that the clinics provide adequate services and do a public mental health outreach campaign to let people know the services are available and to help remove the stigma of being treated for mental health problems.

Although he did not put a price tag on the additional services, Ervin said that between Medicaid reimbursements and federal grants, there would be no "direct cost to the city of Chicago."

But Dr. Julie Morita, commissioner of the Chicago Department of Public Health, said that Medicaid reimbursements fall $375 short of what the city spends for each clinic visit by a mental health patient. So the city would have to spend more.

The Emanuel administration plans to enter into contracts with managed-care networks. But it opposes Ervin's ordinance because it would set a six-month deadline on establishing those contracts, which "takes away our negotiation abilities, because if the insurance companies know we have to have a contract in place by a certain date, we can no longer negotiate terms for our patients," Morita said.

Morita added that the city has hired a consultant to "facilitate" getting contracts but could not commit to a timeline for completing them. She also said the city recently hired a second full-time

psychiatrist and is looking to hire four more but is having difficulty because of "a national shortage of psychiatrists."

As a result, the city is "reluctant" to do more outreach at this time, she added. "Until we have more permanent psychiatrists, we don't want to be too extensive in our outreach, because we don't want to overwhelm our system," she said.

Morita also suggested that people who have obtained insurance under the federal Affordable Care Act might want to look elsewhere for treatment because the city is mostly there to serve as a safety net for the uninsured.

"They can go elsewhere and get more comprehensive care," she said.

hdardick@tribpub.com

Twitter @ReporterHal

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A version of this article appeared in print on February 04, 2016, in the News section of the Chicago Tribune with the headline "Call for mental health services" — Today's paper | Subscribe

This article is related to: Mental Health, Rahm Emanuel, Medicaid, Affordable Care Act (Obamacare), Jason C. Ervin

Program Descriptions

Adult Psychiatric
The adult program offers treatment for adults who have moderate to severe psychiatric and behavioral problems. Our programs are tailored to the patient's needs enabling them to more effectively cope with their emotions and behaviors. The program purpose is to promote the maximum cognitive, social, physical, behavioral, and emotional development in each of our patients. Methods of treatment include medication management, group and individual therapy and discharge planning.

Senior Adult
Older adults often have unique and complex needs and experience physical and lifestyle changes that can negatively impact their emotional wellbeing. Psychiatric and behavioral concerns, combined with medical issues, complicate the diagnosis, care and treatment of seniors. Age-sensitive treatment and discharge planning is provided to assist our patients to achieve or regain the highest level of independence possible and help preserve their quality of life.

Children and Adolescents
Young people may experience symptoms of mental illness or encounter situations that they respond with behaviors that are a danger to themselves or others. Youth programs are evidence-based and specifically designed to help children/adolescents and their families through difficult circumstances or issues using intensive evaluation, treatment and aftercare planning with a professional multidisciplinary team treatment approach. Treatment includes group, individual, and family therapy.

Women Only
The Women's program addresses the unique mental health and chemical dependency needs of women in crisis through evidence-based therapeutic approaches. The program addresses such issues as trauma, depression related to reproductive issues, loss of pregnancy, post-partum depression, anxiety and obsessive disorders, relationship issues, eating disorders, and other serious disorders women may encounter. Only women attend the specialized therapy and educational groups. This gender specific approach enhances the effectiveness of therapy by providing a safe environment to process sensitive issues.

Extra Mile Veteran Care
Our Extra Mile Veteran Care Program provides treatment for PTSD, substance dependence and mental health issues, such as depression and anxiety in an environment designed with the veteran in mind. We understand teamwork and veterans. Our specially trained therapists and technicians will work together with veterans to help them overcome barriers and restore balance to their lives.

Faith Based Mental Health
Our proposed Faith Based specialty program provides unique inpatient and outpatient care where patients can include personal religious beliefs and their faith in God throughout the treatment process. The program merges sound professional counseling with Biblical principles to provide a

Christian atmosphere for recovery from serious mental health and chemical dependency problems.

Dual-diagnosis

Our dual-diagnosis program is an integrated therapy program that focuses on adults who face multiple mental health disorders or a combination of mental illness and drug or alcohol dependency, also known as co-occurring disorders. Patients receive motivational enhancement therapy, cognitive behavioral therapy, and 12-step facilitation therapy. The program allows patients to recognize and manage the issues related to their mental illness and chemical dependency problems.

ALTERNATIVES

1. Identify **ALL** of the alternatives to the proposed project:

The primary purpose of the proposed project is to increase the access of area residents to the acute mental illness inpatient services. To this end, the Applicant considered the expansion of services to CBH which also addresses consideration of smaller projects and collaboration of an existing provider as an alternative to the proposed project. As CBH is situated on a tight lot and is land locked, this alternative was rejected without further evaluation and cost analysis. Also considered was the alternative of developing two separate smaller AMI hospitals one each in Planning Areas HSA7, A-08 and HSA8, A-09.

2) Documentation shall consist of a comparison of the project to alternative options. The comparison shall address issues of total costs, patient access, quality and financial benefits in both the short term (within one to three years after project completion) and long term. This may vary by project or situation. **FOR EVERY ALTERNATIVE IDENTIFIED THE TOTAL PROJECT COST AND THE REASONS WHY THE ALTERNATIVE WAS REJECTED MUST BE PROVIDED.**

ALTERNATIVE #1 - Expansion of Chicago Behavioral Hospital

Cost

As the current project is leasing the property, the real comparison in costs would be the cost of expansion. CBH's original building is approximately 96 years old and the addition is 46 years old. The facility, since its change of ownership, has undergone significant renovations to its third and fourth floors; the cost of renovating an aged structure to provide the required addition could conceivably exceed the cost of new construction. The raw construction costs plus contingencies for the proposed project equate to $210 per gross square foot of space. As renovation cost of existing space, this is 70% of the cost of newly constructed space. Thus, merely by virtue of needing newly constructed space this alternative could represent costs that

ATTACHMENT-13

would be at a minimum 30% greater in terms of costs per gross square feet for raw construction. Costs could also be increased due to the limited staging area on the long narrow parcel for the construction. Refer to **ATTACHMENT-13A**. Finally, and the clincher is that the property is bound by the DesPlaines River on the East and the School District property to the West and the Forest Preserve to the South. The property is land locked and additional property is not readily available. Thus, the alternative was considered not viable.

Patient Access

This alternative improves patient accessibility. CBH is located in Planning Area A-07. However, there is a current identified need for additional beds and services in Planning Areas A-08 and A-09 for AMI services (refer to **ATTACHMENT-13B** for the February 16, 2016 Update to the State's Inventory of Health Care Facilities and Services and Need Determinations). These State defined service areas are directly North and East of the A-07 Planning Area (refer to **ATTACHMENT-13C** for a map illustrating the geographical relationship of the projects). Although the existing CBH is turning away a significant number of its referrals, it would appear that a separate location would better address accessibility throughout the area.

Quality

As identified by CBH, it has a referral relationship with many acute care providers (refer to **ATTACHMENT-13D**), even some which have AMI units or are specific AMI facilities. It is the intent of this Applicant to work closely with all providers and to only provide the services that compliment those that are already provided. This is not reflective of an issue of quality as the Applicant has the utmost respect for CBH and the other Acute care providers offering AMI services. Due to the under supply of all AMI services in Chicago and the country, this project is an issue of need and not quality.

ATTACHMENT-13

Financial Benefits

The financial benefits of this alternative are not known as this is not a viable option due to the CBH site being landlocked.

ALTERNATIVE #2 - Seperate Projects in Planning Areas A-08 and A-09 Respectively

Cost

It has proven difficult to find property in the built up areas that make up Planning Areas A-08 and A-09. Although not impossible, separate projects would require reductions in economies-of-scale of having a single administration and required ancillary service areas such as intake, pharmacy, kitchen/dining, maintenance, laundry, housekeeping/supplies and mechanical/electrical to name a few. These areas could represent upwards of 30% or more of the buildings area. As such, this alternative would be expected to significantly increase the cost of the projects compared to the proposed project.

Patient Access

This alternative improves access; however, all variables being consistent, i.e., number of beds, this alternative would require smaller sites which may not have the presence that a single site could offer. The realistic possibility that two separate smaller sites would be less visible, thus removing the resource from the public's perception effectually limits access to those being referred for care and treatment when we should be removing the stigmatism and making the services more accessible.

Quality

Quality is not of issue as demand for additional services is. It is expected that comparable quality will be provided by the Applicant for related facilities. That being said, additional staffing requirements caused by duplication of facilities could represent negatively on quality.

Financial Benefits

It would appear that in having two ground leases, identical build out of space to include all ancillary support space duplicated in each facility and ultimately the lack of economies-of-scale would render two smaller projects not viable on a financial basis. As such, this alternative was rejected

ALTERNATIVE #3 - Proposed Project

The proposed project is considered viable because of costs of a single project that allows for economies-of-scale over a greater number of beds. The single prominent site allows for greatest patient access for both patients and staff, which renders the project financially viable.

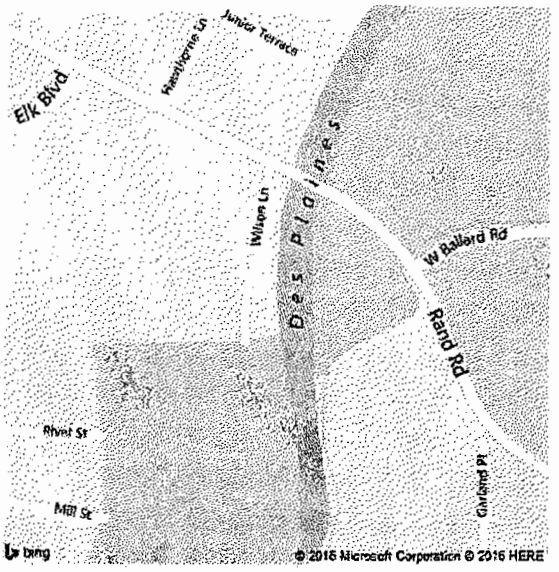
3) The applicant shall provide empirical evidence, including quantified outcome data that verifies improved quality of care, as available.

The sense of knowledge supporting the project is the experienced reality of the Applicant's parent through its related operations of CBH. Chicago Behavioral Hospital has provided services that best compliments the services offered by the existing facilities. This is not to say that there are no overlaps of treatments and programs but the open referrals between CBH and the Acute care providers coupled with the overwhelming response in offered referrals for the proposed project serves to document this empirical evidence. This in no way implies that the quality of care of the Applicant is better than another provider, but that quality of mental health services can be improved if a project is put in place that compliments the services that the existing providers offer. This is the experience of the Applicant's parent through its related facility CBH, a facility only open for just under a year.

bing maps

Notes

Existing CBH location in DesPlaines, Illinois



ILLINOIS DEPARTMENT OF PUBLIC HEALTH
STATE SUMMARY
REVISED BED NEED DETERMINATIONS
2/17/2016

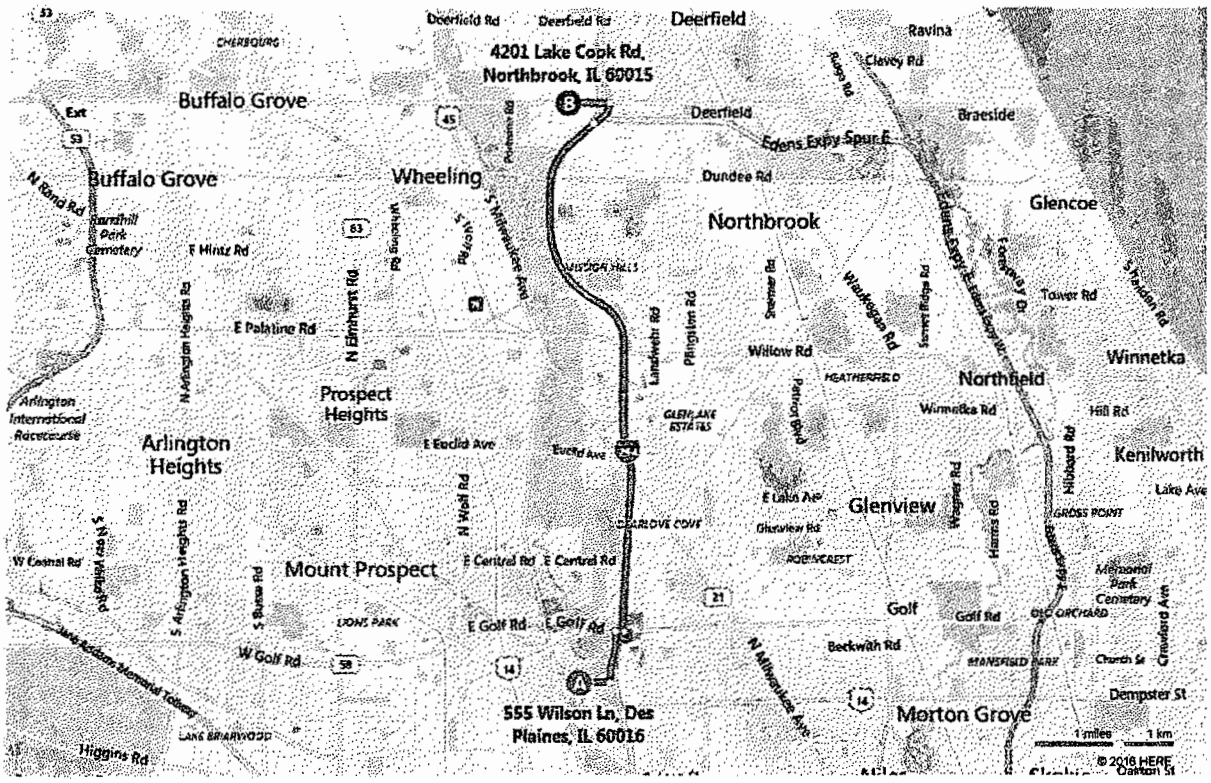
ACUTE MENTAL ILLNESS

ACUTE MENTAL ILLNESS PLANNING AREAS	APPROVED EXISTING BEDS	CALCULATED BEDS NEEDED	ADDITIONAL BEDS NEEDED	EXCESS AMI BEDS
PLANNING AREA 1	66	77	11	0
PLANNING AREA 2	136	96	0	40
PLANNING AREA 3	242	173	0	69
PLANNING AREA 4	214	142	0	72
PLANNING AREA 5	69	67	0	2
PLANNING AREAS 6 & 7				
6 A-1	416	313	0	103
6 A-2	729	516	0	213
6 A-3	234	113	0	121
6 & 7 A-4	195	130	0	65
7 A-5	275	233	0	42
7 A-6	334	237	0	97
7 A-7	556	382	0	174
7 A-8	21	50	29	0
AREA 6 & 7 TOTALS	2,760	1,974	29	815
PLANNING AREA				
8 A-9	59	83	24	0
8 A-10	34	37	3	0
8 A-11	30	48	18	0
8 A-12	95	60	0	35
AREA 8 TOTALS	218	228	45	35
PLANNING AREA				
9 A-13	75	91	16	0
9 A-14	89	52	0	37
AREA 9 TOTALS	164	143	16	37
PLANNING AREA 10	54	44	0	10
PLANNING AREA 11	150	99	0	51
ILLINOIS AMI TOTALS	4,073	3,043	101	1,131

bing maps

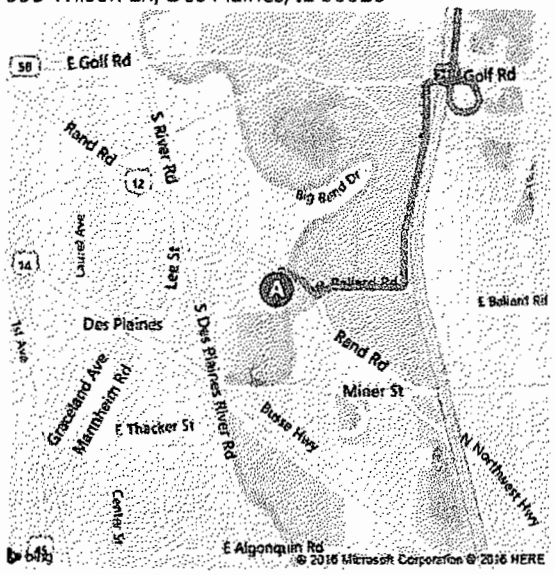
From: 555 Wilson Ln, Des Plaines, IL 60016
To: 4201 Lake Cook Rd, Northbrook, IL 60015
Notes:
A. CBH
B. PRoposed NBH

14 min, 9.7 mi
Light traffic
14 min without traffic
Via I-294 N

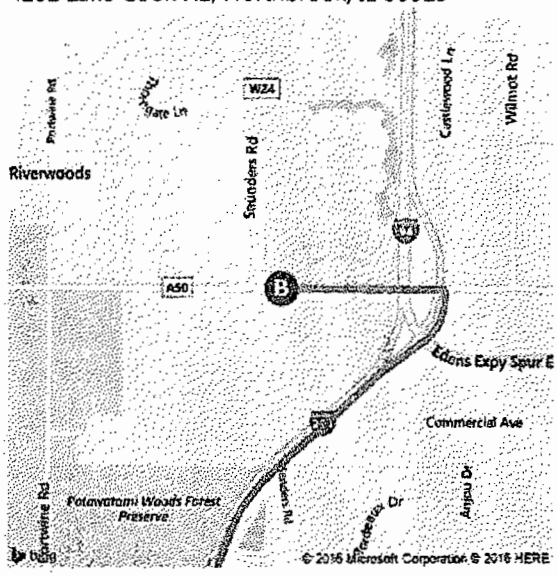


These directions are subject to the Microsoft® Service Agreement and are for informational purposes only. No guarantee is made regarding their completeness or accuracy. Construction projects, traffic, or other events may cause actual conditions to differ from these results. Map and traffic data © 2016 HERE™.

555 Wilson Ln, Des Plaines, IL 60016



4201 Lake Cook Rd, Northbrook, IL 60015



CBH
CHICAGO
BEHAVIORAL HOSPITAL

February 8, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am the CEO of Chicago Behavioral Hospital in Des Plaines, Illinois and I am writing this letter in support of US HealthVest's Certificate of Need application for a behavioral hospital in Northbrook. US HealthVest acquired Chicago Behavioral Hospital ("CBH") on November 3, 2014 from Maryville Academy. Due to renovations that were in process prior to the acquisition, only 78 of the 125 licensed beds were available for use. We expanded services to adults and senior adults and grew from a census in the single digits at the time of the acquisition to full capacity (80%+) in under a year.

In 2015, we deflected 672 patients referred to our hospital in 2015 because we did not have a bed available. While we it is difficult to track where these deflected patients have gone for care, we understand that many have either gone without care or have experienced significant wait times and have had to travel great distances for care. Professional referral sources often verbalize having difficulty with placement because "everyone is full". It has not been unusual for them to note that they have had significant delays finding alternate beds for patients because other hospitals in the area run full. In 2016, we gained access to our newly renovated units and once again see rapid bed occupancy.

Of the 672 deflected patients, 111 patients were from planning areas A-08 and A-09 or zip codes 60016, 60026, 60010, 60030, 60035, 60045, 60046, 60048, 60061, 60085, 60076, 60202 and 60645.

The distribution of beds clearly slights the northern suburbs. Having a relationship with over 50 emergency departments, we know from nurses, crisis workers and physicians in these settings that patients have had to wait long periods in emergency rooms in order to access care. This is something that common and routine problem in many parts of Illinois.

Today, area hospitals that are within a 45 minute drive from CBH and similarly to the Northbrook project, continue to send a significant number of referrals due to their own psychiatric units being full, not treating particular types of patients or not having inpatient psychiatric care. In looking at data from the last ten months since starting adult services, some examples of the numbers of these referrals come from: Evanston Northshore Hospital (52), Advocate Good Shepherd (91), Northwest Community (92), Linden Oaks (82), Community First Hospital (60), Condell Medical Center (32), Northwestern Medicine Central DuPage Hospital (52), Alexian Brothers Behavioral Health Hospital (39), Advocate Lutheran General (115) and Palos Community Hospital (44). The total of referrals coming from hospitals only within 45 minutes travel has been 1,099 for this past ten month period.

MENTAL HEALTH & CHEMICAL DEPENDENCE SERVICES
555 WILSON LANE • DES PLAINES, ILLINOIS 60016
P: 847-768-5430 • F: 847-768-5478
WWW.CHICAGOBH.COM

CBH
CHICAGO
BEHAVIORAL HOSPITAL

Our occupancy at CBH has grown to 87%, 86%, 84%, and 81% in September, October, November and December of 2015 respectively, without the aforementioned plans to increase marketing, and we expect even greater growth this spring. Chicago Behavioral Hospital would also need to deflect patients to a Northbrook Hospital. Our growth projections conservatively reach 84% in April and 90% in May of 2016. We expect our growth trajectory to continue beyond our 125 beds at CBH by the mid 2016 and that we will again have the dilemma of deflecting patients due to bed availability. This would be well before the Northbrook facility could conceivably be opened.

With all of the deflections, marketing efforts, new lines of service development and practices that we are attracting, we are projecting significant referrals to Northbrook Behavioral Hospital from CBH. We believe with our experience of 15% deflections from the Northbrook catchment area Zip Codes, as well as our deflections from other underserved geographies, that CBH alone will refer a total of 48-50 patients per month to Northbrook which will be from 576 to 600 annually. We do not see this need reducing and believe it will be very consistent throughout the years to come.

The information I've included here has not been used to support any other pending or approved CON application for a behavioral health hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services in the north suburban areas of Illinois.

Sincerely,

Anthony DeJoseph

Anthony DeJoseph, Psy.D.
CEO
Chicago Behavioral Hospital

Subscribed and Sworn before me this 18th day of February 2016

Joanne M Rossman

OFFICIAL SEAL
JOANNE M ROSSMAN
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:10/15/17

SECTION VII – SERVICE SPECIFIC REVIEW CRITERIA
C. Criterion 1110.730 – Acute Mental Illness and Chronic Mental Illness Continued i

SIZE OF PROJECT:

1. Document that the amount of physical space proposed for the proposed project is necessary and not excessive. **This must be a narrative.**

The proposed AMI facility will be developed through the renovation of existing space. The State Standard for AMI space is only projected in terms of departmental gross square feet. This standard allows for a range of between 440 to 560 departmental gross square feet per bed. NBH will have 52,033 clinical gross square feet or 520 dgsf/bed. Thus, it is consistent with the HFSRB's standard contained in Appendix B to Part 1110.

2. If the gross square footage exceeds the BGSF/DGSF standards in Appendix B, justify the discrepancy by documenting one of the following::

This item is not applicable as the gross square footage does not exceed the DGSF standards in Appendix B.

ATTACHMENT-14

SECTION VII – SERVICE SPECIFIC REVIEW CRITERIA
C. Criterion 1110.730 – Acute Mental Illness and Chronic Mental Illness Continued ii

PROJECT SERVICES UTILIZATION:

This criterion is applicable only to projects or portions of projects that involve services, functions or equipment for which HFSRB has established utilization standards or occupancy targets in 77 Ill. Adm. Code 1100.

Document that in the second year of operation, the annual utilization of the service or equipment shall meet or exceed the utilization standards specified in 1110.Appendix B. **A narrative of the rationale that supports the projections must be provided.**

The HFSRB has an established utilization standard of 85% for AMI beds and services according the 77 IAC Part 1100. The Applicant has proposed that for the first year of operation, CY 2018, the facility will experience a ramp-up of services resulting in annual patient days of 15,165 (or 41.5%). The second year of operations, CY 2019, the project will have achieved and be able to maintain an adjusted patient days totaling 31,297 days or an 85.7% utilization rate in conformance with this State standard (please note that 31,025 patient days + target rate of 85%).

Support and justification for these assumptions come from two types of sources. First, CBH has had to turn away referrals due to the not having an available bed. Refer to **ATTACHMENT-15A** for CBH's referral/support letter for the proposed project. It should be noted that until January of 2016, 47 beds of its licensed compliment of 125 AMI beds were under renovation; a project that was inherited from the facility's previous operator. Related entity operating CBH ramped up the operations in five months and the available beds have been effectively full (85% or higher since September of 2015). In January the facility completed its third and fourth floor renovations (47-beds) and in the first two months since, have realized peak average daily census well into the 90's. It is expected that by the time this project is heard by the HFSRB, CBH will meet or exceed target utilization of the entire licensed capacity. Based upon this experience it is referring at a minimum between 12-14 monthly referrals. The second and traditional source of referrals are from the mental health provider and agency community.

ATTACHMENT-15

Appended as **ATTACHMENT-15B** are 21-letters of referrals/support for the proposed project. Together these resources are making annual referrals over the 24 month period following project completion that range from 3,558 to 3,951 patients. These referrals reflect an average length of stay of 8.72 days down to 7.85 days. This is well less than the 15.2 days experienced by CBH's predecessor in CY 2014 yet consistent with and within the range of 5.2 days to 11.9 days of the existing AMI providers excluding CBH's predecessor. As such, these referrals more than justify the Applicant's ability to fill and maintain utilization of the proposed NBH.

CBH
CHICAGO
BEHAVIORAL HOSPITAL

February 8, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am the CEO of Chicago Behavioral Hospital in Des Plaines, Illinois and I am writing this letter in support of US HealthVest's Certificate of Need application for a behavioral hospital in Northbrook. US HealthVest acquired Chicago Behavioral Hospital ("CBH") on November 3, 2014 from Maryville Academy. Due to renovations that were in process prior to the acquisition, only 78 of the 125 licensed beds were available for use. We expanded services to adults and senior adults and grew from a census in the single digits at the time of the acquisition to full capacity (80%+) in under a year.

In 2015, we deflected 672 patients referred to our hospital in 2015 because we did not have a bed available. While we it is difficult to track where these deflected patients have gone for care, we understand that many have either gone without care or have experienced significant wait times and have had to travel great distances for care. Professional referral sources often verbalize having difficulty with placement because "everyone is full". It has not been unusual for them to note that they have had significant delays finding alternate beds for patients because other hospitals in the area run full. In 2016, we gained access to our newly renovated units and once again see rapid bed occupancy.

Of the 672 deflected patients, 111 patients were from planning areas A-08 and A-09 or zip codes 60016, 60026, 60010, 60030, 60035, 60045, 60046, 60048, 60061, 60085, 60076, 60202 and 60645.

The distribution of beds clearly slights the northern suburbs. Having a relationship with over 50 emergency departments, we know from nurses, crisis workers and physicians in these settings that patients have had to wait long periods in emergency rooms in order to access care. This is something that common and routine problem in many parts of Illinois.

Today, area hospitals that are within a 45 minute drive from CBH and similarly to the Northbrook project, continue to send a significant number of referrals due to their own psychiatric units being full, not treating particular types of patients or not having inpatient psychiatric care. In looking at data from the last ten months since starting adult services, some examples of the numbers of these referrals come from: Evanston Northshore Hospital (52), Advocate Good Shepherd (91), Northwest Community (92), Linden Oaks (82), Community First Hospital (60), Condell Medical Center (32), Northwestern Medicine Central DuPage Hospital (52), Alexian Brothers Behavioral Health Hospital (39), Advocate Lutheran General (115) and Palos Community Hospital (44). The total of referrals coming from hospitals only within 45 minutes travel has been 1,099 for this past ten month period.

MENTAL HEALTH & CHEMICAL DEPENDENCE SERVICES
555 WILSON LANE • DES PLAINES, ILLINOIS 60016
P: 847-768-5430 • F: 847-768-5478
WWW.CHICAGOBH.COM

ATTACHMENT-15A

CBH
CHICAGO
BEHAVIORAL HOSPITAL

Our occupancy at CBH has grown to 87%, 86%, 84%, and 81% in September, October, November and December of 2015 respectively, without the aforementioned plans to increase marketing, and we expect even greater growth this spring. Chicago Behavioral Hospital would also need to deflect patients to a Northbrook Hospital. Our growth projections conservatively reach 84% in April and 90% in May of 2016. We expect our growth trajectory to continue beyond our 125 beds at CBH by the mid 2016 and that we will again have the dilemma of deflecting patients due to bed availability. This would be well before the Northbrook facility could conceivably be opened.

With all of the deflections, marketing efforts, new lines of service development and practices that we are attracting, we are projecting significant referrals to Northbrook Behavioral Hospital from CBH. We believe with our experience of 15% deflections from the Northbrook catchment area Zip Codes, as well as our deflections from other underserved geographies, that CBH alone will refer a total of 48-50 patients per month to Northbrook which will be from 576 to 600 annually. We do not see this need reducing and believe it will be very consistent throughout the years to come.

The information I've included here has not been used to support any other pending or approved CON application for a behavioral health hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services in the north suburban areas of Illinois.

Sincerely,

Anthony DeJoseph

Anthony DeJoseph, Psy.D.
CEO
Chicago Behavioral Hospital

Subscribed and Sworn before me this 18th day of February 2016

Joanne M Rossman

OFFICIAL SEAL
JOANNE M ROSSMAN
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:10/15/17

MENTAL HEALTH & CHEMICAL DEPENDENCY
555 WILSON LANE • DES PLAINES, ILLINOIS 60016
P: 847-768-5430 • F: 847-768-5478
WWW.CHICAGOBH.COM

Northbrook Behavioral Hospital
Hospital/Physician Referral Letters

Facility Name	Signed by:	historical 1 yr		projected 24 months		projected monthly	
		min	max	min	max	min	max
Abbott House	Ivy Fishman	24.00	24.00	50.00	50.00	2.08	2.08
Associates in Behavioral Science	Alfa Murphy	468.00	468.00	840.00	840.00	35.00	35.00
Behavioral Health Care Associates	Blaise J Wolfrum, MD, FAPA	400.00	400.00	400.00	400.00	16.67	16.67
Brightside Clinic	Kenji Oyasu MD	60.00	72.00	60.00	72.00	2.50	3.00
Brookdale Northbrook Senior Living	Tina Cooper	14.00	14.00	24	28	1.00	1.17
Chicago Behavioral Hospital	Anthony DeJoseph, PsyD	672.00	672.00	1152.00	1200.00	48.00	50.00
counseling speaks	Kasia Wereszczynska, MA, LCPC, RYT	Does not track		720.00	960.00	30.00	40.00
David Bawden MD	David Bawden MD	30.00	30.00	60.00	60.00	2.50	2.50
Eugene Kwon, MD,	Eugene Kwon, MD	104.00	156.00	120.00	120.00	5.00	5.00
Harbor House	Savannah Alderink	3.00	3.00	24.00	24.00	1.00	1.00
Mark D Parisi, PsyD & Associates	Mark D Parisi, PsyD	36.00	36.00	72.00	72.00	3.00	3.00
Maryville Academy	Edgar Ramos, PsyD	150.00	150.00	240.00	360.00	10	15
Mathers Clinic	Renee Shopp RN, CADC	Does not track		840.00	840.00	35.00	35.00
Meier Clinics	Nancy Meier Brown	66.00	66.00	122.00	122.00	5.08	5.08
Mental Health Solutions	Bright Fellowes, PsyD	50.00	50.00	100.00	100.00	4.17	4.17
Mental Health Solutions	Ashley Pasen Shields						
Mind Care Clinic	Sayed Rahim MD ABPN	Does not track		480.00	480.00	20.00	20.00
North Shore Psychology Specialists, PC	Dr Anne H Levin, Psy D	Does not track		72.00	144.00	3	6
The Josselyn Center	Susan Eckstein, LCSW	10.00	10.00	24.00	48.00	1	2
Thodur Ranganathan, MD	Thodur Ranganathan, MD	2280.00	2280.00	1680.00	1920.00	70.00	80.00
KGH Consultation & Treatment, Inc.	Jill Hollederer MA, BCBA	4.00	4.00	24.00	24.00	1.00	1.00
Rosewood Care Center of Northbrook	Amy Saltzman	4.00	4.00	1	2		
		4375.00	4439.0	7105.0	7866.0	296.0	327.7
						3552.0	3932.4

ATTACHMENT-15B

Abbott House

personal attention in a homelike setting

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, IL 62761

RE: US Health Vest's Certificate of Need Application for a behavioral hospital in Northbrook.

Dear Ms. Avery,

I am writing this letter in support of US Health Vest's Certificate of Need application for a behavioral hospital in Northbrook.

As a mental health professional, administrator of Abbott House Nursing Home, LLC, located in Highland Park, my consumers have experienced frequent delays in accessing local inpatient psychiatric care mainly due to bed shortages for mental health patients. There have also been many occasions when local hospitals have returned patients, our consumers, who were actively psychotic and suicidal to our facility without treatment.

Over the last year our facility has referred 24 consumers for inpatient behavioral healthcare to Chicagoland hospitals. We have not been able to refer consumers to a local hospital for inpatient behavioral healthcare as there is not a facility near the 60035 zip code which accepts psychiatric inpatient behavioral healthcare. Our facility estimates that the number of consumers that would be referred for inpatient behavioral healthcare would be at least 50 consumers in a 24 month period.

The information I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US Health Vest's application for Northbrook Behavioral Hospital. Approval of US Health Vest's application will increase access to these much needed and important services.

Sincerely,

Ivy K Fish

Ivy Fishman
Administrator
Abbott House Nursing Home, LLC

OFFICIAL SEAL
B GHASWALA
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:07/09/16

B Ghaswala
1/29/16

847.432.6080 847.432.3255

www.abbotthousenursing.com

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Quality Behavioral Healthcare
6201 W. Cermak Road, Berwyn, IL 60402 · (ph.) 708.788.8808 (fax) 708.788.8549

January 15, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a large interdisciplinary psychiatric practice that works across five hospitals in the Chicago area, we have found that there is very poor access to psychiatric care in the northern suburbs very near Northbrook, and a project of this nature would be quite helpful for accessibility, and in solving the bed shortage in the northern area of Illinois. Patients from this area often have to wait to access care, and quite frankly it's really not available in Northbrook and its surrounding suburbs. Patients characteristically have to be taken out of that area, either down into Chicago or into the far western suburbs for care. There is simply no options available, and we know this because we receive referrals from this area that we are forced to hospitalize very far from our North suburban referral sources.

We hospitalize well over 2000 patients per year, and the fairly significant portion of them come from the north suburban area of which Northbrook is a part. Zip codes for this total are from across the state and too numerous to list. However, with regard to the number of patients that we've had to hospitalize away from their home from that area, whom would be better served in a hospital in Northbrook, we have had approximately 468 admissions from Zip Codes 60089, 60714, 60202, 60076 and 60026. To put this in perspective, we have had to take patients from these ZIP Codes, all of which either border or are surrounding Northbrook, and treat them as far as 30-35 miles away. It would make more sense to treat people near their own community.

Accordingly, we would estimate being able to refer the majority of those 468 patients at the Northbrook Behavioral Hospital, and given that it is not likely that 100% (39) of this group would end up there, we would approximate some 35 of these patients to be hospitalized at the site per month.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these geographically and gravely needed services.

Sincerely,

Alfa Murphy
Practice Manager
ABS

Signed before me this 15th day of January, 2016 in Cook County,

OFFICIAL SEAL
JOANNE M ROSSMAN
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:10/15/17

Joanne M Rossman

ATTACHMENT-15B

Behavioral Health Care Associates

1375 E. Schaumburg Rd, Suite 260
Schaumburg, IL 60194

484 N. Lee Street
Des Plaines, IL 60016

Phone (847) 895-4540 Fax (847) 895-4544 Ans. Service (847) 758-2892

Schaumburg Des Plaines Chicago Park Ridge Hoffman Estates Elk Grove Village

January 20, 2016

Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook, Illinois.

I am a psychiatrist in practice on the northwest side of Chicago and suburbs for the past two decades over which time I have seen several psychiatric facilities close their doors leading to patients having to wait longer at a general medical facility for transfer or being turned away at the admissions office due to lack of beds. My patients now experience this delay on a routine basis. The area is now in short supply and we could use an additional facility managed by US Health Vest who has many decades of experience in psychiatric hospital facility construction and development of quality programs.

Our group practice has referred over 400 patients for inpatient admission and over 600 for partial hospitalization in the past year from our practice locations in zip codes 60631, 60194 and 60016. We estimate that this number will increase to 500 inpatients in 2016 and that once the new hospital is open in Northbrook about two hundred of these in need patients would benefit from an admission to this new state of the art facility for mental health and substance abuse care. These patients live primarily in the following zip code areas. 60015, 16, 22, 25, 26, 29,56, 62, 70, 90, 91, 93, 02, 10, 11, 15, 20 30, 35, 37, 40, 41, 42, 43, 44, 45, 46, 47, 48, 53, 60, 61, 64, 69, 73, 75, 76, 77, 79, 83, 84, 85, 86, 87, 88, 89, 91, 93, 96, 99, 60201, 02, 03, 04 ,08, 09, 60626, 45, 59 60712, 14.

The above information has not been used to support any other facilities pending or approved CON application.

Please register my support for the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will improve the quality of care and increase access to these necessary services.

"OFFICIAL SEAL"
LISA N. KANE
Notary Public, State of Illinois
My Commission Expires 09-14-2019

Sincerely,

Blaise J. Wolfrum, MD, FAPA
Sworn to and subscribed before me this 21 day of January, 2016, county of Cook.
State of Illinois

BRIGHTSIDE

January 21, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a emergency room physician on staff at multiple sites in the Chicago metro area, my patients have experienced frequent delays in accessing inpatient psychiatric care mainly due to bed shortages. There have been many times patients have had to wait to access care. Not uncommonly patients wait over 24 hrs further congesting the emergency room for other medical emergencies.

In addition to my emergency medicine practice I have opened an out patient Opiate Addiction Treatment clinic in Northbrook Ill. (333 Skokie Blvd Suite 112 Northbrook Il 60062). Many, if not all of my patients suffer from dual diagnosis situations depression or anxiety in conjunction with substance abuse. We have had to refer a minimum of 5-6 patients per month outside of the local area for inpatient stabilization prior to outpatient treatment. (Zip codes not available as our system does not track them) Given the recent climate in addiction and its comorbid psychiatric illnesses we expect that this metric will continue. As our clinic continues to grow this number will increase.

A new facility will provide a necessary resources and help keep the patients closer to their families. Mental health patients in the northern Chicago suburbs and its surrounding communities will greatly benefit form a new facility.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

Sincerely,

Kenji Oyasu

Kenji Oyasu MD
Chicago Area Emergency Physician
Executive Medical Director
BRIGHTSIDE Clinic
333 Skokie Blvd., Suite 112
Northbrook, IL 60062
224-205-7866 o 847-341-9907 c
http://www.brightsideclinic.com

Signed by Kenji Oyasu
on this 22nd of January
2016

Joanne M Rossman

OFFICIAL SEAL
JOANNE M ROSSMAN
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:10/1[illegible]

ATTACHMENT-15B

BROOKDALE
NORTHBROOK
SENIOR LIVING SOLUTIONS

ALL THE PLACES LIFE CAN GO™

January 27, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a healthcare provider at Brookdale Northbrook Senior Living located in Northbrook IL, our patients have experienced frequent delays in accessing inpatient psychiatric care mainly due to bed shortages. There have been many times patients have had to wait to access care, or have been sent many miles away for an available bed.

Over the past year we have had 14 patients all from this facility, area code 60062, that were in need of Behaviorial Health Services and they have had to go as far away as Oak Lawn and Elk Grove Village for the needed care. This is very stressful for both patients and families and takes the patients away from their healthcare network here in Northbrook, which does not provide good continuity of care.

We estimate that we would consistently have 12 to 14 patients that we would be referring to Northbrook Behavioral Health annually and more if availability is closer to their home.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

Sincerely,

Tina Cooper

Tina Cooper
Director of Resident Services
Brookdale Northbrook Senior Living

1/27/2016

OFFICIAL SEAL
EGBERT V. ASHLEY
Notary Public - State of Illinois
My Commission Expires Apr 07, 2016

4501 Concord Lane · Northbrook, IL 60062
Telephone (847) 803-7100 · Fax (847) 803-7101
brookdale.com

ATTACHMENT-15B

counselingspeaks
1580 N Northwest # 305D
Park Ridge, IL 60068
(331) 240-0044
counselingspeaks@gmail.com
www.counselingspeaks.com

January 26, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a mental health professional at counseling speaks, LLC located in Park Ridge, my patients have experienced frequent delays in accessing inpatient psychiatric care mainly due to bed shortages. There have been many times patients have had to wait to access care.

counseling speaks, LLC estimates referring a number in the area of 30-40 patients to Northbrook Behavioral Hospital on a monthly basis for hospitalization and would expect to continue to refer this over a 24-month period. This could be for an evaluation, referrals or admission for mental health or addiction care. I do not track my patients by zip code, but the fact that many of them come from suburbs north of our office places them in the service area of the proposed Northbrook Behavioral Hospital.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

Sincerely,

Kasia Wereszczynska, MA, LCPC, RYT
Clinical Therapist
counseling speaks, LLC

Signed before me this 26th day of January 2016 in Cook County, IL
Joanne M Rossman

OFFICIAL SEAL
JOANNE M ROSSMAN
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:10/15/17

DAVID GEORGE BAWDEN, M.D.
4711 Golf Road
Suite 1200
Skokie, Illinois 60076-1200
847-446-7911

January 18 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a psychiatrist at Chicago Behavioral hospital located in Des Plains and Lutheran General Hospital located in Park Ridge, my patients have experienced frequent delays in accessing inpatient psychiatric care mainly due to bed shortages. There have been many times patients have had to wait to access care.

Over the past year I have referred approximately 30 inpatients from zip codes 60714, 60047, 61107 & 60062 for inpatient evaluation. I would expect a similar or larger volume equaling about 3 to 4 per month and approximately 60 in 24 months. These could be for an evaluation or admission for mental health or addiction care.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

Sincerely,

David Bawden, M.D.

Signed before me this 18th day of January.
2016 Lake County, Illinois

OFFICIAL SEAL
JOANNE M ROSSMAN
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:10/15/17

Joanne M Rossman

ATTACHMENT-15B

Maryville Academy

1150 North River Road
Des Plaines, IL 60016
(847) 294-1999

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a clinical psychologist and supervisor at Maryville Academy in Des Plaines, which is very close to the proposed location in Northbrook, my patients have not only experienced delays in accessing inpatient psychiatric care due to bed shortages, but have often had to be sent all across the state, far from their home because of this. We clearly need more beds in this north suburban area which Northbrook is a part of, and accessibility there would make far more sense than what we have to work with at present. We have many problems and delays in accessing care because of a lack of an adequate number of beds in this area.

