

**ILLINOIS HEALTH FACILITIES AND SERVICES REVIEW BOARD  
APPLICATION FOR PERMIT**

**ORIGINAL****SECTION I. IDENTIFICATION, GENERAL INFORMATION, AND CERTIFICATION****RECEIVED**

JUL 16 2015

15-032

**This Section must be completed for all projects.****Facility/Project Identification****HEALTH FACILITIES &  
SERVICES REVIEW BOARD**

Facility Name: Morris Dialysis		
Street Address: 180 East Waverly Street		
City and Zip Code: Morris, Illinois 60450		
County: Grundy	Health Service Area: 09	Health Planning Area: 09

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

Exact Legal Name: DaVita HealthCare Partners Inc.
Address: 2000 16 <sup>th</sup> Street, Denver, CO 80202
Name of Registered Agent: Illinois Corporation Service Company
Name of Chief Executive Officer: Kent Thiry
CEO Address: 2000 16 <sup>th</sup> Street, Denver, CO 80202
Telephone Number: (303) 405-2100

**Type of Ownership of Applicant/Co-Applicant**

<input type="checkbox"/> Non-profit Corporation	<input type="checkbox"/> Partnership
<input checked="" type="checkbox"/> For-profit Corporation	<input type="checkbox"/> Governmental
<input type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Sole Proprietorship
	<input type="checkbox"/> 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.

**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: Tim Tincknell
Title: Administrator
Company Name: DaVita HealthCare Partners Inc.
Address: 1333 North Kingsbury Street, Suite 305, Chicago, Illinois 60642
Telephone Number: 312-649-9289
E-mail Address: timothy.tincknell@davita.com
Fax Number: 866-586-3214

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

Name: Ronny Philip
Title: Regional Operations Director
Company Name: DaVita HealthCare Partners Inc.
Address: 13155 South LaGrange Road, Orland Park, Illinois 60462-1162
Telephone Number: 708-923-0928
E-mail Address: ronny.philip@davita.com
Fax Number: 855-871-6348

**ILLINOIS HEALTH FACILITIES AND SERVICES REVIEW BOARD  
APPLICATION FOR PERMIT**

**SECTION I. IDENTIFICATION, GENERAL INFORMATION, AND CERTIFICATION**

**This Section must be completed for all projects.**

**Facility/Project Identification**

Facility Name: Morris Dialysis		
Street Address: 180 East Waverly Street		
City and Zip Code: Morris, Illinois 60450		
County: Grundy	Health Service Area: 09	Health Planning Area: 09

**Applicant /Co-Applicant Identification**

**[Provide for each co-applicant [refer to Part 1130.220].**

Exact Legal Name: Total Renal Care Inc.
Address: 2000 16 <sup>th</sup> Street, Denver, CO 80202
Name of Registered Agent: Illinois Corporation Service Company
Name of Chief Executive Officer: Kent Thiry
CEO Address: 2000 16 <sup>th</sup> Street, Denver, CO 80202
Telephone Number: (303) 405-2100

**Type of Ownership of Applicant/Co-Applicant**

<input type="checkbox"/> Non-profit Corporation	<input type="checkbox"/> Partnership
<input checked="" type="checkbox"/> For-profit Corporation	<input type="checkbox"/> Governmental
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**Primary Contact**

**[Person to receive ALL correspondence or inquiries]**

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Company Name: DaVita HealthCare Partners Inc.
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**Additional Contact**

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

Name: Ronny Philip
Title: Regional Operations Director
Company Name: DaVita HealthCare Partners Inc.
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Telephone Number: 708-923-0928
E-mail Address: ronny.philip@davita.com
Fax Number: 855-871-6348

**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: Charles Sheets
Title: Attorney
Company Name: Polsinelli PC
Address: 161 North Clark Street, Suite 4200, Chicago, Illinois 60601
Telephone Number: 312-873-3605
E-mail Address: csheets@polsinelli.com
Fax Number: 312-873-3793

**Site Ownership**

[Provide this information for each applicable site]

Exact Legal Name of Site Owner: Arthur F. Hornsby
Address of Site Owner: 815 East Chapin Street, Morris, Illinois 60450
Street Address or Legal Description of Site: OF THE CITY OF MORRIS, COUNTY OF GRUNDY, STATE OF ILLINOIS, THE FOLLOWING DESCRIBED REAL ESTATE, TO-WIT:  LOT 22 OF ROSEMAN'S SUBDIVISION OF 95.32 ACRES OF THE NORTHEAST QUARTER OF SECTION 4, TOWNSHIP 33 NORTH, RANGE 7 EAST OF THE THIRD PRINCIPLE MERIDIAN, IN THE CITY OF MORRIS, IN GRUNDY COUNTY, ILLINOIS.
APPEND DOCUMENTATION AS <u>ATTACHMENT-2</u> , 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: Total Renal Care Inc.
Address: 2000 16 <sup>th</sup> Street, Denver, CO 80202
<input type="checkbox"/> Non-profit Corporation <input type="checkbox"/> Partnership <input checked="" type="checkbox"/> For-profit Corporation <input type="checkbox"/> Governmental <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Other
<ul style="list-style-type: none"> <li>o Corporations and limited liability companies must provide an Illinois Certificate of Good Standing.</li> <li>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.</li> <li>o <b>Persons with 5 percent or greater interest in the licensee must be identified with the % of ownership.</b></li> </ul>
APPEND DOCUMENTATION AS <u>ATTACHMENT-3</u> , 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](http://www.FEMA.gov) or [www.illinoisfloodmaps.org](http://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.

DaVita HealthCare Partners Inc. and Total Renal Care Inc. (the "Applicants") seek authority from the Illinois Health Facilities and Services Review Board (the "Board") to discontinue their existing 9-station dialysis facility at 1551 Creek Drive, Morris, Illinois 60450 and establish a 12-station dialysis facility at 180 East Waverly Street, Morris, Illinois 60450 (the "Replacement Facility"). The proposed dialysis facility will include approximately 5,854 gross square feet of clinical space and 846 gross square feet of non-clinical space for a total of 6,700 gross rentable square feet.

This project has been classified as substantive because it involves the establishment of a health care facility.

**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.

<b>Project Costs and Sources of Funds</b>			
<b>USE OF FUNDS</b>	<b>CLINICAL</b>	<b>NONCLINICAL</b>	<b>TOTAL</b>
Preplanning Costs			
Site Survey and Soil Investigation			
Site Preparation			
Off Site Work			
New Construction Contracts			
Modernization Contracts	\$1,010,000	\$146,000	\$1,156,000
Contingencies	\$60,000	\$10,000	\$70,000
Architectural/Engineering Fees	\$93,000	\$14,000	\$107,000
Consulting and Other Fees	\$94,000	\$13,500	\$107,500
Movable or Other Equipment (not in construction contracts)	\$295,585	\$57,492	\$353,077
Bond Issuance Expense (project related)			
Net Interest Expense During Construction (project related)			
Fair Market Value of Leased Space or Equipment	\$623,000	\$89,780	\$712,780
Other Costs To Be Capitalized (Net Book Value of Existing Equipment)	\$127,286	\$0	\$127,286
Acquisition of Building or Other Property (excluding land)			
<b>TOTAL USES OF FUNDS</b>	<b>\$2,302,871</b>	<b>\$330,772</b>	<b>\$2,633,643</b>
<b>SOURCE OF FUNDS</b>	<b>CLINICAL</b>	<b>NONCLINICAL</b>	<b>TOTAL</b>
Cash and Securities	\$1,552,585	\$240,992	\$1,793,577
Pledges			
Gifts and Bequests			
Bond Issues (project related)			
Mortgages			
Leases (fair market value)	\$623,000	\$89,780	\$712,780
Governmental Appropriations			
Grants			
Other Funds and Sources	\$127,286	\$0	\$127,286
<b>TOTAL SOURCES OF FUNDS</b>	<b>\$2,302,871</b>	<b>\$330,772</b>	<b>\$2,633,643</b>
<b>NOTE: ITEMIZATION OF EACH LINE ITEM MUST BE PROVIDED AT ATTACHMENT-7, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.</b>			

**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	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Purchase Price: \$ _____		
Fair Market Value: \$ _____		

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 \$ \$0 \_\_\_\_\_.

**Project Status and Completion Schedules**

<b>For facilities in which prior permits have been issued please provide the permit numbers.</b>
Indicate the stage of the project's architectural drawings:
<input type="checkbox"/> None or not applicable <input type="checkbox"/> Preliminary <input checked="" type="checkbox"/> Schematics <input type="checkbox"/> Final Working
Anticipated project completion date (refer to Part 1130.140):    April 30, 2017
Indicate the following with respect to project expenditures or to obligation (refer to Part 1130.140):
<input type="checkbox"/> Purchase orders, leases or contracts pertaining to the project have been executed. <input type="checkbox"/> Project obligation is contingent upon permit issuance. Provide a copy of the contingent "certification of obligation" document, highlighting any language related to CON Contingencies <input checked="" type="checkbox"/> Project obligation will occur after permit issuance.
<b>APPEND DOCUMENTATION AS ATTACHMENT-8, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.</b>

**State Agency Submittals**

Are the following submittals up to date as applicable:
<input type="checkbox"/> Cancer Registry <input type="checkbox"/> APORS <input checked="" type="checkbox"/> All formal document requests such as IDPH Questionnaires and Annual Bed Reports been submitted <input checked="" type="checkbox"/> All reports regarding outstanding permits
<b>Failure to be up to date with these requirements will result in the application for permit being deemed incomplete.</b>

**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.**

Dept. / Area	Cost	Gross Square Feet		Amount of Proposed Total Gross Square Feet That Is:			
		Existing	Proposed	New Const.	Modernized	As Is	Vacated Space
<b>REVIEWABLE</b>							
Medical Surgical							
Intensive Care							
Diagnostic Radiology							
MRI							
Total Clinical							
<b>NON REVIEWABLE</b>							
Administrative							
Parking							
Gift Shop							
Total Non-clinical							
<b>TOTAL</b>							

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**.

<b>FACILITY NAME:</b>		<b>CITY:</b>			
<b>REPORTING PERIOD DATES:</b>		<b>From:</b>	<b>to:</b>		
<b>Category of Service</b>	<b>Authorized Beds</b>	<b>Admissions</b>	<b>Patient Days</b>	<b>Bed Changes</b>	<b>Proposed Beds</b>
Medical/Surgical					
Obstetrics					
Pediatrics					
Intensive Care					
Comprehensive Physical Rehabilitation					
Acute/Chronic Mental Illness					
Neonatal Intensive Care					
General Long Term Care					
Specialized Long Term Care					
Long Term Acute Care					
Other (identify)					
<b>TOTALS:</b>					

**CERTIFICATION**

The application must be signed by the authorized representative(s) of the applicant entity. The authorized representative(s) are:

- o in the case of a corporation, any two of its officers or members of its Board of Directors;
- o in the case of a limited liability company, any two of its managers or members (or the sole manager or member when two or more managers or members do not exist);
- o 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);
- o in the case of estates and trusts, two of its beneficiaries (or the sole beneficiary when two or more beneficiaries do not exist); and
- o in the case of a sole proprietor, the individual that is the proprietor.

This Application for Permit is filed on the behalf of DaVita HealthCare Partners Inc.\* 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

Arturo Sida  
\_\_\_\_\_  
PRINTED NAME

Assistant Corporate Secretary  
\_\_\_\_\_  
PRINTED TITLE

  
\_\_\_\_\_  
SIGNATURE

Michael D. Staffieri  
\_\_\_\_\_  
PRINTED NAME

Chief Operating Officer, Kidney Care  
\_\_\_\_\_  
PRINTED TITLE

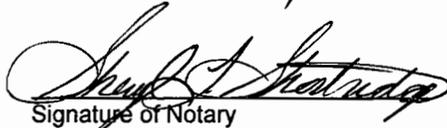
Notarization:  
Subscribed and sworn to before me  
this \_\_\_\_\_ day of \_\_\_\_\_

\_\_\_\_\_  
Signature of Notary

Seal

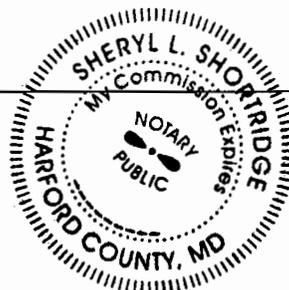
*See Attached*

Notarization:  
Subscribed and sworn to before me  
this 11<sup>th</sup> day of May

  
\_\_\_\_\_  
Signature of Notary

Seal

\*Insert EXACT legal name of the applicant



A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California

County of Los Angeles

On May 18, 2015 before me, Kimberly Ann K. Burgo, Notary Public  
(here insert name and title of the officer)

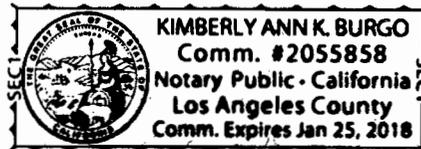
personally appeared \*\* Arturo Sida \*\*

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

*Kimberly Ann K. Burgo*  
Signature



**OPTIONAL INFORMATION**

Law does not require the information below. This information could be of great value to any person(s) relying on this document and could prevent fraudulent and/or the reattachment of this document to an unauthorized document(s)

**DESCRIPTION OF ATTACHED DOCUMENT**

Title or Type of Document: Certificate re CON Application (Morris Dialysis)  
Document Date: May 18, 2015 Number of Pages: 1 (one)  
Signer(s) if Different Than Above: \_\_\_\_\_  
Other Information: \_\_\_\_\_

**CAPACITY(IES) CLAIMED BY SIGNER(S)**

Signer's Name(s): \_\_\_\_\_

- Individual
- Corporate Officer

\_\_\_\_\_  
(Title(s))

- Partner
- Attorney-in-Fact
- Trustee
- Guardian/Conservator
- Other: \_\_\_\_\_

Assistant Corporate Secretary

**SIGNER IS REPRESENTING:** Name of Person or Entity DaVita HealthCare Partners Inc.

**CERTIFICATION**

The application must be signed by the authorized representative(s) of the applicant entity. The authorized representative(s) are:

- o in the case of a corporation, any two of its officers or members of its Board of Directors;
- o in the case of a limited liability company, any two of its managers or members (or the sole manager or member when two or more managers or members do not exist);
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- o in the case of a sole proprietor, the individual that is the proprietor.

