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NOV 25 2014

HEALTH FACILITIES &  
SERVICES REVIEW BOARD



November 24, 2014

Ms. Courtney Avery, Administrator  
Illinois Health Facilities & Services Review Board  
525 W. Jefferson Street, 2<sup>nd</sup> Floor  
Springfield, IL. 62761

**Re: Opposition to Project 14-046**

Dear Ms. Avery:

I am writing on behalf of St. Mary's Decatur to oppose the above referenced application filed by Decatur Memorial Hospital ("Decatur Memorial") to establish a 20 bed Acute Mental Illness ("AMI") unit. It will be duplicative of services we already offer at our hospital, also in Decatur, and will negatively impact us. Decatur Memorial's proposed 20 bed AMI unit is unnecessary and unsupported by any physician referrals letters, as required by Health Facilities and Services Review Board rules.

St. Mary's operates a 56 bed AMI unit. In 2013 the utilization of the unit was 73.7%, which is not at State Board target utilization. The unit has capacity to treat additional patients. Also, the unit provides care to geriatric patients. The Decatur Memorial application states that of St. Mary's 56 AMI beds only 14 are dedicated to geriatric psychiatric services. While this is currently true, St. Mary's can re-allocate more beds to geriatric patients as needed. The HFSRB rules do not distinguish between services/beds as relates to adult, geriatric or pediatric psychiatric services. Certainly the Hospital will re-allocate some of its current psychiatric beds to accommodate patients age 65 or older, if the need is present.

With this said, I would like to point out some concerns about the application itself. They are as follows:

- The application requests approval for an AMI service per the Board's rules. While the applicant states its services will be limited to geriatric patients, there is nothing that would prevent the applicant, once approved, from treating all ages in the unit.
- The application states architects drawings are "N/A". However, the majority of the costs for the project are construction costs (for modernization) and Attachment 7 refers to architect/engineering fees. Further, there are specific IDPH design standards for AMI units, so it is likely the applicant is working with an architect. Thus, the applicant should note what stage of drawings the design is in.
- In the text of the application there is a statement that there is a need for beds in the area, even with the addition of the proposed 20 beds. This is misleading. The purported need is based on the applicant's calculation. In fact, there is an excess of 78 AMI beds in Health Service Area 4, per HFSRB need calculation.
- The alternatives section of the application contains no cost information for the alternatives considered, as required by HFSRB rules.

- The application contains no certified referral letters, as required by HFSRB rules. In looking at past applications to establish AMI units, the applicants provided referral letter. Decatur Memorial simply states that because it does not have a psychiatric service, it cannot provide referral letters. This is inaccurate and unacceptable. First, Decatur Memorial has two psychiatrists on staff. Either they or internists or ED physicians who see patients that require psychiatric services could provide referral letters. The application is devoid of any evidence supporting utilization of the unit at State Board target, because it has no referral letters indicating any physician will refer patients to Decatur Memorial. It also begs the question of whether these physicians (particularly the psychiatrists on staff) are currently referring to St. Mary's in Decatur, which precludes an analysis of true impact on St. Mary's should the Decatur Memorial application be approved.

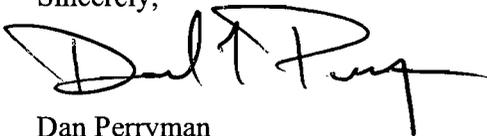
In summary, the application is proposing a service in an area with a significant number of excess beds – there is no need. In addition, the application proposes services that are duplicative of services in the same town, just minutes away from the applicant's hospital. Further, the service is duplicative of other area hospitals' services in the area. There is ample capacity to address the patient population Decatur Memorial references (albeit without any physician referral letters to support same). The application provides no referral letters as required and/or evidence that in fact the applicant will achieve target utilization within two years as required.

If necessary, the HFSRB has St. Mary's commitment to re-allocate some of its 56 AMI beds to serve patients 65 and older, if there is a need in the future for same.

As a result of all of the above, I urge you to deny Decatur Memorial's request to establish an additional AMI unit in Decatur.

Thank you.

Sincerely,



Dan Perryman  
President and Chief Executive Officer  
St. Mary's Decatur  
Hospital Sister Health System

cc: Clare C. Ranalli, McDermott Will & Emery