We have sent over 150 children for hospitalization in the past year spread across numerous hospitals and would prefer to be able to keep them closer to Maryville than has been possible. They are all from the 60016 zip code, as we are residential.

I would estimate that we would send between 10-15 referrals monthly for inpatient psychiatric care at a facility in Northbrook whenever we have access to it. Our referrals are consistent and steady in number year after year, due to the nature of our organization.

The information that I have included here has not been used to support any other pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase the access to these important services that we so desperately need in the northern suburbs surrounding Northbrook...

Sincerely,

Edgar Ramos, Psy.D.
Licensed Psychologist
Maryville Academy

Notarized this 18th of January 2016 before me

Joanne M Rossman

OFFICIAL SEAL
JOANNE M ROSSMAN
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:10/15/17

ATTACHMENT-15B

HARBOR HOUSE

January 26, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a Dementia Care Facility at Harbor House located in Wheeling, my patients have experienced frequent delays in accessing inpatient psychiatric care mainly due to bed shortages. There have been many times patients have had to wait to access care.

Over the last year we have had three referrals for behavioral healthcare from our facility in 60090 to local hospitals. We may refer one patient a month, twelve a year, to Northbrook Behavioral Hospital for evaluation, referrals or admission for mental health care.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

Sincerely,

Savannah Alderink
Executive Director

Harbor House
Dementia Care Facility
760 McHenry Road
Wheeling, IL 60090

To Be Completed by a Notary Republic

I, Amy Bable, attest that this letter was signed by the afore mentioned party on this 26th day of January, 2016.

Signature of Notary Republic

AMY BABLE
OFFICIAL SEAL
Notary Public, State of Illinois
My Commission Expires
September 25, 2019

ATTACHMENT-15B

MARK D. PARISI, PSY.D. & ASSOCIATES, P.C.
Serving the Behavioral Healthcare Needs of Metro Chicago Since 2000

January 19, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a Clinical Psychologist and Administrator / Owner of two large group private practices headquartered in Mount Prospect with satellite offices near Evanston, Illinois, my patients have experienced frequent delays in accessing inpatient psychiatric care mainly due to bed shortages. There have been many times patients have had to wait to access care.

In the past year, we have had occasion to refer, on average, about three clients per month for inpatient or intensive outpatient-based treatment – the type of services that will be offered by Northbrook Behavioral Hospital. While we do not track client zip codes for these referrals, I can tell you that there are few, if any, options for this type of treatment near my office in Chicago located in zip code 60646. My clients often must travel to Chicago Behavioral Hospital in Des Plaines, Alexian Brothers' Behavioral Hospital in Hoffman Estates, or Northwest Community Hospital in Arlington Heights – none of which are especially close to my office. I would expect to channel a majority of these referrals – perhaps as many as 72 over a twenty-four month period – to Northbrook Behavioral Hospital and would expect on-going utilization of their services if they are allowed to build this much-needed behavioral health hospital.

The information included in this Certificate of Need letter has not been included in support of any other pending or approved application for a behavioral healthcare hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

800 E. Northwest Highway, Suite 106, Mount Prospect, Illinois 60056
Tel. (847) 909-9858 / Fax. (847) 299-4952

Very Truly Yours,

Mark D. Parisi, Psy.D.

MARK D. PARISI, PSY.D.
Licensed Clinical Psychologist 071-005598
Administrator / Owner

NOTARY PUBLIC ATTESTATION

State of Illinois County of Cook

By signature and seal below, I attest to the authenticity of this Certificate of Need letter composed by the above individual.

Lisa N Kane

(signature of Duly Licensed Notary Public)

LISA N Kane

(printed name of Notary Public)

"OFFICIAL SEAL"
LISA N. KANE
Notary Public, State of Illinois
My Commission Expires 09-14-2019

SEAL OF NOTARY PUBLIC

State of Illinois, County of Cook

Signed and attested before me on 1/26/16

by Mark D. Parisi

800 E. Northwest Highway, Suite 106, Mount Prospect, Illinois 60056
Tel. (847) 909-9858 / Fax. (847) 299-4952

January 27, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

Mathers Clinic is a mental health and substance abuse practice in Rockford, Woodstock, Crystal Lake and Elgin. We also provide psychiatric services to 14 Assisted Living/Nursing Homes. Our patients have experienced ongoing delays in accessing inpatient psychiatric care mainly due to bed shortages. There have been multiple times when patients have to wait to access care.

We do not have a report that tracks inpatient referrals or zip codes of inpatients. We do have a list of patient zip codes that would benefit from the new location in Northbrook. Our patients come from Northbrook 60062, Prospect Heights 60070, Wheeling 60090, Barrington Hills 60010 and 60011, Fox Lake 60020, Grayslake 60030, Gurnee 60031, Highland Park 60035, Ingleside 60041, Island Lake 60042, Lake Bluff 60044, Kildeer 60047, Libertyville 60048, Mundelein 60060, Vernon Hills 60061, North Chicago 60064, Round Lake 60073, Waukegan 60079, Buffalo Grove 60089, Zion 60099, and Niles 60714.

As a provider we estimate an average of 35 patients would be referred on a monthly basis to Northbrook Behavioral Hospital and would expect to refer over a 24-month period. This could be for an evaluation, referrals or admission for mental health or addiction care.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

Sincerely,

Renee Shopp RN, CADC
Practice Manager
Mathers Clinic

Subscribed & Sworn to
Before me this 27th day
of Jan, 2016.

Regina L Kamin
Notary Public

OFFICIAL SEAL
REGINA L KAMIN
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES 10/15/19

MATHERS CLINIC
The Center for Counseling Services

Crystal Lake: 145 South Virginia Street, Suite C ~ Crystal Lake, IL 60014 | Fax: 815.356.6680 | www.themathersclinic.com
Rockford: 6090 Strathmoor Drive, Suite 1 ~ Rockford, IL 61107 | Fax: 815.397.2712
Woodstock: 715 West Judd Street ~ Woodstock, IL 60098 | Fax: 815.338.7728 | 815.444.9999
Elgin: 585 North Tollgate Road, Suite E ~ Elgin, IL 60123 | Fax: 847.628.6064
www.elginmethadoneclinic.com | 847.462.6099

MEIER CLINICS®
One of the most trusted names in Christian Counseling

January 22, 2016

Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US Healthvest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery:

I am writing this letter in support of US HealthVest's Certficate of Need application for a behavioral hospital in Northbrook.

Meier Clinics provide mental health services in eleven states, including locations in Illinois in Northbrook, Wheaton, Chicago and Geneva. It is not unusual for our patients to experience frequent delays in accessing inpatient psychiatric care, often due to bed shortages or lack of services.

I solicited feedback from the following clinical staff regarding inpatient referrals:

Gary A. Casaccio, M.D., Illinois Medical Director
Steve Lee, M.D., Director of Breakaway
Kim Lurvey, LCSW, Northbrook Clinic Director
Christine Zielinski, LCSW, National Intake Coordinator

They reported that they have referred approximately 66 people to inpatient care over the past 12 months. This is not reflective of the total number we have referred as we have over 50 clinical staff in Illinois, so the above is a very conservative figure. The estimated number of potential referrals over a 24-month period after the project is completed would conservatively be 122 people.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US Health Vest's application will increase access to much needed services.

Sincerely,

Nancy Meier Brown

Nancy Meier Brown
President
Meier Clinics

State of Illinois County of DuPage

This instrument was acknowledged before me on Jan. 22, 2016 by Nancy Meier Brown.

SANDRA K. NEWPORT
OFFICIAL SEAL
Notary Public - State of Illinois
My Commission Expires
September 17, 2017

Signature of Notary Public: Sandra K. Newport

mhs
MENTAL HEALTH SOLUTIONS

Bright Fellowes, PsyD
Mental Health Solutions
PO Box 684
Mundelein, IL 60060

Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest Certificate of Need Application, Northbrook Behavioral Hospital

January 26, 2016

Barrington Courte
101 Lions Drive
Suite 115
Barrington, IL
60010

201 E. Park Street
Unit B
Mundelein, IL
60060

Phone: (847) 566 – 0164

Fax: (847) 566 – 0375

www.MHShelps.com

Dear Ms. Avery,

This letter comes to you in support of US Healthvest's Certificate of Need application for the inpatient behavioral healthcare facility they have proposed building in Northbrook, IL.

As a Licensed Clinical Psychologist and President of a multidisciplinary private, group, behavioral healthcare practice with offices throughout the northern suburbs of Chicago, I can attest to the shortage of nearby facilities offering immediate inpatient care to area residents, specifically in Lake County and Cook County. We find that many current and potential clients are unable to find open beds at nearby inpatient psychiatric and behavioral health facilities and are forced to wait on prohibitively long wait lists for treatment, or else travel great distances to find openings at out-of-state facilities. Others are simply unable to obtain necessary treatment.

I would estimate that as a practice, Mental Health Solutions' providers have referred upwards of fifty clients within the last year to local hospitals and inpatient facilities. These clients are residents of ZIP codes ranging as far south as Chicago and as far north as the Wisconsin boarder, reaching from Norshore suburbs such as Northbrook as far west as Rockford, IL.

I would anticipate that an increase in the availability of inpatient mental healthcare in the area would positively impact my own practice's ability to meet the needs of a growing number of clients, such that over the first twenty four months following its opening, we might refer in excess of one hundred clients (about five clients per month, on average) for evaluation and/or admission.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's behavioral hospital, and I thank you for your assistance in providing access to care to the residents of your area.

Sincerely,

Bright Fellowes, PsyD
Mental Health Solutions, President and Licensed Clinical Psychologist

Signed On: this 26th day of Jan, 2016 before me June R Emrich

Signature June R Emrich

OFFICIAL SEAL
JUNE R EMRICH
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:04/13/18

ATTACHMENT-15B

mhs
MENTAL HEALTH SOLUTIONS

Ashley Pasen Shields
Mental Health Solutions
PO Box 684
Mundelein, IL 60060

Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest Certificate of Need Application, Northbrook Behavioral Hospital

January 26, 2016

Dear Ms. Avery,

I'm writing you today to support US Healthvest's Certificate of Need application for the inpatient behavioral healthcare facility they have proposed building in Northbrook, IL.

As the Director of a multidisciplinary private, group, behavioral healthcare practice with offices throughout the northern suburbs of Chicago, I can attest to the shortage of nearby facilities offering immediate inpatient care to area residents, specifically in Lake County and Cook County. We find that many current and potential clients are unable to find open beds at nearby inpatient psychiatric and behavioral health facilities and are forced to wait on prohibitively long wait lists for treatment, or else travel great distances to find openings at out-of-state facilities. Others are simply unable to obtain necessary treatment.

Based on the calculationsof myself and my partner Dr. Bright Fellowes, Licensed Clinical Psychologist and President of Mental Health Solutions, we estimate that our team of behavioral health professionals have referred upwards of fifty clients within the last year to local hospitals and inpatient facilities. These clients are residents of ZIP codes ranging as far south as Chicago and as far north as the Wisconsin boarder, reaching from Norshore suburbs such as Northbrook as far west as Rockford, IL.

I believe that an increase in the availability of inpatient mental healthcare in the area would positively impact my own practice's ability to meet the needs of a growing number of clients, such that over the first twenty four months following its opening, we might refer in excess of one hundred clients (about five clients per month, on average) for evaluation and/or admission to the proposed facility.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's behavioral hospital, and I thank you for your assistance to the residents of your area by providing access to care.

Sincerely,

Ashley Pasen Shields

Ashley Pasen Shields, Director
Mental Health Solutions

Barrington Courte
101 Lions Drive
Suite 115
Barrington, IL
60010

201 E. Park Street
Unit B
Mundelein, IL
60060

Phone: (847) 566 – 0164

Fax: (847) 566 – 0375

www.MHShelps.com

B. PAIO
NOTARY PUBLIC
Comm. No. 06-361
STATE OF HAWAII

Signed On: 1/26/2016 before me B. Paio

Signature

NOTARY PUBLIC CERTIFICATION

Document Date: 1/26/2016 **# pgs :** 1
Notary Name: B Paio **First Circuit**
Doc. Description: US HealthVest Certificate of Need Application, Northbrook Behavioral Hospital

Notary Signature Date 1/26/2016

B. PAIO
NOTARY PUBLIC
Comm. No. 06-361
STATE OF HAWAII

B. Paio
My Commission Expires:
June 18, 2018

ATTACHMENT-15B

MIND CARE CLINIC

Regulate Emotions thru Relaxed Mind

January 25, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a psychiatrist at Lincolwood Medical Center located in Lincolnwood-IL, my patients have experienced frequent delays in accessing inpatient psychiatric care mainly due to bed shortages. There have been many times patients have had to wait to access care.

1) We expect about 20 of referrals for behavioral healthcare from the various zip codes of the northern Cook county including the city of Chicago of Chicago and the northern suburbs where most of my patients reside in those zip codes.
2) An estimated number of 20 patients may be refer to Northbrook Behavioral Hospital on a monthly basis and would expect to continue to refer over a 24-month period. This could be for an evaluation, referrals or admission for mental health or addiction care.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

Sincerely,

Syed Rahim, MD, ABPN
Board Certified Psychiatrist
Mind Care Clinic,
Lincolnwood Medical Center

"OFFICIAL SEAL"
LISA N. KANE
Notary Public, State of Illinois
My Commission Expires 09-14-2019

State of Illinois, County of Cook
Signed and attested before me on 1/26/16
by Syed A Rahim
Lisa N Kane

Lincolnwood Medical Center, 6501 N. Lincoln Avenue, , Lincolnwood, IL 60712 • Tel: 847.242.1001 Ext. 6463 (MIND) • Fax: 847.739.7275

North Shore Psychology Specialists PC

ANNE HACHMEISTER LEVIN, Psy.D.
7798 Dada Dr.
Gurnee, Illinois 60031
Phone: 847 355 5041
FAX: 847 948-5262
E-mail: AHLPSYDOC@ sbcglobal.net

January 28 , 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 W. Jefferson St.
Springfield, Illinois 62761

RE; US Health Vest's Certificate of Need Applications for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of need for a behavioral hospital in Northbrook, Illinois.

As a Clinical Psychologist at Brookdale Northbrook, in Northbrook, Illinois, my patients have experienced frequent delays in accessing inpatient psychiatric care mainly due to bed shortages. There have been a number of instances when patients have had to wait an unreasonable time to access care.

Recently I have had three patients, all residing in the zip code 60092, who experienced significant delays in receiving inpatient psychiatric care due to a significant lack of psychiatric beds in the area. As a result one patient was sent to Oak Lawn, Illinois, effectively causing her to be prevented from receiving out patient follow-up. The long term consequences of her inability to secure follow up care have been quite detrimental

I anticipate, based upon recent history, that three to six patients per month would be referred by me for either admission, medication management/ evaluation. In this area there is a notable shortage of psychiatrists willing to treat residents in long term care facilites, and as a consequence having reasonable proximity to a behavioral health hospital is critical for this population.

My practice focuses on providing psychotherapy, evaluation and consultation to Senior Living facilities in the Chicago NorthShore suburbs.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital

I urge you to support the approval of US Health Vest's application for Northbrook Behavioral Hospital Approval of US HealthVest's application to increase access to these critical services.

Very truly yours,

Dr. Anne H. Levin , Psy D.
Licensed Clinical Psychologist

Sword to me this 28th day
of January, 2016

OFFICIAL SEAL
EGBERT V. ASHLEY
Notary Public - State of Illinois
My Commission Expires Apr 07, 2016

THE JOSSELYN CENTER
Excellence in Community Behavioral Health

405 Central Avenue
Northfield, IL 60093
847/441-5600
Fax 847/441-7968
www.josselyn.org

Susan B. Resko, M.B.A.
President

January 26, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a Licensed Clinical Social Worker, and Program Director of Clinical Services at The Josselyn Center located at 405 Central Avenue, in Northfield, Illinois our patients have often experienced delays in accessing inpatient psychiatric care while being assessed in a hospital emergency room, mainly due to bed shortages that accept Medicaid clients.

We provide outpatient mental health care to clients from 60 communities. We have referred approximately 10 clients for emergency room assessments in the past year. Client zip codes are not available because our system does not track them.

We as a provider may refer one client per month to the Northbrook Behavioral Hospital, and could expect to continue to refer two a month over a 24-month period; this would be for an evaluation, referral or admission for mental health or addiction care.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

Sincerely,

Suzan Eckstein LCSW

Suzan Eckstein, LCSW
Program Director of Clinical Services
The Josselyn Center

OFFICIAL SEAL
DENISE M PAEZ
Notary Public - State of Illinois
My Commission Expires Feb 2, 2019

Denise M. Paez
1.26.2016

Thodur Ranganathan, M.D.
Adult Psychiatry
(773) 947-7500

January 22, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US HealthVest's Certificate of Need application for a behavioral hospital in Northbrook.

I am an independently practicing psychiatrist working in three different hospitals in Chicago and its suburbs. I am very aware of the need for more psychiatric hospital beds in the greater Chicagoland area and have experienced difficulty finding available beds, and delays for patients in emergency department settings in finding beds for them to be transferred to. Emergency departments in Illinois have seen a great rise in presentation of psychiatric patients but not a corresponding increase in availability of appropriate, accessible care. We need more beds in Illinois as well as a more appropriate distribution of them for better accessibility. For instance, I often treat patients in the west suburban hospital I am on staff at who have come from hours away due to having no care in their areas. The north suburban area seems to be one of those weaknesses, so I believe a hospital in Northbrook would be well received and utilized.

My partner and I hospitalize approximately 100 patients per month at one of our hospitals in the western suburbs and at least 90 at the other in the city. The third hospital does not have psychiatry but I perform all the consults there. We also maintain a very large base of patients from the northern suburbs where this project is proposed, because my partner had built a very large population of patients out of his Des Plaines office, when he was medical director of Forest Hospital; and we have maintained them. These patients come from Des Plaines, Glenview, Niles, Morton Grove, Wilmette, Evanston, Skokie, Mount Prospect and Highland Park to name a few. I am certain that these suburbs are in that catchment area even though I do not know the Zip Codes.

I not only will refer to Northbrook Behavioral Hospital but I have already discussed coming to practice there myself in caring for these patients; should this hospital open. I would easily estimate my referrals to this hospital will be between 70-80 per month on a permanent basis, as our volume remains highly consistent, year after year.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

Sincerely,

T Ranganathan

Thodur Ranganathan, M.D.
Psychiatrist

Signed before me this 22nd day of January 2016
Joanne M Rossman

OFFICIAL SEAL
JOANNE M ROSSMAN
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:10/15/17

7531 S. Stony Island, Chicago, IL. 60649

ATTACHMENT-15B

KGH
Consultation & Treatment, Inc.
Helping Kids Reach Their Potential
Educating Families Along The Way.

Pediatric Center

KGH
Consultation & Treatment, Inc

Teen & Young Adult Center

January 28, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a mental health professional at KGH Consultation & Treatment, Inc. located in Northbrook, IL my patients have experienced frequent delays in accessing inpatient psychiatric care mainly due to bed shortages. There have been many times patients have had to wait to access care.

Within the past year, KGH Consultation & Treatment, Inc. has referred 4 patients for behavioral healthcare. Patient zip codes are not available because our system does not track them.

KGH Consultation & Treatment, Inc. estimates that we could refer 1 patient to Northbrook Behavioral Hospital on a monthly basis and would expect to continue to refer over a 24-month period. This could be for an evaluation, referrals or admission for mental health care.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

Sincerely,

Jill Holleder M.A., BCBA
Clinical Director
KGH Consultation & Treatment, Inc.

State of Illinois, County of Cook
Signed and attested before me on 2/2/16
by Jill M. Hollederer

"OFFICIAL SEAL"
LISA N. KANE
Notary Public, State of Illinois
My Commission Expires 09-14-2019

Lisa N Kane

January 19, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Ms. Avery:

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a psychiatrist at St. Francis Hospital located in Evanston, Illinois, my patients have experienced frequent delays in accessing inpatient psychiatric care mainly due to bed shortages. There have been many times patients have had to wait to access care.

My service refers about 2-3 patients per week for inpatient psychiatric treatment. Though I do not formally track the zip codes of my patients, the overwhelming majority of my patients reside in the normal catchment area for St. Francis Hospital which serves Evanston, Illinois and the neighboring communities. The ZIP code for the hospital is 60202.

I would anticipate referring about 5 patients per month to Northbrook Behavioral Hospital for a 24 month total of 120 patients.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

Sincerely,

Eugene Kwon, M.D.
Psychiatrist

SUSAN NEWTON
Official Seal
Notary Public - State of Illinois
My Commission Expires Jul 1, 2019

01/25/2016

ATTACHMENT-15B

rosewood
CARE CENTERS

February 4, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a Nursing Home Administrator at Rosewood Care Center of Northbrook , the residents have experienced frequent delays in accessing inpatient psychiatric care mainly due to bed shortages. There have been many times patients have had to wait to access care.

Over the last year, the number of referrals for behavioral healthcare from RCC-NOR was 4 and they were all from 60062 zip code.

An estimated number of patients that RCC-NOR may refer to Northbrook Behavioral Hospital on a monthly basis would be 1 and we would expect to continue to refer 1 to 2 patients over a 24 –month period.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

Sincerely,

Amy Saltzman
Administrator
Rosewood Care Center of Northbrook

State of Illinois, County of Lake
Signed and attested before me on 2-4-16
by Amy Ann Saltzman

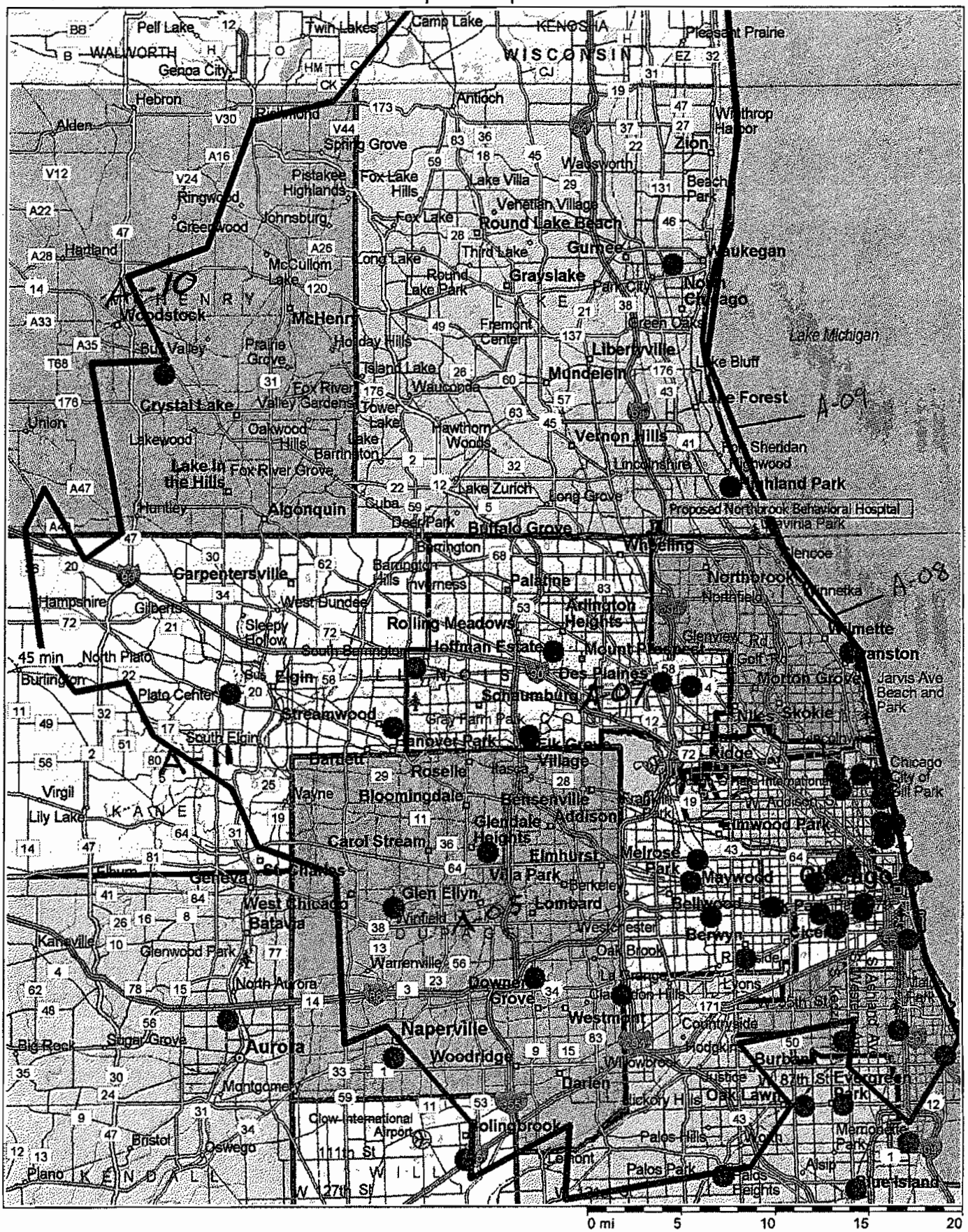
OFFICIAL SEAL
ELENI BOTINIS
Notary Public - State of Illinois
My Commission Expires Apr 17, 2016

1110.730(b)(1) - Planning Area Need - 77 Ill. Adm. Code 1100 (Formula Calculation)

A) The number of beds to be established for each category of service is in conformance with the projected bed deficit specified in 77 Ill. Adm. Code 1100, as reflected in the latest updates to the Inventory.

The February 17, 2016 update to the August 25, 2015 Inventory of Health Care Facilities and Services and Need Determinations - Hospitals shows a need for AMI services of 29-beds and 24-beds respectively for Planning Areas A-08 and A-09. The Applicant is proposing 100-beds to address the needs of these two respective Planning Areas and the overwhelming needs as identified by the Mental Health Agencies and providers to include CBH. Moreover, by contrast, the Northern Chicago suburbs appear to be void of AMI services as compared to the City and its southern and western suburbs. Refer to the Microsoft MapPoint map identifying all AMI providers in the greater Chicagoland area appended as **ATTACHMENT-22B1a**.

AMI Hospital Map 8-28-2015



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ATTACHMENT-22B1a

1110.730(b)(2) - Planning Area Need - Service to Planning Area Residents

The proposed project will provide AMI services to the residents of the Planning Area residents of both A-08 and A-09 Planning Areas. Additionally, the HFSRB rules require an Applicant's service area to look at a 45-minute travel time contour of the proposed project. As this travel time contour takes in the Southern Chicago Suburbs past the Wisconsin/Illinois border and as far West as DuPage County, the referrals provider for the project focus more narrowly on the Northern Suburbs and, thus, more specifically, to the areas primarily including Planning Areas A-08 and A-09. Refer to **ATTACHMENT-22B2a** for the referral letters identifying where the referrals are coming from. Given the expanse of the geographical service area required by this process (45-minute travel time) compliance to this item is achieved. However, it should be known that the referral sources that track the origin for those they serve and refer have provided the majority of referrals addressing those within Planning Areas A-08 and A-09.

Northbrook Behavioral Hospital
Hospital/Physician Referral Letters

Facility Name	Signed by:	historical 1 yr		projected 24 months		projected monthly	
		min	max	min	max	min	max
Abbott House	Ivy Fishman	24.00	24.00	50.00	50.00	2.08	2.08
Associates in Behavioral Science	Alfa Murphy	468.00	468.00	840.00	840.00	35.00	35.00
Behavioral Health Care Associates	Blaise J Wolfrum, MD, FAPA	400.00	400.00	400.00	400.00	16.67	16.67
Brightside Clinic	Kenji Oyasu MD	60.00	72.00	60.00	72.00	2.50	3.00
Brookdale Northbrook Senior Living	Tina Cooper	14.00	14.00	24	28	1.00	1.17
Chicago Behavioral Hospital	Anthony DeJoseph, PsyD	672.00	672.00	1152.00	1200.00	48.00	50.00
counseling speaks	Kasia Wereszczynska, MA, LCPC, RYT	Does not track		720.00	960.00	30.00	40.00
David Bawden MD	David Bawden MD	30.00	30.00	60.00	60.00	2.50	2.50
Eugene Kwon, MD,	Eugene Kwon, MD	104.00	156.00	120.00	120.00	5.00	5.00
Harbor House	Savannah Alderink	3.00	3.00	24.00	24.00	1.00	1.00
Mark D Parisi, PsyD & Associates	Mark D Parisi, PsyD	36.00	36.00	72.00	72.00	3.00	3.00
Maryville Academy	Edgar Ramos, PsyD	150.00	150.00	240.00	360.00	10	15
Mathers Clinic	Renee Shopp RN, CADC	Does not track		840.00	840.00	35.00	35.00
Meier Clinics	Nancy Meier Brown	66.00	66.00	122.00	122.00	5.08	5.08
Mental Health Solutions	Bright Fellowes, PsyD	50.00	50.00	100.00	100.00	4.17	4.17
Mental Health Solutions	Ashley Pasen Shields						
Mind Care Clinic	Sayed Rahim MD ABPN	Does not track		480.00	480.00	20.00	20.00
North Shore Psychology Specialists, PC	Dr Anne H Levin, Psy.D	Does not track		72.00	144.00	3	6
The Josselyn Center	Susan Eckstein, LCSW	10.00	10.00	24.00	48.00	1	2
Thodur Ranganathan, MD	Thodur Ranganathan, MD	2280.00	2280.00	1680.00	1920.00	70.00	80.00
KGH Consultation & Treatment, Inc.	Jill Hollederer MA, BCBA	4.00	4.00	24.00	24.00	1.00	1.00
Rosewood Care Center of Northbrook	Amy Saltzman	4.00	4.00	1	2		
		4375.00	4439.0	7105.0	7866.0	296.0	327.7
						3552.0	3932.4

ATTACHMENT-22B2a

February 8, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am the CEO of Chicago Behavioral Hospital in Des Plaines, Illinois and I am writing this letter in support of US HealthVest's Certificate of Need application for a behavioral hospital in Northbrook. US HealthVest acquired Chicago Behavioral Hospital ("CBH") on November 3, 2014 from Maryville Academy. Due to renovations that were in process prior to the acquisition, only 78 of the 125 licensed beds were available for use. We expanded services to adults and senior adults and grew from a census in the single digits at the time of the acquisition to full capacity (80%+) in under a year.

In 2015, we deflected 672 patients referred to our hospital in 2015 because we did not have a bed available. While we it is difficult to track where these deflected patients have gone for care, we understand that many have either gone without care or have experienced significant wait times and have had to travel great distances for care. Professional referral sources often verbalize having difficulty with placement because "everyone is full". It has not been unusual for them to note that they have had significant delays finding alternate beds for patients because other hospitals in the area run full. In 2016, we gained access to our newly renovated units and once again see rapid bed occupancy.

Of the 672 deflected patients, 111 patients were from planning areas A-08 and A-09 or zip codes 60016, 60026, 60010, 60030, 60035, 60045, 60046, 60048, 60061, 60085, 60076, 60202 and 60645.

The distribution of beds clearly slights the northern suburbs. Having a relationship with over 50 emergency departments, we know from nurses, crisis workers and physicians in these settings that patients have had to wait long periods in emergency rooms in order to access care. This is something that common and routine problem in many parts of Illinois.

Today, area hospitals that are within a 45 minute drive from CBH and similarly to the Northbrook project, continue to send a significant number of referrals due to their own psychiatric units being full, not treating particular types of patients or not having inpatient psychiatric care. In looking at data from the last ten months since starting adult services, some examples of the numbers of these referrals come from: Evanston Northshore Hospital (52), Advocate Good Shepherd (91), Northwest Community (92), Linden Oaks (82), Community First Hospital (60), Condell Medical Center (32), Northwestern Medicine Central DuPage Hospital (52), Alexian Brothers Behavioral Health Hospital (39), Advocate Lutheran General (115) and Palos Community Hospital (44). The total of referrals coming from hospitals only within 45 minutes travel has been 1,099 for this past ten month period.

MENTAL HEALTH & CHEMICAL DEPENDENCE SERVICES
555 WILSON LANE • DES PLAINES, ILLINOIS 60016
P: 847-768-5430 • F: 847-768-5478
WWW.CHICAGOBH.COM

ATTACHMENT-22B2a

CBH
CHICAGO
BEHAVIORAL HOSPITAL

Our occupancy at CBH has grown to 87%, 86%, 84%, and 81% in September, October, November and December of 2015 respectively, without the aforementioned plans to increase marketing, and we expect even greater growth this spring. Chicago Behavioral Hospital would also need to deflect patients to a Northbrook Hospital. Our growth projections conservatively reach 84% in April and 90% in May of 2016. We expect our growth trajectory to continue beyond our 125 beds at CBH by the mid 2016 and that we will again have the dilemma of deflecting patients due to bed availability. This would be well before the Northbrook facility could conceivably be opened.

With all of the deflections, marketing efforts, new lines of service development and practices that we are attracting, we are projecting significant referrals to Northbrook Behavioral Hospital from CBH. We believe with our experience of 15% deflections from the Northbrook catchment area Zip Codes, as well as our deflections from other underserved geographies, that CBH alone will refer a total of 48-50 patients per month to Northbrook which will be from 576 to 600 annually. We do not see this need reducing and believe it will be very consistent throughout the years to come.

The information I've included here has not been used to support any other pending or approved CON application for a behavioral health hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services in the north suburban areas of Illinois.

Sincerely,

Anthony DeJoseph

Anthony DeJoseph, Psy.D.
CEO
Chicago Behavioral Hospital

Subscribed and sworn before me this 18th day of February 2016

Joanne M Rossman

OFFICIAL SEAL
JOANNE M ROSSMAN
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:10/15/17

MENTAL HEALTH & [illegible]
555 WILSON LANE • DES PLAINES, ILLINOIS 60016
P: 847-768-5430 • F: 847-768-5478
WWW.CHICAGOBH.COM

ATTACHMENT-22B2a

Abbott House

personal attention in a homelike setting

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, IL 62761

RE: US Health Vest's Certificate of Need Application for a behavioral hospital in Northbrook.

Dear Ms. Avery,

I am writing this letter in support of US Health Vest's Certificate of Need application for a behavioral hospital in Northbrook.

As a mental health professional, administrator of Abbott House Nursing Home, LLC, located in Highland Park, my consumers have experienced frequent delays in accessing local inpatient psychiatric care mainly due to bed shortages for mental health patients. There have also been many occasions when local hospitals have returned patients, our consumers, who were actively psychotic and suicidal to our facility without treatment.

Over the last year our facility has referred 24 consumers for inpatient behavioral healthcare to Chicagoland hospitals. We have not been able to refer consumers to a local hospital for inpatient behavioral healthcare as there is not a facility near the 60035 zip code which accepts psychiatric inpatient behavioral healthcare. Our facility estimates that the number of consumers that would be referred for inpatient behavioral healthcare would be at least 50 consumers in a 24 month period.

The information I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US Health Vest's application for Northbrook Behavioral Hospital. Approval of US Health Vest's application will increase access to these much needed and important services.

Sincerely,

Ivy K Fish

Ivy Fishman
Administrator
Abbott House Nursing Home, LLC

OFFICIAL SEAL
B GHASWALA
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:07/09/16

B Ghaswala
1/29/16

tel. 847.432.6080 fax 847.432.3255

www.abbotthousenursing.com

ATTACHMENT-22B2a

Associates in Behavioral Science
ABS
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Quality Behavioral Healthcare
6201 W. Cermak Road, Berwyn, IL 60402 · (ph.) 708.788.8808 (fax) 708.788.8549

January 15, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a large interdisciplinary psychiatric practice that works across five hospitals in the Chicago area, we have found that there is very poor access to psychiatric care in the northern suburbs very near Northbrook, and a project of this nature would be quite helpful for accessibility, and in solving the bed shortage in the northern area of Illinois. Patients from this area often have to wait to access care, and quite frankly it's really not available in Northbrook and its surrounding suburbs. Patients characteristically have to be taken out of that area, either down into Chicago or into the far western suburbs for care. There is simply no options available, and we know this because we receive referrals from this area that we are forced to hospitalize very far from our North suburban referral sources.

We hospitalize well over 2000 patients per year, and the fairly significant portion of them come from the north suburban area of which Northbrook is a part. Zip codes for this total are from across the state and too numerous to list. However, with regard to the number of patients that we've had to hospitalize away from their home from that area, whom would be better served in a hospital in Northbrook, we have had approximately 468 admissions from Zip Codes 60089, 60714, 60202, 60076 and 60026. To put this in perspective, we have had to take patients from these ZIP Codes, all of which either border or are surrounding Northbrook, and treat them as far as 30-35 miles away. It would make more sense to treat people near their own community.

Accordingly, we would estimate being able to refer the majority of those 468 patients at the Northbrook Behavioral Hospital, and given that it is not likely that 100% (39) of this group would end up there, we would approximate some 35 of these patients to be hospitalized at the site per month.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these geographically and gravely needed services.

Sincerely,

Alfa Murphy
Practice Manager
ABS

signed before me this 15th day of January, 2016 in Cook County

OFFICIAL SEAL
JOANNE M ROSSMAN
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:10/15/17

Joanne M Rossman

ATTACHMENT-22B2a

Behavioral Health Care Associates

1375 E. Schaumburg Rd, Suite 260
Schaumburg, IL 60194

484 N. Lee Street
Des Plaines, IL 60016

Phone (847) 895-4540 Fax (847) 895-4544 Ans. Service (847) 758-2892

Schaumburg Des Plaines Chicago Park Ridge Hoffman Estates Elk Grove Village

January 20, 2016

Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook, Illinois.

I am a psychiatrist in practice on the northwest side of Chicago and suburbs for the past two decades over which time I have seen several psychiatric facilities close their doors leading to patients having to wait longer at a general medical facility for transfer or being turned away at the admissions office due to lack of beds. My patients now experience this delay on a routine basis. The area is now in short supply and we could use an additional facility managed by US Health Vest who has many decades of experience in psychiatric hospital facility construction and development of quality programs.

Our group practice has referred over 400 patients for inpatient admission and over 600 for partial hospitalization in the past year from our practice locations in zip codes 60631, 60194 and 60016. We estimate that this number will increase to 500 inpatients in 2016 and that once the new hospital is open in Northbrook about two hundred of these in need patients would benefit from an admission to this new state of the art facility for mental health and substance abuse care. These patients live primarily in the following zip code areas. 60015, 16, 22, 25, 26, 29,56, 62, 70, 90, 91, 93, 02, 10, 11, 15, 20 30, 35, 37, 40, 41, 42, 43, 44, 45, 46, 47, 48, 53, 60, 61, 64, 69, 73, 75, 76, 77, 79, 83, 84, 85, 86, 87, 88, 89, 91, 93, 96, 99, 60201, 02, 03, 04 ,08, 09, 60626, 45, 59 60712, 14.

The above information has not been used to support any other facilities pending or approved CON application.

Please register my support for the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will improve the quality of care and increase access to these necessary services.

"OFFICIAL SEAL"
LISA N. KANE
Notary Public, State of Illinois
My Commission Expires 09-14-2019

Sincerely,

Blaise J. Wolfrum, MD, FAPA
Sworn to and subscribed before me this 21 day of January, 2016, county of Cook.
State of Illinois

BRIGHTSIDE

January 21, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a emergency room physician on staff at multiple sites in the Chicago metro area, my patients have experienced frequent delays in accessing inpatient psychiatric care mainly due to bed shortages. There have been many times patients have had to wait to access care. Not uncommonly patients wait over 24 hrs further congesting the emergency room for other medical emergencies.

In addition to my emergency medicine practice I have opened an out patient Opiate Addiction Treatment clinic in Northbrook Ill. (333 Skokie Blvd Suite 112 Northbrook Il 60062). Many, if not all of my patients suffer from dual diagnosis situations depression or anxiety in conjunction with substance abuse. We have had to refer a minimum of 5-6 patients per month outside of the local area for inpatient stabilization prior to outpatient treatment. (Zip codes not available as our system does not track them) Given the recent climate in addiction and its comorbid psychiatric illnesses we expect that this metric will continue. As our clinic continues to grow this number will increase.

A new facility will provide a necessary resources and help keep the patients closer to their families. Mental health patients in the northern Chicago suburbs and its surrounding communities will greatly benefit form a new facility.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

Sincerely,

Kenji Oyasu

Kenji Oyasu MD
Chicago Area Emergency Physician
Executive Medical Director
BRIGHTSIDE Clinic
333 Skokie Blvd., Suite 112
Northbrook, IL 60062
224-205-7866 o 847-341-9907 c
http://www.brightsideclinic.com

Signed by Kenji Oyasu
on this 22nd of January
2016

Joanne M Rossman

OFFICIAL SEAL
JOANNE M ROSSMAN
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:10/15

ATTACHMENT-22B2a

BROOKDALE
NORTHBROOK
SENIOR LIVING SOLUTIONS
ALL THE PLACES LIFE CAN GO™

January 27, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a healthcare provider at Brookdale Northbrook Senior Living located in Northbrook IL, our patients have experienced frequent delays in accessing inpatient psychiatric care mainly due to bed shortages. There have been many times patients have had to wait to access care, or have been sent many miles away for an available bed.

Over the past year we have had 14 patients all from this facility, area code 60062, that were in need of Behaviorial Health Services and they have had to go as far away as Oak Lawn and Elk Grove Village for the needed care. This is very stressful for both patients and families and takes the patients away from their healthcare network here in Northbrook, which does not provide good continuity of care.