**This Application for Permit is filed on the behalf of Total Renal Care Inc.\* 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

Arturo Sida  
\_\_\_\_\_  
PRINTED NAME

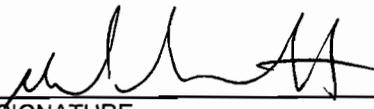
Assistant Corporate Secretary  
\_\_\_\_\_  
PRINTED TITLE

Notarization:  
Subscribed and sworn to before me  
this \_\_\_\_\_ day of \_\_\_\_\_

\_\_\_\_\_  
Signature of Notary

Seal

*See Attached*

  
\_\_\_\_\_  
SIGNATURE

Michael D. Staffieri  
\_\_\_\_\_  
PRINTED NAME

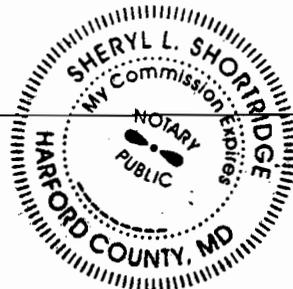
Chief Operating Officer, Kidney Care  
\_\_\_\_\_  
PRINTED TITLE

Notarization:  
Subscribed and sworn to before me  
this 11<sup>th</sup> day of May, 2015

  
\_\_\_\_\_  
Signature of Notary

Seal

\*Insert EXACT legal name of the applicant



A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California

County of Los Angeles

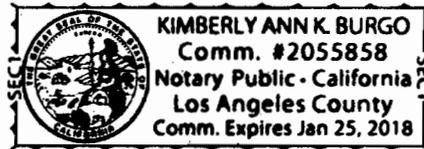
On May 18, 2015 before me, Kimberly Ann K. Burgo, Notary Public  
(here insert name and title of the officer)

personally appeared \*\* Arturo Sida \*\*

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal  
*Kimberly Ann K. Burgo*  
Signature



**OPTIONAL INFORMATION**

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Other Information: \_\_\_\_\_

**CAPACITY(IES) CLAIMED BY SIGNER(S)**

Signer's Name(s):

- Individual
- Corporate Officer

\_\_\_\_\_  
(Title(s))

- Partner
- Attorney-in-Fact
- Trustee
- Guardian/Conservator
- Other: Assistant Corporate Secretary

**SIGNER IS REPRESENTING:** Name of Person or Entity Total Renal Care, Inc.

**SECTION II. DISCONTINUATION**

This Section is applicable to any project that involves discontinuation of a health care facility or a category of service. **NOTE:** If the project is solely for discontinuation and if there is no project cost, the remaining Sections of the application are not applicable.

**Criterion 1110.130 - Discontinuation**

READ THE REVIEW CRITERION and provide the following information:

**GENERAL INFORMATION REQUIREMENTS**

1. Identify the categories of service and the number of beds, if any that is to be discontinued.
2. Identify all of the other clinical services that are to be discontinued.
3. Provide the anticipated date of discontinuation for each identified service or for the entire facility.
4. Provide the anticipated use of the physical plant and equipment after the discontinuation occurs.
5. Provide the anticipated disposition and location of all medical records pertaining to the services being discontinued, and the length of time the records will be maintained.
6. For applications involving the discontinuation of an entire facility, certification by an authorized representative that all questionnaires and data required by HFSRB or DPH (e.g., annual questionnaires, capital expenditures surveys, etc.) will be provided through the date of discontinuation, and that the required information will be submitted no later than 60 days following the date of discontinuation.

**REASONS FOR DISCONTINUATION**

The applicant shall state the reasons for discontinuation and provide data that verifies the need for the proposed action. See criterion 1110.130(b) for examples.

**IMPACT ON ACCESS**

1. Document that the discontinuation of each service or of the entire facility will not have an adverse effect upon access to care for residents of the facility's market area.
2. Document that a written request for an impact statement was received by all existing or approved health care facilities (that provide the same services as those being discontinued) located within 45 minutes travel time of the applicant facility.
3. Provide copies of impact statements received from other resources or health care facilities located within 45 minutes travel time, that indicate the extent to which the applicant's workload will be absorbed without conditions, limitations or discrimination.

APPEND DOCUMENTATION AS **ATTACHMENT-10**, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

### 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?

**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?
YEAR 1					
YEAR 2					

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

**UNFINISHED OR SHELL SPACE:**

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:**

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.

**G. Criterion 1110.1430 - In-Center Hemodialysis**

1. Applicants proposing to establish, expand and/or modernize In-Center Hemodialysis must submit the following information:
2. Indicate station capacity changes by Service: Indicate # of stations changed by action(s):

Category of Service	# Existing Stations	# Proposed Stations
<input checked="" type="checkbox"/> In-Center Hemodialysis	9	12

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

APPLICABLE REVIEW CRITERIA	Establish	Expand	Modernize
1110.1430(b)(1) - Planning Area Need - 77 Ill. Adm. Code 1100 (formula calculation)	X		
1110.1430(b)(2) - Planning Area Need - Service to Planning Area Residents	X	X	
1110.1430(b)(3) - Planning Area Need - Service Demand - Establishment of Category of Service	X		
1110.1430(b)(4) - Planning Area Need - Service Demand - Expansion of Existing Category of Service		X	
1110.1430(b)(5) - Planning Area Need - Service Accessibility	X		
1110.1430(c)(1) - Unnecessary Duplication of Services	X		
1110.1430(c)(2) - Maldistribution	X		
1110.1430(c)(3) - Impact of Project on Other Area Providers	X		
1110.1430(d)(1) - Deteriorated Facilities			X
1110.1430(d)(2) - Documentation			X
1110.1430(d)(3) - Documentation Related to Cited Problems			X
1110.1430(e) - Staffing Availability	X	X	
1110.1430(f) - Support Services	X	X	X
1110.1430(g) - Minimum Number of Stations	X		
1110.1430(h) - Continuity of Care	X		
1110.1430(j) - Assurances	X	X	X
<b>APPEND DOCUMENTATION AS <u>ATTACHMENT-26</u>, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.</b>			

4. Projects for relocation of a facility from one location in a planning area to another in the same planning area must address the requirements listed in subsection (a)(1) for the "Establishment of Services or Facilities", as well as the requirements in Section 1110.130 - "Discontinuation" and subsection 1110.1430(i) - "Relocation of Facilities".

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:**

\$1,793,577	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;
\$712,780 (FMV of Lease)	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;
\$127,286 (FMV of Existing Equipment)	g)	All Other Funds and Sources – verification of the amount and type of any other funds that will be used for the project.
\$2,633,643	<b>TOTAL FUNDS AVAILABLE</b>	

**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.

Provide Data for Projects Classified as:	Category A or Category B (last three years)			Category B (Projected)
<b>Enter Historical and/or Projected Years:</b>				
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	Mod.	Gross Sq. Ft. New	Circ.*	Gross Sq. Ft. Mod.	Circ.*	Const. \$ (A x C)	Mod. \$ (B x E)	
Contingency									
<b>TOTALS</b>									

\* 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			
<b>Total</b>			
Charity (cost in dollars)	Year	Year	Year
Inpatient			
Outpatient			
<b>Total</b>			

**MEDICAID**

Medicaid (# of patients)	Year	Year	Year
Inpatient			
Outpatient			
<b>Total</b>			
Medicaid (revenue)	Year	Year	Year
Inpatient			
Outpatient			
<b>Total</b>			

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.

**Section I, Identification, General Information, and Certification**  
**Applicants**

Certificates of Good Standing for DaVita HealthCare Partners Inc. and Total Renal Care, Inc. (collectively, the "Applicants" or "DaVita") are attached at Attachment – 1. Total Renal Care, Inc. is the operator of Morris Dialysis. Morris Dialysis is a trade name of Total Renal Care, Inc. and is not separately organized. As the person with final control over the operator, DaVita HealthCare Partners Inc. is named as an applicant for this CON application. DaVita HealthCare Partners Inc. does not do business in the State of Illinois. A Certificate of Good Standing for DaVita HealthCare Partners Inc. from the state of its incorporation, Delaware, is attached.

# Delaware

PAGE 1

*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DAVITA HEALTHCARE PARTNERS INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIFTEENTH DAY OF JULY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DAVITA HEALTHCARE PARTNERS INC." WAS INCORPORATED ON THE FOURTH DAY OF APRIL, A.D. 1994.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

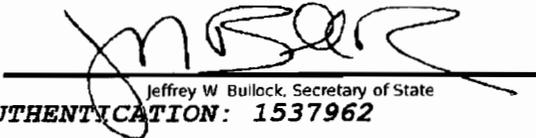
AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

2391269 8300

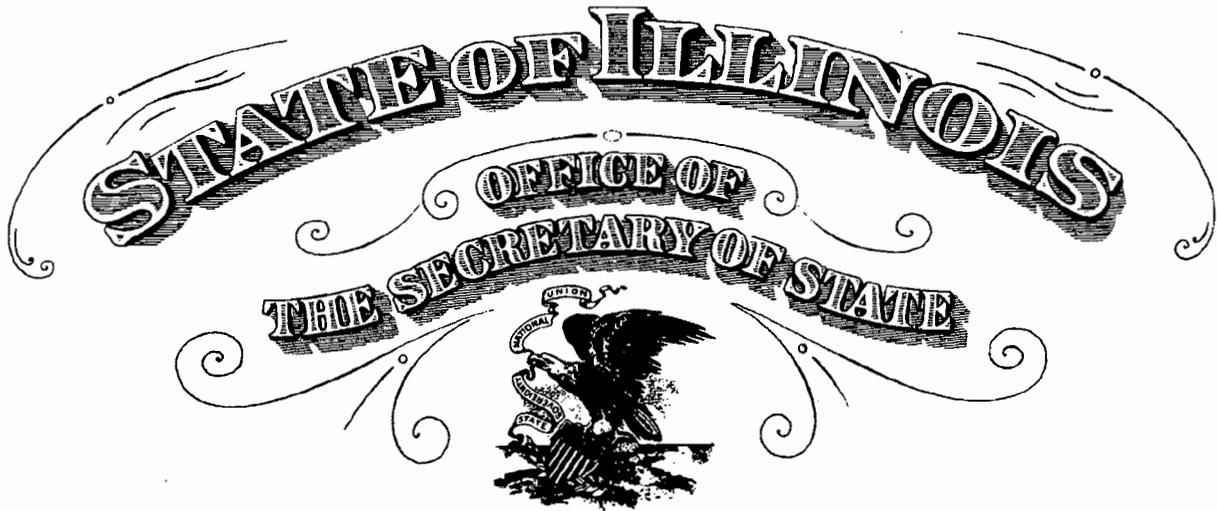
140958293

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)



  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 1537962

DATE: 07-15-14



**To all to whom these Presents Shall Come, Greeting:**

*I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that*

TOTAL RENAL CARE, INC., INCORPORATED IN CALIFORNIA AND LICENSED TO TRANSACT BUSINESS IN THIS STATE ON MARCH 10, 1995, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS A FOREIGN CORPORATION IN GOOD STANDING AND AUTHORIZED TO TRANSACT BUSINESS IN THE STATE OF ILLINOIS.



Authentication #: 1409000508

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

**In Testimony Whereof, I hereto set**  
*my hand and cause to be affixed the Great Seal of*  
*the State of Illinois, this 31ST*  
*day of MARCH A.D. 2014 .*

*Jesse White*

SECRETARY OF STATE

**Section I, Identification, General Information, and Certification**  
**Site Ownership**

The letter of intent between Arthur Hornsby and Total Renal Care, Inc. to lease the facility located at 180 East Waverly Street, Morris, Illinois 60450 is attached at Attachment – 2.



**JOHNSON CONTROLS REAL ESTATE SERVICES INC.**

A JOHNSON CONTROLS COMPANY

June 3, 2015

Mr. Shawn Hornsby  
Century 21 Coleman-Hornsby  
1802 N Division St #108  
Morris, IL 60450

**RE: LOI – 180 E Waverly St, Morris, IL 60450**

Dear Shawn:

Johnson Controls Real Estate Services, Inc. (“JCI”) has been exclusively authorized by Total Renal Care, Inc – a subsidiary of DaVita HealthCare Partners, Inc. (“DaVita”) to assist in securing a lease requirement. DaVita is a Fortune 500 company with approximately 2,000 locations across the US and revenues of approximately \$11.5 billion.

Below is the proposal outlining the terms and conditions wherein the Tenant is willing to lease the subject premises, with some modifications as the entirety of the then circumstances may require:

- PREMISES:** **180 E Waverly St, Morris, IL 60450**  
  
Lot 22 of Roseman’s Subdivision of 95.32 acres of the Northeast Quarter of Section 4, Township 33 North, Range 7 East of the Third Principal Meridian, in the City of Morris, in Grundy County, Illinois.
- TENANT:** Total Renal Care, Inc. or related entity to be named
- LANDLORD:** Arthur Hornsby
- SPACE REQUIREMENTS:** Approximately 6,700 square contiguous rentable square feet. Tenant shall have the right to measure space based on most recent BOMA standards.
- PRIMARY TERM:** Ten (10) years
- BASE RENT:** \$13.00 psf NNN Y1;  
Base rent for Y2 through Y10 will be the previous year’s base rent plus a cost of living increase. The cost of living increase to the base rent shall be made annually on the anniversary of the lease and shall be a percentage increase over the previous year’s base rent equal to the percentage increase in the Consumer Price Index, comparing the CPI for March before the anniversary date of this lease to the CPI for March one year earlier. The Consumer price index employed shall be the index as maintained by the Federal Bureau of Labor Statistics, Consumer Price index for All Urban Consumers, selected areas, all item index for the Chicago, Gary and Kenosha area. The cost of living increase shall be no greater than 5% in any given year.
- ADDITIONAL EXPENSES:** *Please provide an estimated annual cost per square foot for any and all additional operating expenses for which the Tenant will be responsible for paying including Taxes, Insurance and CAM.*

*Estimated to be \$1.50 psf.*

All utilities separately metered to Tenant and Tenant responsibility.

Landlord to limit the cumulative operating expense costs to \$1.50 psf in the first full lease year and no greater than 5% increases annually thereafter on controllable expense costs.

**LANDLORD'S MAINTENANCE:**

Landlord, at its sole cost and expense, shall be responsible for the structural and capitalized items (treated per GAAP standards) for the Property.

**POSSESSION AND RENT COMMENCEMENT:**

Landlord shall deliver Possession of the Premises to the Tenant upon the later of completion of Landlord's required work, (if any) mutual lease execution, or waiver of CON contingency. Rent Commencement shall be the earlier of six (6) months from Possession or the date each of the following conditions have occurred:

- a. Construction improvements within the Premises have been completed in accordance with the final construction documents (except for nominal punch list items); and
- b. A certificate of occupancy for the Premises has been obtained from the city or county; and
- c. Tenant has obtained all necessary licenses and permits to operate its business.

**LEASE FORM:**

Tenant's standard lease form.

**USE:**

The operation of an outpatient renal dialysis clinic, renal dialysis home training, aphaeresis services and similar blood separation and cell collection procedures, general medical offices, clinical laboratory, including all incidental, related and necessary elements and functions of other recognized dialysis disciplines which may be necessary or desirable to render a complete program of treatment to patients of Tenant and related office and administrative uses or for any other lawful purpose.

**PARKING:**

Tenant shall receive four (4) stalls per 1,000 rsf, and two (2) handicapped stalls or such greater number as is required by applicable law or regulation.

**BASE BUILDING:**

Landlord shall deliver to the Premises the Base Building improvements outlined below subject to Tenant's architect and project manager approval:

- 2" inch water supply;
- 4" inch sanitary sewer line.

*Tenant will otherwise take possession of the premises in its "as is" condition to be further defined in lease agreement.*

*Tenant will take possession of the premises in its "as is" condition and will have the opportunity to examine the premises and perform whatever test or inspections that they deem necessary to determine that the premises is acceptable.*

- TENANT IMPROVEMENTS:** None.
- OPTION TO RENEW:** Three, five (5) year options to renew the lease. Option period base rents shall be increased annually by the same cost of living increase method used for Years 1-10 with the same maximum increase of 5% in any given year.
- RIGHT OF FIRST OPPORTUNITY ON ADJACENT SPACE:** Tenant shall have the on-going right of first opportunity on any adjacent space that may become available during the initial term of the lease and any extension thereof, under the same terms and conditions of Tenant's existing lease.
- FAILURE TO DELIVER PREMISES:** If Landlord has not delivered possession of the premises to Tenant with all base building items substantially completed by ninety days (90) from the later of lease execution or waiver of CON contingency, Tenant may elect to receive one day of rent abatement for every day of delay beyond the delivery period.
- HOLDING OVER:** Tenant shall be obligated to pay 125% for the then current rate.
- TENANT SIGNAGE:** Tenant shall have the right to install building, monument and pylon signage at the Premises, subject to compliance with all applicable laws and regulations and Landlord approval. Landlord, at Landlord's expense, will furnish Tenant with any standard building directory signage.
- BUILDING HOURS:** Tenant requires building hours of 24 hours a day, 7 days a week.
- SUBLEASE/ASSIGNMENT:** Tenant will have the right at any time to sublease or assign its interest in this Lease to any majority owned subsidiaries or related entities of DaVita, Inc. without the consent of the Landlord, or to unrelated entities with Landlord reasonable approval.
- ROOF RIGHTS:** Tenant shall have the right to place a satellite dish on the roof at no additional fee.
- NON COMPETE:** Landlord agrees not to lease space to another dialysis provider within a five mile radius of the Premises.
- HVAC:** Existing units.
- DELIVERIES:** *Tenant will take deliveries from a common area alley behind the building.*
- OTHER CONCESSIONS:** None.
- SECURITY DEPOSIT:** None, in lieu of provided financials.
- GOVERNMENTAL COMPLIANCE:** Landlord shall represent and warrant to Tenant that Landlord, at Landlord's sole expense, will cause the Premises, common areas, the building and parking facilities to be in full compliance with any governmental laws, ordinances,

regulations or orders relating to, but not limited to, compliance with the Americans with Disabilities Act (ADA), and environmental conditions relating to the existence of asbestos and/or other hazardous materials, or soil and ground water conditions, and shall indemnify and hold Tenant harmless from any claims, liabilities and cost arising from environmental conditions not caused by Tenant(s).

**CERTIFICATE OF NEED:**

Tenant CON Obligation: Landlord and Tenant understand and agree that the establishment of any chronic outpatient dialysis facility in the State of Illinois is subject to the requirements of the Illinois Health Facilities Planning Act, 20 ILCS 3960/1 et seq. and, thus, the Tenant cannot establish a dialysis facility on the Premises or execute a binding real estate lease in connection therewith unless Tenant obtains a Certificate of Need (CON) permit from the Illinois Health Facilities and Services Review Board (HFSRB). Based on the length of the HFSRB review process, Tenant does not expect to receive a CON permit prior to six (6) months from lease execution. In light of the foregoing facts, the parties agree that they shall promptly proceed with due diligence to negotiate the terms of a definitive lease agreement and execute such agreement prior to approval of the CON permit provided, however, the lease shall not be binding on either party prior to approval of the CON permit and the lease agreement shall contain a contingency clause indicating that the lease agreement is not effective prior to CON permit approval. Assuming CON approval is granted, the effective date of the lease agreement shall be the first day of the calendar month following CON permit approval. In the event that the HFSRB does not award Tenant a CON permit to establish a dialysis center on the Premises within six (6) months from lease execution neither party shall have any further obligation to the other party with regard to the negotiations, lease, or Premises contemplated by this Letter of Intent.

**BROKERAGE FEE:**

Landlord recognizes as the Tenant's sole representative Johnson Controls Real Estate Services, Inc. and shall pay a brokerage fee equal to fifty-cents (\$0.50) per square foot per lease term year, 50% shall be due upon lease execution and waiver of CON contingency and 50% shall be due upon rent commencement. The Tenant shall retain the right to offset rent for failure to pay the brokerage fee.

**PLANS:**

The landlord has no site or construction drawings.

*Please submit your response to this Request for Proposal via e-mail to: [Matt.Gramlich@jci.com](mailto:Matt.Gramlich@jci.com)*

It should be understood that this LOI is subject to the terms of Exhibit A attached hereto. The information in this email is confidential and may be legally privileged. It is intended solely for the addressee. Access to this information by anyone but addressee is unauthorized.

Thank you for your time and consideration to partner with DaVita.

Sincerely,

Matthew J. Gramlich

Cc: DaVita Team Genesis Real Estate  
DaVita Regional Operational Leadership  
John Steffens, Johnson Controls Real Estate Services, Inc.

SIGNATURE PAGE

LETTER OF INTENT:

180 E Waverly St, Morris, IL 60450

AGREED TO AND ACCEPTED THIS 15<sup>th</sup> DAY OF JUNE 2015

By: Jenny Davis DVP

On behalf of Total Renal Care, a wholly owned subsidiary of DaVita Healthcare Partners, Inc.  
("Tenant")

AGREED TO AND ACCEPTED THIS 12<sup>th</sup> DAY OF JUNE 2015

By: Andrew Hornsby

Andrew F. Hornsby  
("Landlord")

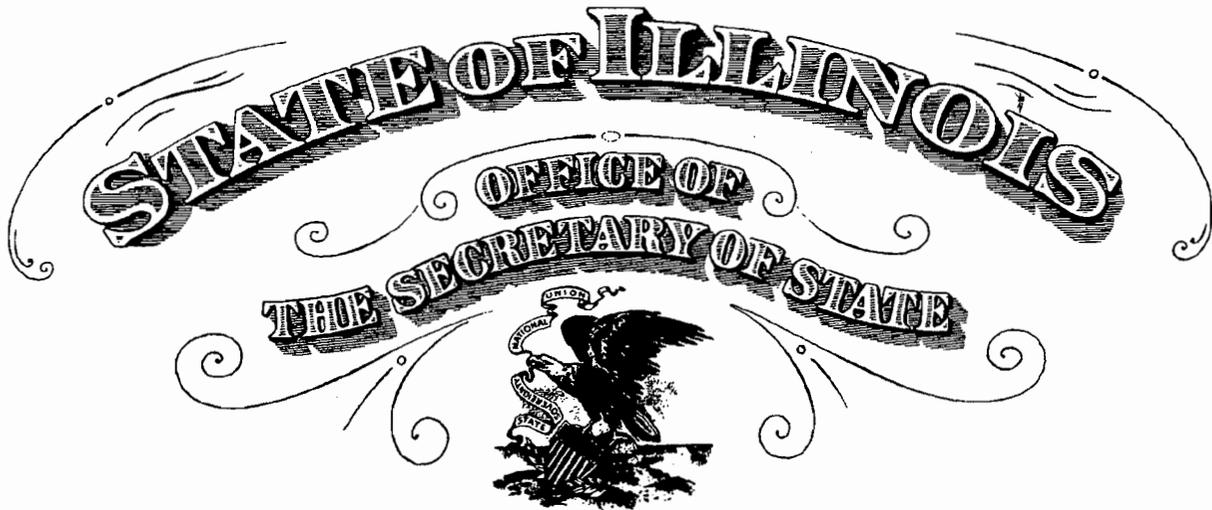
**EXHIBIT A**

**NON-BINDING NOTICE**

**NOTICE: THE PROVISIONS CONTAINED IN THIS LETTER OF INTENT ARE AN EXPRESSION OF THE PARTIES' INTEREST ONLY. SAID PROVISIONS TAKEN TOGETHER OR SEPERATELY ARE NEITHER AN OFFER WHICH BY AN "ACCEPTANCE" CAN BECOME A CONTRACT, NOR A CONTRACT. BY ISSUING THIS LETTER OF INTENT NEITHER TENANT NOR LANDLORD (OR JCI) SHALL BE BOUND TO ENTER INTO ANY (GOOD FAITH OR OTHERWISE) NEGOTIATIONS OF ANY KIND WHATSOEVER. TENANT RESERVES THE RIGHT TO NEGOTIATE WITH OTHER PARTIES. NEITHER TENANT, LANDLORD NOR JCI INTENDS ON THE PROVISIONS CONTAINED IN THIS LETTER OF INTENT TO BE BINDING IN ANY MANNER, AS THE ANALYSIS FOR AN ACCEPTABLE TRANSACTION WILL INVOLVE ADDITIONAL MATTERS NOT ADDRESSED IN THIS LETTER, INCLUDING, WITHOUT LIMITATION, THE TERMS OF ANY COMPETING PROJECTS, OVERALL ECONOMIC AND LIABILITY PROVISIONS CONTAINED IN ANY LEASE DOCUMENT AND INTERNAL APPROVAL PROCESSES AND PROCEDURES. THE PARTIES UNDERSTAND AND AGREE THAT A CONTRACT WITH RESPECT TO THE PROVISIONS IN THIS LETTER OF INTENT WILL NOT EXIST UNLESS AND UNTIL THE PARTIES HAVE EXECUTED A FORMAL, WRITTEN LEASE AGREEMENT APPROVED IN WRITING BY THEIR RESPECTIVE COUNSEL. JCI IS ACTING SOLELY IN THE CAPACITY OF SOLICITING, PROVIDING AND RECEIVING INFORMATION AND PROPOSALS AND NEGOTIATING THE SAME ON BEHALF OF OUR CLIENTS. UNDER NO CIRCUMSTANCES WHATSOEVER DOES JCI HAVE ANY AUTHORITY TO BIND OUR CLIENTS TO ANY ITEM, TERM OR COMBINATION OF TERMS CONTAINED HEREIN. THIS LETTER OF INTENT IS SUBMITTED SUBJECT TO ERRORS, OMISSIONS, CHANGE OF PRICE, RENTAL OR OTHER TERMS; ANY SPECIAL CONDITIONS IMPOSED BY OUR CLIENTS; AND WITHDRAWAL WITHOUT NOTICE. WE RESERVE THE RIGHT TO CONTINUE SIMULTANEOUS NEGOTIATIONS WITH OTHER PARTIES ON BEHALF OF OUR CLIENT. NO PARTY SHALL HAVE ANY LEGAL RIGHTS OR OBLIGATIONS WITH RESPECT TO ANY OTHER PARTY, AND NO PARTY SHOULD TAKE ANY ACTION OR FAIL TO TAKE ANY ACTION IN DETRIMENTAL RELIANCE ON THIS OR ANY OTHER DOCUMENT OR COMMUNICATION UNTIL AND UNLESS A DEFINITIVE WRITTEN LEASE AGREEMENT IS PREPARED AND SIGNED BY TENANT AND LANDLORD**

**Section I, Identification, General Information, and Certification**  
**Operating Identity/Licensee**

The Illinois Certificate of Good Standing for Total Renal Care, Inc. is attached at Attachment – 3.



**To all to whom these Presents Shall Come, Greeting:**

*I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that*

TOTAL RENAL CARE, INC., INCORPORATED IN CALIFORNIA AND LICENSED TO TRANSACT BUSINESS IN THIS STATE ON MARCH 10, 1995, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS A FOREIGN CORPORATION IN GOOD STANDING AND AUTHORIZED TO TRANSACT BUSINESS IN THE STATE OF ILLINOIS.



Authentication #: 1409000508

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

***In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 31ST day of MARCH A.D. 2014***

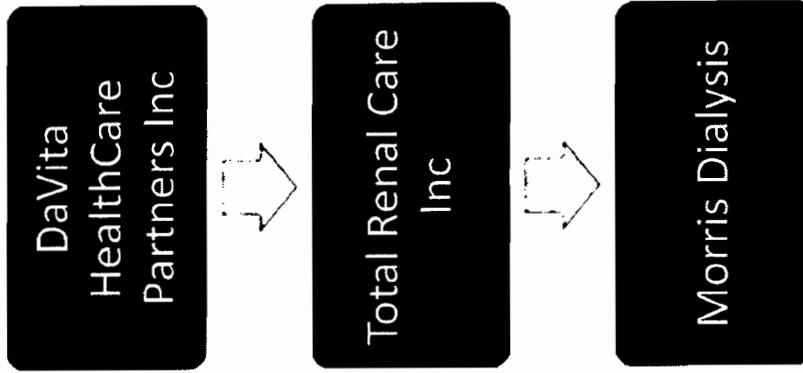
*Jesse White*

SECRETARY OF STATE

**Section I, Identification, General Information, and Certification**  
**Organizational Relationships**

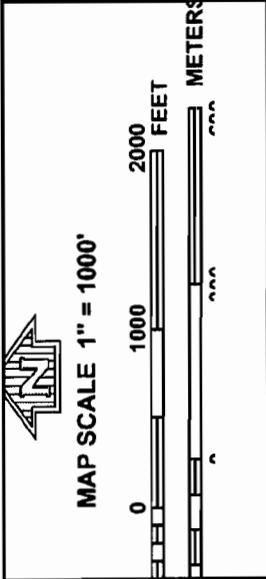
The organizational chart for DaVita HealthCare Partners Inc., Total Renal Care, Inc., and Morris Dialysis is attached at Attachment – 4.

Morris Dialysis Organizational Chart



**Section I, Identification, General Information, and Certification**  
**Flood Plain Requirements**

The site of the proposed dialysis facility complies with the requirements of Illinois Executive Order #2005-5. The proposed dialysis facility will be located at 180 East Waverly Street, Morris, Illinois 60450. As shown on the National Flood Insurance Program FIRM map attached at Attachment – 5, the site of the proposed dialysis facility is located outside of a flood plain.