We estimate that we would consistently have 12 to 14 patients that we would be referring to Northbrook Behavioral Health annually and more if availability is closer to their home.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

Sincerely,

Tina Cooper

Tina Cooper
Director of Resident Services
Brookdale Northbrook Senior Living

1/27/2016

OFFICIAL SEAL
EGBERT V. ASHLEY
Notary Public - State of Illinois
My Commission Expires Apr 07, 2016

4501 Concord Lane · Northbrook, IL 60062
Telephone (847) 803-7100 · Fax (847) 803-7101
brookdale.com

ATTACHMENT-22B2a

counselingspeaks
1580 N Northwest # 305D
Park Ridge, IL 60068
(331) 240-0044
counselingspeaks@gmail.com
www.counselingspeaks.com

January 26, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a mental health professional at counseling speaks, LLC located in Park Ridge, my patients have experienced frequent delays in accessing inpatient psychiatric care mainly due to bed shortages. There have been many times patients have had to wait to access care.

counseling speaks, LLC estimates referring a number in the area of 30-40 patients to Northbrook Behavioral Hospital on a monthly basis for hospitalization and would expect to continue to refer this over a 24-month period. This could be for an evaluation, referrals or admission for mental health or addiction care. I do not track my patients by zip code, but the fact that many of them come from suburbs north of our office places them in the service area of the proposed Northbrook Behavioral Hospital.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

Sincerely,

Kasia Wereszczynska, MA, LCPC, RYT
Clinical Therapist
counseling speaks, LLC

Signed before me this 26th day of January 2016 in Cook County, IL
Joanne M Rossman

OFFICIAL SEAL
JOANNE M ROSSMAN
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:10/15/17

DAVID GEORGE BAWDEN, M.D.
4711 Golf Road
Suite 1200
Skokie, Illinois 60076-1200
847-446-7911

January18 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a psychiatrist at Chicago Behavioral hospital located in Des Plains and Lutheran General Hospital located in Park Ridge, my patients have experienced frequent delays in accessing inpatient psychiatric care mainly due to bed shortages. There have been many times patients have had to wait to access care.

Over the past year I have referred approximately 30 inpatients from zip codes 60714, 60047, 61107 & 60062 for inpatient evaluation. I would expect a similar or larger volume equaling about 3 to 4 per month and approximately 60 in 24 months. These could be for an evaluation or admission for mental health or addiction care.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

Sincerely,

David Bawden, M.D.

Signed before me this 18th day of January.
2016 Lake County, Illinois

OFFICIAL SEAL
JOANNE M ROSSMAN
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:10/15/17

Joanne M Rossman

ATTACHMENT-22B2a

Maryville Academy

1150 North River Road
Des Plaines, IL 60016
(847) 294-1999

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a clinical psychologist and supervisor at Maryville Academy in Des Plaines, which is very close to the proposed location in Northbrook, my patients have not only experienced delays in accessing inpatient psychiatric care due to bed shortages, but have often had to be sent all across the state, far from their home because of this. We clearly need more beds in this north suburban area which Northbrook is a part of, and accessibility there would make far more sense than what we have to work with at present. We have many problems and delays in accessing care because of a lack of an adequate number of beds in this area.

We have sent over 150 children for hospitalization in the past year spread across numerous hospitals and would prefer to be able to keep them closer to Maryville than has been possible. They are all from the 60016 zip code, as we are residential.

I would estimate that we would send between 10-15 referrals monthly for inpatient psychiatric care at a facility in Northbrook whenever we have access to it. Our referrals are consistent and steady in number year after year, due to the nature of our organization.

The information that I have included here has not been used to support any other pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase the access to these important services that we so desperately need in the northern suburbs surrounding Northbrook...

Sincerely,

Edgar Ramos, Psy.D.
Licensed Psychologist
Maryville Academy

Notarized this 18th of January 2016 before me

Joanne M Rossman

OFFICIAL SEAL
JOANNE M ROSSMAN
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:10/15/17

ATTACHMENT-22B2a

HARBOR HOUSE

January 26, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a Dementia Care Facility at Harbor House located in Wheeling, my patients have experienced frequent delays in accessing inpatient psychiatric care mainly due to bed shortages. There have been many times patients have had to wait to access care.

Over the last year we have had three referrals for behavioral healthcare from our facility in 60090 to local hospitals. We may refer one patient a month, twelve a year, to Northbrook Behavioral Hospital for evaluation, referrals or admission for mental health care.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

Sincerely,

Savannah Alderink
Executive Director

Harbor House
Dementia Care Facility
760 McHenry Road
Wheeling, IL 60090

To Be Completed by a Notary Republic

I, Amy Bable, attest that this letter was signed by the afore mentioned party on this 26th day of January, 2016.

Signature of Notary Republic

AMY BABLE
OFFICIAL SEAL
Notary Public, State of Illinois
My Commission Expires
September 25, 2019

MARK D. PARISI, PSY.D. & ASSOCIATES, P.C.
Serving the Behavioral Healthcare Needs of Metro Chicago Since 2000

January 19, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a Clinical Psychologist and Administrator / Owner of two large group private practices headquartered in Mount Prospect with satellite offices near Evanston, Illinois, my patients have experienced frequent delays in accessing inpatient psychiatric care mainly due to bed shortages. There have been many times patients have had to wait to access care.

In the past year, we have had occasion to refer, on average, about three clients per month for inpatient or intensive outpatient-based treatment – the type of services that will be offered by Northbrook Behavioral Hospital. While we do not track client zip codes for these referrals, I can tell you that there are few, if any, options for this type of treatment near my office in Chicago located in zip code 60646. My clients often must travel to Chicago Behavioral Hospital in Des Plaines, Alexian Brothers' Behavioral Hospital in Hoffman Estates, or Northwest Community Hospital in Arlington Heights – none of which are especially close to my office. I would expect to channel a majority of these referrals – perhaps as many as 72 over a twenty-four month period – to Northbrook Behavioral Hospital and would expect on-going utilization of their services if they are allowed to build this much-needed behavioral health hospital.

The information included in this Certificate of Need letter has not been included in support of any other pending or approved application for a behavioral healthcare hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

800 E. Northwest Highway, Suite 106, Mount Prospect, Illinois 60056
Tel. (847) 909-9858 / Fax. (847) 299-4952

Very Truly Yours,

Mark D. Parisi, Psy.D.

MARK D. PARISI, PSY.D.
Licensed Clinical Psychologist 071-005598
Administrator / Owner

NOTARY PUBLIC ATTESTATION

State of Illinois County of Cook

By signature and seal below, I attest to the authenticity of this Certificate of Need letter composed by the above individual.

Lisa Kane

(signature of Duly Licensed Notary Public)

Lisa N Kane

(printed name of Notary Public)

"OFFICIAL SEAL"
LISA N. KANE
Notary Public, State of Illinois
My Commission Expires 09-14-2019

SEAL OF NOTARY PUBLIC

State of Illinois, County of Cook
Signed and attested before me on 1/26/16
by Mark D. Parisi

800 E. Northwest Highway, Suite 106, Mount Prospect, Illinois 60056
Tel. (847) 909-9858 / Fax. (847) 299-4952

January 27, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

Mathers Clinic is a mental health and substance abuse practice in Rockford, Woodstock, Crystal Lake and Elgin. We also provide psychiatric services to 14 Assisted Living/Nursing Homes. Our patients have experienced ongoing delays in accessing inpatient psychiatric care mainly due to bed shortages. There have been multiple times when patients have to wait to access care.

We do not have a report that tracks inpatient referrals or zip codes of inpatients. We do have a list of patient zip codes that would benefit from the new location in Northbrook. Our patients come from Northbrook 60062, Prospect Heights 60070, Wheeling 60090, Barrington Hills 60010 and 60011, Fox Lake 60020, Grayslake 60030, Gurnee 60031, Highland Park 60035, Ingleside 60041, Island Lake 60042, Lake Bluff 60044, Kildeer 60047, Libertyville 60048, Mundelein 60060, Vernon Hills 60061, North Chicago 60064, Round Lake 60073, Waukegan 60079, Buffalo Grove 60089, Zion 60099, and Niles 60714.

As a provider we estimate an average of 35 patients would be referred on a monthly basis to Northbrook Behavioral Hospital and would expect to refer over a 24-month period. This could be for an evaluation, referrals or admission for mental health or addiction care.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

Sincerely,

Renee Shopp RN CADC

Renee Shopp RN, CADC
Practice Manager
Mathers Clinic

Subscribed & Sworn to
Before me this 27th day
of Jan, 2016.

Regina L Kamin
Notary Public

OFFICIAL SEAL
REGINA L KAMIN
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES 10/01/17

MATHERS CLINIC
The Center for Counseling Services

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Rockford: 6090 Strathmoor Drive, Suite 1 ~ Rockford, IL 61107 Fax: 815.397.2712
Woodstock: 715 West Judd Street ~ Woodstock, IL 60098 Fax: 815.338.7728
www.themathersclinic.com
815.444.9999

Elgin: 585 North Tollgate Road, Suite E ~ Elgin, IL 60123
www.elginmethadoneclinic.com
Fax: 847.628.6064
847.462.6099

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January 22, 2016

Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US Healthvest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery:

I am writing this letter in support of US HealthVest's Certficate of Need application for a behavioral hospital in Northbrook.

Meier Clinics provide mental health services in eleven states, including locations in Illinois in Northbrook, Wheaton, Chicago and Geneva. It is not unusual for our patients to experience frequent delays in accessing inpatient psychiatric care, often due to bed shortages or lack of services.

I solicited feedback from the following clinical staff regarding inpatient referrals:

Gary A. Casaccio, M.D., Illinois Medical Director
Steve Lee, M.D., Director of Breakaway
Kim Lurvey, LCSW, Northbrook Clinic Director
Christine Zielinski, LCSW, National Intake Coordinator

They reported that they have referred approximately 66 people to inpatient care over the past 12 months. This is not reflective of the total number we have referred as we have over 50 clinical staff in Illinois, so the above is a very conservative figure. The estimated number of potential referrals over a 24-month period after the project is completed would conservatively be 122 people.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US Health Vest's application will increase access to much needed services.

Sincerely,

Nancy Meier Brown

Nancy Meier Brown
President
Meier Clinics

State of Illinois County of DuPage

This instrument was acknowledged before me on Jan. 22, 2016 by Nancy Meier Brown.

SANDRA K. NEWPORT
OFFICIAL SEAL
Notary Public - State of Illinois
My Commission Expires
September 17, 2017

Signature of Notary Public: Sandra K. Newport

mhs
MENTAL HEALTH SOLUTIONS

Bright Fellowes, PsyD
Mental Health Solutions
PO Box 684
Mundelein, IL 60060

Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest Certificate of Need Application, Northbrook Behavioral Hospital

January 26, 2016

Dear Ms. Avery,

This letter comes to you in support of US Healthvest's Certificate of Need application for the inpatient behavioral healthcare facility they have proposed building in Northbrook, IL.

As a Licensed Clinical Psychologist and President of a multidisciplinary private, group, behavioral healthcare practice with offices throughout the northern suburbs of Chicago, I can attest to the shortage of nearby facilities offering immediate inpatient care to area residents, specifically in Lake County and Cook County. We find that many current and potential clients are unable to find open beds at nearby inpatient psychiatric and behavioral health facilities and are forced to wait on prohibitively long wait lists for treatment, or else travel great distances to find openings at out-of-state facilities. Others are simply unable to obtain necessary treatment.

I would estimate that as a practice, Mental Health Solutions' providers have referred upwards of fifty clients within the last year to local hospitals and inpatient facilities. These clients are residents of ZIP codes ranging as far south as Chicago and as far north as the Wisconsin boarder, reaching from Norshore suburbs such as Northbrook as far west as Rockford, IL.

I would anticipate that an increase in the availability of inpatient mental healthcare in the area would positively impact my own practice's ability to meet the needs of a growing number of clients, such that over the first twenty four months following its opening, we might refer in excess of one hundred clients (about five clients per month, on average) for evaluation and/or admission.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's behavioral hospital, and I thank you for your assistance in providing access to care to the residents of your area.

Sincerely,

Bright Fellowes, PsyD
Mental Health Solutions, President and Licensed Clinical Psychologist

Signed On: this 26th day of Jan, 2016 before me June R Emrich

Signature June R Emrich

OFFICIAL SEAL
JUNE R EMRICH
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:04/13/18

Barrington Courte
101 Lions Drive
Suite 115
Barrington, IL
60010

201 E. Park Street
Unit B
Mundelein, IL
60060

Phone: (847) 566 – 0164

Fax: (847) 566 – 0375

www.MHShelps.com

ATTACHMENT-22B2a

mhs
MENTAL HEALTH SOLUTIONS

Ashley Pasen Shields
Mental Health Solutions
PO Box 684
Mundelein, IL 60060

Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest Certificate of Need Application, Northbrook Behavioral Hospital

January 26, 2016

Dear Ms. Avery,

I'm writing you today to support US Healthvest's Certificate of Need application for the inpatient behavioral healthcare facility they have proposed building in Northbrook, IL.

As the Director of a multidisciplinary private, group, behavioral healthcare practice with offices throughout the northern suburbs of Chicago, I can attest to the shortage of nearby facilities offering immediate inpatient care to area residents, specifically in Lake County and Cook County. We find that many current and potential clients are unable to find open beds at nearby inpatient psychiatric and behavioral health facilities and are forced to wait on prohibitively long wait lists for treatment, or else travel great distances to find openings at out-of-state facilities. Others are simply unable to obtain necessary treatment.

Based on the calculationsof myself and my partner Dr. Bright Fellowes, Licensed Clinical Psychologist and President of Mental Health Solutions, we estimate that our team of behavioral health professionals have referred upwards of fifty clients within the last year to local hospitals and inpatient facilities. These clients are residents of ZIP codes ranging as far south as Chicago and as far north as the Wisconsin boarder, reaching from Norshore suburbs such as Northbrook as far west as Rockford, IL.

I believe that an increase in the availability of inpatient mental healthcare in the area would positively impact my own practice's ability to meet the needs of a growing number of clients, such that over the first twenty four months following its opening, we might refer in excess of one hundred clients (about five clients per month, on average) for evaluation and/or admission to the proposed facility.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's behavioral hospital, and I thank you for your assistance to the residents of your area by providing access to care.

Sincerely,

Ashley Pasen Shields

Ashley Pasen Shields, Director
Mental Health Solutions

Barrington Courte
101 Lions Drive
Suite 115
Barrington, IL
60010

201 E. Park Street
Unit B
Mundelein, IL
60060

Phone: (847) 566 – 0164

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www.MHShelps.com

B. PAIO
NOTARY PUBLIC
Comm. No. 06-361
STATE OF HAWAII

Signed On: 1/26/2016 before me B. Paio

Signature

NOTARY PUBLIC CERTIFICATION

Document Date: 1/26/2016 **# pgs :** 1
Notary Name: B Paio **First Circuit**
Doc. Description: US HealthVest Certificate of Need Application, Northbrook Behavioral Hospital

Notary Signature Date 1/26/2016

B. PAIO
NOTARY PUBLIC
Comm. No. 06-361
STATE OF HAWAII

B. Paio
My Commission Expires:
June 18, 2018

ATTACHMENT-22B2a

MIND CARE CLINIC

Regulate Emotions thru Relaxed Mind

January 25, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a psychiatrist at Lincolwood Medical Center located in Lincolnwood-IL, my patients have experienced frequent delays in accessing inpatient psychiatric care mainly due to bed shortages. There have been many times patients have had to wait to access care.

1) We expect about 20 of referrals for behavioral healthcare from the various zip codes of the northern Cook county including the city of Chicago of Chicago and the northern suburbs where most of my patients reside in those zip codes.
2) An estimated number of 20 patients may be refer to Northbrook Behavioral Hospital on a monthly basis and would expect to continue to refer over a 24-month period. This could be for an evaluation, referrals or admission for mental health or addiction care.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

Sincerely,

Syed Rahim, MD, ABPN
Board Certified Psychiatrist
Mind Care Clinic,
Lincolnwood Medical Center

"OFFICIAL SEAL"
LISA N. KANE
Notary Public, State of Illinois
My Commission Expires 09-14-2019

State of Illinois, County of Cook
Signed and attested before me on 1/26/16
by Syed A Rahim
Lisa N Kane

Lincolnwood Medical Center, 6501 N. Lincoln Avenue, , Lincolnwood, IL 60712 • Tel: 847.242.1001 Ext. 6463 (MIND) • Fax: 847.739.7275

North Shore Psychology Specialists PC

ANNE HACHMEISTER LEVIN, Psy.D.
7798 Dada Dr.
Gurnee, Illinois 60031
Phone: 847 355 5041
FAX: 847 948-5262
E-mail: AHLPSYDOC@ sbcglobal.net

January 28 , 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 W. Jefferson St.
Springfield, Illinois 62761

RE; US Health Vest's Certificate of Need Applications for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of need for a behavioral hospital in Northbrook, Illinois.

As a Clinical Psychologist at Brookdale Northbrook, in Northbrook, Illinois, my patients have experienced frequent delays in accessing inpatient psychiatric care mainly due to bed shortages. There have been a number of instances when patients have had to wait an unreasonable time to access care.

Recently I have had three patients, all residing in the zip code 60092, who experienced significant delays in receiving inpatient psychiatric care due to a significant lack of psychiatric beds in the area. As a result one patient was sent to Oak Lawn, Illinois, effectively causing her to be prevented from receiving out patient follow-up. The long term consequences of her inability to secure follow up care have been quite detrimental

I anticipate, based upon recent history, that three to six patients per month would be referred by me for either admission, medication management/ evaluation. In this area there is a notable shortage of psychiatrists willing to treat residents in long term care facilites, and as a consequence having reasonable proximity to a behavioral health hospital is critical for this population.

My practice focuses on providing psychotherapy, evaluation and consultation to Senior Living facilities in the Chicago NorthShore suburbs.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital

I urge you to support the approval of US Health Vest's application for Northbrook Behavioral Hospital Approval of US HealthVest's application to increase access to these critical services.

Very truly yours,

Dr. Anne H. Levin , Psy D.
Licensed Clinical Psychologist

Sword to me this 28th day
of January, 2016

OFFICIAL SEAL
EGBERT V. ASHLEY
Notary Public - State of Illinois
My Commission Expires Apr 07, 2016

THE JOSSELYN CENTER
Excellence in Community Behavioral Health

405 Central Avenue
Northfield, IL 60093
847/441-5600
Fax 847/441-7968
www.josselyn.org

Susan B. Resko, M.B.A.
President

January 26, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a Licensed Clinical Social Worker, and Program Director of Clinical Services at The Josselyn Center located at 405 Central Avenue, in Northfield, Illinois our patients have often experienced delays in accessing inpatient psychiatric care while being assessed in a hospital emergency room, mainly due to bed shortages that accept Medicaid clients.

We provide outpatient mental health care to clients from 60 communities. We have referred approximately 10 clients for emergency room assessments in the past year. Client zip codes are not available because our system does not track them.

We as a provider may refer one client per month to the Northbrook Behavioral Hospital, and could expect to continue to refer two a month over a 24-month period; this would be for an evaluation, referral or admission for mental health or addiction care.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

Sincerely,

Suzan Eckstein LCSW

Suzan Eckstein, LCSW
Program Director of Clinical Services
The Josselyn Center

OFFICIAL SEAL
DENISE M PAEZ
Notary Public - State of Illinois
My Commission Expires Feb 2, 2019

Denise M. Paez
1.26.2016

Thodur Ranganathan, M.D.
Adult Psychiatry
(773) 947-7500

January 22, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US HealthVest's Certificate of Need application for a behavioral hospital in Northbrook.

I am an independently practicing psychiatrist working in three different hospitals in Chicago and its suburbs. I am very aware of the need for more psychiatric hospital beds in the greater Chicagoland area and have experienced difficulty finding available beds, and delays for patients in emergency department settings in finding beds for them to be transferred to. Emergency departments in Illinois have seen a great rise in presentation of psychiatric patients but not a corresponding increase in availability of appropriate, accessible care. We need more beds in Illinois as well as a more appropriate distribution of them for better accessibility. For instance, I often treat patients in the west suburban hospital I am on staff at who have come from hours away due to having no care in their areas. The north suburban area seems to be one of those weaknesses, so I believe a hospital in Northbrook would be well received and utilized.

My partner and I hospitalize approximately 100 patients per month at one of our hospitals in the western suburbs and at least 90 at the other in the city. The third hospital does not have psychiatry but I perform all the consults there. We also maintain a very large base of patients from the northern suburbs where this project is proposed, because my partner had built a very large population of patients out of his Des Plaines office, when he was medical director of Forest Hospital; and we have maintained them. These patients come from Des Plaines, Glenview, Niles, Morton Grove, Wilmette, Evanston, Skokie, Mount Prospect and Highland Park to name a few. I am certain that these suburbs are in that catchment area even though I do not know the Zip Codes.

I not only will refer to Northbrook Behavioral Hospital but I have already discussed coming to practice there myself in caring for these patients; should this hospital open. I would easily estimate my referrals to this hospital will be between 70-80 per month on a permanent basis, as our volume remains highly consistent, year after year.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

Sincerely,

T Ranganathan

Thodur Ranganathan, M.D.
Psychiatrist

Signed before me this 22nd day of January 2016
Joanne M Rossman

OFFICIAL SEAL
JOANNE M ROSSMAN
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:10/15/17

7531 S. Stony Island, Chicago, IL. 60649

ATTACHMENT-22B2a

KGH
Consultation & Treatment, Inc.
Helping Kids Reach Their Potential
Educating Families Along The Way.
Pediatric Center

KGH
Consultation & Treatment, Inc
Teen & Young Adult Center

January 28, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a mental health professional at KGH Consultation & Treatment, Inc. located in Northbrook, IL my patients have experienced frequent delays in accessing inpatient psychiatric care mainly due to bed shortages. There have been many times patients have had to wait to access care.

Within the past year, KGH Consultation & Treatment, Inc. has referred 4 patients for behavioral healthcare. Patient zip codes are not available because our system does not track them.

KGH Consultation & Treatment, Inc. estimates that we could refer 1 patient to Northbrook Behavioral Hospital on a monthly basis and would expect to continue to refer over a 24-month period. This could be for an evaluation, referrals or admission for mental health care.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

Sincerely,

Jill Holleder

Jill Holleder M.A., BCBA
Clinical Director
KGH Consultation & Treatment, Inc.

State of Illinois, County of Cook
Signed and attested before me on 2/2/16
by Jill M. Holleder

"OFFICIAL SEAL"
LISA N. KANE
Notary Public, State of Illinois
My Commission Expires 09-14-2019

Lisa N Kane

January 19, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Ms. Avery:

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a psychiatrist at St. Francis Hospital located in Evanston, Illinois, my patients have experienced frequent delays in accessing inpatient psychiatric care mainly due to bed shortages. There have been many times patients have had to wait to access care.

My service refers about 2-3 patients per week for inpatient psychiatric treatment. Though I do not formally track the zip codes of my patients, the overwhelming majority of my patients reside in the normal catchment area for St. Francis Hospital which serves Evanston, Illinois and the neighboring communities. The ZIP code for the hospital is 60202.

I would anticipate referring about 5 patients per month to Northbrook Behavioral Hospital for a 24 month total of 120 patients.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

Sincerely,

Eugene Kwon, M.D.
Psychiatrist

SUSAN NEWTON
Official Seal
Notary Public - State of Illinois
My Commission Expires Jul 1, 2019

01/25/2016

ATTACHMENT-22B2a

rosewood
CARE CENTERS

February 4, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am writing this letter in support of US Healthvest's Certificate of Need application for a behavioral hospital in Northbrook.

As a Nursing Home Administrator at Rosewood Care Center of Northbrook , the residents have experienced frequent delays in accessing inpatient psychiatric care mainly due to bed shortages. There have been many times patients have had to wait to access care.

Over the last year, the number of referrals for behavioral healthcare from RCC-NOR was 4 and they were all from 60062 zip code.

An estimated number of patients that RCC-NOR may refer to Northbrook Behavioral Hospital on a monthly basis would be 1 and we would expect to continue to refer 1 to 2 patients over a 24 –month period.

The information that I have included has not been used to support another pending or approved CON application for a behavioral hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services.

Sincerely,

Amy Saltzman
Administrator
Rosewood Care Center of Northbrook

State of Illinois, County of Lake
Signed and attested before me on 2-4-16
by Amy Ann Saltzman

OFFICIAL SEAL
ELENI BOTINIS
Notary Public - State of Illinois
My Commission Expires Apr 17, 2016

1110.730(b)(3) - Planning Area Need - Service Demand – Establishment of AMI and/or CMI

> The number of beds proposed to establish a new AMI and/or CMI service is necessary to accommodate the service demand experienced by the existing applicant facility over the latest two-year period, as evidenced by historical and projected referrals, or, if the applicant proposes to establish a new hospital, the applicant shall submit projected referrals. The applicant shall document subsection (c)(3)(A) and subsection (c)(3)(B) or (C).

As the proposed project is for the establishment an AMI facility, therefore, there are no historical referrals.

Referral letters from mental health providers attesting to the total number of patients referred to AMI services over the past 12-months; estimating annual referrals to the proposed project for the 24-month period following project completion; signed and notarized; and verifying that the referrals have not been used for another pending or approved CON for AMI beds or services are appended as **ATTACHMENT-22B2a**.

Specifically, there are 22 letters of support that provide referrals for the project (21 traditional referral letters and 1 from CBH). These letters have documented that over the last 12-months these mental health resources have made referrals of between 4,375 - 4,439 patients. Based on those historical referrals and the specific geographic service area of Planning Area's A-08 and A-09, these Mental Health Resources will refer between 296.55 - 329.25 monthly referrals. This equates to an annual range of between 3,558 - 3,951 referrals. This projection is within the range that was historically referred. Due to budget restraints and resultant personnel restraints, not all mental health resources were able to track the patient origin data although many were able to indicate this data. The data shows that with the resultant average length of stays of between 8.72-7.85, target utilization can be achieved and maintained.

This project is not based on rapid population growth so that issue in not applicable to the project's need.

ATTACHMENT-22B3

NBH will provider programs for Adult psychiatric, Senior Adult, Child and Adolescents, Women Only, Extra Mile Veteran Care, Faith Based Mental Health and Dual-Diagnosis patients.

Refer to **ATTACHMENT-22B3a** for a more in-depth overview of each program to be offered.

Program Descriptions

Adult Psychiatric
The adult program offers treatment for adults who have moderate to severe psychiatric and behavioral problems. Our programs are tailored to the patient's needs enabling them to more effectively cope with their emotions and behaviors. The program purpose is to promote the maximum cognitive, social, physical, behavioral, and emotional development in each of our patients. Methods of treatment include medication management, group and individual therapy and discharge planning.

Senior Adult
Older adults often have unique and complex needs and experience physical and lifestyle changes that can negatively impact their emotional wellbeing. Psychiatric and behavioral concerns, combined with medical issues, complicate the diagnosis, care and treatment of seniors. Age-sensitive treatment and discharge planning is provided to assist our patients to achieve or regain the highest level of independence possible and help preserve their quality of life.

Children and Adolescents
Young people may experience symptoms of mental illness or encounter situations that they respond with behaviors that are a danger to themselves or others. Youth programs are evidence-based and specifically designed to help children/adolescents and their families through difficult circumstances or issues using intensive evaluation, treatment and aftercare planning with a professional multidisciplinary team treatment approach. Treatment includes group, individual, and family therapy.

Women Only
The Women's program addresses the unique mental health and chemical dependency needs of women in crisis through evidence-based therapeutic approaches. The program addresses such issues as trauma, depression related to reproductive issues, loss of pregnancy, post-partum depression, anxiety and obsessive disorders, relationship issues, eating disorders, and other serious disorders women may encounter. Only women attend the specialized therapy and educational groups. This gender specific approach enhances the effectiveness of therapy by providing a safe environment to process sensitive issues.

Extra Mile Veteran Care
Our Extra Mile Veteran Care Program provides treatment for PTSD, substance dependence and mental health issues, such as depression and anxiety in an environment designed with the veteran in mind. We understand teamwork and veterans. Our specially trained therapists and technicians will work together with veterans to help them overcome barriers and restore balance to their lives.

Faith Based Mental Health
Our proposed Faith Based specialty program provides unique inpatient and outpatient care where patients can include personal religious beliefs and their faith in God throughout the treatment process. The program merges sound professional counseling with Biblical principles to provide a

Christian atmosphere for recovery from serious mental health and chemical dependency problems.

Dual-diagnosis

Our dual-diagnosis program is an integrated therapy program that focuses on adults who face multiple mental health disorders or a combination of mental illness and drug or alcohol dependency, also known as co-occurring disorders. Patients receive motivational enhancement therapy, cognitive behavioral therapy, and 12-step facilitation therapy. The program allows patients to recognize and manage the issues related to their mental illness and chemical dependency problems.

1110.730(b)(5) - Planning Area Need - Service Accessibility

The number of beds being established or added for each category of service is necessary to improve access for planning area residents. The applicant shall document the following:

A) Service Restrictions
The applicant shall document that at least one of the following factors exists in the planning area:

There is not an absence of the proposed service within either Planning Area A-08 or A-09. Specifically, A-08 has a single facility providing the proposed AMI service, Evanston Hospital. This facility meets the utilization standard of 85% and as such exhibits access limitations to additional patients in need of treatment. Planning Area A-09 has two AMI providers, Highland Park Hospital and Vista Medical Center West. Although these two providers do not meet the utilization target of 85% they have only 14 beds potential available or respectively 2 beds and 12 beds potentially available under the target use rate.

There is an interesting issue when examining the ratio of population to beds between all planning areas within HSA's 6, 7, 8 and 9. Specifically, Planning Area's A-08 has the fewest beds for the population with a total of 21,492 people per AMI bed. Planning Area A-09 comes in third lowest with 12,741 people per AMI bed. It is interesting that the average ratio of population to AMI beds is 78% less than that of Planning Area A-09 and 87% less than that of Planning Area A-08. Even adding the proposed 50-AMI beds to each planning area would only reduce the ratios to

Planning Area	Number of Beds	2018 population	Ratio of Pop to Beds
A-01	416	961,240	2,310.7
A-02	729	547,560	751.1
A-03	234	744,490	3,181.6
A-04	198	1,182,690	5,973.2
A-05	275	934,270	3,397.3
A-06	334	494,940	1,481.9
A-07	556	631,840	1,136.4
A-08	**21**	**451,330**	**21,491.9**
A-09	**59**	**751,690**	**12,740.5**
A-10	34	337,710	9,932.6
A-11	30	436,360	14,545.3
A-12	95	405,330	4,266.6
A-13	75	826,459	11,019.5
A-14	89	116,350	1,307.3
PA Tot/Ave	**3145**	**8,822,259**	**2,805.2**

Source: August 4, 2015 Inventory of Health Care Facilities and Services and need Determinations

ATTACHMENT-22B5

6,357 people per AMI bed in Planning Area A-08 and 6,896 people per AMI bed in Planning Area A-09.

H S A Area	Number of Beds	2018 population	Ratio of Pop to Beds
1	66	699,200	10,593.9 : 1
2	136	667,700	4,909.6: 1
3	242	569,300	2,352.5: 1
4	214	843,700	3,942.5: 1
5	69	608,600	8,820.3: 1
6,7,8,& 9	3145	8,822,259	2,805.2: 1
10	54	206,200	3,818.5: 1
11	150	606,800	4,045.3: 1
State Tot/Ave	**4076**	**13,023,759**	**3,195.2**: 1

Source: August 4, 2015 Inventory of Health Care Facilities and Services and need Determinations

What is interesting is looking at the overall HSA's ratio of population to beds. HSA 6, 7, 8 and 9 have the second lowest ratio with 2,805 persons per AMI bed. To utilize the State's ratio of population to beds would indicate additional capacity of AMI beds are needed. That being said the resultant combined ratio for Planning Areas A-08 and A-09 is 2.4 times greater than the HSA 5,6,7 and 8's ratio and two times greater than the overall State's ratio. This supports the Mental Health Referral Resources statements that patients originating from within these Planning Areas and Northern Suburbs must travel significant distances to receive AMI care and treatment.

As indicated, this process requires the Applicant to adopt a geographic service area, i.e., 45-minute adjusted travel time. This expands the existing AMI providers from the three previously identified in Planning Areas A-08 and A-09 to a total of nine. Refer **to ATTACHMENT-22B5a** for a listing of AMI providers and facility use data. Three of the nine are at or over the State's target use rate of 85% for the AMI beds. Highland Park Hospital and Northwest Community Hospital are so near capacity that they only have 4-AMI beds potentially available. The remaining four facilities appear to have capacity. However, their market has experienced significant changes recently.

US HealthVest acquired Maryville Behavioral Health Hospital from Maryville Academy in November of 2014 and renamed it Chicago Behavioral Hospital. Upon acquisition, the facility was essentially empty with only a few remaining patients and a

portion of the facility was under renovation that had ceased. The facility was able to optimally utilize the existing available 78-beds within five months and stabilize and maintain optimal use of those beds and services. In the 14-months of operating CBH the facility had to turn away 672 admissions due to beds not being available. In January of this year CBH was able to complete the renovations of the top two floors and since then has seen average daily census (hereafter referred to as ADC) into the 90's. Appended as **ATTACHMENT-22B5b** is a letter from CBH describing this situation, indicating that based upon existing referrals it will be well in excess of the target use rate in May of this year. This letter also describes how existing acute care providers and AMI providers have referral arrangements with CBH illustrating how CBH is providing complimentary services to those existing health care providers and not directly competing with those facilities. This is important as CBH is a related facility to the proposed project who will emulate this approach to continue supporting and augmenting the mental health services needed to complete the mental health continuum. It should be known that CBH has received referrals from Alexian Brothers Behavioral Health Hospital, Evanston Hospital, Northwest Community and three Advocate hospitals including Advocate Lutheran General Hospital and Advocate Condell in Lake County. Condell does not have AMI beds.

In summary, the one facility with what appeared to be extensively under-utilized is now nearing target capacity (85%). With ADC running into the 90's, instead of having 90 potentially available beds it only has less than 16 and by the time this project is considered it is expected that target utilization will be exceeded and maintained.

ATTACHMENT-22B5

Additionally, Advocate Lutheran General Hospital with what appears to be 17.5 beds potentially available has deflected 115 patients to CBH. This is indicative of the facility effectively being full or providing best practices for its patients in finding care and treatment within the Mental Health continuum that best fits the patients' needs. As such, it would appear that little to no impact would be had on this facility by the proposed project. Alexian Brothers Behavioral Health Hospital also made 39 referrals to CBH. This facility has a history of being at or over target utilization. As such, the system established services at Alexian Brothers Medical Center. In 2014, this facility would have been finishing ramping up its fill-up. The facility's Certificate of Need stated that its sister facility Alexian Brothers Behavioral Health Hospital would refer to that project so it can be inferred that Alexian Brother Medical Center's AMI unit is optimally utilized or it also employed best practices finding services that better fit specific patients mental health needs. Either way, it would appear that this project would have little to no impact on the existing providers.

B) Supporting Documentation

The applicant shall provide the following documentation, as applicable, concerning existing restrictions to service access:

Appended as **ATTACHMENT-22B5a** is a listing of area service providers their locations and utilizations.

Appended as **ATTACHMENT-22B5b** is the referral letter documenting zip code information as available describing patient origin. Appended as **ATTACHMENT-22B5c,** is a listing of all Zip Code areas, in whole or in part, within the 45-minute adjusted travel time with 2010 census data.

Refer to **ATTACHMENT-22B5d** for a summary listing of the independent travel-time study. The individual MapQuest travel-time studies are appended as **ATTACHMENT-22B5e.**

As this project is for the establishment of a new facility, this item is not applicable.

There does not appear to be any admission restrictions in this area.

Of the 672 deflected patients, as referenced in the support letter provided by CBH (refer to **ATTACHMENT-22B5b**), 111 patients were from planning areas A-08 and A-09 or zip codes 60016, 60026, 60010, 60030, 60035, 60045, 60046, 60048, 60061, 60085, 60076, 60202 and 60645, documenting that access problems exist.

The most recently published IDPH Hospital questionnaires are appended as **ATTACHMENT-22B5f.**

Northbrook Behavioral Hospital
4201 Lake Cook Road, Northbrook, Cook County
Utilization Data

NAME	Drive Distance	Adjusted Travel Time	2014 Authorized CON AMI Beds	Peak Bed Setup & Staffed	Peak Census	Inpatient Admissions	Inpatient Days	ALOS	Average Daily Census	CON Occupancy	Staffed Bed Occupancy
Maryville Academy / Scott A. Nolan Center (1)	9.2	13.8	125	50	49	309	5,893	19.1	16.1	12.92%	32.29%
Advocate Lutheran General Hospital	10.1	14.95	55	50	45	1,263	10,674	8.5	29.2	53.17%	58.49%
Highland Park Hospital (2)	7	18.4	13	13	13	641	3,303	5.2	9	69.61%	69.61%
Vista Medical Center West	24	21.62	46	42	37	1,463	9,870	6.7	27	58.78%	64.38%
Northwest Community Hospital	14.6	27.6	32	32	32	1,356	9,205	6.8	25.2	78.81%	78.81%
Alexian Brothers Medical Center	19.6	32.2	25	25	24	223	2,661	11.9	7.3	29.16%	29.16%
Evanston Hospital	16.7	35.65	21	21	21	1,089	6,549	6.0	17.9	85.44%	85.44%
Alexian Brothers Behavioral Health Hospital	22.4	39.1	141	141	140	5,992	47,138	7.9	129.1	91.59%	91.59%
Northwestern Memorial Hospital	28.4	41.4	29	29	29	1,123	9,157	8.2	25.1	86.51%	86.51%
			487	403	390	13,459	104,450		32.6	58.76%	71.01%

(1) 08/27/14 Exemption Approval for change of ownership to 2014 Health LLC d/b/a Chicago Behavioral Health;
11/18/14 received written notice of exemption completion and supporting documentation.
(2) Profile address & Website address: 777 Park Ave West. Glenview address is adjacent to Park Ave West

Sources:
2014 Annual Hospital Questionnaire, Illinois Department of Public Health, Health Systems Development
Inventory of Health Care Facilities and Services and Need Determinations - 2015 - Hospital Services
Microsoft MapPoint 2009
www.mapquest.com

ATTACHMENT22B5a

CBH
CHICAGO
BEHAVIORAL HOSPITAL

February 8, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, Illinois 62761

RE: US HealthVest's Certificate of Need Application for Northbrook Behavioral Hospital

Dear Ms. Avery,

I am the CEO of Chicago Behavioral Hospital in Des Plaines, Illinois and I am writing this letter in support of US HealthVest's Certificate of Need application for a behavioral hospital in Northbrook. US HealthVest acquired Chicago Behavioral Hospital ("CBH") on November 3, 2014 from Maryville Academy. Due to renovations that were in process prior to the acquisition, only 78 of the 125 licensed beds were available for use. We expanded services to adults and senior adults and grew from a census in the single digits at the time of the acquisition to full capacity (80%+) in under a year.

In 2015, we deflected 672 patients referred to our hospital in 2015 because we did not have a bed available. While we it is difficult to track where these deflected patients have gone for care, we understand that many have either gone without care or have experienced significant wait times and have had to travel great distances for care. Professional referral sources often verbalize having difficulty with placement because "everyone is full". It has not been unusual for them to note that they have had significant delays finding alternate beds for patients because other hospitals in the area run full. In 2016, we gained access to our newly renovated units and once again see rapid bed occupancy.

Of the 672 deflected patients, 111 patients were from planning areas A-08 and A-09 or zip codes 60016, 60026, 60010, 60030, 60035, 60045, 60046, 60048, 60061, 60085, 60076, 60202 and 60645.

The distribution of beds clearly slights the northern suburbs. Having a relationship with over 50 emergency departments, we know from nurses, crisis workers and physicians in these settings that patients have had to wait long periods in emergency rooms in order to access care. This is something that common and routine problem in many parts of Illinois.

Today, area hospitals that are within a 45 minute drive from CBH and similarly to the Northbrook project, continue to send a significant number of referrals due to their own psychiatric units being full, not treating particular types of patients or not having inpatient psychiatric care. In looking at data from the last ten months since starting adult services, some examples of the numbers of these referrals come from: Evanston Northshore Hospital (52), Advocate Good Shepherd (91), Northwest Community (92), Linden Oaks (82), Community First Hospital (60), Condell Medical Center (32), Northwestern Medicine Central DuPage Hospital (52), Alexian Brothers Behavioral Health Hospital (39), Advocate Lutheran General (115) and Palos Community Hospital (44). The total of referrals coming from hospitals only within 45 minutes travel has been 1,099 for this past ten month period.

MENTAL HEALTH & CHEMICAL DEPENDENCE SERVICES
555 WILSON LANE • DES PLAINES, ILLINOIS 60016
P: 847-768-5430 • F: 847-768-5478
WWW.CHICAGOBH.COM

CBH
CHICAGO
BEHAVIORAL HOSPITAL

Our occupancy at CBH has grown to 87%, 86%, 84%, and 81% in September, October, November and December of 2015 respectively, without the aforementioned plans to increase marketing, and we expect even greater growth this spring. Chicago Behavioral Hospital would also need to deflect patients to a Northbrook Hospital. Our growth projections conservatively reach 84% in April and 90% in May of 2016. We expect our growth trajectory to continue beyond our 125 beds at CBH by the mid 2016 and that we will again have the dilemma of deflecting patients due to bed availability. This would be well before the Northbrook facility could conceivably be opened.

With all of the deflections, marketing efforts, new lines of service development and practices that we are attracting, we are projecting significant referrals to Northbrook Behavioral Hospital from CBH. We believe with our experience of 15% deflections from the Northbrook catchment area Zip Codes, as well as our deflections from other underserved geographies, that CBH alone will refer a total of 48-50 patients per month to Northbrook which will be from 576 to 600 annually. We do not see this need reducing and believe it will be very consistent throughout the years to come.

The information I've included here has not been used to support any other pending or approved CON application for a behavioral health hospital.

I urge you to support the approval of US HealthVest's application for Northbrook Behavioral Hospital. Approval of US HealthVest's application will increase access to these important services in the north suburban areas of Illinois.