**NFIP**

**PANEL 0110F**

**FIRM**  
**FLOOD INSURANCE RATE MAP**  
**GRUNDY COUNTY,**  
**ILLINOIS**  
**AND INCORPORATED AREAS**

**PANEL 110 OF 350**  
 (SEE MAP INDEX FOR FIRM PANEL LAYOUT)

CONTAINS:	NUMBER	PANEL	SUFFIX
GRUNDY COUNTY	170286	0110	F
MORRIS, CITY OF	170283	0110	F

**MAP NUMBER**  
**17063C0110F**

**EFFECTIVE DATE**  
**AUGUST 2, 2012**

**Federal Emergency Management Agency**

**NATIONAL FLOOD INSURANCE PROGRAM**

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.

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](http://www.msc.fema.gov)



**Section I, Identification, General Information, and Certification**  
**Historic Resources Preservation Act Requirements**

The Historic Preservation Act determination from the Illinois Historic Preservation Agency is attached at Attachment – 6.



**Illinois Historic  
Preservation Agency**

1 Old State Capitol Plaza, Springfield, IL 62701-1512

FAX (217) 524-7525

[www.illinoishistory.gov](http://www.illinoishistory.gov)

Grundy County

Morris

CON - Establish a 12-Station Dialysis Facility

180 E. Waverly St.

IHPA Log #025051815

June 4, 2015

Timothy Tincknell

DaVita Healthcare Partners, Inc.

1333 N. Kingsbury St., Suite 305

Chicago, IL 60642

Dear Mr. Tincknell:

This letter is to inform you that we have reviewed the information provided concerning the referenced project.

Our review of the records indicates that no historic, architectural or archaeological sites exist within the project area.

Please retain this letter in your files as evidence of compliance with Section 4 of the Illinois State Agency Historic Resources Preservation Act (20 ILCS 3420/1 et. seq.). This clearance remains in effect for two years from date of issuance. It does not pertain to any discovery during construction, nor is it a clearance for purposes of the Illinois Human Skeletal Remains Protection Act (20 ILCS 3440).

If you have any further questions, please contact me at 217/785-5031.

Sincerely,

Rachel Leibowitz, Ph.D.

Deputy State Historic

Preservation Officer

Attachment - 6

**Section I, Identification, General Information, and Certification**  
**Project Costs and Sources of Funds**

<b>Table 1120.110</b>			
<b>Project Cost</b>	<b>Clinical</b>	<b>Non-Clinical</b>	<b>Total</b>
Site Preparation			
Site Survey and Soil Investigation			
New Construction Contracts			
Modernization Contracts	\$1,010,000	\$146,000	\$1,156,000
Contingencies	\$60,000	\$10,000	\$70,000
Architectural/Engineering Fees	\$93,000	\$14,000	\$107,000
Consulting and Other Fees	\$94,000	\$13,500	\$107,500
Moveable and Other Equipment			
Communications	\$81,850	\$0	\$81,850
Water Treatment	\$131,575	\$0	\$131,575
Bio-Medical Equipment	\$8,885	\$0	\$8,885
Clinical Equipment	\$55,245	\$0	\$55,245
Clinical Furniture/Fixtures	\$18,030	\$0	\$18,030
Lounge Furniture/Fixtures	\$0	\$3,065	\$3,065
Storage Furniture/Fixtures	\$0	\$5,862	\$5,862
Business Office Fixtures	\$0	\$14,665	\$14,665
General Furniture/Fixtures	\$0	\$23,400	\$23,400
Signage	\$0	\$10,500	\$10,500
Total Moveable and Other Equipment	\$295,585	\$57,492	\$353,077
Fair Market Value of Leased Space	\$623,000	\$89,780	\$712,780
Other Costs to be Capitalized*	\$127,286	\$0	\$127,286
<b>Total Project Costs</b>	<b>\$2,302,871</b>	<b>\$330,772</b>	<b>\$2,633,643</b>

\*Net Book Value of Existing Equipment

**Section I, Identification, General Information, and Certification**  
**Project Status and Completion Schedules**

The Applicants anticipate project completion within 18 months of project approval.

Further, although the Letter of Intent attached at Attachment – 2 provides for project obligation to occur after permit issuance, the Applicants will begin negotiations on a definitive lease agreement for the facility, with the intent of project obligation being contingent upon permit issuance.

**Section I, Identification, General Information, and Certification  
Cost Space Requirements**

<b>Cost Space Table</b>							
<b>Dept. / Area</b>	<b>Cost</b>	<b>Gross Square Feet</b>		<b>Amount of Proposed Total Gross Square Feet That Is:</b>			
		<b>Existing</b>	<b>Proposed</b>	<b>New Const.</b>	<b>Modernized</b>	<b>As Is</b>	<b>Vacated Space</b>
<b>CLINICAL</b>							
ESRD	\$2,302,871		5,854		5,854		
<b>Total Clinical</b>	<b>\$2,302,871</b>		<b>5,854</b>		<b>5,854</b>		
<b>NON CLINICAL</b>							
Administration	\$330,772		846		846		
<b>Total Non-clinical</b>	<b>\$330,772</b>		<b>846</b>		<b>846</b>		
<b>TOTAL</b>	<b>\$2,633,643</b>		<b>6,700</b>		<b>6,700</b>		

**Section II, Discontinuation**  
**Criterion 1110.130(a), General**

1. The Applicants seek authority from the Health Facilities and Services Review Board (the "Board") to discontinue their existing 9-station dialysis facility at 1551 Creek Drive, Morris, Illinois 60450 (the "Existing Facility") and to establish a 12-station dialysis facility at 180 East Waverly Street, Morris, Illinois 60450 (the "Replacement Facility"). The Replacement Facility will be approximately 1.05 miles, or 2 minutes, from the Existing Facility.
2. No other clinical services will be discontinued as a result of this project.
3. Anticipated Discontinuation Date: April 30, 2017
4. The Applicants lease space for the Existing Facility from Keith W. Jaeschke, an individual, successor in interest to the original landlord, as Lessor. As a result, the Applicants will have no control over the use of the space after discontinuation of the Existing Facility.
5. All medical records will be transferred to the Replacement Facility.
6. This project is a relocation of the Existing Facility and not a discontinuation in its entirety. Therefore, this criterion does not apply.

**Section II, Discontinuation**  
**Criterion 1110.130(b), Reasons for Discontinuation**

The Existing Facility was acquired by DaVita in July of 2012 and is in its sixteenth year of operation. It is suboptimal for patients and staff, and in need of repair. Due to patient safety, privacy, and functionality concerns, the outdated Existing Facility simply cannot accommodate the existing and future patients' needs.

The Existing Facility is located at 1551 Creek Drive in Morris, Illinois. As shown on the flood plain map, attached at Attachment – 10A, the Existing Facility is located near the East Fork Nettle Creek flood plain. The parking lot frequently floods, even with small amounts of rain, and is in a continuous state of disrepair. Extended periods of moisture on the lot's surface create added fall risks for patients, who are often elderly, suffer multiple co-morbidities and/or rely on assistive devices. Relocating to a site with minimal flooding risks will improve patient safety.

The Existing Facility is not equipped to adequately handle deliveries of supplies. The rear door is a single door, not a double door. Drivers must break down most deliveries to fit through the single door and either park near the back door of the facility, blocking an emergency exit, or on the street, making multiple trips to cart in deliveries.

Additionally, the design and size of the Existing Facility creates operational and logistical inefficiencies. While the Existing Facility houses 9 dialysis stations in 4,352 GSF, or 483.6 GSF per station, which meets the Board's standard for in-center hemodialysis facilities of this size, the space is inadequate to meet the facilities storage needs. The dedicated storage area is insufficient for storage of medical and office supplies, requiring some supplies to be stored in the BioMed and mechanical rooms, which have inadequate space to store supplies, creating a risk supplies stored on overloaded countertops and shelves could fall on staff. The Existing Facility has only one restroom for up to 2 male and 7 female teammates. There is no dedicated conference room. The conference room is a multi-purpose room as it serves not only as the conference room but as the teammates' break room, and the social worker's or dietitian's office when both are present at the facility on the same day. If a meeting is taking place, teammates have nowhere to eat or relax during their breaks. Additionally, the break room is an inappropriate setting for plan of care meetings, near the teammates' food, sink, and microwave. The conference room cannot accommodate team meetings with the Medical Director. As a result, teammates frequently block the doorway during these meetings, creating a fire hazard. Patient privacy concerns also exist. The treatment floor is compact, making it difficult for nurses to have telephone conversations with medical providers without being overheard. The Administrative Assistant's office, which also serves as the reception desk has no window, just an opening in the wall between her office and the waiting area, creating additional privacy concerns. Flooring, believed to be original, is breaking up and has seams splitting throughout the clinic, causing a potential tripping hazard for patients and staff. The scale, which was built into the floor and takes up the entire width of the hallway, creates a safety concern whenever it is used by a patient in a large wheelchair. The wheelchair blocks the path to the waiting area, and in the event of an emergency, prevents the use of an exit. Restricted waiting area space also means there is no wheelchair storage in the clinic.

The site of the Replacement Facility will be in a shopping center, approximately 1.05 miles away. Patient safety will be enhanced, as the parking lot is less prone to flooding, reducing the risk of patient falls. The increased size of the Replacement Facility will allow for a larger conference room, a dedicated break room for teammates, separate offices for the social worker and dietitian, a larger treatment floor, adequate restroom facilities for teammates, and proper storage for all medical and office supplies. Thus, the Applicants must relocate to a modern facility with enhanced accommodations and improved facilities to better provide for current and future ESRD patient needs.

**Section II, Discontinuation**

**Criterion 1110.130(c), Impact on Access**

1. The relocation of the Existing Facility will not negatively impact access to care. To the contrary, it will improve access to life sustaining dialysis to DaVita's ESRD patient population by making it more accessible to patients and their families throughout the Morris area. The Existing Facility is operating at 70.4%. With the impending discontinuation of FMC Morris in 2016, additional stations will be needed to treat existing and future ESRD patients residing in Morris and the surrounding area. All existing patients and at least 9 displaced patients from FMC Morris are expected to transfer to the Replacement Facility. Additionally, Dr. Kravets anticipates 51 of her pre-ESRD patients will initiate dialysis within two years of project completion. Accordingly, the Replacement Facility is necessary to ensure the residents of Morris have access to life sustaining dialysis.
2. Documentation of the Applicant's request for an impact statement, which was sent to all in-center hemodialysis facilities within 45 minutes normal travel time of the Existing Facility, is attached hereto. A list of facilities located within 45 minutes normal travel time is attached at Attachment – 10. See Appendices – 1 and 2 for documentation that DaVita sent requests for an impact statement to all in-center hemodialysis facilities within 45 minutes travel time.
3. To date, the Applicants received two inquiries / impact statements regarding this project; one from Fox Valley Dialysis and one from Sun Health Dialysis, both of which follow this page. Neither facility will be negatively impacted by the relocation of Morris Dialysis.

## Timothy Tincknell

---

**From:** Timothy Tincknell  
**Sent:** Monday, May 18, 2015 12:33 PM  
**To:** 'Cal Ganong'  
**Cc:** Jackie Hames; hrubinstein@gmail.com  
**Subject:** RE: Morris Dialysis Relocation

180 East Waverly Street, Morris, IL 60450

*Tim Tincknell, FACHE*  
*Administrator*  
*DaVita HealthCare Partners Inc*  
*1333 N Kingsbury St, Suite 305*  
*Chicago, IL 60642*  
*312-649-9289 (office)*  
*773-255-7010 (cell)*  
*866-586-3214 (e-fax)*  
[timothy.tincknell@davita.com](mailto:timothy.tincknell@davita.com)

---

**From:** Cal Ganong [<mailto:Cal@renaissancemgmt.com>]  
**Sent:** Friday, May 15, 2015 11:47 AM  
**To:** Timothy Tincknell  
**Cc:** Jackie Hames; [hrubinstein@gmail.com](mailto:hrubinstein@gmail.com)  
**Subject:** Morris Dialysis Relocation

Dear Mr. Tincknell,

I am in receipt of your letter to Fox Valley Dialysis (FVD) regarding the proposal to relocate your unit- Morris Dialysis. As the management company for FVD and on their behalf, please provide me with the address of the proposed new site.

Thank you.

Calvin Ganong, CEO  
Renaissance Management Company  
1300 Waterford Drive  
Aurora, IL 60504  
630-851-1206 F  
[www.renaissancemgmt.com](http://www.renaissancemgmt.com)

IMPORTANT WARNING: This message is intended for the use of the person or entity to which it is addressed and may contain information that is privileged and confidential, the disclosure of which is governed by applicable law. If the reader of this message is not the intended recipient, or the employee or agent responsible to deliver it to the intended recipient, you are hereby notified that any dissemination, distribution or copying of this information is STRICTLY PROHIBITED. If you have received this message in error, please notify me immediately, and destroy the related message.

# Sun Health

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Bhuvan Chawla, MD  
Medical Director

Beata Kisiel, MD

**Services**  
Hemodialysis  
LDL Apheresis  
Dietary Counseling  
Social Services

**SunNephrology**

**Services**  
Chronic Kidney Disease Clinic  
Clinical Laboratory  
IV Infusion Therapy  
Medical Nutrition Therapy  
ADA Recognized-  
Diabetes Education Program

May 27, 2015

DaVita HealthCare Partners Inc,  
Attn: Tim Tincknell  
1333 North Kingsbury St. Suite 305  
Chicago, Illinois 60642

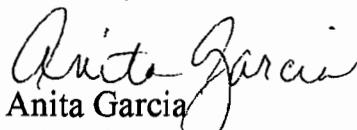
Dear Mr. Tincknell,

On behalf of Sun Health, Inc., I am writing to voice concern about your proposed relocation of DaVita Morris Dialysis, with its potential for adverse impact on access as well as its potential for duplication and maldistribution.

As you know, Fresenius has recently received Board approval to relate its facility away from Morris also.

Additionally, this relocation could have an adverse impact on Sun Health, which has already been adversely impacted on a number of occasions by duplication and maldistribution in its service area.

Sincerely,

  
Anita Garcia  
Administrator  
Sun Health, Inc.



2121 Oneida Street  
Suites 102-104  
Joliet, Illinois 60435  
Phone: 815.744.9300  
Fax: 815.744.9347  
Email: [info@Sunhealth.com](mailto:info@Sunhealth.com)  
Visit us:  
[www.eSunhealth.com](http://www.eSunhealth.com)

## Timothy Tincknell

---

**From:** Anita Garcia <A.Garcia@esunhealth.com>  
**Sent:** Friday, May 29, 2015 10:50 AM  
**To:** Timothy Tincknell  
**Subject:** RE: Sun Health inc/Relocation of Morris Dialysis

Hi,

Thanks for sharing that information, I really appreciate it. I am glad that patients will not have their access to treatment disrupted. Also, that this relocation remains in Morris does help ease any concerns for Sun Health.