Sincerely,

Anthony DeJoseph

Anthony DeJoseph, Psy.D.
CEO
Chicago Behavioral Hospital

Subscribed and sworn before me this 18th day of February 2016

Joanne M Rossman

OFFICIAL SEAL
JOANNE M ROSSMAN
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:10/15/17

Northbrook Behavioral Hospital
45-Minute Zip Codes

ZIP Code	Population
53104	no info
53142	no info
53143	no info
53144	no info
53158	no info
53177	no info
53179	no info
60002	24,305
60004	50,222
60005	30,462
60007	33,830
60008	22,402
60010	44,416
60012	11,313
60013	26,241
60014	48,379
60015	27,373
60016	61,369
60018	29,027
60020	10,246
60021	5,724
60022	8,383
60025	39,263
60026	13,775
60029	478
60030	36,563
60031	37,920
60035	29,837
60037	no info
60040	5,400
60041	8,655
60042	8,556
60043	2,648
60044	9,683
60045	20,516
60046	34,859
60047	42,221
60048	29,284
60050	32,253
60051	24,787
60053	23,424
60056	55,617
60060	37,947
sub-total	927,378

ZIP Code	Population
60061	26,144
60062	40,211
60064	15,898
60067	38,303
60068	37,511
60069	8,301
60070	16,033
60071	3,482
60072	881
60073	60,970
60074	39,010
60076	32,764
60077	27,822
60081	9,963
60082	no info
60083	10,382
60084	15,867
60085	71,112
60087	26,374
60088	13,417
60089	41,584
60090	37,912
60091	27,345
60093	19,385
60096	6,910
60099	31,717
60101	39,709
60102	32,670
60103	42,426
60104	19,081
60106	20,150
60107	41,155
60108	23,105
60110	39,204
60118	15,442
60120	50,154
60123	49,054
60124	20,447
60126	46,823
60130	14,202
60131	18,103
60133	38,377
60136	7,276
sub-total	1,176,676

ZIP Code	Population
60137	38,418
60139	35,000
60140	14,509
60141	157
60142	27,077
60143	10,198
60148	52,833
60153	24,157
60154	16,839
60155	7,947
60156	28,842
60157	2,020
60160	25,590
60162	8,139
60163	5,219
60164	22,287
60165	4,959
60169	34,154
60171	10,305
60172	24,695
60173	12,108
60176	11,842
60177	22,810
60181	28,898
60184	2,424
60185	36,259
60187	28,544
60188	42,614
60190	10,614
60191	14,389
60192	16,637
60193	40,210
60194	19,596
60195	4,294
60201	42,722
60202	32,560
60203	4,460
60208	no info
60301	2,174
60302	32,137
60304	17,677
60305	11,211
60402	64,256
sub-total	891,781

ZIP Code	Population
60415	14,358
60439	23,209
60455	16,560
60457	14,117
60458	14,437
60464	9,512
60465	17,610
60480	5,190
60482	11,040
60501	11,971
60513	19,039
60514	10,187
60515	28,811
60516	27,565
60517	32,533
60521	17,678
60523	9,916
60525	31,675
60526	13,613
60527	28,372
60532	27,235
60534	10,650
60546	15,959
60555	13,533
60558	13,066
60559	24,752
60561	23,155
60563	36,554
60601	10,894
60602	1,429
60603	1,002
60604	419
60605	25,938
60606	2,840
60607	25,927
60608	78,952
60609	62,405
60610	38,482
60612	35,598
60613	49,292
60614	68,573
60615	41,141
60616	49,914
sub-total	1,015,103

ZIP Code	Population
60618	96,230
60619	64,245
60620	71,907
60621	32,619
60622	54,607
60623	87,836
60624	39,706
60625	78,586
60626	49,237
60630	56,978
60631	27,995
60632	91,357
60634	73,119
60636	40,164
60637	48,851
60638	56,812
60639	92,339
60640	64,599
60641	72,460
60644	49,615
60645	46,290
60646	28,367
60647	87,339
60651	60,938
60653	31,038
60654	16,244
60656	28,895
60657	69,444
60659	38,788
60660	41,380
60661	8,838
60666	no info
60706	23,259
60707	42,958
60712	12,653
60714	30,091
60804	84,481
sub-total	1,900,265
TOTAL	**5,911,203**

Sources:

Microsoft MapPoint 2009

American Fact Finder, United States Census Bureau (www.factfinder.census.gov)

ATTACHMENT-22B5c

Northbrook Behavioral Hospital
4201 Lake Cook Road, Northbrook, Cook County
45-min Adj Drive Time

KEY	NAME	STREET	CITY	ZIP	Drive Distance	Adjusted Travel Time	Authorized CON AMI Beds
34	Maryville Academy / Scott A. Nolan Center (1)	555 Wilson Lane	Des Plaines	60016-0000	9.2	13.8	125
7	Advocate Lutheran General Hospital	1775 Dempster Street	Park Ridge	60068-0000	10.1	14.95	55
23	Highland Park Hospital (2)	718 Glenview Avenue	Highland Park	60035-0000	7	18.4	13
78	Vista Medical Center West	2615 West Washington	Waukegan	60085-0000	24	21.62	46
41	Northwest Community Hospital	800 West Central Road	Arlington Heigh	60005-0000	14.6	27.6	32
79	Alexian Brothers Medical Center	800 Biesterfield Road	Elk Grove Villa	60007-0000	19.6	32.2	0
15	Evanston Hospital	2650 Ridge Avenue	Evanston	60201-0000	16.7	35.65	21
8	Alexian Brothers Behavioral Health Hospital	1650 Moon Lake Boulevard	Hoffman Estates	60194-0000	22.4	39.1	141
42	Northwestern Memorial Hospital	251 East Huron St.	Chicago	60611-000	28.4	41.4	29
							462

(1) 08/27/14 Exemption Approval for change of ownership to 2014 Health LLC d/b/a Chicago Behavioral Health; 11/18/14 received written notice of exemption completion and supporting documentation.
(2) Profile address & Website address: 777 Park Ave West. Glenview address is adjacent to Park Ave West

Sources:
2014 Annual Hospital Questionnaire, Illinois Department of Public Health, Health Systems Development
Inventory of Health Care Facilities and Services and Need Determinations - 2015 - Hospital Services
Microsoft MapPoint 2009
www.mapquest.com

ATTACHMENT-22B5d

YOUR TRIP TO:

555 Wilson Ln, Des Plaines, IL 60016-4729

12 MIN | 9.2 MI

Trip time based on traffic conditions as of 4:28 PM on January 14, 2016. Current Traffic: Light

Maryville Academy / Scott A. Nolan Center

1.	Start out going east on Lake Cook Rd toward Sanders Rd.	
	Then 0.47 miles	0.47 total miles
2.	Merge onto I-294 S/Tri State Tollway S (Portions toll).	
	Then 6.95 miles	7.42 total miles
3.	Take the exit toward IL-58/Golf Rd.	
	Then 0.47 miles	7.88 total miles
4.	Turn left onto N East River Rd.	
	Then 0.11 miles	7.99 total miles
5.	N East River Rd becomes Bender Rd.	
	Then 0.66 miles	8.65 total miles
6.	Turn right onto E Ballard Rd.	
	Then 0.30 miles	8.95 total miles
7.	Turn right onto Rand Rd.	
	Then 0.15 miles	9.09 total miles
8.	Turn left onto Wilson Ln.	
	Then 0.08 miles	9.18 total miles
9.	555 WILSON LN is on the left.	

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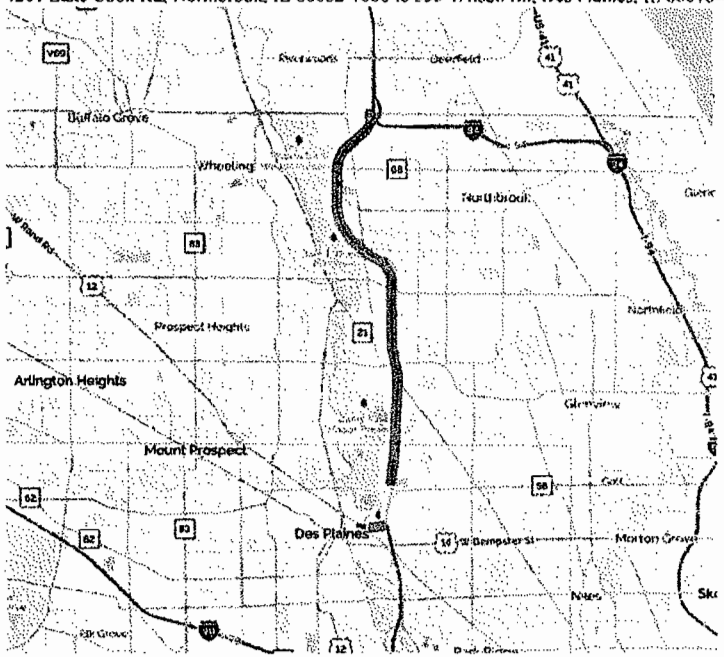

4201 Lake Cook Rd, Northbrook, IL 60062-1060

555 Wilson Ln, Des Plaines, IL 60016-4729

http://www.mapquest.com/directions/list/1/us/il/northbrook/60062-1060/4201-lake-cook-rd-42.152877,-87.... 1/14/2016

179

ATTACHMENT-22B5e

YOUR TRIP TO:

1775 Dempster St, Park Ridge, IL 60068

13 MIN | 10.1 MI

Trip time based on traffic conditions as of 4:20 PM on January 14, 2016. Current Traffic: Light

Advocate Lutheran General Hospital

1.	Start out going east on Lake Cook Rd toward Sanders Rd.	
	Then 0.47 miles	0.47 total miles
2.	Merge onto I-294 S/Tri State Tollway S (Portions toll).	
	Then 6.95 miles	7.42 total miles
3.	Take the exit toward IL-58/Golf Rd.	
	Then 0.47 miles	7.88 total miles
4.	Turn left onto N East River Rd.	
	Then 0.11 miles	7.99 total miles
5.	Take the 1st left onto E Golf Rd/IL-58.	
	Then 0.51 miles	8.50 total miles
6.	Turn right onto Potter Rd.	
	Then 1.00 miles	9.50 total miles
7.	Turn left onto E Dempster St/US-14 E.	
	Then 0.60 miles	10.10 total miles
8.	1775 DEMPSTER ST is on the right.	

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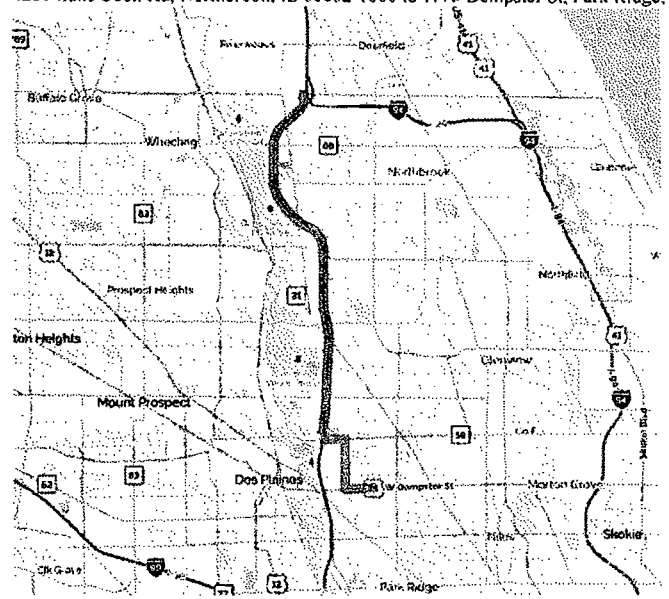

4201 Lake Cook Rd, Northbrook, IL 60062-1060

1775 Dempster St, Park Ridge, IL 60068

http://www.mapquest.com/directions/list/1/us/il/northbrook/60062-1060/4201-lake-cook-rd-42.152877,-87.... 1/14/2016

ATTACHMENT-22B5e

180°

YOUR TRIP TO:

718 Glenview Ave, Highland Park, IL 60035-2432

16 MIN | 7.0 MI

Trip Data based on traffic conditions as of 4:47 PM on January 14, 2016. Current Traffic: Heavy

Highland Park Hospital

Start of next leg of route

1. Start out going east on Lake Cook Rd toward Sanders Rd.
   Then 0.06 miles — 0.06 total miles
2. Take the 1st left onto Saunders Rd.
   Then 1.02 miles — 1.07 total miles
3. Turn right onto Deerfield Rd.
   Then 3.97 miles — 5.04 total miles
4. Merge onto US-41 N/Skokie Hwy N toward Skokie Valley Rd.
   Then 0.81 miles — 5.85 total miles
5. Turn right onto Park Ave W.
   Then 1.02 miles — 6.87 total miles
6. Turn left.
   Then 0.16 miles — 7.02 total miles
7. Take the 1st right onto Glenview Ave.
   Then 0.00 miles — 7.01 total miles
8. 718 GLENVIEW AVE is on the right.

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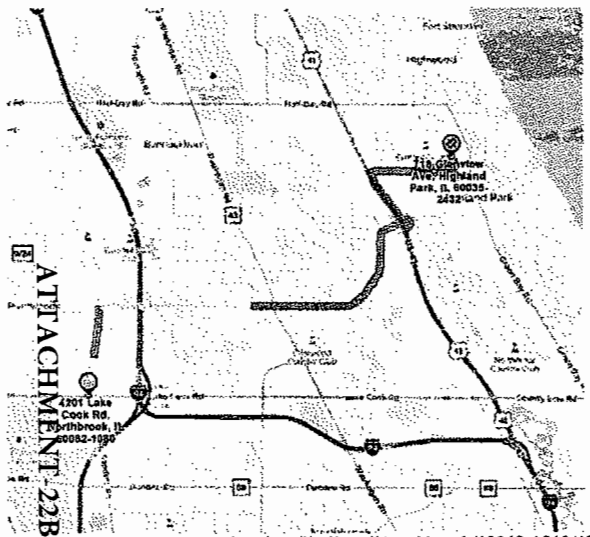

ATTACHMENT 22B e 181

YOUR TRIP TO:

2615 W Washington St, Waukegan, IL 60085

24 MIN | 18.8 MI

Trip time based on traffic conditions as of 4:59 PM on January 14, 2016. Current Traffic: Moderate

Vista Medical Center West

Start of next leg of route

1. Start out going east on Lake Cook Rd toward Sanders Rd.
   Then 0.67 miles — 0.67 total miles
2. Merge onto I-294 N/Tri State Tollway N via the ramp on the left toward I-94 N/Wisconsin (Portions toll).
   Then 0.61 miles — 1.28 total miles
3. I-294 N/Tri State Tollway N becomes I-94 W/Tri State Tollway N (Portions toll).
   Then 13.23 miles — 14.50 total miles
4. Merge onto Belvidere Rd/IL-120 E.
   Then 1.23 miles — 15.73 total miles
5. Take the ramp toward US-41/Chicago/Milwaukee.
   Then 0.28 miles — 16.01 total miles
6. Merge onto IL-43/Waukegan Rd.
   Then 0.93 miles — 16.93 total miles
7. Turn slight left onto US-41 N/Skokie Hwy.
   Then 0.13 miles — 17.06 total miles
8. Take the Washington St ramp.
   Then 0.16 miles — 17.22 total miles
9. Turn slight left onto Old Skokie Hwy.
   Then 0.07 miles — 17.29 total miles
10. Turn right onto Washington St/County Hwy-A22.
    Then 1.31 miles — 18.59 total miles
11. Turn right onto St Therese Blvd.
    Then 0.19 miles — 18.78 total miles
12. Turn left to stay on St Therese Blvd.
    Then 0.05 miles — 18.83 total miles
13. 2615 W WASHINGTON ST.

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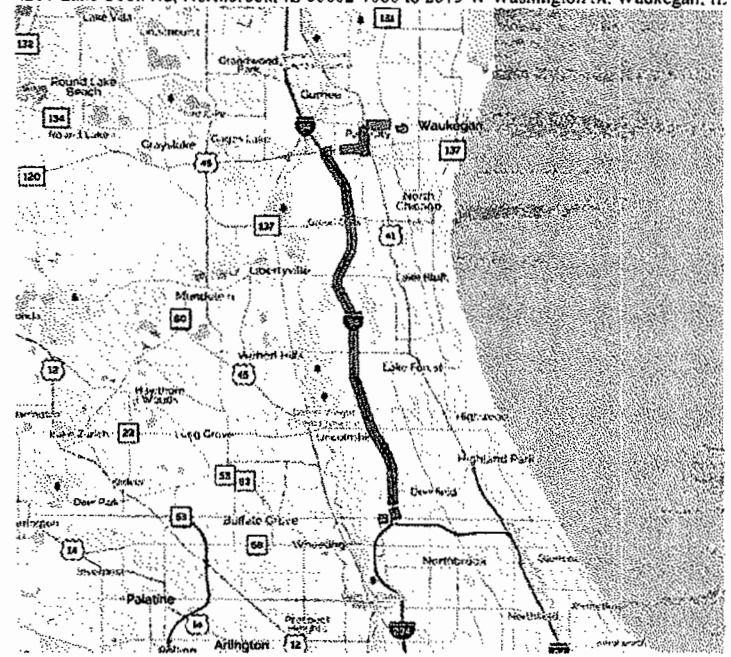

2615 W Washington St, Waukegan, IL 60085

4201 Lake Cook Rd, Northbrook, IL 60062-1060

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ATTACHMENT 22B5e

YOUR TRIP TO:

800 W Central Rd, Arlington Heights, IL 60005

24 MIN | 14.6 MI

Trip time based on traffic conditions as of 4:51 PM on January 14, 2016. Current Traffic: Moderate

Northwest Community Hospital

Start of next leg of route

1. Start out going east on Lake Cook Rd toward Sanders Rd.
   Then 0.47 miles — 0.47 total miles
2. Merge onto I-294 S/Tri State Tollway S (Portions toll).
   Then 6.95 miles — 7.42 total miles
3. Take the exit toward IL-68/Golf Rd.
   Then 0.47 miles — 7.88 total miles
4. Turn left onto N East River Rd.
   Then 0.10 miles — 7.98 total miles
5. Take the 1st right onto E Golf Rd/IL-58.
   Then 1.47 miles — 9.46 total miles
6. Turn slight right onto Rand Rd/US-12 W.
   Then 1.43 miles — 10.89 total miles
7. Turn slight left onto E Central Rd.
   Then 3.71 miles — 14.60 total miles
8. 800 W CENTRAL RD is on the right.

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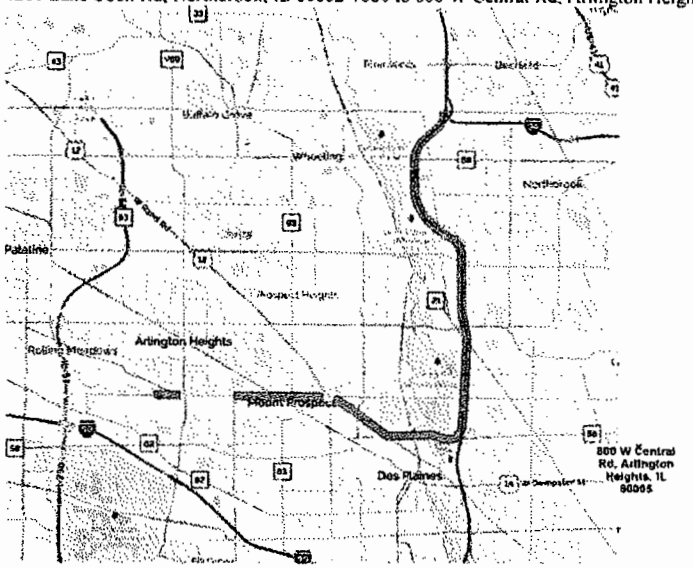

183

ATTACHMENT-22B5e

YOUR TRIP TO:

800 Biesterfield Rd, Elk Grove Village, IL 60007

28 MIN | 19.6 MI

Trip time based on traffic conditions as of 4:00 PM on January 14, 2016. Current Traffic: Heavy

Alexian Brothers Medical Center

Start of next leg of route

1. Start out going east on Lake Cook Rd toward Sanders Rd.
   Then 0.05 miles — 0.05 total miles
2. Make a U-turn at Saunders Rd onto Lake Cook Rd.
   Then 6.97 miles — 7.02 total miles
3. Merge onto IL-53 S toward West Suburbs.
   Then 11.45 miles — 18.47 total miles
4. Take the Biesterfield Rd/IL-53 S exit, EXIT 4.
   Then 0.25 miles — 18.72 total miles
5. Turn left onto IL-53/Biesterfield Rd. Continue to follow Biesterfield Rd.
   Then 0.76 miles — 19.48 total miles
6. Make a U-turn at Leicester Rd onto Biesterfield Rd.
   Then 0.10 miles — 19.58 total miles
7. 800 BIESTERFIELD RD is on the right.

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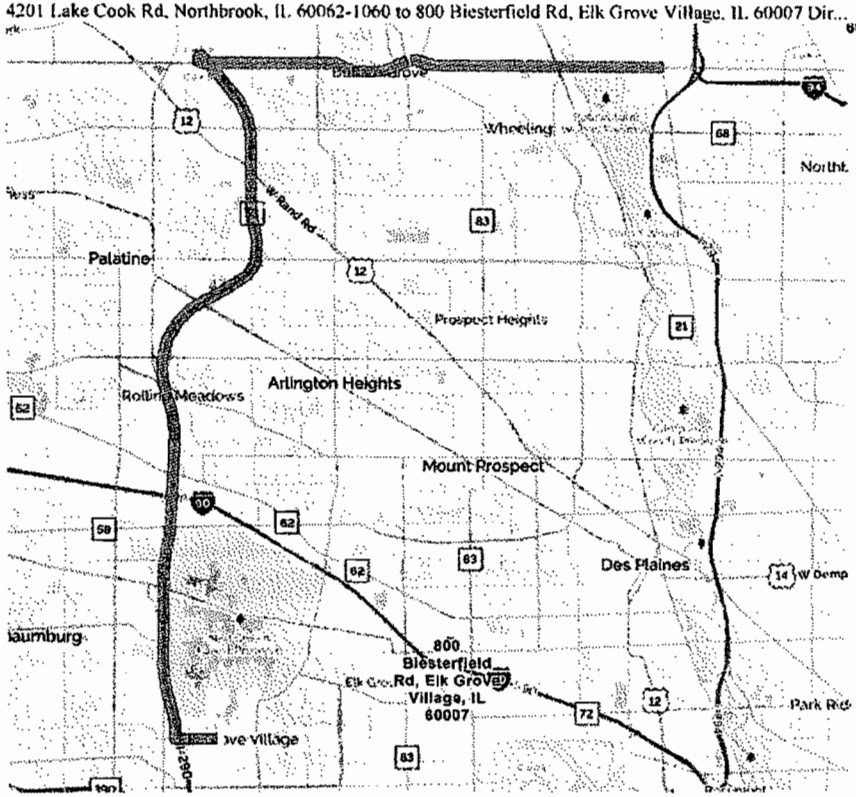

http://www.mapquest.com/directions/list/2/us/il/northbrook/60062-1060/4201-lake-cook-rd-42.152877,-87.... 1/14/2016

ATTACHMENT-22B
184

YOUR TRIP TO:

2650 Ridge Ave, Evanston, IL 60201

39 MIN | 16.4 MI

This route based on traffic conditions at 04:16 PM on January 14, 2016. Current Traffic Moderate

Evanston Hospital

Start of next leg of route

1. Start out going east on Lake Cook Rd toward Sanders Rd.
   Then 0.05 miles — 0.05 total miles
2. Take the 1st left onto Saunders Rd.
   Then 1.02 miles — 1.07 total miles
3. Turn right onto Deerfield Rd.
   Then 0.34 miles — 1.41 total miles
4. Merge onto I-94 E/Tri State Tollway S via the ramp on the left toward Indiana (Portions toll).
   Then 1.08 miles — 2.49 total miles
5. Keep left to take I-94 S toward Chicago (Portions toll) (Electronic toll collection only).
   Then 6.57 miles — 9.06 total miles
6. Take EXIT 31 toward Tower Rd/Dundee Rd.
   Then 0.30 miles — 9.36 total miles
7. Merge onto W Frontage Rd.
   Then 0.15 miles — 9.51 total miles
8. Take the 1st right onto Tower Rd.
   Then 2.34 miles — 11.85 total miles
9. Turn right onto Sheridan Rd.
   Then 4.33 miles — 16.18 total miles
10. Stay straight to go onto Ridge Ave.
    Then 0.27 miles — 16.45 total miles
11. 2650 RIDGE AVE is on the right.

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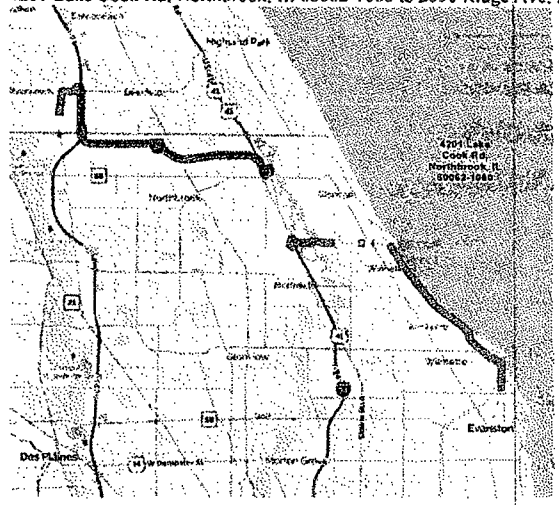


2650 Ridge Ave, Evanston, IL 60201

185

ATTACHMENT-22B-e

YOUR TRIP TO:

1650 Moon Lake Blvd, Hoffman Estates, IL 60169

34 MIN | 22.4 MI

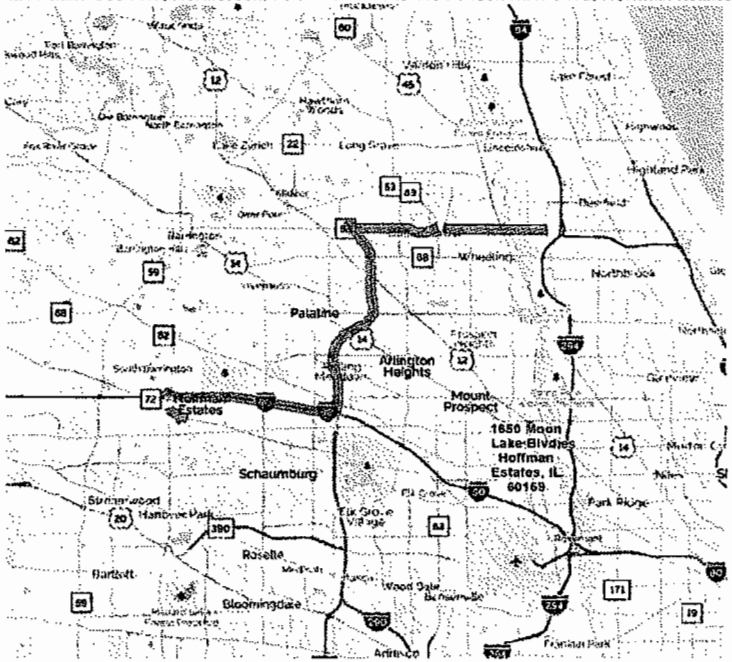
Trip time based on traffic conditions as of 3:55 PM on January 14, 2016. Current Traffic: Moderate

Alexian Brothers Behavioral Health Hospital

Start of next leg of route

1.	Start out going east on Lake Cook Rd toward Sanders Rd.	
	Then 0.05 miles	0.05 total miles
2.	Make a U-turn at Saunders Rd onto Lake Cook Rd.	
	Then 6.97 miles	7.02 total miles
3.	Merge onto IL-53 S toward West Suburbs.	
	Then 6.85 miles	13.87 total miles
4.	Take the Tollway exit toward I-90/Rockford/Chicago.	
	Then 0.38 miles	14.25 total miles
5.	Merge onto I-90 W/Jane Addams Memorial Tollway W via the ramp on the left (Portions toll).	
	Then 5.99 miles	20.24 total miles
6.	Take the Barrington Rd S/Barrington Rd N exit.	
	Then 0.38 miles	20.62 total miles
7.	Keep left to take the Barrington Rd S ramp.	
	Then 0.53 miles	21.15 total miles
8.	Merge onto Barrington Rd.	
	Then 0.49 miles	21.64 total miles
9.	Turn left onto W Higgins Rd/IL-72.	
	Then 0.56 miles	22.20 total miles
10.	Turn right onto Moon Lake Blvd.	
	Then 0.18 miles	22.38 total miles
11.	1650 MOON LAKE BLVD is on the right.	

Use of directions and maps is subject to our Terms of Use. We don't guarantee accuracy, route conditions or usability. You assume all risk of use.



4201 Lake Cook Rd, Northbrook, IL 60062-1060

ATTACHMENT-22B5e

YOUR TRIP TO:

Huron St, Chicago, IL 60611

36 MIN | 28.4 MI

Trip time based on traffic conditions as of 11:15 AM on February 18, 2016. Current Traffic: Moderate

Northwestern Memorial Hospital

1. Start out going **east** on Lake Cook Rd toward Sanders Rd.

   Then 0.47 miles — 0.47 total miles

2. Merge onto I-294 S/Tri State Tollway S (Portions toll).

   Then 11.65 miles — 12.12 total miles

3. Merge onto I-90 E toward **Kennedy Expy/Chicago** (Portions toll).

   Then 13.96 miles — 26.07 total miles

4. Take the **Ohio St E** exit, EXIT 50B, toward **600 N**.

   Then 1.17 miles — 27.25 total miles

5. Stay **straight** to go onto W Ohio St.

   Then 0.87 miles — 28.12 total miles

6. Turn **left** onto N Fairbanks Ct.

   Fairbanks Ct is 0.1 miles past N Saint Clair St.

   If you reach N McClurg Ct you've gone about 0.1 miles too far.

   Then 0.17 miles — 28.28 total miles

7. Turn **left** onto E Huron St.

   E Huron St is just past E Erie St.

   If you reach E Superior St you've gone a little too far.

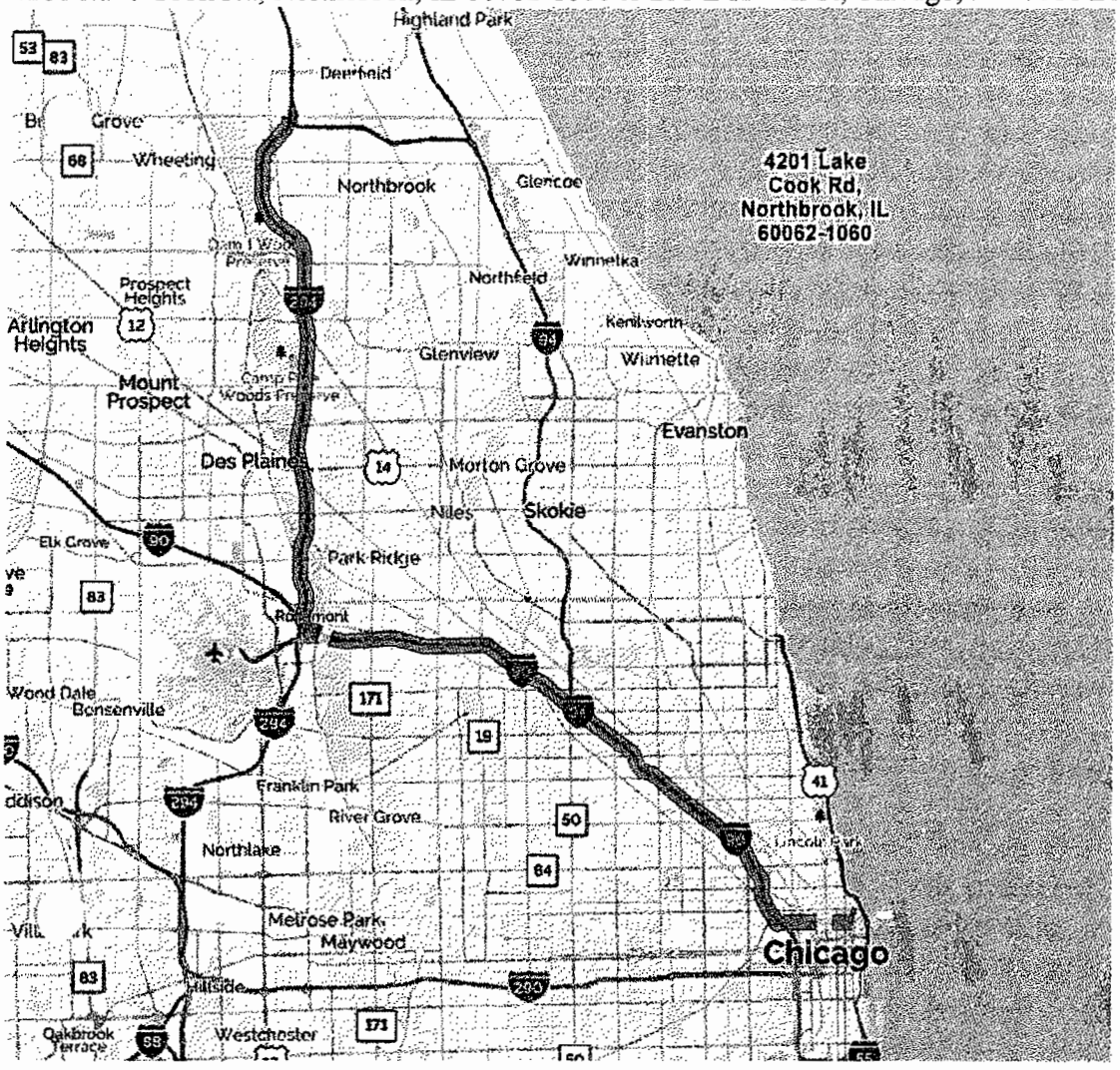
   Then 0.10 miles — 28.38 total miles

8. 251 E HURON ST is on the **left**.

   If you reach N Saint Clair St you've gone a little too far.

Use of directions and maps is subject to our Terms of Use. We don't guarantee accuracy, route conditions or usability. You assume all risk of use.

ATTACHMENT-22B5e



ATTACHMENT-22B5e

Hospital Profile - CY 2014 — Chicago Behavioral Hospital — Des Plaines — Page 1

Ownership, Management and General Information

ADMINISTRATOR NAME:	Anthony DeJoseph, Psy.D.
ADMINISTRATOR PHONE	(847) 768-5312
OWNERSHIP:	2014 Hospital, LLC
OPERATOR:	2014 Hospital, LLC
MANAGEMENT:	For Profit Corporation
CERTIFICATION:	None
FACILITY DESIGNATION:	Psychiatric Hospital
ADDRESS	555 Wilson Lane

CITY: Des Plaines COUNTY: Suburban Cook County

Patients by Race

White	50.5%
Black	43.4%
American Indian	0.3%
Asian	1.0%
Hawaiian/ Pacific	0.0%
Unknown	4.8%

Patients by Ethnicity

Hispanic or Latino:	11.3%
Not Hispanic or Latino:	88.7%
Unknown:	0.0%

IDPH Number:	5934
HPA	A-07
HSA	7

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2014	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	0	0	0	0	0	0	0.0	0.0	0.0	0.0
0-14 Years				0	0					
15-44 Years				0	0					
45-64 Years				0	0					
65-74 Years				0	0					
75 Years +				0	0					
Pediatric	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Intensive Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Direct Admission				0	0					
Transfers				0	0					
Obstetric/Gynecology	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Maternity				0	0					
Clean Gynecology				0	0					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Swing Beds			0	0	0		0.0	0.0		
Acute Mental Illness	125	50	49	309	5,893	0	19.1	16.1	12.9	32.3
Rehabilitation	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	0					0				
Facility Utilization	125			309	5,893	0	19.1	16.1	12.9	

(Includes ICU Direct Admissions Only)

Inpatients and Outpatients Served by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Charity Care	Totals
Inpatients	0.0%	89.3%	0.0%	10.7%	0.0%	0.0%	
	0	276	0	33	0	0	309
Outpatients	0.0%	100.0%	0.0%	0.0%	0.0%	0.0%	
	0	2	0	0	0	0	2

Financial Year Reported: 1/1/2014 to 12/31/2014

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Totals	Charity Care Expense	Total Charity Care Expense
Inpatient Revenue ($)	0.0%	87.4%	0.3%	12.3%	0.0%	100.0%		0
	0	5,008,511	18,200	706,525	0	5,733,236	0	*Total Charity Care as % of Net Revenue*
Outpatient Revenue ($)	0.0%	100.0%	0.0%	0.0%	0.0%	100.0%		
	0	5,916	0	0	0	5,916	0	0.0%

Birthing Data

Number of Total Births:	0
Number of Live Births:	0
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	0
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	0
CSections Performed:	0

Newborn Nursery Utilization

	Level I	Level II	Level III+
Beds	0	0	0
Patient Days	0	0	0
Total Newborn Patient Days			0

Laboratory Studies

Inpatient Studies	0
Outpatient Studies	0
Studies Performed Under Contract	2,490

Organ Transplantation

Kidney:	0
Heart:	0
Lung:	0
Heart/Lung:	0
Pancreas:	0
Liver:	0
Total:	0

Hospital Profile - CY 2014 — Chicago Behavioral Hospital — Des Plaines — Page 2

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms: Inpatient	Operating Rooms: Outpatient	Operating Rooms: Combined	Operating Rooms: Total	Surgical Cases: Inpatient	Surgical Cases: Outpatient	Surgical Hours: Inpatient	Surgical Hours: Outpatient	Surgical Hours: Total Hours	Hours per Case: Inpatient	Hours per Case: Outpatient
Cardiovascular	0	0	0	0	0	0	0	0	0	0.0	0.0
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	0	0	0	0	0	0	0	0.0	0.0
Gastroenterology	0	0	0	0	0	0	0	0	0	0.0	0.0
Neurology	0	0	0	0	0	0	0	0	0	0.0	0.0
OB/Gynecology	0	0	0	0	0	0	0	0	0	0.0	0.0
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	0	0	0	0	0	0	0	0.0	0.0
Orthopedic	0	0	0	0	0	0	0	0	0	0.0	0.0
Otolaryngology	0	0	0	0	0	0	0	0	0	0.0	0.0
Plastic Surgery	0	0	0	0	0	0	0	0	0	0.0	0.0
Podiatry	0	0	0	0	0	0	0	0	0	0.0	0.0
Thoracic	0	0	0	0	0	0	0	0	0	0.0	0.0
Urology	0	0	0	0	0	0	0	0	0	0.0	0.0
Totals	0	0	0	0	0	0	0	0	0	0.0	0.0

SURGICAL RECOVERY STATIONS — Stage 1 Recovery Stations: 0 — Stage 2 Recovery Stations: 0

Dedicated and Non-Dedicated Procedure Room Utilization

Procedure Type	Procedure Rooms: Inpatient	Procedure Rooms: Outpatient	Procedure Rooms: Combined	Procedure Rooms: Total	Surgical Cases: Inpatient	Surgical Cases: Outpatient	Surgical Hours: Inpatient	Surgical Hours: Outpatient	Surgical Hours: Total Hours	Hours per Case: Inpatient	Hours per Case: Outpatient
Gastrointestinal	0	0	0	0	0	0	0	0	0	0.0	0.0
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	0	0	0	0	0	0	0	0.0	0.0
Cystoscopy	0	0	0	0	0	0	0	0	0	0.0	0.0
Multipurpose Non-Dedicated Rooms											
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center	No
Level of Trauma Service	Level 1 / Level 2
Operating Rooms Dedicated for Trauma Care	0
Number of Trauma Visits:	0
Patients Admitted from Trauma	0
Emergency Service Type:	Stand-By
Number of Emergency Room Stations	0
Persons Treated by Emergency Services:	0
Patients Admitted from Emergency:	0
Total ED Visits (Emergency+Trauma):	0

Free-Standing Emergency Center

Beds in Free-Standing Centers	
Patient Visits in Free-Standing Centers	
Hospital Admissions from Free-Standing Center	

Outpatient Service Data

Total Outpatient Visits	29
Outpatient Visits at the Hospital/ Campus:	29
Outpatient Visits Offsite/off campus	0

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	0
Cath Labs used for Angiography procedures	0
Dedicated Diagnostic Catheterization Lab	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	0
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	0
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	0
EP Catheterizations (15+)	0

Cardiac Surgery Data

Total Cardiac Surgery Cases:	0
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	0
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	0

Diagnostic/Interventional Equipment

	Owned	Contract	Examinations: Inpatient	Examinations: Outpt	Examinations: Contract
General Radiography/Fluoroscopy	0	0	0	0	0
Nuclear Medicine	0	0	0	0	0
Mammography	0	0	0	0	0
Ultrasound	0	0	0	0	0
Angiography	0	0			
Diagnostic Angiography			0	0	0
Interventional Angiography			0	0	0
Positron Emission Tomography (PET)	0	0	0	0	0
Computerized Axial Tomography (CAT)	0	0	0	0	0
Magnetic Resonance Imaging	0	0	0	0	0

Therapeutic Equipment

	Owned	Contract	Therapies/ Treatments
Lithotripsy	0	0	0
Linear Accelerator	0	0	0
Image Guided Rad Therapy			0
Intensity Modulated Rad Thrp			0
High Dose Brachytherapy	0	0	0
Proton Beam Therapy	0	0	0
Gamma Knife	0	0	0
Cyber knife	0	0	0

Source: 2014 Annual Hospital Questionnaire, Illinois Department of Public Health, Health Systems Development.

ATTACHMENT-22B5f

Ownership, Management and General Information

ADMINISTRATOR NAME:	Rick Floyd
ADMINSTRATOR PHONE	847-723-8448
OWNERSHIP:	Advocate Health and Hospitals Corp.
OPERATOR:	Advocate Health and Hospitals Corp.
MANAGEMENT:	Church-Related
CERTIFICATION:	None
FACILITY DESIGNATION:	General Hospital
ADDRESS	1775 Dempster Street CITY: Park Ridge COUNTY: Suburban Cook County

Patients by Race

White	84.6%
Black	2.5%
American Indian	0.8%
Asian	7.2%
Hawaiian/ Pacific	0.1%
Unknown	4.7%

Patients by Ethnicity

Hispanic or Latino:	9.0%
Not Hispanic or Latino:	86.2%
Unknown:	4.8%

IDPH Number:	4798
HPA	A-07
HSA	7

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2014	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	313	309	305	15,888	75,605	8,934	5.3	231.6	74.0	75.0
0-14 Years				*0*	*0*					
15-44 Years				*2,174*	*9,931*					
45-64 Years				*4,812*	*23,014*					
65-74 Years				*3,070*	*14,661*					
75 Years +				*5,842*	*28,009*					
Pediatric	48	48	47	2,012	9,302	1,569	5.4	29.8	62.0	62.0
Intensive Care	61	61	61	5,077	13,514	291	2.7	37.8	62.0	62.0
Direct Admission				*3,326*	*8,863*					
Transfers				*1,751*	*4,651*					
Obstetric/Gynecology	62	58	44	4,421	12,317	186	2.8	34.3	55.2	59.1
Maternity				*4,339*	*12,123*					
Clean Gynecology				*82*	*194*					
Neonatal	54	56	56	466	15,389	0	33.0	42.2	78.1	75.3
Long Term Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Swing Beds			0	0	0		0.0	0.0		
Acute Mental Illness	55	50	45	1,263	10,674	0	8.5	29.2	53.2	58.5
Rehabilitation	45	45	44	953	12,543	0	13.2	34.4	76.4	76.4
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	838			28,339	149,344	10,980	5.7	439.2	68.8	

(Includes ICU Direct Admissions Only)

Inpatients and Outpatients Served by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Charity Care	Totals
Inpatients	37.6%	20.4%	0.2%	40.5%	0.0%	1.2%	
	10661	5782	54	11491	0	351	28,339
Outpatients	27.2%	18.7%	0.1%	53.6%	0.7%	1.6%	
	84977	52192	397	167218	2323	4754	311,859

Inpatient and Outpatient Net Revenue by Payor Source

Financial Year Reported: 1/1/2014 to 12/31/2014

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Totals	Charity Care Expense	Total Charity Care Expense
Inpatient Revenue ($)	29.3%	12.1%	0.1%	58.4%	0.1%	100.0%		8,154,000
	143,783,416	59,475,887	610,285	288,054,652	353,353	490,177,593	4,106,000	
Outpatient Revenue ($)	18.3%	3.2%	0.1%	72.3%	0.1%	100.0%		Total Charity Care as % of Net Revenue
	45,970,954	8,129,910	335,862	181,844,652	15,311,597	251,586,895	4,048,000	1.1%

Birthing Data

Number of Total Births:	4,266
Number of Live Births:	4,260
Birthing Rooms:	0
Labor Rooms:	2
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	15
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	3
CSections Performed:	1,365

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	56	56	0
Patient Days	7,439	1,152	0
Total Newborn Patient Days			8,591

Laboratory Studies

Inpatient Studies	803,433
Outpatient Studies	294,940
Studies Performed Under Contract	0

Organ Transplantation

Kidney:	0
Heart:	0
Lung:	0
Heart/Lung:	0
Pancreas:	0
Liver:	0
Total:	0

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms: Inpatient	Operating Rooms: Outpatient	Operating Rooms: Combined	Operating Rooms: Total	Surgical Cases: Inpatient	Surgical Cases: Outpatient	Surgical Hours: Inpatient	Surgical Hours: Outpatient	Surgical Hours: Total Hours	Hours per Case: Inpatient	Hours per Case: Outpatient
Cardiovascular	1	0	0	1	351	67	1544	161	1705	4.4	2.4
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	1	7	10	18	1817	3544	5596	6113	11709	3.1	1.7
Gastroenterology	0	0	0	0	26	21	36	25	61	1.4	1.2
Neurology	0	0	2	2	409	135	1388	357	1743	3.4	2.6
OB/Gynecology	0	0	0	0	373	1987	1168	3851	5019	3.1	2.0
Oral/Maxillofacial	0	0	0	0	23	43	63	106	169	2.7	2.5
Ophthalmology	0	0	0	0	32	923	88	1984	2072	2.8	2.1
Orthopedic	0	0	2	2	3217	1217	9223	2602	11825	2.9	2.1
Otolaryngology	0	0	0	0	190	1372	381	2218	2599	2.0	1.6
Plastic Surgery	0	0	0	0	220	642	834	1805	2639	3.8	2.6
Podiatry	0	0	0	0	19	275	30	586	616	1.6	2.1
Thoracic	0	0	0	0	151	38	462	52	534	3.2	1.4
Urology	0	0	1	1	453	1177	1084	1577	2661	2.4	1.3
Totals	2	7	15	24	7281	11421	21916	21327	43242	3.0	1.9

SURGICAL RECOVERY STATIONS Stage 1 Recovery Stations: 25 Stage 2 Recovery Stations: 49

Dedicated and Non-Dedicated Procedure Room Utilization

Procedure Type	Procedure Rooms: Inpatient	Procedure Rooms: Outpatient	Procedure Rooms: Combined	Procedure Rooms: Total	Surgical Cases: Inpatient	Surgical Cases: Outpatient	Surgical Hours: Inpatient	Surgical Hours: Outpatient	Surgical Hours: Total Hours	Hours per Case: Inpatient	Hours per Case: Outpatient
Gastrointestinal	2	0	6	8	1718	10272	1374	8218	9592	0.8	0.8
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	0	0	0	0	0	0	0	0.0	0.0
Cystoscopy	0	0	0	0	0	0	0	0	0	0.0	0.0

Multipurpose Non-Dedicated Rooms

0	0	0	0	0	0	0	0	0	0.0	0.0
0	0	0	0	0	0	0	0	0	0.0	0.0
0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center	Yes
Level of Trauma Service	Level 1 Adult / Level 2
Operating Rooms Dedicated for Trauma Care	1
Number of Trauma Visits:	1,168
Patients Admitted from Trauma	1,088
Emergency Service Type:	Comprehensive
Number of Emergency Room Stations	32
Persons Treated by Emergency Services:	64,270
Patients Admitted from Emergency:	13,627
Total ED Visits (Emergency+Trauma):	65,438

Free-Standing Emergency Center

Beds in Free-Standing Centers	
Patient Visits in Free-Standing Centers	
Hospital Admissions from Free-Standing Center	

Outpatient Service Data

Total Outpatient Visits	311,859
Outpatient Visits at the Hospital/ Campus:	311,859
Outpatient Visits Offsite/off campus	0

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	5
Cath Labs used for Angiography procedures	0
Dedicated Diagnostic Catheterization Lab	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	2,143
Diagnostic Catheterizations (0-14)	18
Diagnostic Catheterizations (15+)	1,265
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	476
EP Catheterizations (15+)	384

Cardiac Surgery Data

Total Cardiac Surgery Cases:	187
Pediatric (0 - 14 Years):	7
Adult (15 Years and Older):	180
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	136

Diagnostic/Interventional Equipment

	Owned	Contract
General Radiography/Fluoroscopy	32	0
Nuclear Medicine	8	0
Mammography	7	0
Ultrasound	11	0
Angiography	2	0
Diagnostic Angiography		
Interventional Angiography		
Positron Emission Tomography (PET)	1	0
Computerized Axial Tomography (CAT)	5	0
Magnetic Resonance Imaging	5	0

Examinations

	Inpatient	Outpt	Contract
General Radiography/Fluoroscopy	43,414	49,404	0
Nuclear Medicine	1,476	3,931	0
Mammography	0	29,494	0
Ultrasound	3,859	19,359	0
Angiography			
Diagnostic Angiography	4,457	3,890	0
Interventional Angiography	1,709	2,119	0
Positron Emission Tomography (PET)	0	540	0
Computerized Axial Tomography (CAT)	15,934	23,927	0
Magnetic Resonance Imaging	4,725	13,896	0

Therapeutic Equipment

	Owned	Contract	Therapies/ Treatments
Lithotripsy	0	1	758
Linear Accelerator	3	0	10,073
Image Guided Rad Therapy			3,592
Intensity Modulated Rad Thrp			3,600
High Dose Brachytherapy	1	0	209
Proton Beam Therapy	0	0	0
Gamma Knife	0	0	0
Cyber knife	0	1	603

Source: 2014 Annual Hospital Questionnaire, Illinois Department of Public Health, Health Systems Development.

ATTACHMENT-22B5f

Ownership, Management and General Information

ADMINISTRATOR NAME:	Gerald P. Gallagher
ADMINISTRATOR PHONE	847-570-6151
OWNERSHIP:	NorthShore University HealthSystem
OPERATOR:	NorthShore University HealthSystem
MANAGEMENT:	Not for Profit Corporation (Not Church-R
CERTIFICATION:	None
FACILITY DESIGNATION:	General Hospital
ADDRESS	777 Park Avenue West CITY: Highland Park COUNTY: Lake County

Patients by Race

White	69.0%
Black	4.0%
American Indian	0.2%
Asian	4.4%
Hawaiian/ Pacific	0.1%
Unknown	21.6%

Patients by Ethnicity

Hispanic or Latino:	8.0%
Not Hispanic or Latino:	92.0%
Unknown:	0.0%

IDPH Number:	6068
HPA	A-09
HSA	8

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2014	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	93	93	93	4,609	21,263	5,097	5.7	72.2	77.7	77.7
0-14 Years				*0*	*0*					
15-44 Years				*1,414*	*5,134*					
45-64 Years				*981*	*4,464*					
65-74 Years				*638*	*3,217*					
75 Years +				*1,576*	*8,448*					
Podiatric	6	6	6	193	293	260	2.9	1.5	25.3	25.3
Intensive Care	12	12	12	1,201	3,278	28	2.6	9.1	75.5	75.5
Direct Admission				*956*	*2,427*					
Transfers				*335*	*851*					
Obstetric/Gynecology	25	25	25	1,469	3,445	684	2.9	11.9	47.4	47.4
Maternity				*1,386*	*3,250*					
Clean Gynecology				*83*	*195*					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Swing Beds			0	0	0		0.0	0.0		
Acute Mental Illness	13	13	13	841	3,303	0	5.2	9.0	69.6	69.6
Rehabilitation	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	149			7,668	31,582	6,269	4.8	103.7	69.6	

(Includes ICU Direct Admissions Only)

Inpatients and Outpatients Served by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Charity Care	Totals
Inpatients	34.6%	8.1%	0.0%	49.0%	1.6%	7.7%	
	2720	637	0	3776	126	608	7,869
Outpatients	36.5%	4.5%	0.0%	56.6%	1.5%	0.9%	
	91292	11255	0	141265	3761	2358	249,921

Inpatient and Outpatient Net Revenue by Payor Source

Financial Year Reported: 10/1/2013 *to* 9/30/2014

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Totals	Charity Care Expense	Total Charity Care Expense
Inpatient Revenue ($)	38.4%	3.8%	0.0%	84.1%	3.6%	100.0%		2,714,384
	32,726,547	3,276,168	0	46,153,078	3,093,945	85,249,538	1,016,335	
Outpatient Revenue ($)	22.3%	1.6%	0.0%	72.1%	4.1%	100.0%		*Total Charity Care as % of Net Revenue*
	37,519,492	2,621,069	0	121,521,729	6,870,702	168,532,992	1,698,049	1.1%

Birthing Data

Number of Total Births:	1,409
Number of Live Births:	1,404
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	0
Labor-Delivery-Recovery-Postpartum Rooms:	25
C-Section Rooms:	2
CSections Performed:	409

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	27	6	0
Patient Days	3,429	104	0
Total Newborn Patient Days			3,533

Laboratory Studies

Inpatient Studies	240,853
Outpatient Studies	258,864
Studies Performed Under Contract	16,383

Organ Transplantation

Kidney:	0
Heart:	0
Lung:	0
Heart/Lung:	0
Pancreas:	0
Liver:	0
Total:	0

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	0	0	1	1	199	79	1107	174	1281	5.6	2.2
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	1	1	2	365	1608	870	2045	2915	2.4	1.3
Gastroenterology	0	0	0	0	2	50	2	31	33	1.0	0.6
Neurology	0	0	0	0	71	109	203	168	371	2.9	1.5
OB/Gynecology	0	0	1	1	127	948	273	1136	1409	2.1	1.2
Oral/Maxillofacial	0	0	0	0	19	33	102	65	167	5.4	2.0
Ophthalmology	0	1	0	1	2	2136	5	1848	1853	2.5	0.9
Orthopedic	0	0	2	2	450	470	1063	657	1720	2.4	1.4
Otolaryngology	0	0	1	1	8	687	11	756	767	1.4	1.1
Plastic Surgery	0	1	1	2	31	901	86	1649	1645	3.1	1.7
Podiatry	0	0	0	0	28	74	27	99	126	1.0	1.3
Thoracic	0	0	0	0	84	13	175	17	192	2.1	1.3
Urology	0	0	1	1	220	676	305	551	856	1.4	0.8
Totals	0	3	8	11	1606	7784	4239	9096	13335	2.6	1.2

SURGICAL RECOVERY STATIONS Stage 1 Recovery Stations 13 Stage 2 Recovery Stations 0

Dedicated and Non-Dedicated Procedure Room Utilization

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	6	6	549	7995	824	11093	12817	1.5	1.5
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	1	1	17	232	26	348	374	1.5	1.5
Cystoscopy	0	0	0	0	0	0	0	0	0	0.0	0.0

Multipurpose Non-Dedicated Rooms

0	0	0	0	0	0	0	0	0	0.0	0.0
0	0	0	0	0	0	0	0	0	0.0	0.0
0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center	Yes
Level of Trauma Service	Level 1 Level 2 Adult
Operating Rooms Dedicated for Trauma Care	0
Number of Trauma Visits:	616
Patients Admitted from Trauma	615
Emergency Service Type:	Comprehensive
Number of Emergency Room Stations	15
Persons Treated by Emergency Services:	25,851
Patients Admitted from Emergency:	4,027
Total ED Visits (Emergency+Trauma):	26,287

Free-Standing Emergency Center

Beds in Free-Standing Centers	
Patient Visits in Free-Standing Centers	
Hospital Admissions from Free-Standing Center	

Outpatient Service Data

Total Outpatient Visits	237,386
Outpatient Visits at the Hospital/ Campus:	237,386
Outpatient Visits Offsite/off campus	0

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	2
Cath Labs used for Angiography procedures	0
Dedicated Diagnostic Catheterization Lab	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	1

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	1,147
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	816
Interventional Catheterizations (0-14)	0
Interventional Catheterization (15+)	291
EP Catheterizations (15+)	240

Cardiac Surgery Data

Total Cardiac Surgery Cases:	129
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	129
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	92

Diagnostic/Interventional Equipment

	Owned	Contract	Inpatient	Outpt	Contract
General Radiography/Fluoroscopy	3	0	10,186	20,185	0
Nuclear Medicine	3	0	287	6,929	0
Mammography	3	0	4	18,784	0
Ultrasound	3	0	2,104	10,973	0
Angiography	1	0			
Diagnostic Angiography			42	14	0
Interventional Angiography			14	9	0
Positron Emission Tomography (PET)	1	0	21	975	0
Computerized Axial Tomography (CAT)	2	0	5,632	17,431	0
Magnetic Resonance Imaging	1	0	946	5,719	0

Examinations

Therapeutic Equipment

	Owned	Contract	Therapies/ Treatments
Lithotripsy	0	0	0
Linear Accelerator	1	0	7,073
Image Guided Rad Therapy			0
Intensity Modulated Rad Thrp			1,956
High Dose Brachytherapy	0	0	0
Proton Beam Therapy	0	0	0
Gamma Knife	0	0	0
Cyber knife	0	0	0

Source: 2014 Annual Hospital Questionnaire, Illinois Department of Public Health, Health Systems Development.

ATTACHMENT-22B5f

Ownership, Management and General Information

ADMINISTRATOR NAME:	Barbara Martin
ADMINSTRATOR PHONE	847-360-3000
OWNERSHIP:	Community Health System
OPERATOR:	Community Health System
MANAGEMENT:	For Profit Corporation
CERTIFICATION:	None
FACILITY DESIGNATION:	Psychiatric Hospital
ADDRESS	2615 West Washington CITY: Waukegan COUNTY: Lake County

Patients by Race

White	61.6%
Black	25.2%
American Indian	0.0%
Asian	0.9%
Hawaiian/ Pacific	0.1%
Unknown	12.2%

Patients by Ethnicity

Hispanic or Latino:	17.3%
Not Hispanic or Latino:	76.1%
Unknown:	6.7%

IDPH Number:	5405
HPA	A-09
HSA	8

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2014	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	0	0	0	0	0	0	0.0	0.0	0.0	0.0
0-14 Years				0	0					
15-44 Years				0	0					
45-64 Years				0	0					
65-74 Years				0	0					
75 Years +				0	0					
Pediatric	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Intensive Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Direct Admission				0	0					
Transfers				0	0					
Obstetric/Gynecology	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Maternity				0	0					
Clean Gynecology				0	0					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Swing Beds			0	0	0		0.0	0.0		
Acute Mental Illness	46	42	37	1,483	9,870	0	6.7	27.0	58.8	64.4
Rehabilitation	25	25	13	241	3,089	0	12.7	8.4	33.6	33.6
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	0					0				
Facility Utilization	71			1,704	12,939	0	7.6	35.4	49.9	

(Includes ICU Direct Admissions Only)

Inpatients and Outpatients Served by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Charity Care	Totals
Inpatients	43.4%	31.1%	1.5%	19.7%	3.1%	1.2%	
	739	530	26	336	52	21	1,704
Outpatients	7.8%	57.1%	1.1%	15.3%	17.4%	1.3%	
	955	6950	133	1857	2116	159	12,172

Inpatient and Outpatient Net Revenue by Payor Source

Financial Year Reported: 1/1/2014 to 12/31/2014

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Totals	Charity Care Expense	Total Charity Care Expense
Inpatient Revenue ($)	28.0%	41.3%	1.6%	18.5%	9.2%	100.0%		134,748
	4,668,375	6,882,209	164,949	3,147,871	1,493,380	16,176,784	32,561	
Outpatient Revenue ($)	9.1%	-2.3%	1.3%	25.3%	66.6%	100.0%		Total Charity Care as % of Net Revenue
	688,604	-172,878	85,899	1,916,937	5,045,332	7,576,794	102,187	0.6%

Birthing Data

Number of Total Births:	0
Number of Live Births:	0
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	0
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	0
CSections Performed:	0

Newborn Nursery Utilization

	Level I	Level II	Level III+
Beds	0	0	0
Patient Days	0	0	0
Total Newborn Patient Days			0

Laboratory Studies

Inpatient Studies	19,438
Outpatient Studies	37,456
Studies Performed Under Contract	0

Organ Transplantation

Kidney:	0
Heart:	0
Lung:	0
Heart/Lung:	0
Pancreas:	0
Liver:	0
Total:	0

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	0	0	0	0	0	0	0	0	0	0.0	0.0
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	0	0	0	0	0	0	0	0.0	0.0
Gastroenterology	0	0	0	0	0	0	0	0	0	0.0	0.0
Neurology	0	0	0	0	0	0	0	0	0	0.0	0.0
OB/Gynecology	0	0	0	0	0	0	0	0	0	0.0	0.0
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	0	0	0	0	0	0	0	0.0	0.0
Orthopedic	0	0	0	0	0	0	0	0	0	0.0	0.0
Otolaryngology	0	0	0	0	0	0	0	0	0	0.0	0.0
Plastic Surgery	0	0	0	0	0	0	0	0	0	0.0	0.0
Podiatry	0	0	0	0	0	0	0	0	0	0.0	0.0
Thoracic	0	0	0	0	0	0	0	0	0	0.0	0.0
Urology	0	0	0	0	0	0	0	0	0	0.0	0.0
Totals	0	0	0	0	0	0	0	0	0	0.0	0.0

SURGICAL RECOVERY STATIONS Stage 1 Recovery Stations: 0 Stage 2 Recovery Stations: 0

Dedicated and Non-Dedicated Procedure Room Utilization

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	0	0	0	0	0	0	0	0.0	0.0
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	0	0	0	0	0	0	0	0.0	0.0
Cystoscopy	0	0	0	0	0	0	0	0	0	0.0	0.0

Multipurpose Non-Dedicated Rooms

	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center	No
Level of Trauma Service	Level 1 / Level 2
Operating Rooms Dedicated for Trauma Care	0
Number of Trauma Visits:	0
Patients Admitted from Trauma	0
Emergency Service Type:	Comprehensive
Number of Emergency Room Stations	11
Persons Treated by Emergency Services:	11,844
Patients Admitted from Emergency:	680
Total ED Visits (Emergency+Trauma):	11,844

Free-Standing Emergency Center

Beds in Free-Standing Centers	
Patient Visits in Free-Standing Center	
Hospital Admissions from Free-Standing Center	

Outpatient Service Data

Total Outpatient Visits	12,172
Outpatient Visits at the Hospital/ Campus:	12,172
Outpatient Visits Offsite/off campus	0

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	0
Cath Labs used for Angiography procedures	0
Dedicated Diagnostic Catheterization Lab	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	0
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	0
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	0
EP Catheterizations (15+)	0

Cardiac Surgery Data

Total Cardiac Surgery Cases:	0
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	0
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	0

Diagnostic/Interventional Equipment

	Owned	Contract	Inpatient	Outpt	Contract
General Radiography/Fluoroscopy	2	0	186	2,640	0
Nuclear Medicine	0	0	0	0	0
Mammography	0	0	0	0	0
Ultrasound	1	0	11	336	0
Angiography	0	0			
Diagnostic Angiography			0	0	0
Interventional Angiography			0	0	0
Positron Emission Tomography (PET)	0	0	0	0	0
Computerized Axial Tomography (CAT)	1	0	50	1,321	0
Magnetic Resonance Imaging	0	0	0	0	0

Examinations

Therapeutic Equipment

	Owned	Contract	Therapies/ Treatments
Lithotripsy	0	0	0
Linear Accelerator	0	0	0
Image Guided Rad Therapy			0
Intensity Modulated Rad Thrp			0
High Dose Brachytherapy	0	0	0
Proton Beam Therapy	0	0	0
Gamma Knife	0	0	0
Cyber knife	0	0	0

Source: 2014 Annual Hospital Questionnaire, Illinois Department of Public Health, Health Systems Development.

ATTACHMENT-22B5f

Ownership, Management and General Information

ADMINISTRATOR NAME:	Steve Scogna
ADMINISTRATOR PHONE	847-618-5007
OWNERSHIP:	Northwest Community Hospital
OPERATOR:	Northwest Community Hospital
MANAGEMENT:	Other Not For Profit (specify below)
CERTIFICATION:	None
FACILITY DESIGNATION:	General Hospital
ADDRESS	800 West Central Road CITY: Arlington Heights COUNTY: Suburban Cook County

Patients by Race

White	85.9%
Black	2.3%
American Indian	0.3%
Asian	5.4%
Hawaiian/ Pacific	0.0%
Unknown	6.1%

Patients by Ethnicity

Hispanic or Latino:	8.9%
Not Hispanic or Latino:	91.1%
Unknown:	0.0%

IDPH Number:	1701
HPA	A-07
HSA	7

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2014	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	312	250	188	11,089	39,024	10,113	4.4	134.6	43.1	53.8
0-14 Years				*0*	*0*					
15-44 Years				*1,135*	*3,718*					
45-64 Years				*2,949*	*10,924*					
65-74 Years				*2,159*	*8,283*					
75 Years +				*4,846*	*16,099*					
Pediatric	16	16	13	487	1,161	866	4.2	5.6	34.7	34.7
Intensive Care	60	36	35	3,119	8,591	114	2.8	23.6	39.7	66.2
Direct Admission				*2,937*	*7,579*					
Transfers				*182*	*1,012*					
Obstetric/Gynecology	44	44	40	2,986	7,813	261	2.6	21.6	49.0	49.0
Maternity				*2,876*	*7,406*					
Clean Gynecology				*110*	*207*					
Neonatal	8	8	8	134	983	0	7.3	2.7	33.7	33.7
Long Term Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Swing Beds			0	0	0		0.0	0.0		
Acute Mental Illness	32	32	32	1,356	9,205	2	6.8	25.2	78.8	78.8
Rehabilitation	17	0	0	0	0	0	0.0	0.0	0.0	0.0
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*0*					*0*				
Facility Utilization	489			18,989	68,577	11,358	4.1	213.5	43.7	

(Includes ICU Direct Admissions Only)

Inpatients and Outpatients Served by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Charity Care	Totals
Inpatients	46.3%	11.3%	0.0%	37.0%	0.4%	3.0%	
	9168	2149	0	7030	81	561	18,989
Outpatients	38.9%	7.7%	0.0%	50.2%	0.5%	2.7%	
	136056	27045	0	175527	1597	9563	349,788

Financial Year Reported: 10/1/2013 to 9/30/2014

Inpatient and Outpatient Net Revenue by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Totals	Charity Care Expense
Inpatient Revenue ($)	45.4%	12.3%	0.0%	41.7%	0.6%	100.0%	
	82,478,967	22,204,956	0	75,755,962	992,192	181,481,977	5,765,857
Outpatient Revenue ($)	22.5%	5.9%	0.0%	71.0%	0.6%	100.0%	
	54,210,712	14,298,369	0	171,026,705	1,406,027	240,941,813	7,132,391

Total Charity Care Expense 12,898,248

Total Charity Care as % of Net Revenue 3.1%

Birthing Data

Number of Total Births:	2,827
Number of Live Births:	2,800
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	12
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	3
CSections Performed:	980

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	45	5	6
Patient Days	5,737	327	2,343
Total Newborn Patient Days			8,407

Laboratory Studies

Inpatient Studies	592,978
Outpatient Studies	487,674
Studies Performed Under Contract	201,212

Organ Transplantation

Kidney:	0
Heart:	0
Lung:	0
Heart/Lung:	0
Pancreas:	0
Liver:	0
Total:	0

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms: Inpatient	Operating Rooms: Outpatient	Operating Rooms: Combined	Operating Rooms: Total	Surgical Cases: Inpatient	Surgical Cases: Outpatient	Surgical Hours: Inpatient	Surgical Hours: Outpatient	Surgical Hours: Total Hours	Hours per Case: Inpatient	Hours per Case: Outpatient
Cardiovascular	0	0	2	2	365	107	1871	262	2133	5.1	2.4
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	11	11	1400	1713	3558	3132	6668	2.5	1.8
Gastroenterology	0	0	0	0	3	4	7	9	16	2.3	2.3
Neurology	0	0	0	0	198	85	699	149	848	3.5	1.8
OB/Gynecology	0	0	0	0	173	428	423	1253	1676	2.4	2.9
Oral/Maxillofacial	0	0	0	0	23	5	80	12	92	3.5	2.4
Ophthalmology	0	0	0	0	2	6	9	27	36	4.5	4.5
Orthopedic	0	0	0	0	1653	722	5264	1865	7129	3.2	2.6
Otolaryngology	0	0	0	0	81	403	194	1051	1245	2.4	2.6
Plastic Surgery	0	0	0	0	5	87	12	132	144	2.4	2.0
Podiatry	0	0	0	0	2	3	3	7	10	1.5	2.3
Thoracic	0	0	0	0	93	9	299	22	321	3.2	2.4
Urology	0	0	1	1	185	922	368	1173	1541	2.0	1.3
Totals	0	0	14	14	4183	4474	12785	9094	21879	3.1	2.0

SURGICAL RECOVERY STATIONS Stage 1 Recovery Stations 14 Stage 2 Recovery Stations 16

Dedicated and Non-Dedicated Procedure Room Utilization

Procedure Type	Procedure Rooms: Inpatient	Procedure Rooms: Outpatient	Procedure Rooms: Combined	Procedure Rooms: Total	Surgical Cases: Inpatient	Surgical Cases: Outpatient	Surgical Hours: Inpatient	Surgical Hours: Outpatient	Surgical Hours: Total Hours	Hours per Case: Inpatient	Hours per Case: Outpatient
Gastrointestinal	0	0	9	9	1953	12403	1744	11077	12821	0.9	0.9
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	0	0	0	0	0	0	0	0.0	0.0
Cystoscopy	0	0	0	0	0	0	0	0	0	0.0	0.0

Multipurpose Non-Dedicated Rooms

0	0	0	0	0	0	0	0	0	0.0	0.0
0	0	0	0	0	0	0	0	0	0.0	0.0
0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center	Yes
Level of Trauma Service	Level 1 / Level 2 / Adult
Operating Rooms Dedicated for Trauma Care	1
Number of Trauma Visits:	13,704
Patients Admitted from Trauma	1,088
Emergency Service Type:	Comprehensive
Number of Emergency Room Stations	48
Persons Treated by Emergency Services:	58,301
Patients Admitted from Emergency:	11,485
Total ED Visits (Emergency+Trauma):	72,005

Free-Standing Emergency Center

Beds in Free-Standing Centers	
Patient Visits in Free-Standing Centers	
Hospital Admissions from Free-Standing Center	

Outpatient Service Data

Total Outpatient Visits	349,788
Outpatient Visits at the Hospital/ Campus:	249,556
Outpatient Visits Offsite/off campus	100,232

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	3
Cath Labs used for Angiography procedures	0
Dedicated Diagnostic Catheterization Lab	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	2,161
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	1,141
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	468
EP Catheterizations (15+)	552

Cardiac Surgery Data

Total Cardiac Surgery Cases:	198
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	198
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	117

Diagnostic/Interventional Equipment

	Owned	Contract	Examinations: Inpatient	Examinations: Outpt	Examinations: Contract
General Radiography/Fluoroscopy	21	0	25,983	83,568	0
Nuclear Medicine	6	0	887	3,604	0
Mammography	5	0	4	26,713	0
Ultrasound	14	0	3,921	19,028	0
Angiography	2	0			
Diagnostic Angiography			1,244	689	0
Interventional Angiography			1,633	1,115	0
Positron Emission Tomography (PET)	1	0	12	950	0
Computerized Axial Tomography (CAT)	8	0	11,956	36,363	0
Magnetic Resonance Imaging	6	0	446	13,477	0

Therapeutic Equipment

	Owned	Contract	Therapies/ Treatments
Lithotripsy	0	0	0
Linear Accelerator	2	0	10,503
Image Guided Rad Therapy			3,715
Intensity Modulated Rad Thrp			2,759
High Dose Brachytherapy	1	0	499
Proton Beam Therapy	0	0	0
Gamma Knife	0	0	0
Cyber knife	0	1	154

Source: 2014 Annual Hospital Questionnaire, Illinois Department of Public Health, Health Systems Development.

ATTACHMENT-22B5f

Ownership, Management and General Information

ADMINISTRATOR NAME:	Gerald P. Gallagher
ADMINISTRATOR PHONE	847-570-5151
OWNERSHIP:	NorthShore University HealthSystem
OPERATOR:	NorthShore University HealthSystem
MANAGEMENT:	Not for Profit Corporation (Not Church-R
CERTIFICATION:	None
FACILITY DESIGNATION:	General Hospital
ADDRESS	2650 Ridge Avenue

CITY: Evanston COUNTY: Suburban Cook County

Patients by Race

White	59.4%
Black	10.3%
American Indian	0.2%
Asian	5.3%
Hawaiian/ Pacific	0.1%
Unknown	24.7%

Patients by Ethnicity

Hispanic or Latino:	6.7%
Not Hispanic or Latino:	93.3%
Unknown:	0.0%

IDPH Number:	0646
HPA	A-08
HSA	7

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2014	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	174	180	150	6,781	33,704	3,326	5.5	101.5	58.3	67.6
0-14 Years				*0*	*0*					
15-44 Years				*2,740*	*10,223*					
45-64 Years				*1,485*	*8,185*					
65-74 Years				*1,018*	*6,099*					
75 Years +				*1,540*	*9,197*					
Pediatric	15	12	12	386	1,035	640	4.3	4.6	30.6	38.2
Intensive Care	26	26	26	2,340	6,341	13	2.7	17.4	67.0	67.0
Direct Admission				*1,554*	*4,211*					
Transfers				*786*	*2,130*					
Obstetric/Gynecology	52	52	52	3,720	10,926	1,465	3.3	34.0	65.3	65.3
Maternity				*3,383*	*10,269*					
Clean Gynecology				*337*	*659*					
Neonatal	44	44	44	457	11,841	1	25.9	32.4	73.7	73.7
Long Term Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Swing Beds			0	0	0		0.0	0.0		
Acute Mental Illness	21	21	21	1,089	6,549	0	6.0	17.9	85.4	85.4
Rehabilitation	22	19	19	449	5,878	2	13.1	16.1	73.2	84.8
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*21*					*4083*				
Facility Utilization	354			14,416	76,276	9,530	6.0	235.1	68.4	

(Includes ICU Direct Admissions Only)

Inpatients and Outpatients Served by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Charity Care	Totals
Inpatients	24.1%	13.4%	0.0%	50.2%	1.9%	10.3%	
	3477	1929	0	7244	279	1487	14,416
Outpatients	32.6%	7.5%	0.0%	52.8%	5.4%	1.8%	
	167450	38564	0	271268	27950	8104	513,336

Inpatient and Outpatient Net Revenue by Payor Source

Financial Year Reported: 10/1/2013 to 9/30/2014

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Totals	Charity Care Expense	Total Charity Care Expense
Inpatient Revenue ($)	27.1%	9.4%	0.0%	58.7%	4.8%	100.0%		10,850,484
	66,009,979	22,905,853	0	142,790,818	11,715,501	243,422,151	3,312,794	
Outpatient Revenue ($)	23.6%	2.7%	0.0%	64.0%	9.7%	100.0%		Total Charity Care as % of Net Revenue
	62,935,987	7,335,951	0	170,911,965	26,023,610	267,207,533	7,237,690	2.1%

Birthing Data

Number of Total Births:	3,528
Number of Live Births:	3,474
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	10
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	3
CSections Performed:	879

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	52	13	0
Patient Days	7,258	144	0
Total Newborn Patient Days			7,402

Laboratory Studies

Inpatient Studies	661,427
Outpatient Studies	2,337,798
Studies Performed Under Contract	92,759

Organ Transplantation

Kidney:	0
Heart:	0
Lung:	0
Heart/Lung:	0
Pancreas:	0
Liver:	0
Total:	0

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	0	0	2	2	519	180	2407	1793	4200	4.6	10.0
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	3	3	755	1464	2407	1964	4371	3.2	1.4
Gastroenterology	0	0	0	0	5	222	4	122	126	0.8	0.5
Neurology	0	0	2	2	651	205	2662	438	3100	4.1	2.1
OB/Gynecology	0	0	2	2	283	1222	1091	2140	3231	3.9	1.8
Oral/Maxillofacial	0	0	0	0	10	2	28	4	32	2.8	2.0
Ophthalmology	0	0	0	0	1	34	3	49	52	3.0	1.4
Orthopedic	0	0	2	2	579	938	2200	1725	3925	3.8	1.8
Otolaryngology	0	0	2	2	109	1204	482	1614	2098	4.4	1.3
Plastic Surgery	0	0	1	1	102	557	340	1214	1554	3.3	2.2
Podiatry	0	0	0	0	45	6	51	7	58	1.1	1.2
Thoracic	0	0	1	1	243	121	642	155	797	2.6	1.3
Urology	0	0	1	1	208	501	453	506	959	2.2	1.0
Totals	0	0	18	18	3510	6848	12770	11731	24501	3.6	1.8

SURGICAL RECOVERY STATIONS — Stage 1 Recovery Stations: 15 — Stage 2 Recovery Stations: 0

Dedicated and Non-Dedicated Procedure Room Utilization

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	7	7	819	9626	1229	14439	15668	1.5	1.5
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	2	2	43	3280	65	4921	4986	1.5	1.5
Cystoscopy	0	0	0	0	0	0	0	0	0	0.0	0.0

Multipurpose Non-Dedicated Rooms

	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center	Yes
Level of Trauma Service	Level 1 Adult / Level 2
Operating Rooms Dedicated for Trauma Care	1
Number of Trauma Visits:	777
Patients Admitted from Trauma	759
Emergency Service Type:	Comprehensive
Number of Emergency Room Stations	18
Persons Treated by Emergency Services:	36,723
Patients Admitted from Emergency:	4,888
Total ED Visits (Emergency+Trauma):	36,500

Free-Standing Emergency Center

Beds in Free-Standing Centers	
Patient Visits in Free-Standing Centers	
Hospital Admissions from Free-Standing Center	

Outpatient Service Data

Total Outpatient Visits	749,483
Outpatient Visits at the Hospital/ Campus:	371,341
Outpatient Visits Offsite/off campus	378,122

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	3
Cath Labs used for Angiography procedures	0
Dedicated Diagnostic Catheterization Lab	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	1

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	2,258
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	1,368
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	457
EP Catheterizations (15+)	433

Cardiac Surgery Data

Total Cardiac Surgery Cases:	209
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	209
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	117

Diagnostic/Interventional Equipment

	Owned	Contract	Examinations Inpatient	Outpt	Contract
General Radiography/Fluoroscopy	7	0	20,524	27,355	0
Nuclear Medicine	4	0	385	5,478	0
Mammography	5	0	8	20,142	0
Ultrasound	3	0	4,476	12,227	0
Angiography	3	0			
Diagnostic Angiography			552	432	0
Interventional Angiography			91	57	0
Positron Emission Tomography (PET)	0	0	0	0	0
Computerized Axial Tomography (CAT)	3	0	9,567	20,043	0
Magnetic Resonance Imaging	4	0	2,071	10,184	0

Therapeutic Equipment

	Owned	Contract	Therapies/ Treatments
Lithotripsy	0	0	0
Linear Accelerator	2	0	8,939
Image Guided Rad Therapy			0
Intensity Modulated Rad Thrp			2,583
High Dose Brachytherapy	1	0	117
Proton Beam Therapy	0	0	0
Gamma Knife	0	0	0
Cyber knife	0	0	0

Source: 2014 Annual Hospital Questionnaire, Illinois Department of Public Health, Health Systems Development.

ATTACHMENT-22B5f

Ownership, Management and General Information

ADMINISTRATOR NAME:	CLAYTON CIHA
ADMINSTRATOR PHONE	847-882-1600 ext.8001
OWNERSHIP:	ALEXIAN BROTHERS BEHAVIORAL HEALTH HOSPITA
OPERATOR:	ALEXIAN BROTHERS BEHAVIORAL HEALTH HOSPITA
MANAGEMENT:	Church-Related
CERTIFICATION:	None
FACILITY DESIGNATION:	Psychiatric Hospital
ADDRESS	1650 Moon Lake Boulevard CITY: Hoffman Estates COUNTY: Suburban Cook County

Patients by Race

White	82.6%
Black	3.8%
American Indian	0.1%
Asian	2.3%
Hawaiian/ Pacific	0.0%
Unknown	11.0%

Patients by Ethnicity

Hispanic or Latino:	2.4%
Not Hispanic or Latino:	92.6%
Unknown:	5.0%

IDPH Number:	5009
HPA	A-07
HSA	7

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2014	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	0	0	0	0	0	0	0.0	0.0	0.0	0.0
0-14 Years				0	0					
15-44 Years				0	0					
45-64 Years				0	0					
65-74 Years				0	0					
75 Years +				0	0					
Pediatric	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Intensive Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Direct Admission				0	0					
Transfers				0	0					
Obstetric/Gynecology	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Maternity				0	0					
Clean Gynecology				0	0					
Neonatal	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long Term Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Swing Beds			0	0	0		0.0	0.0		
Acute Mental Illness	141	141	140	5,992	47,138	0	7.9	129.1	91.6	91.6
Rehabilitation	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	0					0				
Facility Utilization	141			5,992	47,138	0	7.9	129.1	91.6	

(Includes ICU Direct Admissions Only)

Inpatients and Outpatients Served by Payor Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Charity Care	Totals
Inpatients	21.9%	5.9%	0.8%	56.1%	1.6%	11.8%	
	1310	355	49	3479	84	715	5,992
Outpatients	21.2%	4.7%	0.9%	69.1%	2.9%	1.1%	
	4354	972	180	14182	602	234	20,834

Inpatient and Outpatient Net Revenue by Payor Source

Financial Year Reported: 7/1/2013 to 6/30/2014

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Totals	Charity Care Expense	Total Charity Care Expense
Inpatient Revenue ($)	39.4%	1.7%	0.6%	58.2%	0.2%	100.0%		363,750
	15,038,986	630,007	216,994	22,166,548	70,850	38,141,385	297,646	
Outpatient Revenue ($)	16.9%	5.4%	0.4%	70.5%	6.8%	100.0%		Total Charity Care as % of Net Revenue
	4,635,150	1,471,557	113,101	19,303,605	1,848,717	27,372,130	66,104	0.8%

Birthing Data

Number of Total Births:	0
Number of Live Births:	0
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	0
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	0
CSections Performed:	0

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	0	0	0
Patient Days	0	0	0
Total Newborn Patient Days			0

Laboratory Studies

Inpatient Studies	0
Outpatient Studies	0
Studies Performed Under Contract	69,906

Organ Transplantation

Kidney:	0
Heart:	0
Lung:	0
Heart/Lung:	0
Pancreas:	0
Liver:	0
Total:	0

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Cardiovascular	0	0	0	0	0	0	0	0	0	0.0	0.0
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	0	0	0	0	0	0	0	0.0	0.0
Gastroenterology	0	0	0	0	0	0	0	0	0	0.0	0.0
Neurology	0	0	0	0	0	0	0	0	0	0.0	0.0
OB/Gynecology	0	0	0	0	0	0	0	0	0	0.0	0.0
Oral/Maxillofacial	0	0	0	0	0	0	0	0	0	0.0	0.0
Ophthalmology	0	0	0	0	0	0	0	0	0	0.0	0.0
Orthopedic	0	0	0	0	0	0	0	0	0	0.0	0.0
Otolaryngology	0	0	0	0	0	0	0	0	0	0.0	0.0
Plastic Surgery	0	0	0	0	0	0	0	0	0	0.0	0.0
Podiatry	0	0	0	0	0	0	0	0	0	0.0	0.0
Thoracic	0	0	0	0	0	0	0	0	0	0.0	0.0
Urology	0	0	0	0	0	0	0	0	0	0.0	0.0
Totals	0	0	0	0	0	0	0	0	0	0.0	0.0

SURGICAL RECOVERY STATIONS Stage 1 Recovery Stations: 0 Stage 2 Recovery Stations: 0

Dedicated and Non-Dedicated Procedure Room Utilization

Procedure Type	Procedure Rooms				Surgical Cases		Surgical Hours			Hours per Case	
	Inpatient	Outpatient	Combined	Total	Inpatient	Outpatient	Inpatient	Outpatient	Total Hours	Inpatient	Outpatient
Gastrointestinal	0	0	0	0	0	0	0	0	0	0.0	0.0
Laser Eye Procedures	0	0	0	0	0	0	0	0	0	0.0	0.0
Pain Management	0	0	0	0	0	0	0	0	0	0.0	0.0
Cystoscopy	0	0	0	0	0	0	0	0	0	0.0	0.0

Multipurpose Non-Dedicated Rooms

	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center	No
Level of Trauma Service	Level 1 Level 2
Operating Rooms Dedicated for Trauma Care	0
Number of Trauma Visits:	0
Patients Admitted from Trauma	0
Emergency Service Type:	Stand-By
Number of Emergency Room Stations	0
Persons Treated by Emergency Services:	0
Patients Admitted from Emergency:	0
Total ED Visits (Emergency+Trauma):	0

Free-Standing Emergency Center

Beds in Free-Standing Centers	
Patient Visits in Free-Standing Centers	
Hospital Admissions from Free-Standing Center	

Outpatient Service Data

Total Outpatient Visits	157,168
Outpatient Visits at the Hospital/ Campus:	61,530
Outpatient Visits Offsite/off campus	95,638

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	0
Cath Labs used for Angiography procedures	0
Dedicated Diagnostic Catheterization Lab	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	0

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	0
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	0
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	0
EP Catheterizations (15+)	0

Cardiac Surgery Data

Total Cardiac Surgery Cases:	0
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	0
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	0

Diagnostic/Interventional Equipment

	Owned	Contract
General Radiography/Fluoroscopy	0	0
Nuclear Medicine	0	0
Mammography	0	0
Ultrasound	0	0
Angiography	0	0
Diagnostic Angiography		
Interventional Angiography		
Positron Emission Tomography (PET)	0	0
Computerized Axial Tomography (CAT)	0	0
Magnetic Resonance Imaging	0	0

Examinations

	Inpatient	Outpt	Contract
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
		0	0
		0	0
	0	0	0
	0	0	0
	0	0	0

Therapeutic Equipment

	Owned	Contract	Therapies/ Treatments
Lithotripsy	0	0	0
Linear Accelerator	0	0	0
Image Guided Rad Therapy			0
Intensity Modulated Rad Thrp			0
High Dose Brachytherapy	0	0	0
Proton Beam Therapy	0	0	0
Gamma Knife	0	0	0
Cyber knife	0	0	0

Source: 2014 Annual Hospital Questionnaire, Illinois Department of Public Health, Health Systems Development.