Regards,  
Anita

---

**From:** Timothy Tincknell [<mailto:Timothy.Tincknell@davita.com>]  
**Sent:** Thursday, May 28, 2015 3:20 PM  
**To:** Anita Garcia  
**Subject:** RE: Sun Health inc/Relocation of Morris Dialysis

Ms. Garcia,

Thank you for your response. For the record, our proposed relocation of our existing facility is due primarily to aging facility concerns. We plan to stay in Morris and relocate just 1.05 miles from our present location. Sun Health will be just over **21** miles from our proposed relocation site. Please let me know if this additional information helps quell any concerns regarding an adverse impact on Sun Health.

Thank you,  
Tim

*Tim Tincknell, FACHE*  
*Administrator*  
*DaVita HealthCare Partners Inc*  
*1333 N Kingsbury St, Suite 305*  
*Chicago, IL 60642*  
*312-649-9289 (office)*  
*773-255-7010 (cell)*  
*866-586-3214 (e-fax)*  
[timothy.tincknell@davita.com](mailto:timothy.tincknell@davita.com)

---

**From:** Anita Garcia [<mailto:A.Garcia@esunhealth.com>]  
**Sent:** Thursday, May 28, 2015 3:07 PM  
**To:** Timothy Tincknell  
**Subject:** Sun Health inc/Relocation of Morris Dialysis

Please find the attached letter regarding the proposed relocation of Morris Dialysis Facility.

Thank you,

Anita Garcia  
Administrator  
Sun Health Inc.

**Section III, Project Purpose, Background and Alternatives – Information Requirements**  
**Criterion 1110.230, Project Purpose, Background and Alternatives**

Background of the Applicant

The Applicants are fit, willing and able, and have the qualifications, background and character to adequately provide a proper standard of health care services for the community. The proposed project involves the discontinuation of Morris Dialysis' existing 9-station facility and the establishment of a 12-station Replacement Facility located at 180 East Waverly Street, Morris, Illinois 60450 to better serve ESRD patients residing in and around Morris.

DaVita HealthCare Partners Inc. is a leading provider of dialysis services in the United States and is committed to innovation, improving clinical outcomes, compassionate care, education and empowering patients, and community outreach. A copy of DaVita's 2014 Community Care report, some of which is outlined below, details DaVita's commitment to quality, patient centric focus and community outreach and was previously included in the application for Proj. No. 15-025.

As referenced in the report, DaVita led the industry in quality, with 50 percent of its dialysis centers earning four or five stars in the federal Five-Star Ratings, compared to the 21 percent industry average. DaVita also led the industry in Medicare's Quality Incentive Program, ranking No. 1 in three out of four clinical measures and receiving the fewest penalties.

DaVita has taken on many initiatives to improve the lives of patients suffering from chronic kidney disease ("CKD") and end stage renal disease ("ESRD"). These programs include the Kidney Smart, IMPACT, CathAway, and transplant assistance programs. Information on the Kidney Smart, IMPACT and CathAway programs was previously included in the application for Proj. No. 15-025. Three recent press releases: "DaVita HealthCare Partners Concludes 16<sup>th</sup> Villagewide for 3,500 teammates," "DaVita HealthCare Partners Certified as Freedom-Centered Workplace by WorldBlu," and "DaVita HealthCare Partners Recognizes Military Appreciation Month" are attached at Attachment – 11A.

There are over 26 million patients with CKD and that number is expected to rise. Current data reveals troubling trends, which help explain the growing need for dialysis services:

- Between 1988-1994 and 2007-2012, the overall prevalence estimate for CKD rose from 12.0 to 13.6 percent. The largest relative increase, from 25.4 to 39.5 percent, was seen in those with cardiovascular disease.<sup>1</sup>
- Many studies have shown that diabetes, hypertension, cardiovascular disease, higher body mass index, and advancing age are associated with the increasing prevalence of CKD.<sup>2</sup>
- Nearly six times the number of new patients began treatment for ESRD in 2012 (approximately 115,000) versus 1980 (approximately 20,000).<sup>3</sup>
- Nearly eleven times more patients are now being treated for ESRD than in 1980 (approximately 637,000 versus approximately 60,000).<sup>4</sup>
- U.S. patients newly diagnosed with ESRD were 1 in 2,800 in 2011 versus 1 in 11,000 in 1980.<sup>5</sup>
- U.S. patients treated for ESRD were 1 in 526 in 2011 versus 1 in 3,400 in 1980.<sup>6</sup>

<sup>1</sup> US Renal Data System, USRDS 2014 Annual Data Report: Atlas of Chronic Kidney Disease and End-Stage Renal Disease in the United States, National Institutes of Health, National Institute of Diabetes and Digestive and Kidney Diseases, Bethesda, MD, 15 (2014).

<sup>2</sup> Id.

<sup>3</sup> Id. at 79

<sup>4</sup> Id.

<sup>5</sup> US Renal Data System, USRDS 2013 Annual Data Report: Atlas of Chronic Kidney Disease and End-Stage Renal Disease in the United States, National Institutes of Health, National Institute of Diabetes and Digestive and Kidney Diseases, Bethesda, MD, 160 (2013).

<sup>6</sup> Id.

- Increasing prevalence in the diagnosis of diabetes and hypertension, the two major causes of CKD; 44% of new ESRD cases have a primary diagnosis of diabetes; 28% have a primary diagnosis of hypertension.<sup>7</sup>
- Nephrology care prior to ESRD continues to be a concern. Since the 2005 introduction of the new Medical Evidence form (2728), with fields addressing pre-ESRD care, there has been little progress made in this area (pre-ESRD data, however, should be interpreted with caution because of the potential for misreporting). Forty-one percent of new ESRD patients in 2012, for example, had not seen a nephrologist prior to beginning therapy. And among these patients, 49 percent of those on hemodialysis began therapy with a catheter, compared to 21 percent of those who had received a year or more of nephrology care. Among those with a year or more of pre-ESRD nephrologist care, 54 percent began therapy with a fistula – five times higher than the rate among non-referred patients.<sup>8</sup>

Additionally, DaVita's Kidney Smart program helps to improve intervention and education for pre-ESRD patients. Approximately 69% of CKD Medicare patients have never been evaluated by a nephrologist.<sup>9</sup> Timely CKD care is imperative for patient morbidity and mortality. Adverse outcomes of CKD can often be prevented or delayed through early detection and treatment. Several studies have shown that early detection, intervention and care of CKD may result in improved patient outcomes and reduce ESRD:

- Reduced GFR is an independent risk factor for morbidity and mortality,
- A reduction in the rate of decline in kidney function upon nephrologists referrals has been associated with prolonged survival of CKD patients,
- Late referral to a nephrologist has been correlated with lower survival during the first 90 days of dialysis, and
- Timely referral of CKD patients to a multidisciplinary clinical team may improve outcomes and reduce cost.

A care plan for patients with CKD includes strategies to slow the loss of kidney function, manage comorbidities, and prevent or treat cardiovascular disease and other complications of CKD, as well as ease the transition to kidney replacement therapy. Through the Kidney Smart program, DaVita offers educational services to CKD patients that can help patients reduce, delay, and prevent adverse outcomes of untreated CKD. DaVita's Kidney Smart program encourages CKD patients to take control of their health and make informed decisions about their dialysis care.

DaVita's IMPACT program seeks to reduce patient mortality rates during the first 90-days of dialysis through patient intake, education and management, and reporting. Through IMPACT, DaVita's physician partners and clinical team have had proven positive results in addressing the critical issues of the incident dialysis patient. The program has helped improve DaVita's overall gross mortality rate, which has fallen 28% in the last 13 years.

DaVita's CathAway program seeks to reduce the number of patients with central venous catheters ("CVC"). Instead patients receive arteriovenous fistula ("AV fistula") placement. AV fistulas have superior patency, lower complication rates, improved adequacy, lower cost to the healthcare system, and decreased risk of patient mortality compared to CVCs. In July 2003, the Centers for Medicare and Medicaid Services, the End Stage Renal Disease Networks and key providers jointly recommended adoption of a National Vascular Access Improvement Initiative ("NVAII") to increase the appropriate use of AV fistulas for hemodialysis. The CathAway program is designed to comply with NVAII through patient education outlining the benefits for AV fistula placement and support through vessel mapping, fistula

<sup>7</sup> Id at 161.

<sup>8</sup> US Renal Data System, *USRDS 2014 Annual Data Report: Atlas of Chronic Kidney Disease and End-Stage Renal Disease in the United States*, National Institutes of Health, National Institute of Diabetes and Digestive and Kidney Diseases, Bethesda, MD, 107 (2014).

<sup>9</sup> Id at 4.

surgery and maturation, first cannulation and catheter removal. Since the inception of the program, DaVita has worked with its physician partners and clinical teammates to reduce catheter rates by 46 percent over the last seven years.

DaVita was recognized at the National Adult and Influenza Immunization Summit (NAIS) as the national winner in the "Healthcare Personnel Campaign" category of the 2014 Immunization Excellence Awards. In 2013, DaVita was the first large dialysis provider to implement a comprehensive teammate vaccination order, requiring all teammates who work in or whose jobs require frequent visits to dialysis centers to either be vaccinated against influenza or wear surgical masks in patient-care areas. By March 15, 2014 DaVita achieved 100 percent compliance with its teammate immunization-or-mask directive, with more than 86 percent of teammates choosing vaccination. As of the same date, 92.2 percent of patients were vaccinated for the flu, marking the fourth consecutive year that DaVita's patient vaccination rates exceeded the U.S. Department of Health and Human Services Healthy People 2020 recommendations.

In an effort to improve patient outcomes and experience during dialysis, on May 13, 2014, DaVita announced the first delivery of hemodiafiltration in the United States. It is delivering hemodiafiltration treatments to select patients at its North Colorado Springs Clinic as part of a six-month trial program. Hemodiafiltration incorporates the standard hemodialysis process but adds an extra step to remove even larger toxin particles. It is commonly practiced in Europe but until recently there was no FDA approved device for use in the U.S. DaVita clinical experts will determine whether there are improved outcomes of dialysis treatment and patient quality of life compared to hemodialysis.

For more than a decade, DaVita has been investing and growing its integrated kidney care capabilities, and on May 5, 2014, DaVita's approach to integrated care was recognized with two Dorland Health "Case in Point" Platinum Awards for its Pathways Care Management and VillageHealth Integrated Care Management programs. The Dorland Health awards recognize the most successful and innovative case-management programs working to improve health care across the continuum.

Through Patient Pathways, DaVita partners with hospitals to provide faster, more accurate ESRD patient placement to reduce the length of hospital inpatient stays and readmissions. Importantly, Patient Pathways is not an intake program. An unbiased onsite liaison, who specializes in ESRD patient care, meets with both newly diagnosed and existing ESRD patients to assess their current ESRD care and provide information about insurance, treatment modalities, outpatient care, financial obligations before discharge, and grants available to ESRD patients. Patients choose a provider/center that best meets their needs for insurance, preferred nephrologists, transportation, modality and treatment schedule.

DaVita currently partners with over 350 hospitals nationwide through Patient Pathways. Patient Pathways has demonstrated benefits to hospitals, patients, physicians and dialysis centers. Since its creation in 2007, Patient Pathways has impacted over 130,000 patients. The Patient Pathways program reduced overall readmission rates by 18 percent, reduced average patient stay by half-day, and reduced acute dialysis treatments per patient by 11%. Moreover, patients are better educated and arrive at the dialysis center more prepared and less stressed. They have a better understanding of their insurance coverage and are more engaged and satisfied with their choice of dialysis facility. As a result, patients have higher attendance rates, are more compliant with their dialysis care, and have fewer avoidable readmissions.

Since 1996, Village Health has innovated to become the country's largest renal National Committee for Quality Assurance accredited disease management program. VillageHealth's Integrated Care Management ("ICM") services partners with patients, providers and care team members to focus on the root causes of unnecessary hospitalizations such as unplanned dialysis starts, infection, fluid overload and medication management.

VillageHealth ICM services for payers and ACOs provide CKD and ESRD population health management delivered by a team of dedicated and highly skilled nurses who support patients both in the field and on the phone. Nurses use VillageHealth's industry-leading renal decision support and risk stratification software to manage a patient's coordinated needs. Improved clinical outcomes and reduced hospital

readmission rates have contributed to improved quality of life for patients. As of 2014, VillageHealth ICM has delivered up to a 15 percent reduction in non-dialysis medical costs for ESRD patients, a 15 percent lower year-one mortality rate over a three-year period, and 27 percent fewer hospital readmissions compared to the Medicare benchmark. Applied to DaVita's managed ESRD population, this represents an annual savings of more than \$30 million.

DaVita's transplant referral and tracking program ensures every dialysis patient is informed of transplant as a modality option and promotes access to transplantation for every patient who is interested and eligible for transplant. The social worker or designee obtains transplant center guidelines and criteria for selection of appropriate candidates and assists transplant candidates with factors that may affect their eligibility, such as severe obesity, adherence to prescribed medicine or therapy, and social/emotional/financial factors related to post-transplant functioning.

In an effort to better serve all kidney patients, DaVita believes in requiring that all providers measure outcomes in the same way and report them in a timely and accurate basis or be subject to penalty. There are four key measures that are the most common indicators of quality care for dialysis providers: dialysis adequacy, fistula use rate, nutrition and bone and mineral metabolism. Adherence to these standard measures has been directly linked to 15-20% fewer hospitalizations. On each of these measures, DaVita has demonstrated superior clinical outcomes, which directly translated into 7% reduction in hospitalizations among DaVita patients. DaVita has improved clinical outcomes each year since 2000, generating an estimated \$204 million in net savings to the American healthcare system in 2013.

DaVita Rx, the first and largest licensed, full-service U.S. renal pharmacy, focuses on the unique needs of dialysis patients. Since 2005, DaVita Rx has been helping improve outcomes by delivering medications to dialysis centers or to patients' homes, making it easier for patients to keep up with their drug regimens. DaVita Rx patients have medication adherence rates greater than 80%, almost double that of patients who fill their prescriptions elsewhere, and are correlated with 40% fewer hospitalizations.

DaVita has been repeatedly recognized for its commitment to its employees (or teammates), particularly its more than 1,700 teammates who are reservists, members of the National Guard, military veterans, and military spouses. In June 2013, DaVita received the prestigious Secretary of Defense Employer Support Freedom Award. Presented annually by the Employer Support of the Guard and Reserve ("ESGR"), an arm of the Department of Defense, the Freedom Award recognizes employers for outstanding support of employees who serve in the Guard and Reserve. It is the highest military-friendly award presented by the U.S. government. G.I. Jobs has recognized DaVita as a Military Friendly Employer for six consecutive years. The ranking is based on a survey assessing companies' long-term commitment to hiring those with military service, recruiting and hiring efforts and results, policies for Reserve and National Guard members called to active duty, military spouse programs, and the presence of special military recruitment programs. DaVita was also named as a Civilianjobs.com Most Valuable Employer (MVE) for Military winner for five consecutive years. The MVE was open to all U.S.-based companies, and winners were selected based on surveys in which employers outlined their recruiting, training and retention plans that best serve military service members and veterans.