ATTACHMENT-22B5f

Ownership, Management and General Information

ADMINISTRATOR NAME:	Richard Gannotta
ADMINISTRATOR PHONE	312-926-2000
OWNERSHIP:	Northwestern Memorial Hospital
OPERATOR:	Northwestern Memorial Hospital
MANAGEMENT:	Not for Profit Corporation (Not Church-R
CERTIFICATION:	None
FACILITY DESIGNATION:	General Hospital
ADDRESS	251 East Huron Street CITY: Chicago COUNTY: Suburban Cook (Chicago)

Patients by Race

White	58.7%
Black	21.7%
American Indian	0.1%
Asian	4.4%
Hawaiian/ Pacific	0.0%
Unknown	15.1%

Patients by Ethnicity

Hispanic or Latino:	11.2%
Not Hispanic or Latino:	84.9%
Unknown:	3.9%

IDPH Number:	3251
HPA	A-01
HSA	6

Facility Utilization Data by Category of Service

Clinical Service	Authorized CON Beds 12/31/2014	Peak Beds Setup and Staffed	Peak Census	Admissions	Inpatient Days	Observation Days	Average Length of Stay	Average Daily Census	CON Occupancy Rate %	Staffed Bed Occupancy Rate %
Medical/Surgical	530	526	526	24,729	141,650	0	5.7	388.1	73.2	73.8
0-14 Years				*5*	*9*					
15-44 Years				*6,452*	*30,736*					
45-64 Years				*9,299*	*55,828*					
65-74 Years				*4,783*	*29,349*					
75 Years +				*4,190*	*25,734*					
Pediatric	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Intensive Care	115	106	106	7,064	29,001	36	4.2	82.0	71.3	77.4
Direct Admission				*5,610*	*20,575*					
Transfers				*1,454*	*8,326*					
Obstetric/Gynecology	134	134	134	12,170	35,486	727	3.0	99.2	74.0	74.0
Maternity				*12,170*	*35,486*					
Clean Gynecology				*0*	*0*					
Neonatal	86	86	86	1,031	18,291	0	17.7	50.1	58.3	58.3
Long Term Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Swing Beds			0	0	0		0.0	0.0		
Acute Mental Illness	29	29	29	1,123	9,157	0	8.2	25.1	86.5	86.5
Rehabilitation	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Long-Term Acute Care	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Dedicated Observation	*48*					*14059*				
Facility Utilization	894			44,863	234,485	14,822	5.6	693.0	76.4	

(Includes ICU Direct Admissions Only)

Inpatients and Outpatients Served by Payer Source

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Charity Care	Totals
Inpatients	27.9%	12.1%	0.1%	57.7%	0.2%	2.0%	
	12455	5390	64	25762	94	898	44,663
Outpatients	32.3%	8.6%	0.1%	53.3%	3.6%	2.0%	
	190121	50435	521	313847	22098	12045	589,067

Inpatient and Outpatient Net Revenue by Payer Source

Financial Year Reported: 9/1/2013 to 6/31/2014

	Medicare	Medicaid	Other Public	Private Insurance	Private Pay	Totals	Charity Care Expense	Total Charity Care Expense
Inpatient Revenue ($)	24.1%	17.5%	0.1%	58.1%	0.2%	100.0%		40,459,000
	209,398,471	152,450,047	1,161,149	505,073,796	1,314,917	870,399,380	15,724,596	*Total Charity Care as % of Net Revenue*
Outpatient Revenue ($)	12.9%	1.2%	0.1%	79.5%	6.3%	100.0%		2.8%
	74,201,541	6,935,631	415,774	455,873,554	36,093,631	573,520,431	24,734,404	

Birthing Data

Number of Total Births:	12,594
Number of Live Births:	12,497
Birthing Rooms:	0
Labor Rooms:	0
Delivery Rooms:	0
Labor-Delivery-Recovery Rooms:	32
Labor-Delivery-Recovery-Postpartum Rooms:	0
C-Section Rooms:	4
CSections Performed:	3,209

Newborn Nursery Utilization

	Level I	Level II	Level II+
Beds	144	0	0
Patient Days	26,250	21,536	0
Total Newborn Patient Days			47,786

Laboratory Studies

Inpatient Studies	2,250,441
Outpatient Studies	1,400,251
Studies Performed Under Contract	74,955

Organ Transplantation

Kidney:	197
Heart:	32
Lung:	9
Heart/Lung:	0
Pancreas:	21
Liver:	108
Total:	367

Surgery and Operating Room Utilization

Surgical Specialty	Operating Rooms: Inpatient	Outpatient	Combined	Total	Surgical Cases: Inpatient	Outpatient	Surgical Hours: Inpatient	Outpatient	Total Hours	Hours per Case: Inpatient	Outpatient
Cardiovascular	0	0	7	7	1787	274	9969	711	10680	5.6	2.6
Dermatology	0	0	0	0	0	0	0	0	0	0.0	0.0
General	0	0	10	10	3058	4638	12842	10395	23237	4.2	2.2
Gastroenterology	0	0	0	0	1	1	4	1	5	4.0	1.0
Neurology	0	0	4	4	2041	605	11699	1842	13541	5.7	3.0
OB/Gynecology	0	0	6	6	732	3168	9014	6130	9144	4.1	1.9
Oral/Maxillofacial	0	0	0	0	33	38	110	113	223	3.3	3.0
Ophthalmology	0	0	2	2	15	2698	60	3651	3711	4.0	1.4
Orthopedic	0	0	18	18	2296	4008	8252	8594	16846	3.6	2.1
Otolaryngology	0	0	3	3	285	1704	1389	4555	5944	4.9	2.7
Plastic Surgery	0	0	5	5	990	1637	2777	4394	7171	4.0	2.7
Podiatry	0	0	0	0	0	0	0	0	0	0.0	0.0
Thoracic	0	0	2	2	607	180	2326	426	2752	3.8	2.4
Urology	0	0	5	5	990	2676	4401	5538	9939	4.4	2.1
Totals	0	0	62	62	12535	21627	56843	46350	103193	4.5	2.1

SURGICAL RECOVERY STATIONS — Stage 1 Recovery Stations: 60 — Stage 2 Recovery Stations: 83

Dedicated and Non-Dedicated Procedure Room Utilization

Procedure Type	Procedure Rooms: Inpatient	Outpatient	Combined	Total	Surgical Cases: Inpatient	Outpatient	Surgical Hours: Inpatient	Outpatient	Total Hours	Hours per Case: Inpatient	Outpatient
Gastrointestinal	1	11	2	14	2788	28080	2076	21045	23121	0.8	0.8
Laser Eye Procedures	0	0	1	1	0	237	0	194	194	0.0	0.8
Pain Management	0	0	0	0	0	0	0	0	0	0.0	0.0
Cystoscopy	0	0	0	0	0	0	0	0	0	0.0	0.0

Multipurpose Non-Radiated Rooms

Minor Procedures	0	0	2	2	7	94	11	71	82	1.6	0.8
	0	0	0	0	0	0	0	0	0	0.0	0.0
	0	0	0	0	0	0	0	0	0	0.0	0.0

Emergency/Trauma Care

Certified Trauma Center	Yes
Level of Trauma Service	Level 1 Adult / Level 2
Operating Rooms Dedicated for Trauma Care	2
Number of Trauma Visits:	747
Patients Admitted from Trauma	363
Emergency Service Type:	Comprehensive
Number of Emergency Room Stations	55
Persons Treated by Emergency Services:	83,222
Patients Admitted from Emergency:	18,534
Total ED Visits (Emergency+Trauma):	83,969

Free-Standing Emergency Center

Beds in Free-Standing Centers	
Patient Visits in Free-Standing Centers	
Hospital Admissions from Free-Standing Center	

Outpatient Service Data

Total Outpatient Visits	575,938
Outpatient Visits at the Hospital/ Campus:	569,052
Outpatient Visits Offsite/off campus	6,886

Cardiac Catheterization Labs

Total Cath Labs (Dedicated+Nondedicated labs):	8
Cath Labs used for Angiography procedures	0
Dedicated Diagnostic Catheterization Lab	0
Dedicated Interventional Catheterization Labs	0
Dedicated EP Catheterization Labs	3

Cardiac Catheterization Utilization

Total Cardiac Cath Procedures:	7,907
Diagnostic Catheterizations (0-14)	0
Diagnostic Catheterizations (15+)	4,405
Interventional Catheterizations (0-14):	0
Interventional Catheterization (15+)	1,549
EP Catheterizations (15+)	1,953

Cardiac Surgery Data

Total Cardiac Surgery Cases:	987
Pediatric (0 - 14 Years):	0
Adult (15 Years and Older):	987
Coronary Artery Bypass Grafts (CABGs) performed of total Cardiac Cases :	147

Diagnostic/Interventional Equipment

	Owned	Contract	Examinations: Inpatient	Outpt	Contract
General Radiography/Fluoroscopy	56	0	74,445	101,136	0
Nuclear Medicine	10	0	1,165	11,146	0
Mammography	26	0	166	86,260	0
Ultrasound	53	0	24,243	73,550	0
Angiography	13	0			
Diagnostic Angiography			0	0	0
Interventional Angiography			5,368	8,411	0
Positron Emission Tomography (PET)	1	0	240	1,983	0
Computerized Axial Tomography (CAT)	8	0	19,082	65,986	0
Magnetic Resonance Imaging	15	0	9,901	47,851	0

Therapeutic Equipment

	Owned	Contract	Therapies/ Treatments
Lithotripsy	1	0	88
Linear Accelerator	5	0	27,740
Image Guided Rad Therapy			18,545
Intensity Modulated Rad Thrp			9,195
High Dose Brachytherapy	1	0	285
Proton Beam Therapy	0	0	0
Gamma Knife	1	0	198
Cyber knife	0	0	0

Source: 2014 Annual Hospital Questionnaire, Illinois Department of Public Health, Health Systems Development

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ATTACHMENT-22B5f

1110.730(c)(1) - Unnecessary Duplication of Services

A) A list of all zip code areas that are located, in total or in part, within 30 minutes normal travel time of the project's site;

B) The total population of the identified zip code areas (based upon the most recent population numbers available for the State of Illinois population); and

Appended as **ATTACHMENT-22B5c**, is a listing of all Zip Code areas, in whole or in part, within the 45-minute adjusted travel time with 2010 census data.

C) The names and locations of all existing or approved health care facilities located within 30 minutes normal travel time from the project site that provide the categories of bed service that are proposed by the project.

Appended as **ATTACHMENT-22B5d**, is a summary listing of AMI facilities identified as within the adjusted market area contour, their number of licensed beds, and travel times to the proposed site.

ATTACHMENT-22C1

1110.730(c)(2) - Maldisribution

(c)2) The applicant shall document that the project will not result in maldistribution of services. Maldistribution exists when the identified area (within the planning area) has an excess supply of facilities, bed and services characterized by such factors as, but not limited to:

A) A ratio of beds to population that exceeds one and one-half times the State average;

Misdistribution is typified by having too many facilities clustered together within the service area where as the ratio of "beds" to "population" is one and one half times greater than the ratio of the State as a whole. The actual ratio of "beds" to "population" for the combined A-08 and A-09 Planning Areas and that of the 45-minute travel contour as they compare to the State's is as follows:

beds in PA A-08/A-09	180	(80 Existing + 100 Proposed)	=	0.000149623
Population in PA: A-08/A-09	1203020			

Beds in 45-min Adj. Travel Time Contour	587	(487 Existing + 100 Proposed)	=	0.000099303
Population in 45-minutes Adj. Travel Time	5,911,203			

Beds in State	4076		=	0.000312966
Statewide Population	13,023,759			

The State's resultant ratio is the largest without the one and half times allowance. Thus, the ratio is not indicative of the project resulting in a maldistribution. The inverse ratio is easier to understand. The planning area's resultant ratio would be one AMI bed for every 6,683 people. The travel time contour's resultant ratio equates to one AMI bed for every 12,070 people. The State's ratio is AMI bed for every 3,195 people. Both the Planning Area's and the travel time Contour's resultant ratios have many fewer beds per the population they support. This statewide ratio indicates that additional capacity is necessary to ensure accessibility for all. Again, it

ATTACHMENT-22C2

would appear that a "maldistribution" in accordance with the Board's definition does not exist.

B) Historical utilization (for the latest 12-month period prior to submission of the application) for existing facilities and services that is below the occupancy standard established pursuant to 77 Ill. Adm. Code 1100; or

As indicated, this process requires the Applicant to adopt a geographic service area, i.e., 45-minute adjusted travel time. This expands the existing AMI providers from the total of only three previously identified in Planning Areas A-08 and A-09 to a total of nine. Refer **to ATTACHMENT-22B5a** for a listing of AMI providers and facility use data. Three of the nine are at or over the State's target use rate of 85% for the AMI beds. Highland Park Hospital and Northwest Community Hospital are so near capacity that they only have a total of 4-AMI beds potentially available. The remaining four facilities appear to have capacity. However, their market has experienced significant changes recently.

Maryville Behavioral Health Hospital (formerly Maryville Academy and the Applicant's sister facility) is now Chicago Behavioral Hospital. This change took place in April of 2015 whereupon the 125-bed facility was essentially empty with only a few remaining patients. The top two floors of the building, accounting for 47 AMI beds, were under renovations that had ceased. Upon the change of ownership, the facility was able to optimally utilize the existing available 78-beds within five months and stabilize and maintain optimal use of those beds and services. In the 10-months of operating CBH the facility had to turn away 672 admissions due to beds not being available. In January of this year CBH was able to complete the renovations of the top two floors and since then has seen the average daily census (hereafter referred to as ADC) into the 90's. Appended as **ATTACHMENT-22B5b** is a letter from CBH describing this situation, indicating that based upon existing referrals it will be well in excess of the target use rate in May of this

year. This letter also describes how existing acute care providers and AMI providers have referral arraignments with CBH illustrating how CBH is providing complimentary services to those existing health care providers and not directly competing with those facilities. This is important as CBH is a related facility to the proposed project who will emulate this approach to continue supporting and augmenting the mental health services needed to complete the mental health continuum. It should be noted that CBH has received referrals from Alexian Brothers Behavioral Health Hospital, Evanston Hospital, Northwest Community and three Advocate hospitals including Advocate Lutheran General Hospital and Advocate Condell in Lake County. Condell does not have AMI beds.

In summary, the one facility (the Applicant's sister facility) with what appeared to be extensively under-utilized is now nearing target capacity (85%). With ADC running into the 90's, instead of having 90 potentially available beds it only has less than 16 potentially available beds (currently) and by the time this project is considered it is expected that target utilization will be exceeded and maintained. Additionally, Advocate Lutheran General Hospital with what appears to be 17.5 beds potentially available has deflected 115 patients to CBH. This is indicative of the facility effectively being full or providing best practices for its patients in finding care and treatment within the Mental Health continuum that best fits the patients' needs. As such, it would appear that little to no impact would be had on this facility by the proposed project. Alexian Brothers Behavioral Health Hospital also made 39 referrals to CBH. This facility has a history of being at or over target utilization. As such, the system established services at Alexian Brothers Medical Center. In 2014, this facility would have been finishing ramping up its

fill-up. The facility's Certificate of Need stated that its sister facility Alexian Brothers Behavioral Health Hospital would refer to that project so it can be inferred that Alexian Brother Medical Center's AMI unit is optimally utilized or it also employed best practices finding services that better fit specific patients' mental health needs. Either way, it would appear that this project would have little to no impact on the existing providers.

C) Insufficient population to provide the volume or caseload necessary to utilize the services proposed by the project at or above occupancy standards.

There is an interesting issue when examining the ratio of population to beds between all planning areas within HSA's 6, 7, 8 and 9. Specifically, Planning Area's A-08 has the fewest beds for the population with a total of 21,492 people per AMI bed. Planning Area A-09 comes in third lowest with 12,741 people per AMI bed. It is interesting that the average ratio of population to AMI beds is 78% less than that of Planning Area A-09 and 87% less than that of Planning Area A-08. Even adding the proposed 50-AMI beds to each planning area would only reduce the ratios to 6,357 people per AMI bed in Planning Area A-08 and 6,896 people per AMI bed in Planning Area A-09.

Planning Area	Number of Beds	2018 population	Ratio of Pop to Beds
A-01	416	961,240	2,310.7
A-02	729	547,560	751.1
A-03	234	744,490	3,181.6
A-04	198	1,182,690	5,973.2
A-05	275	934,270	3,397.3
A-06	334	494,940	1,481.9
A-07	556	631,840	1,136.4
A-08	**21**	**451,330**	**21,491.9**
A-09	**59**	**751,690**	**12,740.5**
A-10	34	337,710	9,932.6
A-11	30	436,360	14,545.3
A-12	95	405,330	4,266.6
A-13	75	826,459	11,019.5
A-14	89	116,350	1,307.3
PA Tot/Ave	**3145**	**8,822,259**	**2,805.2**

Source: August 4, 2015 Inventory of Health Care Facilities and Services and need Determinations

HSA Area	Number of Beds	2018 population	Ratio of Pop to Beds
1	66	699,200	10,593.9 : 1
2	136	667,700	4,909.6: 1
3	242	569,300	2,352.5: 1
4	214	843,700	3,942.5: 1
5	69	608,600	8,820.3: 1
6,7,8,& 9	3145	8,822,259	2,805.2: 1
10	54	206,200	3,818.5: 1
11	150	606,800	4,045.3: 1
State Tot/Ave	**4076**	**13,023,759**	**3,195.2**: 1

Source: August 4, 2015 Inventory of Health Care Facilities and Services and need Determinations

What is interesting is looking at the overall HSA's ratio of population to beds. HSA 6, 7, 8 and 9 have the second lowest ratio with 2,805 persons per AMI bed. To utilize the State's ratio of population to beds would indicate additional

capacity of AMI beds are needed. That being said the resultant combined ratio for Planning Areas A-08 and A-09 is 2.4 times greater than the HSA 5,6,7 and 8's ratio and two times greater than the overall State's ratio. This supports the Mental Health Referral Resources statements that patients originating from within these Planning Areas and Northern Suburbs must travel significant distances to receive AMI care and treatment. Therefore, there appears to be sufficient population to support the proposed project and that of the existing AMI providers.

1110.730(c)(3) - Impact of Project on Other Area Providers

It is not the intent of the Applicant to lower the occupancy rates at other area AMI facilities. The experience of CBH and the planning areas facilities show that this project would not appear to have an impact. The Applicant's related behavioral health hospital (CBH) has proven that the proposed services compliment those of the existing acute care providers and those acute care providers that have AMI beds to the extent that CBH has an active and reciprocal referral arrangement with those identified (refer to **ATTACHMENT-22B5b** for the CBH referral/support letter).

ATTACHMENT-22C3

1110.730(e)(1) - Staffing Availability

The proposed AMI facility will meet all licensure, JCAHO and industry staffing requirements. The Applicant's will follow the model used by CBH as it proceeded through the change of ownership and ramp up in establishing programs, clinical policies and treatment protocols. A Board Certified psychiatrist will be installed as Medical director. This person will utilize the existing resources of existing staff and the facility's ability to collect job applicants who are direct care and ancillary staff with preferred mental health work background.

With the existing presence of CBH and its experience in recruiting staff, fulfilling the staffing requirements should not be of issue. One indicator of available staff are those who have sought and continue to seek employment at CBH. Appended as **ATTACHMENT-22E1a**, is a staffing pattern for the proposed project. Appended as **ATTACHMENT-22E1b**, listing of job openings and candidates for those openings posted on the "indeed" jobsite for CBH. Employees can be obtained from this site for the project.

ATTACHMENT-22E1

STAFFING

	2017	2018	2019
Direct Care			
Nursing	0.00	17.15	28.00
LVNs	0.00	0.00	0.00
MHTs	0.00	19.13	31.73
CNAs	0.00	3.15	5.60
MHTs / Other	0.00	22.28	37.33
Total Direct Care	**0.00**	**39.43**	**65.33**
Other Clinical	0.33	21.49	33.20
Total Inpatient	**0.33**	**60.93**	**98.53**
Support	1.88	39.98	59.30
Outpatient	0.00	4.00	5.13
Total FTEs	**2.21**	**104.90**	**162.96**

CBH
CHICAGO
BEHAVIORAL HOSPITAL

February 2, 2016

Ms. Courtney Avery, Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street
Springfield, IL 62761

RE: US HealthVest's Proposed Behavioral Hospital in Northbrook

Dear Ms. Avery:

Attached are a list of job openings and candidates for those openings posted on the Indeed jobsite. From this pool of candidates, employees can be obtained for the Northbrook Behavioral Hospital.

I urge you to support the approval of US HealthVest's behavioral hospital application and thank you for your assistance in providing access to care.

Sincerely,

Joanne M. Rossman
Director of Human Resources

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	Job	Location	Created	Candidates	Views	Status
☐	Accountant	Des Plaines, IL	Aug 4 2015	109 candidates	1,082	Closed
☐	Activity Therapist	Des Plaines, IL	Jun 18 2015	108 candidates (10 unread)	2,328	Closed
☐	Activity Therapist	Des Plaines, IL	May 7 2015	17 candidates (9 unread)	400	Closed
☐	Administrative Assistant to CEO/COO	Des Plaines, IL	Jan 12	143 candidates (142 unread)	1,640	Closed
☐	ADON	Des Plaines, IL	Jan 29 2015	8 candidates (8 unread)	117	Closed
☐	Assessment & Referral Clinicians PRN (Per Diem) edit job	Des Plaines, IL	Nov 10 2015	35 candidates (13 unread)	1,388	Open
☐	Assessment & Referral Clinincan	Des Plaines, IL	May 19 2015	25 candidates (13 unread)	483	Closed
☐	Assessment & Referral Tech	Des Plaines, IL	Jul 2 2015	60 candidates (60 unread)	494	Closed
☐	Assessment & Referral Technician PRN (Per Diem) - Overnights/Weekends edit job	Des Plaines, IL	Nov 10 2015	38 candidates (23 unread)	833	Open
☐	Assistant Director of Nursing	Des Plaines, IL	Oct 30 2015	6 candidates	63	Closed
☐	Business Office Manager	Des Plaines, IL	Feb 13 2015	65 candidates (65 unread)	513	Closed
☐	Business Office Manager	Des Plaines, IL	Dec 31 2014	49 candidates (41 unread)	499	Closed
☐	CADC / Therapist edit job	Des Plaines, IL	Dec 9 2015	25 candidates (20 unread)	393	Paused
☐	Career Fair Wednesday July 15th	Des Plaines, IL	Jul 3 2015	16 candidates (14 unread)	739	Closed
☐	Chemical Dependency Counselor (Must have CADC)	Des Plaines, IL	Aug 10 2015	99 candidates	2,757	Closed
☐	Clinical Staff Scheduler edit job	Des Plaines, IL	Jan 5	67 candidates (67 unread)	406	Paused
☐	Clinician	Des Plaines, IL	Mar 25 2015	22 candidates (22 unread)	396	Closed

Job	Location	Created	Candidates	Views	Status
Collection Specialist	Des Plaines, IL	Jan 25	76 candidates (76 unread)	313	Closed
Controller	Des Plaines, IL	May 26 2015	28 candidates (28 unread)	359	Closed
Controller	Des Plaines, IL	Apr 20 2015	39 candidates (39 unread)	441	Closed
Cook edit job	Des Plaines, IL	Nov 4 2015	89 candidates (38 unread)	436	Open
Cook	Des Plaines, IL	Apr 7 2015	46 candidates (46 unread)	254	Closed
Cook	Des Plaines, IL	Nov 13 2014	61 candidates (54 unread)	351	Closed
Dietary Aide edit job	Des Plaines, IL	Jan 5	224 candidates (224 unread)	957	Open
Dietary Aide	Des Plaines, IL	Mar 27 2015	105 candidates (105 unread)	420	Closed
Director of Business Development	Des Plaines, IL	Nov 25 2014	19 candidates (19 unread)	153	Closed
Director of Human Resources	Des Plaines, IL	Dec 28 2015	59 candidates (58 unread)	456	Closed
Director of Medical Records edit job	Des Plaines, IL	Jan 20	18 candidates (11 unread)	197	Open
Directory of Pharmacy	Des Plaines, IL	Jul 29 2015	6 candidates (6 unread)	224	Closed
Discharge Planner	Des Plaines, IL	Jan 29 2015	54 candidates (54 unread)	110	Closed
Float Pool Mental Health Tech edit job	Des Plaines, IL	Jan 7	63 candidates (63 unread)	543	Open
Float Pool RN edit job	Des Plaines, IL	Jan 7	2 candidates (2 unread)	30	Open
Food Service Manager/Cook	Des Plaines, IL	Aug 20 2015	51 candidates	278	Closed
Health Information Technician	Des Plaines, IL	May 19 2015	30 candidates (18 unread)	513	Closed
Housekeeping Aide	Des Plaines, IL	Jan 5	0 candidates	0	Closed
Housekeeping Aide edit job	Des Plaines, IL	Oct 29 2015	672 candidates (511 unread)	2,331	Open
Housekeeping Aide	Des Plaines, IL	Jul 16 2015	235 candidates (235 unread)	683	Closed
Housekeeping Aide	Des Plaines, IL	May 5 2015	79 candidates (65 unread)	329	Closed

Job	Location	Created	Candidates	Views	Status
Human Resources Manager	Des Plaines, IL	Aug 18 2015	123 candidates (1 unread)	849	Closed
Insurance Verifier/Admissions	Des Plaines, IL	Oct 7 2015	473 candidates (352 unread)	2,673	Closed
Intake Clinician (LSW/LPC required)	Des Plaines, IL	Jun 25 2015	48 candidates (44 unread)	594	Closed
Intake Clinician (LSW/LPC) edit job	Des Plaines, IL	Jun 19 2015	158 candidates (42 unread)	2,843	Open
LCSW - Veterans IOP	Des Plaines, IL	Nov 12 2015	16 candidates (7 unread)	444	Closed
Licensed Clinical Dependency Counselor	Des Plaines, IL	Nov 11 2014	14 candidates (14 unread)	320	Closed
LPN	Des Plaines, IL	Nov 19 2014	122 candidates (122 unread)	823	Closed
Marketing Associate	Des Plaines, IL	Apr 6 2015	65 candidates (65 unread)	418	Closed
Mental Health Tech	Des Plaines, IL	Mar 20 2015	237 candidates (237 unread)	1,189	Closed
Mental Health Technician edit job	Des Plaines, IL	Nov 3 2015	267 candidates (215 unread)	1,987	Paused
Mental Health Technician	Des Plaines, IL	Mar 3 2015	151 candidates (151 unread)	819	Closed
Mental Health Technician	Des Plaines, IL	Feb 5 2015	118 candidates (117 unread)	606	Closed
Mental Health Technician	Des Plaines, IL	Dec 11 2014	127 candidates (127 unread)	718	Closed
Mental Health Technician (16hr weekend shifts)	Des Plaines, IL	Jun 18 2015	242 candidates (242 unread)	1,438	Closed
Mental Health Technician - Overnights / Weekends edit job	Des Plaines, IL	Dec 5 2015	401 candidates (365 unread)	4,462	Open
Mental Health Technician I & II (All shifts)	Des Plaines, IL	Mar 27 2015	373 candidates (373 unread)	1,666	Closed
Military Outpatient Director	Des Plaines, IL	Aug 18 2015	24 candidates	541	Closed
Military Outpatient Therapist edit job	Des Plaines, IL	Jul 29 2015	19 candidates (1 unread)	650	Paused
Nurse Manager/Program Director	Des Plaines, IL	May 20 2015	20 candidates	370	Closed
Nurse Practitioner	Des Plaines, IL	Jul 31 2015	2 candidates	247	Closed
Outpatient Therapist				2,910	Paused

Job	Location	Created	Candidates	Views	Status
edit job	Des Plaines, IL	Jul 29 2015	272 candidates (114 unread)		
Part Time Receptionist	Des Plaines, IL	Jun 25 2015	246 candidates (246 unread)	1,743	Closed
Patient Accounts Represenative	Des Plaines, IL	May 12 2015	63 candidates (63 unread)	456	Closed
Payroll/Accounts Payable Clerk	Des Plaines, IL	Dec 31 2014	103 candidates (103 unread)	644	Closed
Pharmacy Technician	Des Plaines, IL	Jun 3 2015	81 candidates	487	Closed
Program Director for Adult Psychiatric Unit	Des Plaines, IL	Oct 8 2015	34 candidates (6 unread)	359	Closed
Program Director for Geriatric-Psych Unit edit job	Des Plaines, IL	Oct 8 2015	20 candidates (2 unread)	206	Paused
Program Therapist edit job	Des Plaines, IL	Aug 18 2015	412 candidates (170 unread)	3,544	Open
Program Therapist -PRN edit job	Des Plaines, IL	Oct 28 2015	77 candidates (56 unread)	1,043	Paused
PT Licensed/Registered Dietician (30 hours)	Des Plaines, IL	Jun 25 2015	22 candidates (22 unread)	342	Closed
Receptionist	Des Plaines, IL	May 5 2015	292 candidates (292 unread)	1,141	Closed
Recreational Therapist (PRN-Weekends)	Des Plaines, IL	Jan 29 2015	17 candidates (17 unread)	234	Closed
Registered Nurse edit job	Des Plaines, IL	Jan 5	12 candidates (5 unread)	179	Open
Registered Nurse	Des Plaines, IL	May 21 2015	31 candidates (31 unread)	394	Closed
Registered Nurse (All shifts) (Part & Full Time)	Des Plaines, IL	Mar 27 2015	39 candidates (28 unread)	543	Closed
Registered Nurse (RN)	Des Plaines, IL	Apr 27 2015	24 candidates (19 unread)	390	Closed
Registered Nurse (RN), Inpatient Geriatric edit job	Des Plaines, IL	Nov 14 2015	14 candidates (1 unread)	156	Open
Registered Nurse (RN), Inpatient High-functioning Adult edit job	Des Plaines, IL	Nov 14 2015	20 candidates (4 unread)	231	Open
Registered Nurse (RN), Inpatient Veterans Program edit job	Des Plaines, IL	Nov 14 2015	33 candidates (15 unread)	318	Paused
Registered Nurse (RN), Inpatient Women's Program edit job	Des Plaines, IL	Nov 14 2015	25 candidates (1 unread)	442	Open

Job	Location	Created	Candidates	Views	Status
Registered Nurse (RN), Intake / Admissions edit job	Des Plaines, IL	Nov 14 2015	41 candidates (29 unread)	535	Paused
RN	Des Plaines, IL	Aug 4 2015	13 candidates	194	Closed
RN	Des Plaines, IL	Nov 11 2014	38 candidates (38 unread)	487	Closed
RN (16 hour weekend shifts)	Des Plaines, IL	Jun 18 2015	26 candidates (23 unread)	411	Closed
RN Charge Nurse/RN Supervisor	Des Plaines, IL	Feb 5 2015	31 candidates (1 unread)	418	Closed
RN Charge Nurses/RN Supervisors	Des Plaines, IL	Nov 19 2014	22 candidates (22 unread)	327	Closed
RN Staff Nurse edit job	Des Plaines, IL	Nov 6 2015	36 candidates (1 unread)	358	Paused
RN Staff Nurse	Des Plaines, IL	Jul 16 2015	40 candidates (4 unread)	595	Closed
RN Staff Nurse	Des Plaines, IL	Jul 16 2015	5 candidates	50	Closed
RN Supervisor edit job	Des Plaines, IL	Nov 6 2015	5 candidates	40	Paused
Social Media Manager	Des Plaines, IL	Jun 15 2015	78 candidates (76 unread)	366	Closed
Social Worker	Des Plaines, IL	May 7 2015	33 candidates (32 unread)	553	Closed
Social Worker PRN-Weekends	Des Plaines, IL	Jan 29 2015	10 candidates (10 unread)	175	Closed
Special Education Teacher (Part Time)	Des Plaines, IL	Feb 23 2015	14 candidates (14 unread)	381	Closed
Staffing Coordinator	Des Plaines, IL	Sep 15 2015	68 candidates (34 unread)	536	Closed
Staffing Coordinator	Des Plaines, IL	Jan 29 2015	76 candidates (76 unread)	148	Closed
Substance Abuse Therapist	Des Plaines, IL	May 7 2015	12 candidates (12 unread)	292	Closed
Utilization Management Coordinator	Des Plaines, IL	Sep 15 2015	27 candidates (13 unread)	693	Closed
Utilization Review Coord. (Clinical Licenses, LPN's welcomed)	Des Plaines, IL	Jun 18 2015	41 candidates (35 unread)	477	Closed
Utilization Review Coordinator	Des Plaines, IL	Jan 29 2015	39 candidates (31 unread)	120	Closed
Utilization Review Director	Des Plaines, IL	Jul 29 2015	13 candidates (13 unread)	179	Closed

☐	Job	Location	Created	Candidates	Views	Status
☐	Utilization Review Specialist	Des Plaines, IL	May 7 2015	24 candidates (2 unread)	317	Closed

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Total spend (Feb 1 – Feb 29): $134.62 – performance report – billing history

Monthly budget: $6,000.00 – edit

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1110.730(f) - Performance Requirements

As the proposed project is for 100 beds, this item is in conformance with the bed capacity minimums set-forth in this item.

1110.730(g) - Assurances

Appended as **ATTACHMENT-22Ga**, is a letter signed by the Applicant addressing the Applicant's ability to achieve and maintain the target utilization of 85%.

US HealthVest

February 22, 2016

Ms. Courtney Avery
Administrator
Health Facilities and Services Review Board
525 West Jefferson Street, 2nd Floor
Springfield, Illinois 62761

Dear Ms. Avery:

This letter attests to the fact that if this Project is approved by the Illinois Health Facilities and Services Review Board, Northbrook Behavioral Hospital understands that it is expected to achieve and maintain the occupancy specified in §1110.730 (h) by the second year of operation after project completion. Our ability to maintain this occupancy level could be affected by various factors outside of our control, such as natural disasters, regulatory changes in healthcare, interruption of necessary utilities, physical plant problems, or other unexpected issues outside of our control which could have a direct or indirect effect upon our occupancy rate.

Sincerely,

Martina Sze
Executive Vice President

Subscribed and sworn to before me
this 22nd day of Feb, 2016

Notary Public

JACQUELINE PLANAS
Notary Public, State of New York
No. 01PL6240430
Qualified in New York County
Commission Expires April 28, 2019

32 East 57th Street
17th Floor
New York, New York 10022
T 212.243.5565 · F 212.243.1099
www.ushealthvest.com

ATTACHMENT-22Ga

The following Sections DO NOT need to be addressed by the applicants or co-applicants responsible for funding or guaranteeing the funding of the project if the applicant has a bond rating of A- or better from Fitch's or Standard and Poor's rating agencies, or A3 or better from Moody's (the rating shall be affirmed within the latest 18 month period prior to the submittal of the application):

- **Section 1120.120 Availability of Funds – Review Criteria**
- **Section 1120.130 Financial Viability – Review Criteria**
- **Section 1120.140 Economic Feasibility – Review Criteria, subsection (a)**

VIII. - 1120.120 - Availability of Funds

The applicant shall document that financial resources shall be available and be equal to or exceed the estimated total project cost plus any related project costs by providing evidence of sufficient financial resources from the following sources, as applicable: **Indicate the dollar amount to be provided from the following sources:**

Availability of Funds

The applicant shall document that financial resources shall be available and be equal to or exceed the estimated total project cost plus any related project costs by providing evidence of sufficient financial resources from the following sources, as applicable: **Indicate the dollar amount to be provided from the following sources:**

a. Cash and Securities – statements (e.g., audited financial statements, letters from financial institutions, board resolutions) as to:

The Applicant is funding the establishment through internal resources. The audited financial statements for **US HealthVest, LLC** (the entity funding the project) are appended as **ATTACHMENT-36A.**

Consolidated Results - US HealthVest, LLC

Combined Balance Sheet
January 31, 2016

	USHV 1/31/2016
Assets:	
Current Assets:	
Cash	21,599,290
Net Accounts Receivable	4,159,936
Inventory	148,119
Prepaid Expenses	512,037
Other Current Assets	0
Total Current Assets	26,419,382
Fixed Assets	15,716,195
Less Accum Depr	(341,067)
Net Fixed Assets	15,375,127
Intercompany	(0)
Investments	569,808
Goodwill	15,016,697
Other receivable and other assets	342,763
Total Assets	**57,723,777**
Liabilities & Equity:	
Liabilities:	
Accounts payable	680,485
Accrued expenses	3,004,967
Long term debt, current portion	130,855
Financing obligation, current portion	225,910
Total Current Liabilities	4,042,217
Long term debt - net of current portion	19,746,704
Total Liabilities	23,788,922
Stockholders' Equity:	
Contributed capital	46,250,000
Accumulated losses 12/31/15	(11,892,236)
Current income (losses)	(422,909)
Total Equity	33,934,855
Total Liabilities & Equity	**57,723,777**

US HealthVest

BEHAVIORAL HEALTHCARE REDEFINED

Consolidated Reviewed Financial Statements and Supplementary Information

For the Ten Months ended October 31, 2015

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INDEPENDENT AUDITORS' REVIEW REPORT

To the members of:
US HealthVest, LLC
New York, N.Y.

We have reviewed the accompanying consolidated financial statements of US HealthVest, LLC and its subsidiaries, which comprise the consolidated balance sheet as of October 31, 2015, and the related statements of operations, members' equity, and cash flows for the ten months then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements
Management is responsible for the preparation and fair presentation of the interim financial information in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control sufficient to provide a reasonable basis for the preparation and fair presentation of interim financial information in accordance with the applicable financial reporting framework.

Auditors' Responsibility
Our responsibility is to conduct our review in accordance with auditing standards generally accepted in the United States of America applicable to reviews of interim financial information. A review of interim financial information consists principally of applying analytical procedures and making inquiries of persons responsible for financial and accounting matters. It is substantially less in scope than an audit conducted in accordance with auditing standards generally accepted in the United States of America, the objective of which is the expression of an opinion regarding the financial information as a whole. Accordingly we do not express such an opinion.

Conclusion
Based on our review, we are not aware of any material modifications that should be made to the accompanying consolidated interim financial information for it to be in accordance with accounting principles generally accepted in the United States of America.