In May 2015, DaVita was certified by WorldBlu as a "Freedom-Centered Workplace." For the eighth consecutive year, DaVita appeared on WorldBlu's list, formerly known as "most democratic" workplaces. WorldBlu surveys organizations' teammates to determine the level of democracy practiced. For the fourth consecutive year, DaVita was recognized as a Top Workplace by *The Denver Post*. DaVita was named a Silver LearningElite organization for 2014 by *Chief Learning Officer* magazine for creating and implementing exemplary teammate development practices that deliver measurable business value. DaVita ranked No. 29 in a record breaking field of more than 200 companies. Finally, DaVita has been recognized as one of *Fortune*® Magazine's Most Admired Companies in 2015 – for the tenth consecutive year.

DaVita is also committed to sustainability and reducing its carbon footprint. In fact, it is the only kidney care company recognized by the Environmental Protection Agency for its sustainability initiatives. In 2010, DaVita opened the first LEED-certified dialysis center in the U.S. *Newsweek Green Rankings*

recognized DaVita as a 2015 Top Green Company in the United States, and it has appeared on the list every year since the inception of the program in 2009. Furthermore, DaVita annually saves approximately 8 million pounds of medical waste through dialyzer reuse and it also diverts more than 85% of its waste through composting and recycling programs. It has also undertaken a number of similar initiatives at its offices and has achieved LEED Gold certification for its corporate headquarters. In addition, DaVita was also recognized as an "EPA Green Power Partner" by the U.S. Environmental Protection Agency.

DaVita consistently raises awareness of community needs and makes cash contributions to organizations aimed at improving access to kidney care. DaVita provides significant funding to kidney disease-awareness organizations such as the Kidney TRUST, the National Kidney Foundation, the American Kidney Fund, and several other organizations. Its own employees, or members of the "DaVita Village," assisted in these initiatives and have raised approximately \$5 million, thus far, through the annual Tour DaVita bicycle ride, with \$1 million coming in 2013 alone. The Kidney Rock 5K Run/Walk raised an estimated \$1 million for Bridge of Life – DaVita Medical Missions in 2011 and 2012, combined. DaVita continued its "DaVita Way of Giving" program in 2014 with teammates at clinics across the nation selecting more than 950 nonprofits and community organizations to receive more than \$1.6 million in contributions. Nearly \$4 million has been donated through the DaVita Way of Giving since the program began.

DaVita does not limit its community engagement to the U.S. alone. In 2014, DaVita Village Trust completed 21 medical missions in 7 countries, bringing life-saving dialysis treatment to more than 250 patients around the world. Through its first primary care medical mission, it provided care and health education to more than 70 kidney donors and individuals. It provided CKD rapid-screenings for over 8,500 people through 38 domestic and two international CKD screening events. 32 screening events are planned for 2015 for people in at-risk and underserved communities in the U.S. and abroad.

1. Neither the Centers for Medicare and Medicaid Services nor the Illinois Department of Public Health has taken any adverse action involving civil monetary penalties or restriction or termination of participation in the Medicare or Medicaid programs against any of the applicants, or against any Illinois health care facilities owned or operated by the Applicants, directly or indirectly, within three years preceding the filing of this application.

A list of health care facilities owned or operated by the Applicants in Illinois is attached at Attachment – 11B.

Dialysis facilities are currently not subject to State Licensure in Illinois.

2. Certification that no adverse action has been taken against either of the Applicants or against any health care facilities owned or operated by the Applicants in Illinois within three years preceding the filing of this application is attached at Attachment – 11C.
3. An authorization permitting the Illinois Health Facilities and Services Review Board ("HFSRB") and the Illinois Department of Public Health ("IDPH") access to any documents necessary to verify information submitted, including, but not limited to: official records of IDPH or other State agencies; and the records of nationally recognized accreditation organizations is attached at Attachment – 11C.



## DaVita HealthCare Partners Concludes 16th Villagewide for 3,500 teammates

### Company recognizes field teammates for quality patient care and team values

NATIONAL HARBOR, Md., May 14, 2015 /PRNewswire/ -- [DaVita HealthCare Partners Inc.](#) (NYSE: DVA), one of the nation's largest and most innovative health care communities, recognizes its teammates worldwide and their commitment to quality care and team values during its annual Villagewide event.

"We honor teammate behavior at our Villagewide celebration," said Kent Thiry, co-chairman and CEO for DaVita HealthCare Partners. "We are intentional about recognizing those who embrace our 'Trilogy of Care' – caring for our patients, caring for each other and caring for the world."

Villagewide is recognized as a best-in-class training and development program for its comprehensive focus on culture, clinical quality and teammate togetherness. The 2015 theme is "Active Leadership," where teammates access programming that impacts their personal and professional lives.

Villagewide celebrated DaVita HealthCare Partners' teammates and the patients they care for. One annual feature is the 'Circle of Life' program that remembers the patients and teammates who passed away in the last year. Many teammates are reminded that ethics, quality care and clinical outcomes for a vulnerable patient population matter most.

DaVita was recently recognized as the highest quality provider by two government programs, the Centers for Medicare and Medicaid (CMS) Five-Star Rating System and the CMS Quality Incentive Program. DaVita has 54 percent of all four and five-star rated dialysis centers in the industry. In addition, 98.5 percent of DaVita dialysis centers met or exceeded QIP standards, outperforming the industry.

### About DaVita HealthCare Partners

DaVita HealthCare Partners Inc., a Fortune 500® company, is the parent company of DaVita Kidney Care and HealthCare Partners. DaVita Kidney Care is a leading provider of kidney care in the United States, delivering dialysis services to patients with chronic kidney failure and end stage renal disease. As of March 31, 2015, DaVita Kidney Care operated or provided administrative services at 2,197 outpatient dialysis centers located in the United States serving approximately 174,000 patients. The company also operated 93 outpatient dialysis centers located in 10 countries outside the United States. HealthCare Partners manages and operates medical groups and affiliated physician networks in Arizona, California, Nevada, New Mexico, Florida and Colorado in its pursuit to deliver excellent-quality health care in a dignified and compassionate manner. As of March 31, 2015 HealthCare Partners provided integrated care management for approximately 830,000 patients. For more information, please visit [DaVitaHealthCarePartners.com](http://DaVitaHealthCarePartners.com).

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SOURCE DaVita HealthCare Partners Inc.



## DaVita HealthCare Partners Certified as Freedom-Centered Workplace by WorldBlu

### Company celebrates eight years of recognition

DENVER, May 26, 2015 /PRNewswire/ -- [DaVita HealthCare Partners Inc.](#) (NYSE: DVA), one of the nation's largest and most innovative health care communities, today announced that the company has been certified as a "Freedom-Centered Workplace" by WorldBlu. This is the eighth year the company has been recognized on the list, formerly known as "most democratic" workplaces.

"We believe in teammate engagement," said Kent Thiry, Co-chairman and CEO of DaVita HealthCare Partners. "The way we operate allows each of us to offer our best selves to our patients, each other and the community around us."

DaVita HealthCare Partners conducts "town halls" and "Voice of the Village" calls where teammates can hear directly from senior leaders and ask questions about the business, policies, strategic direction and more. Teammates also have the opportunity to recognize one another for exemplifying the company's core values.

DaVita HealthCare Partners emphasizes collaboration and teamwork to deliver industry-leading care as reflected in two reports from the Centers for Medicare and Medicaid Services (CMS). In the CMS Five-Star Rating System, DaVita Kidney Care outperformed the industry average by 138 percent. According to the CMS Quality Incentive Program, 98 percent of DaVita Kidney Care centers are rated in the top clinical performance tier.

For more information about DaVita HealthCare Partners' award-winning culture, visit [DaVita.com/CSR](http://DaVita.com/CSR).

Organizations become eligible for a spot on the WorldBlu List of Most Freedom-Centered Workplaces™ after teammates complete The WorldBlu Freedom at Work™ Assessment, a survey evaluating their practice of the [WorldBlu 10 Principles of Organizational Democracy™](#). The assessment was developed based on a decade of research into what makes a successful freedom-centered company. Organizations from the for-profit and non-profit sectors that have been in operation for at least one full year and have five or more employees can apply for the certification.

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DaVita and DaVita HealthCare Partners are trademarks or registered trademarks of DaVita HealthCare Partners Inc.

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SOURCE DaVita HealthCare Partners Inc.

Attachment - 11A



## DaVita HealthCare Partners Recognizes Military Appreciation Month

### Company honors teammates & patients dedication to service

DENVER, May 27, 2015 /PRNewswire/ -- [DaVita HealthCare Partners Inc.](#) (NYSE: DVA), one of the nation's largest and most innovative health care communities, distinguishes Military Appreciation Month by honoring the men and women of the armed forces who have selflessly served the United States of America.

"We celebrate the service of our patients and teammates who have or are serving the United States Armed Forces," said Laura Mildenberger, chief people officer at DaVita Kidney Care. "DaVita HealthCare Partners prides itself on being an employer and care provider that honors and respects the commitment that service veterans and active military members have made."

In the last five years, DaVita HealthCare Partners has hired more than 2,000 veterans and offered transitional support for teammates coming from a military background to integrate with civil life. These veterans are offered positions throughout the company – from patient care technicians to executives.

There are [several programs](#) offered at DaVita HealthCare Partners to help welcome veterans to the company and to thrive in their roles.

- **Military Stories**— A site to help teammates ease the transition from military service to employment. This interactive site was designed from the input of veteran teammates to help support new hires making that transition.
- **Village Veterans** – Allows new military teammates to receive mentorship from company leaders as they transition to new roles within the company.
- **Star Troopers** – Offers teammates the opportunity to assemble care packages and write thank you notes to be sent to those serving overseas. The Star Troopers program has supported troops with more than 7,500 cards, letters and care packages.
- **Military Spouse Employment Partnership** – As a member of this partnership, DaVita HealthCare Partners makes a commitment to help match veterans and their spouses to jobs within the company.

DaVita HealthCare Partners commitment to the military is demonstrated by being honored with military awards consistently over the past few years. This year, DaVita HealthCare Partners won "[ERE Recruiting Excellence Award](#)" for its Military Talent Program. The company has received numerous other Military awards over the past several years, including:

- **Best for Vets** – Received recognition by *Military Times Edge* as a "Best for Vets" employer for the sixth consecutive year.
- **Top Military Spouse Friendly Employers** – DaVita was recognized as a top employer for military spouses by *Military Spouse Magazine* for the second consecutive year.
- **Top Military Friendly Employers** – DaVita has been recognized as a Top Military Friendly Employer by *GI Jobs* for six consecutive years.
- **Top Veteran-Friendly Companies** – DaVita was named a top veteran friendly company by *U.S. Veterans Magazine*.
- **Most Valuable Employer for Military** – [CivilianJobs.com](#) has named DaVita HealthCare Partners to this list for the last five consecutive years.

For more information about DaVita's veterans' programs, please visit [Careers.DaVita.com/ Military](#).

### About DaVita HealthCare Partners

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Attachment - 11A

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SOURCE DaVita HealthCare Partners

Attachment - 11A

**DaVita HealthCare Partners Inc.**  
Illinois Facilities

Regulatory Name	Address 1	Address 2	City	County	State	Zip	Medicare Certification Number
Adams County Dialysis	436 N 10TH ST		QUINCY	ADAMS	IL	62301-4152	14-2711
Alton Dialysis	3511 COLLEGE AVE		ALTON	MADISON	IL	62002-5009	14-2619
Arlington Heights Renal Center	17 WEST GOLF ROAD		ARLINGTON HEIGHTS	COOK	IL	60005-3905	14-2628
Barrington Creek	28160 W. NORTHWEST HIGHWAY		LAKE BARRINGTON	LAKE	IL	60010	14-2736
Belvidere Dialysis	1755 BELOIT ROAD		BELVIDERE	BOONE	IL	61008	
Benton Dialysis	1151 ROUTE 14 W		BENTON	FRANKLIN	IL	62812-1500	14-2608
Beverly Dialysis	8109 SOUTH WESTERN AVE		CHICAGO	COOK	IL	60620-5939	14-2638
Big Oaks Dialysis	5623 W TOUHY AVE		NILES	COOK	IL	60714-4019	14-2712
Buffalo Grove Renal Center	1291 W. DUNDEE ROAD		BUFFALO GROVE	COOK	IL	60089-4009	14-2650
Calumet City Dialysis	1200 SIBLEY BOULEVARD		CALUMET CITY	COOK	IL	60409	
Carpentersville Dialysis	2203 RANDALL ROAD		CARPENTERSVILLE	KANE	IL	60110-3355	14-2598
Centralia Dialysis	1231 STATE ROUTE 161		CENTRALIA	MARION	IL	62801-6739	14-2609
Chicago Heights Dialysis	177 W JOE ORR RD	STE B	CHICAGO HEIGHTS	COOK	IL	60411-1733	14-2635
Chicago Ridge Dialysis	10511 SOUTH HARLEM AVE		WORTH	COOK	IL	60482	
Churchview Dialysis	5970 CHURCHVIEW DR		ROCKFORD	WINNEBAGO	IL	61107-2574	14-2640
Cobblestone Dialysis	934 CENTER ST	STE A	ELGIN	KANE	IL	60120-2125	14-2715
Country Hills Dialysis	4215 W 167TH ST		COUNTRY CLUB HILLS	COOK	IL	60478-2017	14-2575
Crystal Springs Dialysis	720 COG CIRCLE		CRYSTAL LAKE	MICHENRY	IL	60014-7301	14-2716
Decatur East Wood Dialysis	794 E WOOD ST		DECATUR	MACON	IL	62523-1155	14-2599
Dixon Kidney Center	1131 N GALENA AVE		DIXON	LEE	IL	61021-1015	14-2651
Driftwood Dialysis	1808 SOUTH WEST AVE		FREEPORT	STEPHENSON	IL	61032-6712	14-2747
Edwardsville Dialysis	235 S BUCHANAN ST		EDWARDSVILLE	MADISON	IL	62025-2108	14-2701
Effingham Dialysis	904 MEDICAL PARK DR	STE 1	EFFINGHAM	EFFINGHAM	IL	62401-2193	14-2580
Emerald Dialysis	710 W 43RD ST		CHICAGO	COOK	IL	60609-3435	14-2529
Evanston Renal Center	1715 CENTRAL STREET		EVANSTON	COOK	IL	60201-1507	14-2511
Grand Crossing Dialysis	7319 S COTTAGE GROVE AVENUE		CHICAGO	COOK	IL	60619-1909	14-2728
Freeport Dialysis	1028 S KUNKLE BLVD		FREEPORT	STEPHENSON	IL	61032-6914	14-2642
Garfield Kidney Center	3250 WEST FRANKLIN BLVD		CHICAGO	COOK	IL	60624-1509	14-2777
Granite City Dialysis Center	9 AMERICAN VLG		GRANITE CITY	MADISON	IL	62040-3706	14-2537
Harvey Dialysis	16641 S HALSTED ST		HARVEY	COOK	IL	60426-6174	14-2698
Hazel Crest Renal Center	3470 WEST 183rd STREET		HAZEL CREST	COOK	IL	60429-2428	14-2622
Illini Renal Dialysis	507 E UNIVERSITY AVE		CHAMPAIGN	CHAMPAIGN	IL	61820-3828	14-2633
Jacksonville Dialysis	1515 W WALNUT ST		JACKSONVILLE	MORGAN	IL	62650-1150	14-2581

DaVita HealthCare Partners Inc. Illinois Facilities							
Regulatory Name	Address 1	Address 2	City	County	State	Zip	Medicare Certification Number
Jerseyville Dialysis	917 S STATE ST		JERSEYVILLE	JERSEY	IL	62052-2344	14-2636
Kankakee County Dialysis	581 WILLIAM R LATHAM SR DR	STE 104	BOURBONNAIS	KANKAKEE	IL	60914-2439	14-2685
Kenwood Dialysis	4259 S COTTAGE GROVE AVENUE		CHICAGO	COOK	IL	60653	14-2717
Lake County Dialysis Services	565 LAKEVIEW PARKWAY	STE 176	VERNON HILLS	LAKE	IL	60061	14-2552
Lake Villa Dialysis	37809 N IL ROUTE 59		LAKE VILLA	LAKE	IL	60046-7332	14-2666
Lawndale Dialysis	3934 WEST 24TH ST		CHICAGO	COOK	IL	60623	14-2768
Lincoln Dialysis	2100 WEST FIFTH		LINCOLN	LOGAN	IL	62656-9115	14-2582
Lincoln Park Dialysis	3157 N LINCOLN AVE		CHICAGO	COOK	IL	60657-3111	14-2528
Litchfield Dialysis	915 ST FRANCES WAY		LITCHFIELD	MONTGOMERY	IL	62056-1775	14-2583
Little Village Dialysis	2335 W CERMAK RD		CHICAGO	COOK	IL	60608-3811	14-2668
Logan Square Dialysis	2838 NORTH KIMBALL AVE		CHICAGO	COOK	IL	60618	14-2534
Loop Renal Center	1101 SOUTH CANAL STREET		CHICAGO	COOK	IL	60607-4901	14-2505
Machesney Park Dialysis	6950 NORTH PERRYVILLE ROAD		MACHESNEY PARK	WINNEBAGO	IL	61115	
Macon County Dialysis	1090 W MCKINLEY AVE		DECATUR	MACON	IL	62526-3208	14-2584
Marengo City Dialysis	910 GREENLEE STREET	STE B	MARENGO	MCHENRY	IL	60152-8200	14-2643
Marion Dialysis	324 S 4TH ST		MARION	WILLIAMSON	IL	62959-1241	14-2570
Maryville Dialysis	2130 VADALABENE DR		MARYVILLE	MADISON	IL	62062-5632	14-2634
Mattoon Dialysis	6051 DEVELOPMENT DRIVE		CHARLESTON	COLES	IL	61938-4652	14-2585
Metro East Dialysis	5105 W MAIN ST		BELLEVILLE	SAINT CLAIR	IL	62226-4728	14-2527
Montclare Dialysis Center	7009 W BELMONT AVE		CHICAGO	COOK	IL	60634-4533	14-2649
Mount Vernon Dialysis	1800 JEFFERSON AVE		MOUNT VERNON	JEFFERSON	IL	62864-4300	14-2541
Mt. Greenwood Dialysis	3401 W 111TH ST		CHICAGO	COOK	IL	60655-3329	14-2660
Olnley Dialysis Center	117 N BOONE ST		OLNEY	RICHLAND	IL	62450-2109	14-2674
Olympia Fields Dialysis Center	4557B LINCOLN HWY	STE B	MATTESON	COOK	IL	60443-2318	14-2548
Palos Park Dialysis	13155 S LaGRANGE ROAD		ORLAND PARK	COOK	IL	60462-1162	14-2732
Pittsfield Dialysis	640 W WASHINGTON ST		PITTSFIELD	PIKE	IL	62363-1350	14-2708
Red Bud Dialysis	LOT 4 IN 1ST ADDITION OF EAST INDUSTRIAL PARK		RED BUD	RANDOLPH	IL	62278	14-2772
Robinson Dialysis	1215 N ALLEN ST	STE B	ROBINSON	CRAWFORD	IL	62454-1100	14-2714
Rockford Dialysis	3339 N ROCKTON AVE		ROCKFORD	WINNEBAGO	IL	61103-2839	14-2647
Roxbury Dialysis Center	622 ROXBURY RD		ROCKFORD	WINNEBAGO	IL	61107-5089	14-2665
Rushville Dialysis	112 SULLIVAN DRIVE		RUSHVILLE	SCHUYLER	IL	62681-1293	14-2620

DaVita HealthCare Partners Inc.									
Illinois Facilities									
Regulatory Name	Address 1	Address 2	City	County	State	Zip	Medicare Certification Number		
Sauget Dialysis	2061 GOOSE LAKE RD		SAUGET	SAINT CLAIR	IL	62206-2822	14-2561		
Schaumburg Renal Center	1156 S ROSELLE ROAD		SCHAUMBURG	COOK	IL	60193-4072	14-2654		
Shiloh Dialysis	1095 NORTH GREEN MOUNT RD		SHILOH	ST CLAIR	IL	62269	14-2753		
Silver Cross Renal Center - Morris	1551 CREEK DRIVE		MORRIS	GRUNDY	IL	60450	14-2740		
Silver Cross Renal Center - New Lenox	1890 SILVER CROSS BOULEVARD		NEW LENOX	WILL	IL	60451	14-2741		
Silver Cross Renal Center - West	1051 ESSINGTON ROAD		JOLIET	WILL	IL	60435	14-2742		
South Holland Renal Center	16136 SOUTH PARK AVENUE		SOUTH HOLLAND	COOK	IL	60473-1511	14-2544		
Springfield Central Dialysis	932 N RUTLEDGE ST		SPRINGFIELD	SANGAMON	IL	62702-3721	14-2586		
Springfield Montvale Dialysis	2930 MONTVALE DR	STE A	SPRINGFIELD	SANGAMON	IL	62704-5376	14-2590		
Springfield South	2930 SOUTH 6th STREET		SPRINGFIELD	SANGAMON	IL	62703	14-2733		
Stonestrest Dialysis	1302 E STATE ST		ROCKFORD	WINNEBAGO	IL	61104-2228	14-2615		
Stony Creek Dialysis	9115 S CICERO AVE		OAK LAWN	COOK	IL	60453-1895	14-2661		
Stony Island Dialysis	8725 S STONY ISLAND AVE		CHICAGO	COOK	IL	60617-2709	14-2718		
Sycamore Dialysis	2200 GATEWAY DR		SYCAMORE	DEKALB	IL	60178-3113	14-2639		
Taylorville Dialysis	901 W SPRESSER ST		TAYLORVILLE	CHRISTIAN	IL	62568-1831	14-2587		
Tazewell County Dialysis	1021 COURT STREET		PEKIN	TAZEWELL	IL	61554	14-2767		
Timber Creek Dialysis	1001 S ANNIE GLIDDEN ROAD		DEKALB	DEKALB	IL	60115	14-2763		
Tinley Park Dialysis	16767 SOUTH 80TH AVENUE		TINLEY PARK	COOK	IL	60477			
TRC Children's Dialysis Center	2611 N HALSTED ST		CHICAGO	COOK	IL	60614-2301	14-2604		
Vandalia Dialysis	301 MATTES AVE		VANDALIA	FAYETTE	IL	62471-2061	14-2693		
Vermilion County Dialysis	22 WEST NEWELL ROAD		DANVILLE	VERMILION	IL	61834			
Waukegan Renal Center	1616 NORTH GRAND AVENUE	STE C	Waukegan	COOK	IL	60085-3676	14-2577		
Wayne County Dialysis	303 NW 11TH ST	STE 1	FAIRFIELD	WAYNE	IL	62837-1203	14-2688		
West Lawn Dialysis	7000 S PULASKI RD		CHICAGO	COOK	IL	60629-5842	14-2719		
West Side Dialysis	1600 W 13TH STREET		CHICAGO	COOK	IL	60608			
Whiteside Dialysis	2600 N LOCUST	STE D	STERLING	WHITESIDE	IL	61081-4602	14-2648		
Woodlawn Dialysis	5060 S STATE ST		CHICAGO	COOK	IL	60609	14-2310		

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

Dear Chairwoman Olson:

I hereby certify under penalty of perjury as provided in § 1-109 of the Illinois Code of Civil Procedure, 735 ILCS 5/1-109 that no adverse action as defined in 77 IAC 1130.140 has been taken against any in-center dialysis facility owned or operated by DaVita HealthCare Partners Inc. or Total Renal Care Inc. in the State of Illinois during the three year period prior to filing this application.

Additionally, pursuant to 77 Ill. Admin. Code § 1110.230(a)(3)(C), I hereby authorize the Health Facilities and Services Review Board (“HFSRB”) and the Illinois Department of Public Health (“IDPH”) access to any documents necessary to verify information submitted as part of this application for permit. I further authorize HFSRB and IDPH to obtain any additional information or documents from other government agencies which HFSRB or IDPH deem pertinent to process this application for permit.

Sincerely,



Print Name: Arturo Sida  
Its: Assistant Corporate Secretary  
DaVita HealthCare Partners Inc.

Subscribed and sworn to me  
This \_\_\_ day of \_\_\_\_\_, 2015

\_\_\_\_\_  
Notary Public

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California

County of Los Angeles

On May 18, 2015 before me, Kimberly Ann K. Burgo, Notary Public,  
(here insert name and title of the officer)

personally appeared **\*\* Arturo Sida \*\***

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

*Kimberly Ann K. Burgo*  
Signature



**OPTIONAL INFORMATION**

Law does not require the information below. This information could be of great value to any person(s) relying on this document and could prevent fraudulent and/or the reattachment of this document to an unauthorized document(s)

**DESCRIPTION OF ATTACHED DOCUMENT**

Title or Type of Document: Ltr. to K.Olson re CON Application (Morris Dialysis)

Document Date: May 18, 2015 Number of Pages: 1 (one)

Signer(s) if Different Than Above: \_\_\_\_\_

Other Information: \_\_\_\_\_

**CAPACITY(IES) CLAIMED BY SIGNER(S)**

Signer's Name(s):

Individual

Corporate Officer

(Title(s))

Partner

Attorney-in-Fact

Trustee

Guardian/Conservator

Other: Assistant Corporate Secretary

**SIGNER IS REPRESENTING:** Name of Person or Entity DaVita HealthCare Partners Inc.

**Section III, Project Purpose, Background and Alternatives – Information Requirements**  
**Criterion 1110.230(b), Project Purpose, Background and Alternatives**

**Purpose of the Project**

1. The Applicants propose to discontinue the Existing Facility of 9-stations located at 1551 Creek Drive, Morris, Illinois 60450 and establish a 12-station facility 1.05 miles, or 2 minutes away, to 180 East Waverly Street, Illinois 60450 (the "Replacement Facility").

The Existing Facility is suboptimal for both patients and staff. As the Applicant does not own the building, it has determined that it will be better able to serve the needs of its patients if the service is relocated to a modern facility. The 16-year old Existing Facility has many patient safety, privacy, and functionality concerns and simply cannot accommodate the existing and expected future patient volume. The site of the Replacement Facility was selected due to its proximity to the Existing Facility, the necessary space it provides for current and future expansion needs, as well as the parking availability for patients, staff, and vendors. The proposed Replacement Facility will create numerous operational and logistical efficiencies.

The Existing Facility has numerous operational and logistical inefficiencies. While the Existing Facility houses 9 dialysis stations in 4,352 GSF, or 483.6 GSF per station, which meets the Board's standard for in-center hemodialysis facilities of this size, the space is inadequate to meet the facilities storage needs. The dedicated storage area is insufficient for storage of medical and office supplies, requiring some supplies to be stored in the BioMed and mechanical rooms, which have inadequate space to store supplies, creating a risk supplies stored on overloaded countertops and shelves could fall on staff. The Existing Facility has only one restroom for up to 2 male and 7 female teammates. There is no dedicated conference room. The conference room is a multi-purpose room as it serves not only as the conference room but as the teammates' break room, and the social worker's or dietitian's office when both are present at the facility on the same day. If a meeting is taking place, teammates have nowhere to eat or relax during their breaks. Additionally, the break room is an inappropriate setting for plan of care meetings, near the teammates' food, sink, and microwave. The conference room cannot accommodate team meetings with the Medical Director. As a result, teammates frequently block the doorway during these meetings, creating a fire hazard. Patient privacy concerns also exist. The treatment floor is compact, making it difficult for nurses to have telephone conversations with medical providers without being overheard. The Administrative Assistant's office, which also serves as the reception desk has no window, just an opening in the wall between her office and the waiting area, creating additional privacy concerns. Flooring, believed to be original, is breaking up and has seams splitting throughout the clinic, causing a potential tripping hazard for patients and staff. The scale, which was built into the floor and takes up the entire width of the hallway, creates a safety concern whenever it is used by a patient in a large wheelchair. The wheelchair blocks the path to the waiting area, and in the event of an emergency, prevents the use of an exit. Restricted waiting area space also means there is no wheelchair storage in the clinic.

The Replacement Facility is needed to serve the growing demand for dialysis services in the area. Currently, the Existing Facility serves 38 in-center ESRD patients. Teresa Kravets, M.D., the Medical Director for Morris Dialysis, anticipates all 38 current patients will transfer to the Replacement Facility. Furthermore, Dr. Kravets is currently treating 82 Stage 4 & 5 CKD patients who reside within approximately 30 minutes of the proposed facility. See Appendix 3. Conservatively, based upon attrition due to patient death, transplant, or return of function, it is projected that 51 of these pre-ESRD patients will require dialysis within 12 to 24 months of project completion. In addition, the FMC Morris facility currently treats 14 patients who live within 20 minutes of that facility (See App. Proj. No. 14-065 p 83). Fresenius anticipates most of the existing FMC Morris patients will transfer to FMC Plainfield North, FMC Plainfield, FMC Ottawa or DaVita's Morris Dialysis facility. Based upon proximity to the FMC Morris patients' residences, we anticipate at least 9 of the displaced FMC Morris patients will transfer to DaVita's Morris Dialysis facility. The existing facility's 38 current patients represent a 70.4% utilization rate, which is below the State's 80% standard. However, the transfer of 9 patients from FMC Morris would immediately increase the Existing Facility's utilization to 87.0%.