Purchase, New York
December 23, 2015

US HealthVest, LLC

Consolidated Balance Sheet

As of October 31,	2015
ASSETS	
Current Assets	
Cash and equivalents	$ 10,478,931
Accounts receivable, net	3,672,471
Inventory	97,285
Prepaid expenses	172,562
Total Current Assets	14,421,249
Land, Property and Equipment, net	13,158,219
Other Assets	
Investment in future facilities	250,000
Other receivable and other assets	136,394
Closing Costs, net of accumulated amortization	142,678
Goodwill	15,016,697
Total Other Assets	15,545,769
Total Assets	**$ 43,125,237**
LIABILITIES AND MEMBERS' EQUITY	
Current Liabilities	
Accounts payable	$ 432,773
Accrued expenses	2,557,048
Note payable, current portion	58,405
Total Current Liabilities	3,048,226
Notes payable, net of current	5,738,489
Total Liabilities	**8,786,715**
MEMBERS' EQUITY	34,338,522
Total Liabilities and Members' Equity	**$ 43,125,237**

See accompanying notes to the financial statements

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US HealthVest, LLC

Consolidated Statements of Operations

For the ten months ended October 31,	2015
Revenues	
Net Patient Service Revenues	$ 12,246,985
Other Revenue	1,124,916
Net Revenues	**13,371,901**
Operating Expenses	
Salaries and benefits	9,901,097
Professional fees	2,223,715
Supplies	862,531
Licenses, permits and fees	739,601
Travel and entertainment	510,509
Contracted labor	398,500
Contracted services	369,582
Property and business taxes	361,354
Insurance	281,501
Utilities	184,425
Repairs and maintenance	172,508
Rent	171,839
Recruiting	70,657
Bad debt expense	67,104
Other operating expenses	62,330
Computer and internet	59,084
Advertising and marketing	11,430
Dues and subscriptions	6,950
Total Operating Expenses	**16,454,717**
Loss from Operations before other Items	**(3,082,816)**
Depreciation and amortization expense	(211,296)
Interest expense, net of income	(64,496)
Net Loss	**$ (3,358,608)**

See accompanying notes to the financial statements

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US HealthVest, LLC

Consolidated Statements of Members' Equity

For the ten months ended October 31, 2015	
Balance, January 1, 2015	**$ 27,697,130**
Contributions from members	10,000,000
Net Loss for the ten months ended October 31, 2015	(3,358,608)
Balance, October 31, 2015	**$ 34,338,522**

See accompanying notes to the financial statements

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US HealthVest, LLC

Consolidated Statements of Cash Flows

For the ten months ended October 31,	2015
Cash Flows From Operating Activities	
Net Loss	$ (3,358,608)
Adjustments to Reconcile Net Loss to Net Cash Provided by Operating Activities:	
Depreciation and amortization	211,296
Bad debt expense	67,104
Changes in Operating Assets and Liabilities:	
Decrease in prepaid expenses	294,795
Increase in other receivable and other assets	(194,516)
Increase in accounts receivable	(2,900,278)
Decrease in inventory	36,848
Increase in accounts payable and accrued expenses	1,509,102
Net Cash Flows Used in Operating Activities	**(4,334,257)**
Cash Flows From Investing Activities	
Capital expenditures	(5,803,724)
Net Cash Flows Used in Investing Activities	**(5,803,724)**
Cash Flows From Financing Activities	
Contributed capital	10,000,000
Advances from note payable	5,796,894
Closing Costs	(148,881)
Decrease in financed insurance	(167,472)
Net Cash Flows Provided by Financing Activities	**15,480,541**
Net Increase In Cash	**5,342,560**
Cash at Beginning of Period	5,136,371
Cash at End of Period	**$ 10,478,931**
Supplemental Disclosures	
Cash paid during the period for:	
Interest Expense	$ 73,346

See accompanying notes to the financial statements

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Note 1 – Summary of Accounting Policies

Organization and Business
US HealthVest, LLC (the Company) was formed under the laws of the State of Delaware on March 1, 2013. The purpose of the Company and its affiliates is to acquire and operate behavioral healthcare facilities throughout the United States. The Company currently operates one facility located in Illinois.

Basis of Accounting
The financial statements have been prepared on the accrual basis of accounting in conformity with generally accepted accounting principles.

Principles of Consolidation
The consolidated financial statements include the activities of US HealthVest, LLC, and its subsidiaries, collectively referred to as "the Company". All material intercompany accounts and transactions have been eliminated.

The activities of 2014 Health, LLC, 2014 Health Realty, LLC, V Colorado, LLC, and Vest Monroe Realty, LLC, collectively referred to as "affiliates" have been consolidated with the activities of US HealthVest, LLC and are presented in the statements of supplemental information.

Recent Developments
On November 3, 2014 the Company acquired the assets of Maryville Behavioral Health Hospital. The acquisition included a 125 bed hospital as well as the land on which the hospital is located in Des Plaines, Illinois. This hospital provides services to those suffering from mental health illnesses and chemical dependency. The activities of this operation from the date of acquisition through the end of the fiscal year are included in the consolidated financial statements.

In January 2014, US HealthVest received a Certificate of Need to develop a 75 bed hospital in Washington State. The hospital will be located in Marysville, a suburb of Seattle. In September 2014, the Company received a Certificate of Need for an additional 50 beds in Washington State.

In June 2014, US HealthVest received a Certificate of Need to develop a 70 bed hospital in Georgia. In June 2015, the Company acquired property including an existing hospital building and the land on which the hospital is located in Monroe, Georgia.

Accounts Receivable, Net Revenue and Cost Recognition
The Company recognizes revenues in the period in which services are performed. Accounts receivable consist primarily of amounts due from third-party payors. The amounts the Company receives for treatment of patients covered by governmental programs such as Medicare, Medicaid and other third-party payors such as health maintenance organizations, preferred provider organizations and other private insurers are generally less than the Company's established billing rates. Accordingly, the revenues and accounts receivable reported in the Company's consolidated financial statements are recorded at the net amount expected to be received.

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Note 1 - Summary of Accounting Policies, continued

Cash and Equivalents
The Company considers all short term investments with an original maturity of three months or less to be cash equivalents.

Inventory - Supplies
Inventories consist of pharmaceutical and dietary supplies and are stated at the lower of cost or market using the first-in, first-out (FIFO) method.

Property and Equipment
Property and equipment are stated at cost. Maintenance and repairs are expensed in the period incurred; major renewals and betterments are capitalized. When items of property are sold or retired, the related costs are removed from the accounts and any gain or loss is included in income.

Depreciation
Property and Equipment are depreciated using straight-line depreciation methods over their estimated useful lives as follows:

Buildings and Improvements	39 years
Furniture and Equipment	5-7 years
Computer equipment and software	5 years

Use of Estimates
The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amount of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the reporting period. Actual results could differ from those estimates.

Allowance for Doubtful Accounts
The primary risk in patient receivables would be uninsured amounts owed by direct pay patients. The Company estimates the allowance for doubtful accounts primarily based upon the age of the accounts since the patient discharge date. The Company also estimates insurance denials for amounts included in accounts receivable. The Company continually monitors accounts receivable balances and utilizes cash collection data and historical trends to support these positions. The allowance for doubtful accounts and insurance denials as of October 31, 2015 was $225,218.

Concentration of Credit Risk
Financial instruments that potentially subject the Corporation to concentrations of credit risk consist of cash, cash equivalents and investments held in financial institutions. At times such balances may be in excess of Federal Deposit Insurance Company (FDIC) limits.

The Company's revenues are heavily related to patients participating in Medicaid. Management recognizes that revenues and receivables from government agencies are significant to the Company's operations, but it does not believe that there is significant credit risk associated with this government agency.

DRAFT

Note 1 - Summary of Accounting Policies, continued

Advertising Costs
Advertising costs are expensed as incurred. Advertising expenses amounted to $11,430 for the ten months ended October 31, 2015.

Goodwill
Goodwill represents the amount of purchase price in excess of the fair value assigned to the underlying identifiable net asset in certain acquisitions. In accordance with FASB ASC 350-10, goodwill and indefinite-lived intangible assets are no longer amortized systematically, but subject to impairment annually. Management reviews the carrying value of goodwill on an annual basis in order to determine whether impairment has occurred. Impairments are based on several factors, including the Company's projection of future operating cash flows. As of October 31, 2015 the Company has not recognized impairment of goodwill.

Compensated Absences
The Company's employees earn paid time off hours ("PTO"), which can be used towards vacation, sick time and personal days off. Paid time off is earned depending on the length of service and job position. Employees can carryover no more than 80 PTO hours at year end. Accrued compensated absences as of October 31, 2015 was $194,634.

Income Taxes
The Company is organized as a Limited Liability Company, in lieu of corporate taxes; the members of a Limited Liability Company are taxed on their proportionate share of the Company's taxable income. Therefore, no provision or liability for federal or state income taxes has been included in the financial statements. The Company's income tax returns are subject to examination by the appropriate tax jurisdictions for a period of three years from when they are required to be filed.

The Company recognizes the effect of uncertain income tax positions only if those positions are more likely than not to be sustained. Management has determined that the Company had no uncertain tax positions that would require financial statement recognition and/or disclosure.

Acquisitions, Business Combinations
The company accounts for business combinations using the acquisition method and accordingly, the identifiable assets acquired, and the liabilities assumed are recorded at their acquisition date fair values. Goodwill represents the excess of the purchase price over the fair value of net assets, including the amount assigned to identifiable intangible assets.

Note 2 – Investment in Future Facilities

During 2015 the Company was in the process of establishing new psychiatric facilities in Phoenix and Seattle. The Company made deposits of $150,000 and $100,000, respectively, during 2015 for the future purchase of these facilities.

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Note 3 - Property and Equipment

The major classifications of property and equipment are as follows:

As of October 31,		2015
Land	$	2,122,260
Buildings		7,915,460
Furniture and Fixtures		534,123
Computer Equipment and Software		422,203
Construction in progress		2,413,706
Total Land, Property, and Equipment		13,407,752
Less Accumulated Depreciation		(249,533)
Land, Property and Equipment, net	$	13,158,219

Note 4 – Closing Costs

Closing costs in connection with the CityBank loan are being amortized over 10 years using the straight line method. Net closing costs as of October 31, 2015 were as follows:

As of October 31,		2015
Closing Costs	$	148,881
Less: Accumulated Amortization		(6,203)
Closing Costs, net	$	142,678

Note 5 – Note Payable

On May 29, 2015, 2014 Health Realty, LLC entered into a note payable to CityBank. The initial twelve month term has a maximum drawdown of $7,500,000. The note carries interest at prime plus 75 basis points with a floor of 4.75%. During the drawdown period payments are interest only. After the initial twelve month period the note converts to a nine year term loan, amortized over 20 years. This loan is collateralized by the real estate owned by 2014 Health Realty, LLC. As of October 31, 2015 the outstanding balance on this note was $5,796,894.

Estimated current maturities based on the October 31, 2015 balance is as follows:

For the year ending December 31, 2016	$ 87,956
For the year ending December 31, 2017	182,291
For the year ending December 31, 2018	191,141
For the year ending December 31, 2019	200,420
For the year ending December 31, 2020	210,150
Thereafter	4,924,936
Total	$ 5,796,894

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Note 6 – Operating Lease of Facilities

The Company leases through an unrelated third party, an administrative office located in New York. The lease was assigned from a former entity of common ownership with an initial lease term of ten years, expiring October 31, 2019. Rent expense for the ten months ended October 31, 2015 was $127,072.

Future minimum rental payments under this lease commitment are as follows:

November - December 2015	$	32,075
For the year ending 12/31/2016		193,414
For the year ending 12/31/2017		199,217
For the year ending 12/31/2018		205,193
For the year ending 12/31/2019		175,248
Total	$	805,147

In addition, the Company was under an Option Agreement with an unrelated third party to purchase land in Marysville, Washington. Under this agreement, the Company paid the land owner $5,600 per month through June 2015. During the ten months ended October 31, 2015, these payments have been classified as rent in the amount of $33,600.

Note 7 – Retirement Plan

The Company maintains a 401(k) retirement plan ("the Plan") for all eligible employees over 21 years of age with at least five months of service. Participants can contribute a percentage of their compensation up to a maximum deferral of 85% and receive a matching employer contribution of 100% of deferrals up to 3% of compensation, and 50% of deferrals for the next 2% of compensation. Participants may also receive a discretionary employer matching contribution at the discretion of the Company's Board of Directors. The Company incurred expenses of $75,430 for the ten months ended October 31, 2015.

Note 8 – Related Party Transactions

Chicago Behavioral Hospital (2014 Health, LLC) leases its Illinois based facility from its related company, 2014 Health Realty, LLC. The lease is a 15 year operating lease that commenced on November 3, 2014. Base rent is $92,083 per month. Intercompany rental income and expense is eliminated upon consolidation of the financial statements.

As of October 31, 2015, US HealthVest, LLC was due $1,342,930 from Chicago Behavioral Hospital (its related entity) for miscellaneous operating expenses. This intercompany receivable is eliminated upon consolidation of the financial statements.

As of October 31, 2015, US HealthVest, LLC was due $158,745 from 2014 Health Realty, LLC (its related entity) for fees paid in connection with the closing of the CityBank loan. This intercompany receivable is eliminated upon consolidation of the financial statements.

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Note 8 – Related Party Transactions, continued

As of October 31, 2015, Chicago Behavioral Hospital was due $1,501,066 from 2014 Health Realty, LLC (its related entity) for miscellaneous operating expenses. This intercompany receivable is eliminated upon consolidation of the financial statements.

As of October 31, 2015, Vest Monroe Realty, LLC was due $82,500 from US HealthVest, LLC (its related entity) for fees paid in connection with the acquisition of property. This intercompany receivable is eliminated upon consolidation of the financial statements.

Note 9 – Subsequent Events

Subsequent events were evaluated through December 23, 2015, the date that the financial statements were available to be issued.

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Independent Auditors' Review Report on Supplementary Information

To the members of:
US HealthVest, LLC
New York, N.Y.

Our review was made primarily for the purpose of obtaining a basis for reporting whether we are aware of any material modifications that should be made to the interim financial information in order for it to be in conformity with accounting principles generally accepted in the United States of America through performing limited procedures. The accompanying supplementary information, which is the responsibility of management, is presented for purposes of additional analysis and is not a required part of the interim financial information. The supplementary information has been subjected to the limited procedures applied in the review of the interim financial information, and we did not become aware of any material modifications that should be made to such information.

Purchase, New York
December 23, 2015

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US HealthVest, LLC

Consolidating Balance Sheet

As of October 31,2015	US HealthVest LLC	V Colorado LLC	V Monroe Realty, LLC	2014 Health LLC	2014 Health Realty, LLC	eliminations	Consolidated
ASSETS							
Current assets							
Cash and equivalents	$ 4,393,522	$ -	$ 326,635	$ 1,303,757	$ 4,455,017	$ -	$ 10,478,931
Accounts receivable, net	-	-	-	3,672,471	-	-	3,672,471
Inventory	-	-	-	97,285	-	-	97,285
Prepaid expenses	50,263	-	-	122,299	-	-	172,562
Due from parent/subsidiaries	1,501,675	-	82,500	1,501,066	-	(3,085,241)	-
Total current assets	5,945,460	-	409,135	6,696,878	4,455,017	(3,085,241)	14,421,249
Land, Property and equipment, net	51,103	-	2,740,865	-	10,366,251	-	13,158,219
Other Assets							
Investment in 2014 Health, LLC (CBH)	18,636,965	8,454	-	-	-	(18,645,419)	-
Investment in 2014 Health Realty, LLC	7,167,038	-	-	-	-	(7,167,038)	-
Investment in V Colorado, LLC	8,454	-	-	-	-	(8,454)	-
Investment in V Monroe Realty, LLC	3,150,000	-	-	-	-	(3,150,000)	-
Investment in future facilities	250,000	-	-	-	-	-	250,000
Other receivable and other assets	121,580	-	-	14,814	-	-	136,394
Closing costs, net	-	-	-	-	142,678	-	142,678
Goodwill	-	-	-	15,016,697	-	-	15,016,697
Total Other Assets	29,334,037	8,454	-	15,031,511	142,678	(28,970,911)	15,545,769
Total Assets	$ 35,330,600	$ 8,454	$ 3,150,000	$ 21,728,389	$ 14,963,946	$ (32,056,152)	$ 43,125,237
LIABILITIES AND MEMBERS' EQUITY							
Liabilities							
Accounts payable	$ 217,354	$ -	$ -	$ 215,419	$ -	$ -	$ 432,773
Accrued expenses	692,222	-	-	1,524,623	340,203	-	2,557,048
Due to parent/subsidiaries	82,500	-	-	1,342,930	1,659,811	(3,085,241)	-
Total current liabilities	992,076	-	-	3,082,972	2,000,014	(3,085,241)	2,989,821
Note Payable	-	-	-	-	5,796,894	-	5,796,894
Total Liabilities	992,076	-	-	3,082,972	7,796,908	(3,085,241)	8,786,715
Members' Equity	34,338,524	8,454	3,150,000	18,645,417	7,167,038	(28,970,911)	34,338,522
Total Liabilities and Members' Equity	$ 35,330,600	$ 8,454	$ 3,150,000	$ 21,728,389	$ 14,963,946	$ (32,056,152)	$ 43,125,237

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US HealthVest, LLC

Consolidating Statement of Operations

For the ten months ended October 31, 2015	US HealthVest LLC	V Colorado LLC	2014 Health LLC	2014 Health Realty, LLC	eliminations	Consolidated
Revenues:						
Net patient service revenue	$ -	$ -	$ 12,246,985	$ -	$ -	$ 12,246,985
Other revenue	-	-	1,124,916	920,833	(920,833)	1,124,916
Net Revenues	-	-	13,371,901	920,833	(920,833)	13,371,901
Operating expenses						
Salaries and benefits	2,638,147	-	7,262,950	-	-	9,901,097
Professional fees	1,233,706	-	986,009	4,000	-	2,223,715
Supplies	15,660	-	814,633	32,238	-	862,531
Licenses, permits and fees	16,636	-	722,965	-	-	739,601
Travel and entertainment	443,945	-	66,564	-	-	510,509
Contracted labor	-	-	398,500	-	-	398,500
Contracted Services	-	-	366,669	2,913	-	369,582
Property and business taxes	3,973	-	40,214	317,167	-	361,354
Insurance	33,692	-	163,823	83,986	-	281,501
Utilities	4,220	-	42,129	138,076	-	184,425
Repairs and maintenance	12,483	-	-	160,025	-	172,508
Rent	162,490	-	930,182	-	(920,833)	171,839
Recruiting	-	-	70,657	-	-	70,657
Bad debt expense	-	-	67,104	-	-	67,104
Other operating expenses	38,517	-	23,813	-	-	62,330
Computer and internet	59,084	-	-	-	-	59,084
Advertising and marketing	750	-	10,680	-	-	11,430
Dues and subscriptions	6,950	-	-	-	-	6,950
Total operating expenses	4,670,253	-	11,966,892	738,405	(920,833)	16,454,717
Operating Profit (Loss)	(4,670,253)	-	1,405,009	182,428	-	(3,082,816)
Other income (expenses):						
Depreciation and amortization	(12,060)	-	-	(199,236)	-	(211,296)
Equity in net income of subsidiaries	1,314,857	14,012	-	-	(1,328,869)	-
Interest income, net of expense	8,850	-	(3,811)	(69,535)	-	(64,496)
Total other expenses	1,311,647	14,012	(3,811)	(268,771)	(1,328,869)	(275,792)
Net Income (Loss)	$ (3,358,606)	$ 14,012	$ 1,401,198	$ (86,343)	$ (1,328,869)	$ (3,358,608)

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US HealthVest, LLC

Consolidating Statement of Members' Equity

For the ten months ended October 31, 2015	US HealthVest LLC	V Colorado LLC	V Monroe Realty, LLC	2014 Health LLC	2014 Health Realty, LLC	eliminations	Consolidated
Beginning Balance, January 1, 2015	$ 27,697,130	$ (5,558)	$ -	$ 17,244,219	$ 7,253,381	$ (24,492,042)	$ 27,697,130
Contributions from Members	10,000,000	-	3,150,000	-	-	(3,150,000)	10,000,000
Net Income (Loss)	(3,358,606)	14,012	-	1,401,198	(86,343)	(1,328,869)	(3,358,608)
Balance, October 31, 2015	$ 34,338,524	$ 8,454	$ 3,150,000	$ 18,645,417	$ 7,167,038	$ (28,970,911)	$ 34,338,522

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US HealthVest, LLC

Consolidating Statement of Cash Flows

For the ten months ended October 31, 2015	US HealthVest LLC	V Colorado LLC	V Monroe Realty, LLC	2014 Health LLC	2014 Health Realty, LLC	eliminations	Consolidated
Cash Flows From Operating Activities							
Net Income (Loss)	$ (3,358,606)	$ 14,012	$ -	$ 1,401,198	$ (86,343)	$ (1,328,869)	$ (3,358,608)
Adjustments to Reconcile Net Loss to Net Cash Provided by Operating Activities:							
Depreciation and amortization	12,060	-	-	-	199,236	-	211,296
Bad debt expense	-	-	-	67,104	-	-	67,104
Changes in Operating Assets and Liabilities:							
(Increase) Decrease in prepaid expenses	(28,429)	-	-	323,224	-	-	294,795
Increase in other receivable and other assets	(184,382)	-	-	(10,134)	-	-	(194,516)
Increase in accounts receivable	-	-	-	(2,900,278)	-	-	(2,900,278)
Decrease in inventory	-	-	-	36,848	-	-	36,848
Increase in payables and accrued expenses	61,019	-	-	1,141,110	306,973	-	1,509,102
Net Cash Flows Used in Operating Activities	(3,498,338)	14,012	-	59,072	419,866	(1,328,869)	(4,334,257)
Cash Flows From Investing Activities							
Capital expenditures	(8,672)	-	(2,740,865)	329,680	(3,383,867)	-	(5,803,724)
Investment in Subsidiaries	(4,464,857)	(14,012)	-	-	-	4,478,889	-
Net Cash Flows Used in Investing Activities	(4,473,529)	(14,012)	(2,740,865)	329,680	(3,383,867)	4,478,869	(5,803,724)
Cash Flows From Financing Activities							
Contributed Capital	10,000,000	-	3,150,000	-	-	(3,150,000)	10,000,000
Advances from notes payable	-	-	-	-	5,796,894	-	5,796,894
Due to/From Subsidiaries	(1,418,290)	-	(82,500)	(270,215)	1,771,005	-	-
Closing costs	-	-	-	-	(148,881)	-	(148,881)
Decrease in financed insurance	-	-	-	(167,472)	-	-	(167,472)
Net Cash Flows Provided by Financing Activities	8,581,710	-	3,067,500	(437,687)	7,419,018	(3,150,000)	15,480,541
Net Increase In Cash	609,843	-	326,635	(48,935)	4,455,017	-	5,342,560
Cash at Beginning of Period	3,783,679	-	-	1,352,692	-	-	5,136,371
Cash at End of Period	$ 4,393,522	$ -	$ 326,635	$ 1,303,757	$ 4,455,017	$ -	$ 10,478,931

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US HealthVest

BEHAVIORAL HEALTHCARE REDEFINED

Consolidated Audited Financial Statements and Supplemental Information

For the Year ended December 31, 2014 and the
Period from March 1, 2013 (Inception) through December 31, 2013

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TOBIN & COMPANY
CERTIFIED PUBLIC ACCOUNTANTS, PC

INDEPENDENT AUDITORS' REPORT

To the members of:
US HealthVest, LLC
New York, N.Y.

We have audited the accompanying consolidated financial statements of US HealthVest, LLC and subsidiaries, which comprise the balance sheet as of December 31, 2014 and 2013, and the related statements of operations, members' equity and cash flows for the year ended December 31, 2014 and the period from March 1, 2013 (inception) through December 31, 2013, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements
Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility
Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion
In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the financial position of US HealthVest, LLC. as of December 31, 2014 and 2013, and the results of their operations and their cash flows for the year ended December 31, 2014 and the period from March 1, 2013 (inception) through December 31, 2013 in accordance with accounting principles generally accepted in the United States of America.

Tobin & Company
Certified Public Accountants, PC

Purchase, New York
March 25, 2015

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US HealthVest, LLC

Consolidated Balance Sheets

As of December 31,	2014	2013
ASSETS		
Current Assets		
Cash and equivalents	$ 5,136,371	$ 14,365,520
Accounts receivable, net	839,297	-
Capital commitments receivable	-	19,215,279
Inventory	134,133	-
Prepaid expenses	467,357	18,801
Total Current Assets	6,577,158	33,599,600
Land, Property and Equipment, net	7,559,588	11,421
Other Assets		
Investment in future facilities	150,000	-
Other receivable and other assets	41,878	19,658
Goodwill	15,016,697	-
Total Other Assets	15,208,575	19,658
Total Assets	**$ 29,345,321**	**$ 33,630,679**
LIABILITIES AND MEMBERS' EQUITY		
Current Liabilities		
Accounts payable	$ 384,149	$ 47,387
Accrued expenses	1,096,570	169,149
Financed insurance	167,472	-
Total Current Liabilities	1,648,191	216,536
MEMBERS' EQUITY	27,697,130	33,414,143
Total Liabilities and Members' Equity	**$ 29,345,321**	**$ 33,630,679**

See accompanying notes to the financial statements

US HealthVest, LLC

Consolidated Statements of Operations

For the year ended December 31, 2014 and
the period from March 1, 2013 (inception) through December 31, 2013

	2014	2013
Revenues		
Net Patient Service Revenues	$ 827,152	$ -
Other Revenue	36,033	-
Net Revenues	**863,185**	-
Operating Expenses		
Salaries and benefits	3,269,671	1,538,774
Professional fees	1,962,619	785,009
Travel and entertainment	328,038	226,538
Rent	213,057	136,725
Supplies	117,930	53,532
Contracted labor	105,629	-
Insurance	97,907	-
Licenses, permits and fees	94,477	69,321
Contracted services	68,989	-
Utilities	62,998	21,763
Administrative consulting	55,347	-
Repairs and maintenance	44,392	-
Computer and internet	41,085	-
Property and business taxes	37,003	-
Dues and subscriptions	24,895	
Other operating expenses	22,661	8,250
Advertising and marketing	8,931	480
Total Operating Expenses	**6,555,629**	**2,840,392**
Loss from Operations before other Items	**(5,692,444)**	**(2,840,392)**
Depreciation expense	(42,666)	(1,772)
Interest income, net of expense	18,097	6,307
Net Loss	**$ (5,717,013)**	**$ (2,835,857)**

See accompanying notes to the financial statements

US HealthVest, LLC

Consolidated Statements of Members' Equity

For the year ended December 31, 2014 and
the period from March 1, 2013 (inception) through December 31, 2013

Beginning Balance, inception	**$ -**
Contributions from Members	36,250,000
Net Loss for the perod from March 1, 2013 (inception) through December 31, 2013	(2,835,857)
Balance, December 31, 2013	**33,414,143**
Net Loss for the year ended December 31, 2014	(5,717,013)
Balance, December 31, 2014	**$ 27,697,130**

See accompanying notes to the financial statements

US HealthVest, LLC

Consolidated Statements of Cash Flows

For the year ended December 31, 2014 and
the period from March 1, 2013 (inception) through December 31, 2013

	2014	2013
Cash Flows From Operating Activities		
Net Loss	$ (5,717,013)	$ (2,835,857)
Adjustments to Reconcile Net Loss to Net Cash Provided by Operating Activities:		
Depreciation	42,666	1,772
Changes in Operating Assets and Liabilities:		
Increase in prepaid expenses	(448,556)	(18,801)
Increase in other receivable and other assets	(172,220)	(19,658)
Increase in accounts receivable	(839,297)	-
Increase in inventory	(134,133)	-
Increase in accounts payable and accrued expenses	1,264,183	216,536
Net Cash Flows Used in Operating Activities	**(6,004,370)**	**(2,656,008)**
Cash Flows From Investing Activities		
Capital expenditures	(7,590,833)	(13,193)
Purchase of goodwill	(15,016,697)	-
Net Cash Flows Used in Investing Activities	**(22,607,530)**	**(13,193)**
Cash Flows From Financing Activities		
Capital commitment	-	36,250,000
Increase in financed insurance	167,472	-
(Increase) Decrease in capital commitments receivable	19,215,279	(19,215,279)
Net Cash Flows Provided by Financing Activities	**19,382,751**	**17,034,721**
Net Increase (Decrease) In Cash	**(9,229,149)**	**14,365,520**
Cash at Beginning of Year	14,365,520	-
Cash at End of Year	**$ 5,136,371**	**$ 14,365,520**
Supplemental Disclosures		
Cash paid during the period for:		
Interest Expense	$ 865	$ -

See accompanying notes to the financial statements

Note 1 – Summary of Accounting Policies

Organization and Business
US HealthVest, LLC (the Company) was formed under the laws of the State of Delaware on March 1, 2013. The purpose of the Company and its affiliates is to acquire and operate behavioral healthcare facilities throughout the United States. The Company currently operates one facility located in Illinois.

Basis of Accounting
The financial statements have been prepared on the accrual basis of accounting in conformity with generally accepted accounting principles.

Principles of Consolidation
The consolidated financial statements include the activities of US HealthVest, LLC, and its subsidiaries, collectively referred to as "the Company". All material intercompany accounts and transactions have been eliminated.

The activities of 2014 Health, LLC, 2014 Health Realty, LLC, and V Colorado, LLC, collectively referred to as "affiliates" have been consolidated with the activities of US HealthVest, LLC and are presented in the statements of supplemental information.

Recent Developments
On November 3, 2014 the Company acquired the assets of Maryville Behavioral Health Hospital. The acquisition included a 125 bed hospital as well as the land on which the hospital is located in Des Plaines, Illinois. This hospital provides services to those suffering from mental health illnesses and chemical dependency. The activities of this operation from the date of acquisition through the end of the fiscal year are included in the consolidated financial statements.

In January 2014, US HealthVest received a Certificate of Need to develop a 75 bed hospital in Washington State. The hospital will be located in Marysville, a suburb of Seattle. In September 2014, the Company received a Certificate of Need for an additional 50 beds in Washington State.

In June 2014, US HealthVest received a Certificate of Need to develop a 70 bed hospital in Georgia.

Accounts Receivable, Net Revenue and Cost Recognition
The Company recognizes revenues in the period in which services are performed. Accounts receivable consist primarily of amounts due from third-party payors. The amounts the Company receives for treatment of patients covered by governmental programs such as Medicare, Medicaid and other third-party payors such as health maintenance organizations, preferred provider organizations and other private insurers are generally less than the Company's established billing rates. Accordingly, the revenues and accounts receivable reported in the Company's consolidated financial statements are recorded at the net amount expected to be received.

Note 1 - Summary of Accounting Policies, continued

Cash and Equivalents
The Company considers all short term investments with an original maturity of three months or less to be cash equivalents.

Inventory - Supplies
Inventories consist of pharmaceutical and dietary supplies and are stated at the lower of cost or market using the first-in, first-out (FIFO) method.

Property and Equipment
Property and equipment are stated at cost. Maintenance and repairs are expensed in the period incurred; major renewals and betterments are capitalized. When items of property are sold or retired, the related costs are removed from the accounts and any gain or loss is included in income.

Depreciation
Property and Equipment are depreciated using straight-line depreciation methods over their estimated useful lives as follows:

Buildings and Improvements	39 years
Furniture and Equipment	5-7 years
Computer equipment and software	5 years

Use of Estimates
The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amount of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the reporting period. Actual results could differ from those estimates.

Allowance for Doubtful Accounts
The primary risk in patient receivables would be uninsured amounts owed by direct pay patients. The Company is not currently accepting direct pay patients, and therefore the Company has not established an allowance for doubtful accounts. The Company continually monitors accounts receivable balances and utilizes cash collection data and historical trends to support this position. The Company has however established an allowance for denials from payors in the amount of $5,270.

Concentration of Credit Risk
Financial instruments that potentially subject the Corporation to concentrations of credit risk consist of cash, cash equivalents and investments held in financial institutions. At times such balances may be in excess of Federal Deposit Insurance Company (FDIC) limits.

The Company's revenues are heavily related to patients participating in Medicaid. Management recognizes that revenues and receivables from government agencies are significant to the Company's operations, but it does not believe that there is significant credit risk associated with this government agency.

Note 1 - Summary of Accounting Policies, continued

Advertising Costs
Advertising costs are expensed as incurred. Advertising expenses amounted to $8,931 and $480 for the year ended December 31, 2014 and the period from March 1, 2013 (inception) through December 31, 2013, respectively.

Goodwill
Goodwill represents the amount of purchase price in excess of the fair value assigned to the underlying identifiable net asset in certain acquisitions. In accordance with FASB ASC 350-10, goodwill and indefinite-lived intangible assets are no longer amortized systematically, but subject to impairment annually. Management reviews the carrying value of goodwill on an annual basis in order to determine whether impairment has occurred. Impairments are based on several factors, including the Company's projection of future operating cash flows. As of December 31, 2014 the Company has not recognized impairment of goodwill.

Compensated Absences
The Company's employees earn paid time off hours ("PTO"), which can be used towards vacation, sick time and personal days off. Paid time off is earned depending on the length of service and job position. Employees can carryover no more than 80 PTO hours at year end. Accrued compensated absences as of December 31, 2014 and 2013 were $18,307 and $0, respectively.

Income Taxes
The Company is organized as a Limited Liability Company, in lieu of corporate taxes; the members of a Limited Liability Company are taxed on their proportionate share of the Company's taxable income. Therefore, no provision or liability for federal or state income taxes has been included in the financial statements. The Company's income tax returns are subject to examination by the appropriate tax jurisdictions for a period of three years from when they are required to be filed.

Acquisitions, Business Combinations
The company accounts for business combinations using the acquisition method and accordingly, the identifiable assets acquired, and the liabilities assumed are recorded at their acquisition date fair values. Goodwill represents the excess of the purchase price over the fair value of net assets, including the amount assigned to identifiable intangible assets.

Note 2 - Capital Commitments Receivable

Upon commencement of operations, the Company received capital commitments from its members totaling $36,250,000. Of this amount, $17,034,721 was collected as of December 31, 2013. The remaining balance was collected during the year ended December 31, 2014.

Note 3 – Investment in Future Facilities

During 2014 the Company was in the process of establishing a new psychiatric facility in Monroe, Georgia. The Company made a deposit of $150,000 during 2014 for the future purchase of this facility.

Note 4 - Property and Equipment

The major classifications of property and equipment are as follows:

As of December 31,	2014	2013
Land	$ 1,300,000	$ -
Building	5,900,000	-
Furniture and Fixtures	262,850	13,193
Computer Equipment and Software	121,831	-
Construction in progress	19,344	-
Total Land, Property, and Equipment	7,604,025	13,193
Less Accumulated Depreciation	(44,437)	(1,772)
Land, Property and Equipment, net	$ 7,559,588	$ 11,421

Note 5 – Financed Insurance

The Company financed its insurance premiums through IPFS Corporation. Total premiums on these policies are $261,777. Of this amount, $209,340 was financed and is payable in ten equal monthly installments of $21,366, including finance charges at 4.48%. As of December 31, 2014 the remaining balance on this agreement was $167,472.

Note 6 – Operating Lease of Facilities

The Company leases through an unrelated third party, an administrative office located in New York. The lease was assigned from a former entity of common ownership with an initial lease term of ten years, expiring October 31, 2019. Rent expense for the year ended December 31, 2014 and the period from March 1, 2013 (inception) through December 31, 2013 was $143,245 and $136,725, respectively.

Future minimum rental payments under this lease commitment are as follows:

December 31, 2015	$ 187,781
December 31, 2016	193,414
December 31, 2017	199,217
December 31, 2018	205,193
December 31, 2019	175,248
Total	$ 960,853

In addition, the Company is under an Option Agreement with an unrelated third party to purchase land in Marysville, Washington. Under this agreement, the Company pays the land owner $5,600 per month for the term of the agreement. During the year ended December 31, 2014, these payments have been classified as rent in the amount of $67,200.

Note 7 – Retirement Plan

The Company maintains a 401(k) retirement plan ("the Plan") for all eligible employees over 21 years of age with at least five months of service. Participants can contribute a percentage of their compensation up to a maximum deferral of 85% and receive a matching employer contribution of 100% of deferrals up to 3% of compensation, and 50% of deferrals for the next 2% of compensation. Participants may also receive a discretionary employer matching contribution at the discretion of the Company's Board of Directors. The Company incurred expenses of $60,186 in 2014.

Note 8 – Acquisitions

During 2014 the Company acquired the assets of Maryville Behavioral Health Hospital for cash consideration of $22,600,000. The facility provides behavioral health care to patients in and around the Chicago, Illinois area, with a total of 125 patient beds. The aggregate net purchase price of the business was allocated to assets based on their estimated fair values as follows:

Goodwill	$ 15,016,697
Building and Improvements	5,900,000
Land	1,300,000
Furniture and Equipment	243,303
Inventory	140,000
Total Purchase Price	$ 22,600,000

Note 9 – Related Party Transactions

Chicago Behavioral Hospital (2014 Health, LLC) leases its Illinois based facility from its related company, 2014 Health Realty, LLC. The lease is a 15 year operating lease that commenced on November 3, 2014. Base rent is $92,083 per month. Intercompany rental income and expense is eliminated upon consolidation of the financial statements.

As of December 31, 2014, 2014 Health Realty, LLC was due $111,194 from Chicago Behavioral Hospital (its related entity) for the November and December 2014 rent. This intercompany receivable is eliminated upon consolidation of the financial statements.

As of December 31, 2014, US HealthVest, LLC was due $885 from Chicago Behavioral Hospital (its related entity) for miscellaneous operating expenses. This intercompany receivable is eliminated upon consolidation of the financial statements.

Note 10 – Subsequent Event

Subsequent events were evaluated through March 25, 2015, the date that the financial statements were available to be issued.

TOBIN & COMPANY
CERTIFIED PUBLIC ACCOUNTANTS, PC

Independent Auditors' Report on Supplemental Material

To the members of:
US HealthVest, LLC
New York, N.Y.

We have audited the consolidated financial statements of US HealthVest, LLC and subsidiaries as of and for the year ended December 31, 2014, and as of and for the period from March 1, 2013 (inception) through December 31, 2013, which expressed an unmodified opinion on those financial statements, appears on page 3. Our audits were conducted for the purpose of forming an opinion on the consolidated financial statements as a whole. The consolidating information included in the following section is presented for purposes of additional analysis of the consolidated financial statements rather than to present the financial position, results of operations, and cash flows of the individual companies, and it is not a required part of the consolidated financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the consolidated financial statements. The consolidating information has been subjected to the auditing procedures applied in the audit of the consolidated financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the consolidated financial statements or to the consolidated financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the consolidating information is fairly stated in all material respects in relation to the consolidated financial statements as a whole.

Tobin & Company
Certified Public Accountants, PC

Purchase, New York
March 25, 2015

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US HealthVest, LLC

Consolidating Balance Sheet

As of December 31,2014	US HealthVest LLC	V Colorado LLC	2014 Health LLC	2014 Health Realty, LLC	eliminations	Consolidated
ASSETS						
Current assets						
Cash and equivalents	$ 3,783,679	$ -	$ 1,352,692	$ -	$ -	$ 5,136,371
Accounts receivable, net	-	-	839,297	-	-	839,297
Inventory	-	-	134,133	-	-	134,133
Prepaid expenses	21,834	-	445,523	-	-	467,357
Due from parent/subsidiaries	885	-	-	111,194	(112,079)	-
Total current assets	3,806,398	-	2,771,645	111,194	(112,079)	6,577,158
Land, Property and equipment, net	54,491	-	329,680	7,175,417	-	7,559,588
Other Assets						
Investment in 2014 Health, LLC (CBH)	17,249,777	(5,558)	-	-	(17,244,219)	-
Investment in 2014 Health Realty, LLC	7,253,381	-	-	-	(7,253,381)	-
Investment in V Colorado, LLC	(5,558)	-	-	-	5,558	-
Investment in future facilities	150,000	-	-	-	-	150,000
Other receivable and other assets	37,198	-	4,680	-	-	41,878
Goodwill	-	-	15,016,697	-	-	15,016,697
Total Other Assets	24,684,798	(5,558)	15,021,377	-	(24,492,042)	15,208,575
Total Assets	$ 28,545,687	$ (5,558)	$ 18,122,702	$ 7,286,611	$ (24,604,121)	$ 29,345,321
LIABILITIES AND MEMBERS' EQUITY						
Liabilities						
Accounts payable	$ 86,237	$ -	$ 297,912	$ -	$ -	$ 384,149
Accrued expenses	762,320	-	301,020	33,230	-	1,096,570
Financed insurance	-	-	167,472	-	-	167,472
Due to parent/subsidiaries	-	-	112,079	-	(112,079)	-
Total current liabilities	848,557	-	878,483	33,230	(112,079)	1,648,191
Members' Equity	27,697,130	(5,558)	17,244,219	7,253,381	(24,492,042)	27,697,130
Total Liabilities and Members' Equity	$ 28,545,687	$ (5,558)	$ 18,122,702	$ 7,286,611	$ (24,604,121)	$ 29,345,321

US HealthVest, LLC

Consolidating Statement of Operations

For the year ended December 31, 2014	US HealthVest LLC	V Colorado LLC	2014 Health LLC	2014 Health Realty, LLC	eliminations	Consolidated
Revenues:						
Net patient service revenue	$ -	$ -	$ 827,152	$ -	$ -	$ 827,152
Other revenue	-	-	36,033	178,028	(178,028)	36,033
Net Revenues	-	-	863,185	178,028	(178,028)	863,185
Operating expenses						
Salaries and benefits	2,484,039	-	785,632	-	-	3,269,671
Professional fees	1,946,765	-	15,854	-	-	1,962,619
Travel and entertainment	323,462	-	4,576	-	-	328,038
Rent	212,152	-	178,933	-	(178,028)	213,057
Supplies	31,045	-	86,885	-	-	117,930
Contracted labor	-	-	105,629	-	-	105,629
Insurance	7,019	-	60,122	30,766	-	97,907
Licenses, permits and fees	86,714	-	7,763	-	-	94,477
Contracted services	-	-	68,989	-	-	68,989
Utilities	32,338	-	3,045	27,615	-	62,998
Administrative consulting	-	-	55,347	-	-	55,347
Repairs and maintenance	15,567	-	11,142	17,683	-	44,392
Computer and internet	41,085	-	-	-	-	41,085
Property and business taxes	-	-	13,003	24,000	-	37,003
Dues and subscriptions	24,009	-	886	-	-	24,895
Other operating expenses	8,709	-	13,952	-	-	22,661
Advertising and marketing	7,053	-	1,878	-	-	8,931
Total operating expenses	5,219,957	-	1,413,636	100,064	(178,028)	6,555,629
Operating Profit (Loss)	(5,219,957)	-	(550,451)	77,964	-	(5,692,444)
Other income (expenses):						
Depreciation and amortization	(9,786)	-	(8,297)	(24,583)	-	(42,666)
Equity in net income of subsidiaries	(502,400)	(5,558)	-	-	507,958	-
Interest income, net of expense	15,130	-	2,967	-	-	18,097
Total other expenses	(497,056)	(5,558)	(5,330)	(24,583)	507,958	(24,569)
Net Income (Loss)	$ (5,717,013)	$ (5,558)	$ (555,781)	$ 53,381	$ 507,958	$ (5,717,013)

US HealthVest, LLC

Consolidating Statement of Members' Equity

For the year ended December 31, 2014	US HealthVest LLC	V Colorado LLC	2014 Health LLC	2014 Health Realty, LLC	eliminations	Consolidated
Beginning Balance, January 1, 2014	$ 33,414,143	$ -	$ -	$ -	$ -	$ 33,414,143
Contributions from Members	-	-	17,800,000	7,200,000	(25,000,000)	-
Net Income (Loss)	(5,717,013)	(5,558)	(555,781)	53,381	507,958	(5,717,013)
Balance, December 31, 2014	$ 27,697,130	$ (5,558)	$ 17,244,219	$ 7,253,381	$ (24,492,042)	$ 27,697,130

US HealthVest, LLC

Consolidating Statement of Cash Flows

For the year ended December 31, 2014	US HealthVest LLC	V Colorado LLC	2014 Health LLC	2014 Health Realty, LLC	eliminations	Consolidated
Cash Flows From Operating Activities						
Net Income (Loss)	$ (5,717,013)	$ (5,558)	$ (555,781)	$ 53,381	$ 507,958	$ (5,717,013)
Adjustments to Reconcile Net Loss to Net Cash Provided by Operating Activities:						
Depreciation	9,786	-	8,297	24,583		42,666
Changes in Operating Assets and Liabilities:						-
Increase in prepaid expenses	(3,033)	-	(445,523)	-		(448,556)
Increase in other receivable and other assets	(167,540)		(4,680)	-		(172,220)
Increase in accounts receivable	-		(839,297)	-		(839,297)
Increase in inventory	-		(134,133)	-		(134,133)
Increase in payables and accrued expenses	632,021		598,932	33,230		1,264,183
Net Cash Flows Used in Operating Activities	(5,245,779)	(5,558)	(1,372,185)	111,194	507,958	(6,004,370)
Cash Flows From Investing Activities						
Capital expenditures	(52,856)	-	(337,977)	(7,200,000)		(7,590,833)
Investment in Subsidiaries	(24,497,600)	5,558			24,492,042	-
Purchase of goodwill	-	-	(15,016,697)			(15,016,697)
Net Cash Flows Used in Investing Activities	(24,550,456)	5,558	(15,354,674)	(7,200,000)	24,492,042	(22,607,530)
Cash Flows From Financing Activities						
Contributed Capital	-	-	17,800,000	7,200,000	(25,000,000)	-
Due to/From Subsidiaries	(885)	-	112,079	(111,194)		-
Increase in financed insurance	-	-	167,472			167,472
Decrease in capital commitment receivable	19,215,279	-				19,215,279
Net Cash Flows Provided by Financing Activities	19,214,394	-	18,079,551	7,088,806	(25,000,000)	19,382,751
Net Increase (Decrease) in Cash	(10,581,841)	-	1,352,692	-	-	(9,229,149)
Cash at Beginning of Year	14,365,520	-	-	-	-	14,365,520
Cash at End of Year	$ 3,783,679	$ -	$ 1,352,692	$ -	$ -	$ 5,136,371

US HealthVest, LLC

Consolidated Audited Financial Statements
For the Period from
March 1, 2013 (Inception) through December 31, 2013

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TOBIN & COMPANY
CERTIFIED PUBLIC ACCOUNTANTS, PC

INDEPENDENT AUDITORS' REPORT

To the members of:
US HealthVest, LLC
New York, N.Y.

We have audited the accompanying financial statements of US HealthVest, LLC, which comprise the balance sheet as of December 31, 2013, and the related statements of operations, members' capital and cash flows for the period from March 1, 2013 (inception) through December 31, 2013. and the related notes to the financial statements.

Management's Responsibility for the Financial Statements
Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility
Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion
In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of US HealthVest, LLC. as of December 31, 2013, and the results of its operations and its cash flows for the period from March 1, 2013 (inception) through December 31, 2013 in conformity with accounting principles generally accepted in the United States of America.

Tobin & Company
Certified Public Accountants, PC

Purchase, New York
March 1, 2014

ATTACHMENT-36A

2500 WESTCHESTER AVENUE, SUITE 117 • PURCHASE, NEW YORK 10577 • TEL: (914) 833-2200 • FAX: (914) 833-2278

US HealthVest, LLC

Consolidated Balance Sheet

As of December 31,		2013
ASSETS		
Current Assets		
Cash	$	14,365,520
Other Receivable and Other Assets		19,658
Capital Commitment Receivable		19,215,279
Prepaid Expenses		18,801
Total Current Assets		33,619,258
Furniture and Equipment, net of accumulated depreciation		11,421
Total Assets	**$**	**33,630,679**
LIABILITIES AND MEMBERS' CAPITAL		
Current Liabilities		
Accounts Payable	$	47,387
Accrued Expenses		169,149
Total Current Liabilities		216,536
MEMBERS' CAPITAL		
Members' Capital		33,414,143
Total Liabilities and Members' Capital	**$**	**33,630,679**

See accompanying notes to the financial statements

US HealthVest, LLC

Consolidated Statement of Operations and Members Capital

For the period from March 1, 2013 (inception) through December 31,	2013
Revenues	$ -
Operating Expenses	
Salaries and Benefits	1,538,774
Legal and Professional	785,009
Business Development	226,538
Rent	136,725
Licenses, Permits and Fees	69,321
Supplies	53,532
Utilities	21,763
Other Operating Expenses	8,730
Total Operating Expenses	2,840,392
Loss from Operations before other Items	**(2,840,392)**
Depreciation Expense	(1,772)
Interest Income	6,307
Net Loss	**(2,835,857)**
Members' Capital	
Beginning of year	-
Member Commitments	36,250,000
Members' Capital, ending	**$ 33,414,143**

See accompanying notes to the financial statements

US HealthVest, LLC

Consolidated Statement of Cash Flows

For the period from March 1, 2013 (inception) through December 31,	2013
Cash Flows From Operating Activities	
Net Loss	$ (2,835,857)
Adjustments to Reconcile Net Loss to Net Cash Provided by Operating Activities:	
Depreciation	1,772
Changes in Operating Assets and Liabilities:	
Increase in Prepaid Expenses	(18,801)
Increase in Other Receivable and Other Assets	(19,658)
Increase in Accounts Payable and Accrued Expenses	216,536
Net Cash Flows Used in Operating Activities	**(2,656,008)**
Cash Flows From Investing Activities	
Capital Expenditures	**(13,193)**
Cash Flows From Financing Activities	
Capital Commitment	36,250,000
Increase in Capital Commitment Receivable	(19,215,279)
Net Cash Flows Provided by Financing Activities	**17,034,721**
Net Increase In Cash	14,365,520
Cash at Beginning of Period	-
Cash at End of Period	**$ 14,365,520**
Supplemental Disclosures	
Cash paid during the period for:	
Interest Expense	$ -
Income Taxes	$ -

See accompanying notes to the financial statements

Note 1 - Nature of Organization

US HealthVest, LLC (the Company) was formed under the State of Delaware, and commenced operations on March 1, 2013 (inception). The purpose of the Company is to acquire and operate behavioral healthcare facilities throughout the United States.

Note 2 - Summary of Significant Accounting Policies

Principles of Consolidation
The consolidated financial statements include the activities of US HealthVest, LLC, and its wholly owned subsidiaries, collectively referred to as "the Company". All material intercompany accounts and transactions have been eliminated.

Basis of Accounting
The financial statements have been prepared on the accrual basis of accounting in conformity with generally accepted accounting principles.

Property and Equipment
Property and equipment are stated at cost. Maintenance and repairs are expensed in the period incurred; major renewals and betterments are capitalized. When items of property are sold or retired, the related costs are removed from the accounts and any gain or loss is included in income.

Depreciation
Property and Equipment are depreciated using straight-line depreciation methods over their estimated useful lives as follows:

Furniture and Equipment	3-5

Use of Estimates
The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amount of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the reporting period. Actual results could differ from those estimates.

Concentration of Credit Risk
Financial instruments that potentially subject the Corporation to concentrations of credit risk consist of cash, cash equivalents and investments held in financial institutions. At times such balances may be in excess of Federal Deposit Insurance Company (FDIC) limits.

Note 2 - Summary of Significant Accounting Policies, continued

Income Taxes
The Company is a limited liability company and is recognized as a partnership for federal and state income tax purposes. All items of income and expense are passed through to the members to report on their individual income tax returns. Therefore the Company pays no income tax itself.

Note 3 - Capital Commitments Receivable

Upon commencement of operations, the Company received capital commitments from its members totaling $36,250,000. Of this amount, $17,034,721 has been collected as of December 31, 2013. The Company considers the balance of $19,215,279 to be fully collectible upon demand.

Note 4 - Property and Equipment

The major classifications of property and equipment are as follows:

As of December 31,		2013
Furniture and Equipment	$	13,193
Less Accumulated Depreciation		(1,772)
Furniture and Equipment, net	$	11,421

Note 5 – Retirement Plan

The Company maintains a 401(k) retirement plan ("the Plan") for eligible employees. The Plan provides for employee deferrals and a discretionary employer match as described in the Plan document.

Note 6 – Subsequent Event

In January 2014, US HealthVest received a Certificate of Need to develop a 75 bed hospital in Washington State. The hospital will be located in Marysville, a suburb of Seattle.

INCOME STATEMENT
OPERATOR - V Covington, LLC (VC)

	2017	2018	2019	2020
Patient Days	0	15,076	31,114	31,943
ADC	0.0	41.2	85.0	87.5
Outpatient Visits	0	2,085	4,351	4,463
Adj. Patient Days	0	15,165	31,297	32,128
REVENUE:				
Inpatient Revenue	0	10,779,714	23,115,335	24,216,902
Outpatient Revenue	0	479,596	1,010,830	1,047,076
Net Patient Revenue	**0**	**11,259,310**	**24,126,165**	**25,263,977**
Other Revenue	0	0	0	0
Total Revenue	**0**	**11,259,310**	**24,126,165**	**25,263,977**
OPERATING EXPENSES:				
Salaries	194,175	6,501,053	10,183,244	10,579,654
Contract Labor	0	0	0	0
Incentive Compensation	0	251,000	257,275	263,707
Employee Benefits	36,893	1,235,200	1,934,816	2,010,134
Supplies	22,500	606,932	1,258,721	1,323,798
Medical Professional	0	1,030,877	1,966,673	2,040,495
Professional Fees	120,000	120,000	123,980	127,788
Purchased Services	0	641,374	837,511	859,037
Repairs & Maint	0	240,000	246,000	252,150
Rent	0	18,000	18,450	18,911
Utilities	0	319,848	327,844	336,040
Recruitment	8,000	48,000	49,200	50,430
T&E	6,000	72,000	73,800	75,645
Insurance	60,000	336,000	346,080	356,462
Advertising	0	60,000	61,500	63,038
Bad Debt	0	400,067	723,785	757,919
Taxes - Non Income	1,100,000	1,240,000	1,246,000	1,252,150
Other Expenses	3,000	36,000	36,900	37,823
Total Operating Exp	**1,550,569**	**13,156,352**	**19,691,780**	**20,405,181**
EBITDA	**($1,550,569)**	**($1,897,041)**	**$4,434,386**	**$4,858,796**
Margin	*N/A*	*-17%*	*18%*	*19%*
OTHER COSTS:				
Depreciation/Amort	0	463,869	489,878	516,537
Franchise Taxes	0	0	0	0
Interest	0	0	0	0
Total	**0**	**463,869**	**489,878**	**516,537**
NET INCOME	**($1,550,569)**	**($2,360,911)**	**$3,944,507**	**$4,342,259**
FTEs	**2.2**	**107.7**	**167.5**	**170.8**
EBOP	**N/A**	**2.6**	**2.0**	**2.0**

Rent Payments

INCOME STATEMENT

OWNER - V Covington Realty, LLC (VCR)

	2017	2018	2019	2020
Patient Days	0	0	0	0
ADC	0.0	0.0	0.0	0.0
Outpatient Visits	0	0	0	0
Adj. Patient Days	0	0	0	0
REVENUE:				
Inpatient Revenue	0	0	0	0
Outpatient Revenue	0	0	0	0
Net Patient Revenue	0	0	0	0
Other Revenue	0	0	0	0
Total Revenue	**0**	**0**	**0**	**0**
OPERATING EXPENSES:				
Salaries	0	0	0	0
Contract Labor	0	0	0	0
Incentive Compensation	0	0	0	0
Employee Benefits	0	0	0	0
Supplies	0	0	0	0
Medical Professional	0	0	0	0
Professional Fees	0	0	0	0
Purchased Services	0	0	0	0
Repairs & Maint	0	0	0	0
Rent	0	0	0	0
Utilities	0	0	0	0
Recruitment	0	0	0	0
T&E	0	0	0	0
Insurance	0	0	0	0
Advertising	0	0	0	0
Bad Debt	0	0	0	0
Taxes - Non Income	0	0	0	0
Other Expenses	0	0	0	0
Total Operating Exp	**0**	**0**	**0**	**0**
EBITDA	**$0**	**$0**	**$0**	**$0**
Margin	*N/A*	*N/A*	*N/A*	*N/A*
OTHER COSTS:				
Depreciation/Amort		519,784	519,784	519,784
Franchise Taxes	0	0	0	0
Interest	0	1,251,856	1,260,151	1,267,218
Total	**0**	**1,771,640**	**1,779,935**	**1,787,002**
NET INCOME	**$0**	**($1,771,640)**	**($1,779,935)**	**($1,787,002)**
FTEs	**0.0**	**0.0**	**0.0**	**0.0**
EBOP	**N/A**	**N/A**	**N/A**	**N/A**
		1,141,000	1,163,820	1,187,096

INCOME STATEMENT
Combined

	2017	2018	2019	2020
Patient Days	0	15,076	31,114	31,943
ADC	0.0	41.2	85.0	87.5
Outpatient Visits	0	2,085	4,351	4,463
Adj. Patient Days	0	15,165	31,297	32,128
REVENUE:				
Inpatient Revenue	0	10,779,714	23,115,335	24,216,902
Outpatient Revenue	0	479,596	1,010,830	1,047,076
Net Patient Revenue	**0**	**11,259,310**	**24,126,165**	**25,263,977**
Other Revenue	0	0	0	0
Total Revenue	**0**	**11,259,310**	**24,126,165**	**25,263,977**
OPERATING EXPENSES:				
Salaries	194,175	6,501,053	10,183,244	10,579,654
Contract Labor	0	0	0	0
Incentive Compensation	0	251,000	257,275	263,707
Employee Benefits	36,893	1,235,200	1,934,816	2,010,134
Supplies	22,500	606,932	1,258,721	1,323,798
Medical Professional	**0**	1,030,877	1,966,673	2,040,495
Professional Fees	120,000	120,000	123,980	127,788
Purchased Services	0	641,374	837,511	859,037
Repairs & Maint	0	240,000	246,000	252,150
Rent	0	18,000	18,450	18,911
Utilities	0	319,848	327,844	336,040
Recruitment	8,000	48,000	49,200	50,430
T&E	6,000	72,000	73,800	75,645
Insurance	60,000	336,000	346,080	356,462
Advertising	0	60,000	61,500	63,038
Bad Debt	0	400,067	723,785	757,919
Taxes - Non Income	1,100,000	1,240,000	1,246,000	1,252,150
Other Expenses	3,000	36,000	36,900	37,823
Total Operating Exp	**1,550,569**	**13,156,352**	**19,691,780**	**20,405,181**
EBITDA	**($1,550,569)**	**($1,897,041)**	**$4,434,386**	**$4,858,796**
Margin	*N/A*	*-17%*	*18%*	*19%*
OTHER COSTS:				
Depreciation/Amort	0	983,653	1,009,662	1,036,321
Franchise Taxes	0	0	0	0
Interest	0	1,251,856	1,260,151	1,267,218
Total	**0**	**2,235,509**	**2,269,813**	**2,303,539**
NET INCOME	**($1,550,569)**	**($4,132,551)**	**$2,164,572**	**$2,555,257**
FTEs	**2.2**	**107.7**	**167.5**	**170.8**
EBOP	**N/A**	**2.62**	**1.97**	**1.95**

BALANCE SHEET
By Year

	VC 12/31/2017	VCR 12/31/2017	Combined 12/31/2017
Assets			
Cash	$6,373,511	$0	$6,373,511
Net Accounts Receivable	$0	$0	$0
Total Current Assets	**$6,373,511**	**$0**	**$6,373,511**
Fixed Assets	$15,726,200	$15,593,509	$31,319,709
Less: Accum Depr.	$0	$0	$0
Net Fixed Assets	**$15,726,200**	**$15,593,509**	**$31,319,709**
Intercompany	$0	$0	$0
Other Assets	$0	$0	$0
Total Assets	**$22,099,711**	**$15,593,509**	**$37,693,220**
Liabilities & Equity			
Accrued Expenses	$107,796	$0	$107,796
Accrued Payroll	$42,484	$0	$42,484
Debt, Current Portion	$0	$0	$0
Capital Lease, Current Portion			
Total Current Liabilities	**$150,280**	**$0**	**$150,280**
Debt, Net of Current	$0	$0	$0
Capital Lease, Net of Current		$15,593,509	$15,593,509
Total Liabilities	**$150,280**	**$15,593,509**	**$15,743,789**
Beginning Equity	$23,500,000	$0	$23,500,000
Net Income	($1,550,569)	$0	($1,550,569)
Ending Equity	**$21,949,431**	**$0**	**$21,949,431**
Total Liabilities & Equity	**$22,099,711**	**$15,593,509**	**$37,693,220**
Check	$0	$0	$0
Current Ratio	42.4	NA	8.4
Net Margin Percentage	NA	NA	NA
Percent Debt to Total Capitalization	0%	0%	0%
Debt Service Coverage Ratio	0%	0%	0%
Days Cash on Hand	1500.3	0.0	1500.3
Cushion Ratio	0.0	0.0	0.0

BALANCE SHEET

	VC 12/31/2018	VCR 12/31/2018	Combined 12/31/2018
Assets			
Cash	$490,115	$0	$490,115
Net Accounts Receivable	$2,652,561	$0	$2,652,561
Total Current Assets	**$3,142,676**	**$0**	**$3,142,676**
Fixed Assets	$15,906,200	$15,593,509	$31,499,709
Less: Accum Depr.	($463,869)	($519,784)	($983,653)
Net Fixed Assets	**$15,442,331**	**$15,073,726**	**$30,516,056**
Intercompany	$1,141,000	($1,141,000)	$0
Other Assets	$570,500	$0	$570,500
Total Assets	**$20,296,507**	**$13,932,726**	**$34,229,232**
Liabilities & Equity			
Accrued Expenses	$403,874	$0	$403,874
Accrued Payroll	$304,112	$0	$304,112
Debt, Current Portion	$0	$0	$0
Capital Lease, Current Portion			
Total Current Liabilities	**$707,986**	**$0**	**$707,986**
Debt, Net of Current	$0	$0	$0
Capital Lease, Net of Current		$15,704,365	$15,704,365
Total Liabilities	**$707,986**	**$15,704,365**	**$16,412,352**
Beginning Equity	$21,949,431	$0	$21,949,431
Net Income	($2,360,911)	($1,771,640)	($4,132,551)
Ending Equity	**$19,588,521**	**($1,771,640)**	**$17,816,881**
Total Liabilities & Equity	**$20,296,507**	**$13,932,726**	**$34,229,232**
Check	$0	$0	$0
Current Ratio	4.4	NA	4.4
Net Margin Percentage	NA	NA	NA
Percent Debt to Total Capitalization	0%	0%	0%
Debt Service Coverage Ratio	0%	0%	0%
Days Cash on Hand	13.6	0.0	13.6
Cushion Ratio	0.0	0.0	0.0

BALANCE SHEET

	VC 12/31/2019	VCR 12/31/2019	Combined 12/31/2019
Assets			
Cash	$4,037,503	$0	$4,037,503
Net Accounts Receivable	$2,554,211	$0	$2,554,211
Total Current Assets	**$6,591,714**	**$0**	**$6,591,714**
Fixed Assets	$16,090,700	$15,593,509	$31,684,209
Less: Accum Depr.	($953,748)	($1,039,567)	($1,993,315)
Net Fixed Assets	**$15,136,953**	**$14,553,942**	**$29,690,894**
Intercompany	$2,304,820	($2,304,820)	$0
Other Assets	$285,250	$0	$285,250
Total Assets	**$24,318,736**	**$12,249,122**	**$36,567,858**
Liabilities & Equity			
Accrued Expenses	$445,557	$0	$445,557
Accrued Payroll	$340,151	$0	$340,151
Debt, Current Portion	$0	$0	$0
Capital Lease, Current Portion			
Total Current Liabilities	**$785,708**	**$0**	**$785,708**
Debt, Net of Current	$0	$0	$0
Capital Lease, Net of Current		$15,800,697	$15,800,697
Total Liabilities	**$785,708**	**$15,800,697**	**$16,586,405**
Beginning Equity	$19,588,521	($1,771,640)	$17,816,881
Net Income	$3,944,507	($1,779,935)	$2,164,572
Ending Equity	**$23,533,028**	**($3,551,575)**	**$19,981,453**
Total Liabilities & Equity	**$24,318,736**	**$12,249,122**	**$36,567,858**
Check	$0	$0	$0
Current Ratio	8.4	NA	8.4
Net Margin Percentage	NA	-37%	10%
Percent Debt to Total Capitalization	0%	0%	0%
Debt Service Coverage Ratio	0%	0%	0%
Days Cash on Hand	74.8	0.0	74.8
Cushion Ratio	0.0	0.0	0.0

BALANCE SHEET

	VC 12/31/2020	VCR 12/31/2020	Combined 12/31/2020
Assets			
Cash	$7,405,685	$0	$7,405,685
Net Accounts Receivable	$2,696,254	$0	$2,696,254
Total Current Assets	**$10,101,939**	**$0**	**$10,101,939**
Fixed Assets	$16,279,813	$15,593,509	$31,873,322
Less: Accum Depr.	($1,470,285)	($1,559,351)	($3,029,636)
Net Fixed Assets	**$14,809,528**	**$14,034,158**	**$28,843,686**
Intercompany	$3,491,916	($3,491,916)	$0
Other Assets	$285,250	$0	$285,250
Total Assets	**$28,688,634**	**$10,542,242**	**$39,230,875**
Liabilities & Equity			
Accrued Expenses	$460,684	$0	$460,684
Accrued Payroll	$352,662	$0	$352,662
Debt, Current Portion	$0	$0	$0
Capital Lease, Current Portion			
Total Current Liabilities	**$813,347**	**$0**	**$813,347**
Debt, Net of Current	$0	$0	$0
Capital Lease, Net of Current		$15,880,819	$15,880,819
Total Liabilities	**$813,347**	**$15,880,819**	**$16,694,165**
Beginning Equity	$23,533,028	($3,551,575)	$19,981,453
Net Income	$4,342,259	($1,787,002)	$2,555,257
Ending Equity	**$27,875,287**	**($5,338,577)**	**$22,536,710**
Total Liabilities & Equity	**$28,688,634**	**$10,542,242**	**$39,230,876**
Check	$0	$0	$0
Current Ratio	12.4	NA	12.4
Net Margin Percentage	NA	NA	NA
Percent Debt to Total Capitalization	0%	0%	0%
Debt Service Coverage Ratio	0%	0%	0%
Days Cash on Hand	132.5	0.0	132.5
Cushion Ratio	0.0	0.0	0.0

BALANCE SHEET
By Entity

V Covington, LLC

	12/31/2017	12/31/2018	12/31/2019	12/31/2020
Assets				
Cash	$6,373,511	$490,115	$4,037,503	$7,405,685
Net Accounts Receivable	$0	$2,652,561	$2,554,211	$2,696,254
Total Current Assets	**$6,373,511**	**$3,142,676**	**$6,591,714**	**$10,101,939**
Fixed Assets	$15,726,200	$15,906,200	$16,090,700	$16,279,813
Less: Accum Depr.	$0	($463,869)	($953,748)	($1,470,285)
Net Fixed Assets	**$15,726,200**	**$15,442,331**	**$15,136,953**	**$14,809,528**
Intercompany	$0	$1,141,000	$2,304,820	$3,491,916
Other Assets	$0	$570,500	$285,250	$285,250
Total Assets	**$22,099,711**	**$20,296,507**	**$24,318,736**	**$28,688,634**
Liabilities & Equity				
Accrued Expenses	$107,796	$403,874	$445,557	$460,684
Accrued Payroll	$42,484	$304,112	$340,151	$352,662
Debt, Current Portion	$0	$0	$0	$0
Capital Lease, Current Portion	$0	$0	$0	$0
Total Current Liabilities	**$150,280**	**$707,986**	**$785,708**	**$813,347**
Debt, Net of Current	$0	$0	$0	$0
Capital Lease, Current Portion	$0	$0	$0	$0
Total Liabilities	**$150,280**	**$707,986**	**$785,708**	**$813,347**
Beginning Equity	$23,500,000	$21,949,431	$19,588,521	$23,533,028
Net Income	($1,550,569)	($2,360,911)	$3,944,507	$4,342,259
Ending Equity	**$21,949,431**	**$19,588,521**	**$23,533,028**	**$27,875,287**
Total Liabilities & Equity	**$22,099,711**	**$20,296,507**	**$24,318,736**	**$28,688,634**
Check	0	0	0	0

BALANCE SHEET

V Covington Realty, LLC

	12/31/2017	12/31/2018	12/31/2019	12/31/2020
Assets				
Cash	$0	$0	$0	$0
Net Accounts Receivable	$0	$0	$0	$0
Total Current Assets	**$0**	**$0**	**$0**	**$0**
Fixed Assets	$15,593,509	$15,593,509	$15,593,509	$15,593,509
Less: Accum Depr.	$0	($519,784)	($1,039,567)	($1,559,351)
Net Fixed Assets	**$15,593,509**	**$15,073,726**	**$14,553,942**	**$14,034,158**
Intercompany	$0	($1,141,000)	($2,304,820)	($3,491,916)
Other Assets	$0	$0	$0	$0
Total Assets	**$15,593,509**	**$13,932,726**	**$12,249,122**	**$10,542,242**
Liabilities & Equity				
Accrued Expenses	$0	$0	$0	$0
Accrued Payroll	$0	$0	$0	$0
Debt, Current Portion	$0	$0	$0	$0
Capital Lease, Current Portion	$0	$0	$0	$0
Total Current Liabilities	**$0**	**$0**	**$0**	**$0**
Debt, Net of Current	$0	$0	$0	$0
Capital Lease, Current Portion	$15,593,509	$15,704,365	$15,800,697	$15,880,819
Total Liabilities	**$15,593,509**	**$15,704,365**	**$15,800,697**	**$15,880,819**
Beginning Equity	$0	$0	($1,771,640)	($3,551,575)
Net Income	$0	($1,771,640)	($1,779,935)	($1,787,002)
Ending Equity	**$0**	**($1,771,640)**	**($3,551,575)**	**($5,338,577)**
Total Liabilities & Equity	**$15,593,509**	**$13,932,726**	**$12,249,122**	**$10,542,242**
Check	0	0	0	0

BALANCE SHEET

Combined

	12/31/2017	12/31/2018	12/31/2019	12/31/2020
Assets				
Cash	$6,373,511	$490,115	$4,037,503	$7,405,685
Net Accounts Receivable	$0	$2,652,561	$2,554,211	$2,696,254
Total Current Assets	**$6,373,511**	**$3,142,676**	**$6,591,714**	**$10,101,939**
Fixed Assets	$31,319,709	$31,499,709	$31,684,209	$31,873,322
Less: Accum Depr.	$0	($983,653)	($1,993,315)	($3,029,636)
Net Fixed Assets	**$31,319,709**	**$30,516,056**	**$29,690,894**	**$28,843,686**
Intercompany	$0	$0	$0	$0
Other Assets	$0	$570,500	$285,250	$285,250
Total Assets	**$37,693,220**	**$34,229,232**	**$36,567,858**	**$39,230,875**
Liabilities & Equity				
Accrued Expenses	$107,796	$403,874	$445,557	$460,684
Accrued Payroll	$42,484	$304,112	$340,151	$352,662
Debt, Current Portion	$0	$0	$0	$0
Capital Lease, Current Portion	$0	$0	$0	$0
Total Current Liabilities	**$150,280**	**$707,986**	**$785,708**	**$813,347**
Debt, Net of Current	$0	$0	$0	$0
Capital Lease, Current Portion	$15,593,509	$15,704,365	$15,800,697	$15,880,819
Total Liabilities	**$15,743,789**	**$16,412,352**	**$16,586,405**	**$16,694,165**
Beginning Equity	$23,500,000	$21,949,431	$17,816,881	$19,981,453
Net Income	($1,550,569)	($4,132,551)	$2,164,572	$2,555,257
Ending Equity	**$21,949,431**	**$17,816,881**	**$19,981,453**	**$22,536,710**
Total Liabilities & Equity	**$37,693,220**	**$34,229,232**	**$36,567,858**	**$39,230,876**
Check	0	0	0	0

CASH FLOW STATEMENT

By Year

	Year to Date for Year Ending on		12/31/2017
	V Covington	V Covington Realty	Combined
Cash Flows from Operating Activities			
Net Income (Loss)	($1,550,569)	$0	($1,550,569)
Adjustments to Operating Activities:			
D&A	$0	$0	$0
Change in Working Capital	$150,280	$0	$150,280
Cash Flow from Investing Activities			
Capex	($15,726,200)	($15,593,509)	($31,319,709)
Cash Flow from Financing Activities			
Contributed Capital	$23,500,000	$0	$23,500,000
Capital Lease	$0	$15,593,509	$15,593,509
Intercompany	$0	$0	$0
Net Change in Cash & Cash Equivalents	**$6,373,511**	**$0**	**$6,373,511**
Cash Beginning of Year	$0	$0	$0
Cash End of Year	$6,373,511	$0	$6,373,511
Cash Balance - Balance Sheet	$6,373,511	$0	$6,373,511
Check	$0	$0	$0

CASH FLOW STATEMENT

	Year to Date for Year Ending on		12/31/2018
	V Covington	V Covington Realty	Combined
Cash Flows from Operating Activities			
Net Income (Loss)	($2,360,911)	($1,771,640)	($4,132,551)
Adjustments to Operating Activities:			
D&A	$463,869	$519,784	$983,653
Change in Working Capital	($2,665,355)	$0	($2,665,355)
Cash Flow from Investing Activities			
Capex	($180,000)	$0	($180,000)
Cash Flow from Financing Activities			
Contributed Capital	$0	$0	$0
Capital Lease	$0	$110,856	$110,856
Intercompany	($1,141,000)	$1,141,000	$0
Net Change in Cash & Cash Equivalents	**($5,883,396)**	**($0)**	**($5,883,396)**
Cash Beginning of Year	$6,373,511	$0	$6,373,511
Cash End of Year	$490,115	($0)	$490,115
Cash Balance - Balance Sheet	$490,115	$0	$490,115
Check	($0)	$0	($0)

CASH FLOW STATEMENT

	Year to Date for Year Ending on		12/31/2019
	V Covington	V Covington Realty	Combined
Cash Flows from Operating Activities			
Net Income (Loss)	$3,944,507	($1,779,935)	$2,164,572
Adjustments to Operating Activities:			
D&A	$489,878	$519,784	$1,009,662
Change in Working Capital	$461,322	$0	$461,322
Cash Flow from Investing Activities			
Capex	($184,500)	$0	($184,500)
Cash Flow from Financing Activities			
Contributed Capital	$0	$0	$0
Capital Lease	$0	$96,331	$96,331
Intercompany	($1,163,820)	$1,163,820	$0
Net Change in Cash & Cash Equivalents	**$3,547,388**	**($0)**	**$3,547,388**
Cash Beginning of Year	$490,115	$0	$490,115
Cash End of Year	$4,037,503	($0)	$4,037,503
Cash Balance - Balance Sheet	$4,037,503	$0	$4,037,503
Check	$0	$0	$0

CASH FLOW STATEMENT

	Year to Date for Year Ending on		12/31/2020
	V Covington	V Covington Realty	Combined
Cash Flows from Operating Activities			
Net Income (Loss)	$4,342,259	($1,787,002)	$2,555,257
Adjustments to Operating Activities:			
D&A	$516,537	$519,784	$1,036,321
Change in Working Capital	($114,405)	$0	($114,405)
Cash Flow from Investing Activities			
Capex	($189,113)	$0	($189,113)
Cash Flow from Financing Activities			
Contributed Capital	$0	$0	$0
Capital Lease	$0	$80,122	$80,122
Intercompany	($1,187,096)	$1,187,096	$0
Net Change in Cash & Cash Equivalents	**$3,368,182**	**($0)**	**$3,368,182**
Cash Beginning of Year	$4,037,503	$0	$4,037,503
Cash End of Year	$7,405,685	($0)	$7,405,685
Cash Balance - Balance Sheet	$7,405,685	$0	$7,405,685
Check	($0)	$0	($0)

Financial Viability

All the applicants and co-applicants shall be identified, specifying their roles in the project funding or guaranteeing the funding (sole responsibility or shared) and percentage of participation in that funding.

Financial Viability Waiver

The applicant is not required to submit financial viability ratios if:

1. **"A" Bond rating or better.**
2. **All of the projects capital expenditures are completely funded through internal sources.**
3. **The applicant's current debt financing or projected debt financing is insured or anticipated to be insured by MBIA (Municipal Bond Insurance Association Inc.) or equivalent.**
4. **The applicant provides a third party surety bond or performance bond letter of credit from an A rated guarantor.**

See Section 1120.130 Financial Waiver for information to be provided.

As the proposed project meets item 2 above it is eligible for the Financial Viability Waiver, as such this item is not applicable.

ATTACHMENT-37

Economic Feasibility

A. Reasonableness of Financing Arrangements

The applicant shall document the reasonableness of financing arrangements by submitting a notarized statement signed by an authorized representative that attests to one of the following:

1) That the total estimated project costs and related costs will be funded in total with cash and equivalents, including investment securities, unrestricted funds, received pledge receipts and funded depreciation; or

Appended as **ATTACHMENT-39A,** is a letter from the owner addressing reasonableness of financing arrangements.

B. Conditions of Debt Financing

This criterion is applicable only to projects that involve debt financing. The applicant shall document that the conditions of debt financing are reasonable by submitting a notarized statement signed by an authorized representative that attests to the following, as applicable:

As this project is being funded completely with internal resources, this item is not applicable.

D. Projected Operating Costs

The applicant shall provide the projected direct annual operating costs (in current dollars per equivalent patient day or unit of service) for the first full fiscal year at target utilization but no more than two years following project completion. Direct cost means the fully allocated costs of salaries, benefits and supplies for the service.

	2019	
Salaries	$10,183,244	
Benefits	$1,934,816	
Supplies	$1,258,721	
Patient Days @ 85%		31,025
Total/Operating Cost/PT Day		**$431.16**

E. Total Effect of the Project on Capital Costs

The applicant shall provide the total projected annual capital costs (in current dollars per equivalent patient day) for the first full fiscal year at target utilization but no more than two years following project completion.

	2019	
Depreciation	$1,009,662	
Interest Expense	$1,260,151	
Amortization	0	
Real Estate Taxes	$246,000	
Patient Days @ 85%		31,025
Total/Operating Cost/PT Day		**$81.09**

US HealthVest

February 22, 2016

Ms. Courtney Avery
Administrator
Illinois Health Facilities and Services Review Board
525 W. Jefferson Street, 2nd Floor
Springfield, Illinois 62761

RE: Certificate of Need Application for **V Covington, LLC** reasonableness of financing arrangements

Dear Ms. Avery:

Reasonableness of Financing Arrangements

The applicant shall document the reasonableness of financing arrangements by submitting a notarized statement signed by an authorized representative that attests to the following:

That the total estimated project costs and related costs will be funded in total with cash and equivalents, including investment securities, unrestricted funds, received pledge receipts and funded depreciation.

Respectfully,

Board Member or Officer

Board Member or Officer

Notarization:
Subscribed and sworn to before me
this 22nd day of Feb 2016

Signature of Notary
Seal

JACQUELINE PLANAS
Notary Public, State of New York
No. 01PL6240430
Qualified in New York County
Commission Expires April 28, 2019

Notarization:
Subscribed and sworn to before me
this ____ day of _____

Signature of Notary
Seal

32 East 57th Street
17th Floor
New York, New York 10022
T 212.243.5565 · F 212.243.1099
www.ushealthvest.com

ATTACHMENT-39A

US HealthVest

February 22, 2016

Ms. Courtney Avery
Administrator
Illinois Health Facilities and Services Review Board
525 W. Jefferson Street, 2nd Floor
Springfield, Illinois 62761

RE: Certificate of Need Application for **V Covington Realty, LLC** reasonableness of financing arrangements

Dear Ms. Avery:

Reasonableness of Financing Arrangements

The applicant shall document the reasonableness of financing arrangements by submitting a notarized statement signed by an authorized representative that attests to the following:

That the total estimated project costs and related costs will be funded in total with cash and equivalents, including investment securities, unrestricted funds, received pledge receipts and funded depreciation.

Respectfully,

Board Member or Officer

Board Member or Officer

Notarization:
Subscribed and sworn to before me
this 22nd day of Feb. 2016

Signature of Notary
Seal

JACQUELINE PLANAS
Notary Public, State of New York
No. 01PL6240430
Qualified In New York County
Commission Expires April 28, 2019

Notarization:
Subscribed and sworn to before me
this ____ day of _____

Signature of Notary
Seal

32 East 57th Street
17th Floor
New York, New York 10022
T 212.243.5565 · F 212.243.1099
www.ushealthvest.com

ATTACHMENT-39A

SAFETY NET IMPACT STATEMENT that describes all of the following must be submitted for ALL SUBSTANTIVE AND DISCONTINUATION PROJECTS:

1. The project's material impact, if any, on essential safety net services in the community, to the extent that it is feasible for an applicant to have such knowledge.

Northbrook Behavioral Hospital will impact essential safety net services in the community by working with healthcare providers and clinicians in the community within existing safety net services and providing a full continuum of psychiatric care. Northbrook Behavioral Hospital will operate 24 hours a day / 7 days a week to respond to crisis situations. NBH will also provide free initial assessments to determine how best to help individuals. We are committed to collaborating with every agency to participate within any agency's safety net protocols. We assist all patients, regardless of ability to pay. As the project unfolds we will commit to meetings that help define our role in working closely with all providers.

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.

Northbrook Behavioral Hospital will provide services that compliment healthcare providers and clinicians. Through the process of free initial assessments, NBH will be able to match a person's specific mental health needs with community services that match affordability. Traditional outpatient settings do not provide free assessments and do not provide specialized services for specific populations. For Example, NBH may offer a specialized program for women, a specialized program for veterans, a faith based program, and a private crisis stabilization unit. NBH will not duplicate traditional outpatient services. Rather, NBH will integrate into the existing network or providers and only provide inpatient stabilization, PHP, and IOP services for all ages.

ATTACHMENT – 40

3. How the discontinuation of a facility or service might impact the remaining safety net providers in a given community, if reasonably known by the applicant.

This item is not applicable as this project is not part of a discontinuation. Instead, it is a compliment to existing community services and has the potential to identify and address unmet

Safety Net Impact Statements shall also include all of 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.

This project is for the establishment of a freestanding A/CMI facility. As such, three fiscal years of history is not germane to the project. The Applicant has estimated charity care as part of future operations at 1.5%.

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.

This project is for the establishment of a freestanding A/CMI facility. As such, three fiscal years of history is not germane to the project. Inpatient / Outpatient net revenue is estimated to be 95.8% and 4.2%. New revenue by Payor Source for both inpatients and outpatient's is as follows:

Tricare -	2.2%
Medicare -	28.8%
Medicaid/County -	27.8%
Mananged Care -	38.3%
Charity Care -	1.5%
Self Pay -	1.5%

ATTACHMENT – 40

3. Any information the applicant believes is directly relevant to safety net services, including information regarding teaching, research, and any other service.

Integrating behavioral health with primary care is directly relevant to safety net services and to increasing access to behavioral health services for the insured, uninsured and underinsured patient population. More than 68 percent of adults with a mental disorder have medical conditions, and 29 percent of adults with medical conditions have mental disorders. Persons with comorbid mental and medical conditions are at high risk for receiving poor quality of care. NBH is committed to collaborating with primary care physicians to establish safety net protocols that can deliver services to everyone in need.

Charity Care information MUST be furnished for ALL projects.

CHARITY CARE			
	Year	**Year**	**Year**
Net Patient Revenue		**2018**	**2019**
Amount of Charity Care (charges)		$407,052	$840,078
Cost of Charity Care		$407,052	$840,078

ATTACHMENT-40

SECTION XII – CHARITY CARE INFORMATION Continued i

As the Applicant has no history, it felt that it was relevant to convey the charity care data for its related facility CBH. Please refer below to the safety net and the charity care charts:

Safety Net Information per PA 96-0031			
CHARITY CARE			
Charity (# of patients)	**2014**	**2015 (est.)**	
Inpatient	0	3	
Outpatient	0	1	
Total	**0**	**4**	
Charity (cost In dollars)			
Inpatient	-	20,193	
Outpatient	-	245	
Total	**-**	**20,438**	
MEDICAID			
Medicaid (# of patients) **	**2014**	**2015**	
Inpatient	47	326	
Out Patient Visits	8	155	
Total	55	481	
Medicaid (revenue) **			
Inpatient	1,554,612	10,774,800	
Outpatient	11,352	69,750	
Total	**1,565,964**	**10,844,550**	

CHARITY CARE			
	2014	**2015**	
Net Patient Revenue			
Amount of Charity Care (charges)	-	20,438	
Cost of Charity Care	-	20,438	

2014 is for the period of time November 3, 2014 thru December 31, 2014

** from filed Medicaid Cost Report

ATTACHMENT-40