Thus, the Existing Facility must relocate in order to have the capacity to accommodate projected growth. While the Applicants are requesting the addition of 3 stations with this relocation, the Replacement Facility will be plumbed to accommodate up to 16 stations. This will allow for a future census capacity of 96 in-center ESRD patients.

As shown in Attachment – 12A, including the Existing Facility for Morris Dialysis, there are currently 8 existing or approved dialysis facilities within 30 minutes normal travel time of the proposed location of the Replacement Facility (7 facilities, excluding FMC Morris, which will close with the opening of FMC Plainfield North.) As collected and reported by the HFSRB Staff, the ESRD utilization for existing and approved facilities for the quarter ended March 31, 2015 within a 30 minute drive time is 61.8%. However, it is important to note that within a 20 minute drive time of the Proposed Facility, there will be no other in-center hemodialysis facilities once FMC Morris closes. The utilization of Morris Dialysis, should it capture the 9 FMC Morris patients that reside closest to the replacement facility, would climb to 87.0%, and would exceed the State Board's utilization standard of 80%, even without factoring in any new patient referrals. Accordingly, the Replacement Facility is needed to accommodate future growth.

2. A map of the market area for the proposed facility is attached at Attachment – 12B. The market area encompasses an approximate 20 mile radius around the proposed facility. The boundaries of the market area are as follows:

- North approximately 30 minutes normal travel time to Yorkville, Illinois.
- Northeast approximately 30 minutes normal travel time to Plainfield, Illinois.
- East approximately 35 minutes normal travel time to Elwood, Illinois.
- Southeast approximately 30 minutes normal travel time to Braidwood, Illinois.
- South approximately 25 minutes normal travel time to Dwight, Illinois.
- Southwest approximately 37 minutes normal travel time to Grand Ridge, Illinois.
- West approximately 30 minutes normal travel time to Ottawa, Illinois.
- Northwest approximately 30 minutes normal travel time to Sheridan, Illinois.

3. Source Information

The Renal Network, ZIP Code Report, December 31, 2013.

U.S. Census Bureau, American FactFinder, Fact Sheet, *available at* [http://factfinder.census.gov/home/saff/main.html?\\_lang=en](http://factfinder.census.gov/home/saff/main.html?_lang=en) (last visited May 11, 2015).

US Renal Data System, USRDS 2014 Annual Data Report: Atlas of Chronic Kidney Disease and End-Stage Renal Disease in the United States, National Institutes of Health, National Institute of Diabetes and Digestive and Kidney Diseases, Bethesda, MD, (2014).

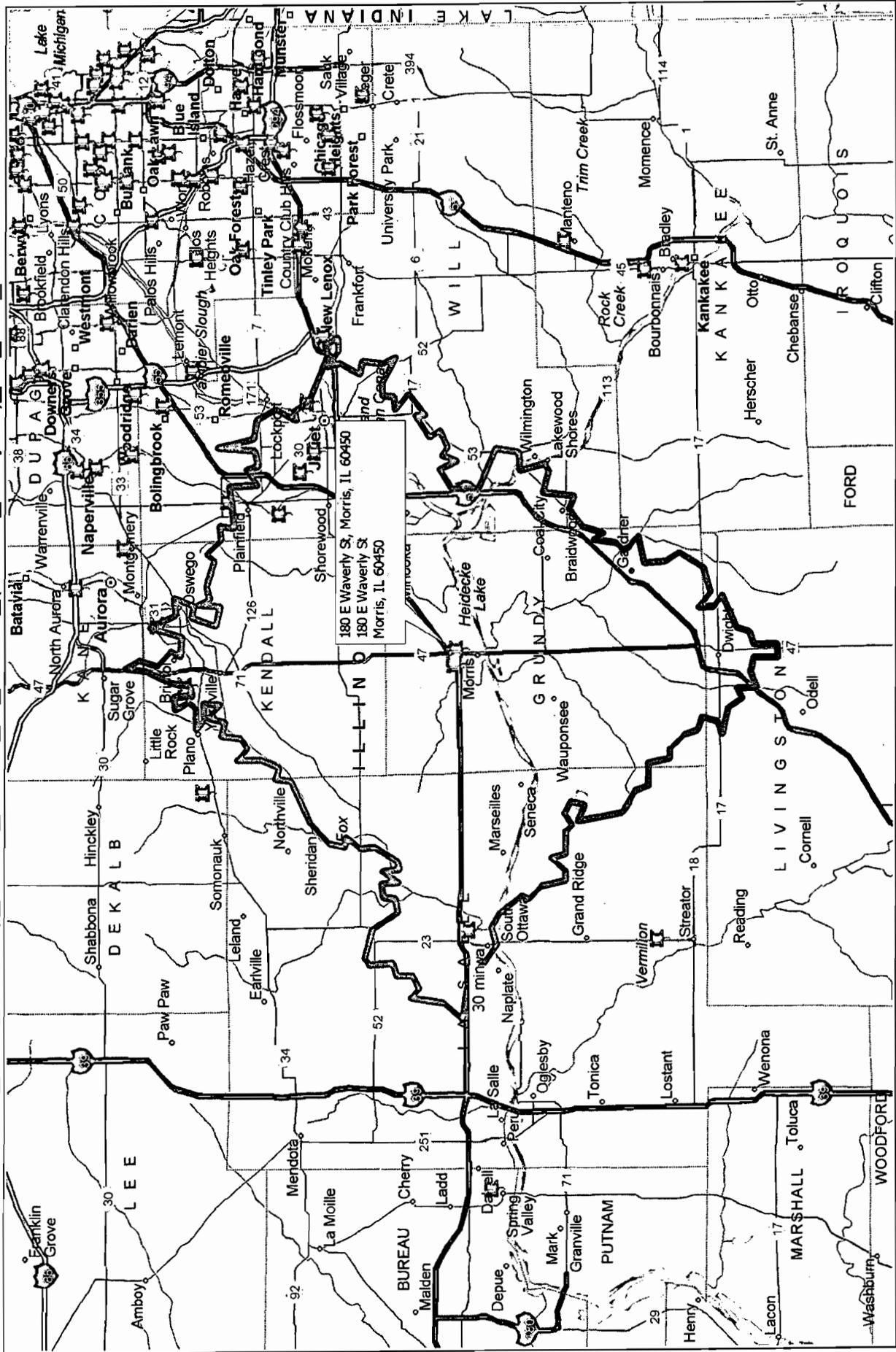
US Renal Data System, USRDS 2013 Annual Data Report: Atlas of Chronic Kidney Disease and End-Stage Renal Disease in the United States, National Institutes of Health, National Institute of Diabetes and Digestive and Kidney Diseases, Bethesda, MD, 160 (2013).

4. As stated above, the Existing Facility is suboptimal for both patients and staff. As the Applicant does not own the building, it has determined that it will be better able to serve the needs of its patients if the service is relocated to a modern facility and expanded. The 16-year old Existing Facility has many patient safety, privacy, and functionality concerns and simply cannot accommodate the existing and expected future patient volume. The site of the Replacement Facility was selected due to its proximity to the Existing Facility, the necessary space it provides for current and future expansion needs, as well as the parking availability for patients, staff, and vendors. The proposed relocation facility will create numerous operational and logistical efficiencies. Thus, the Applicants must relocate to a modern facility, with enhanced accommodations and improved utilities, to improve access and better provide for the needs of the area's ESRD patients and their families.

5. The Applicants anticipate the proposed facility will have quality outcomes comparable to other DaVita facilities. Additionally, in an effort to better serve all kidney patients, DaVita believes in requiring all providers measure outcomes in the same way and report them in a timely and accurate basis or be subject to penalty. There are four key measures that are the most common indicators of quality care for dialysis providers: dialysis adequacy, fistula use rate, nutrition and bone and mineral metabolism. Adherence to these standard measures has been directly linked to 15-20% fewer hospitalizations. On each of these measures, DaVita has demonstrated superior clinical outcomes, which directly translated into 7% reduction in hospitalizations among DaVita patients. DaVita has improved clinical outcomes each year since 2000, generating an estimated \$204 million in net savings to the American healthcare system in 2013.

End Stage Renal Disease Facility	Address	City	Distance	Drive Time	03-31-2015 Stations	03-31-2015 Patients	03-31-2015 Utilization
Renal Care Group - Ottawa	1601 Mercury Court	Ottawa	23.31	28	12	31	0.4306
Silver Cross Renal Center Morris	1547 Creek Drive	Morris	1.05	2	9	36	0.6667
Renal Care Group - Morris	1401 Lakewood Dr., Suite B,C	Morris	1.28	2	0	14	0.7333
Fresenius Medical Care of Plainfield	2320 Michas Drive	Plainfield	22.52	27	16	74	0.7708
Silver Cross Renal Center West	1051 Essington Road Ste 140	Joliet	20.43	24	29	127	0.7299
Fresenius Medical Care Plainfield North	24020 Riverwalk Court	Plainfield	25.72	30	10	0	0
Sun Health	2121 Oneida St. Ste 104	Joliet	21.18	24	17	56	0.549
Fresenius Medical Care Joliet	721 East Jackson Street	Joliet	24.48	29	16	66	0.6875

180 East Waverly Street Morris IL 60450 (Morris Dialysis) 30 Min GSA



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**Section III, Project Purpose, Background and Alternatives – Information Requirements**  
**Criterion 1110.230(c), Project Purpose, Background and Alternatives**

Alternatives

The Applicants explored several options prior to determining to relocate Morris Dialysis. After exploring the options below in detail, the Applicants determined to relocate the Existing Facility in order to maintain access to life-sustaining dialysis for patients residing in Morris and the surrounding area. A review of each of the options considered and the reasons they were rejected follows.

Do Nothing

The Existing Facility is suboptimal for patients and staff, and in need of repair. The 16-year old facility has physical plant, privacy, and functionality concerns and simply cannot accommodate the expected future patient volume.

The Existing Facility is located at 1551 Creek Drive in Morris, Illinois. As shown on the flood plain map, attached at Attachment – 10A, the Existing Facility is located near the East Fork Nettle Creek flood plain. The parking lot frequently floods, even with small amounts of rain, and is in a continuous state of disrepair. Extended periods of moisture on the lot's surface create added fall risks for patients, who are often elderly, suffer multiple co-morbidities and/or rely on assistive devices. Relocating to a site with minimal flooding risks will improve patient safety.

The Existing Facility is not equipped to adequately handle deliveries of supplies. The rear door is a single door, not a double door. Drivers must break down most deliveries to fit through the single door and either park near the back door of the facility, blocking an emergency exit, or on the street, making multiple trips to cart in deliveries.

Additionally, the design and size of the Existing Facility creates operational and logistical inefficiencies.

There is no capital cost with this alternative.

Renovate the Existing Facility

As the Applicants do not own the building, they have determined that it will be better able to serve the needs of its patients if the service is relocated to a modern facility. While the Existing Facility houses 9 dialysis stations in 4,352 GSF, or 483.6 GSF per station, which meets the Board's standard for in-center hemodialysis facilities of this size, the space is inadequate to meet the facilities storage needs. The dedicated storage area is insufficient for storage of medical and office supplies, requiring some supplies to be stored in the BioMed and mechanical rooms, which have inadequate space to store supplies, creating a risk supplies stored on overloaded countertops and shelves could fall on staff. The Existing Facility has only one restroom for up to 2 male and 7 female teammates. There is no dedicated conference room. The conference room is a multi-purpose room as it serves not only as the conference room but as the teammates' break room, and the social worker's or dietitian's office when both are present at the facility on the same day. If a meeting is taking place, teammates have nowhere to eat or relax during their breaks. Additionally, the break room is an inappropriate setting for plan of care meetings, near the teammates' food, sink, and microwave. The conference room cannot accommodate team meetings with the Medical Director. As a result, teammates frequently block the doorway during these meetings, creating a fire hazard. Patient privacy concerns also exist. The treatment floor is compact, making it difficult for nurses to have telephone conversations with medical providers without being overheard. The Administrative Assistant's office, which also serves as the reception desk has no window, just an opening in the wall between her office and the waiting area, creating additional privacy concerns. Flooring, believed to be original, is breaking up and has

seams splitting throughout the clinic, causing a potential tripping hazard for patients and staff. The scale, which was built into the floor and takes up the entire width of the hallway, creates a safety concern whenever it is used by a patient in a large wheelchair. The wheelchair blocks the path to the waiting area, and in the event of an emergency, prevents the use of an exit. Restricted waiting area space also means there is no wheelchair storage in the clinic.

The Applicants considered renovating the Existing Facility. However, many of the issues identified cannot be addressed through renovation. The Existing Facility is landlocked from behind and to the side and the drafting of a possible expansion revealed a maximum capacity of only two additional ESRD stations at the Existing Facility to 11, with no room to expand beyond that total in the future. Thus, the Applicants decided to relocate to a modern facility with an updated functional design and space to expand, to address the growing need for dialysis services in the community, to better address its patients' needs and improve access to a broader patient-base.

#### Utilize Existing Facilities

The Replacement Facility is needed to serve the growing demand for dialysis services in the area. Currently, as of April 30, 2015, the Existing Facility serves 38 in-center ESRD patients. Teresa Kravets, M.D., the Medical Director for Morris Dialysis, anticipates all 38 current patients will transfer to the Replacement Facility. Furthermore, Dr. Kravets is currently treating 82 Stage 4 & 5 CKD patients who all reside within approximately 30 minutes of the proposed facility. See Appendix – 3. Conservatively, based upon attrition due to patient death, transplant, or return of function, it is projected that 51 of these pre-ESRD patients will require dialysis within 12 to 24 months of project completion. As shown in Attachment – 12A, including the Existing Facility, there are currently 8 existing or approved dialysis facilities within 30 minutes normal travel time of the proposed location of the Replacement Facility (7 facilities, excluding FMC Morris, will close with the opening of FMC Plainfield North). Importantly, within a 20 minute drive time of the Replacement Facility, there will be no other in-center hemodialysis facilities, once FMC Morris closes. The utilization of Morris Dialysis, should it capture the 9 FMC Morris patients that reside closest to the Replacement Facility, would climb to 87.0%, and would exceed the State Board's utilization standard of 80%, without factoring in any new patient referrals. Accordingly, there will be insufficient capacity to accommodate all of Dr. Kravet's future projected patients. With this expected growth in patient volume, the Existing Facility must relocate in order to accommodate current and future ESRD patients residing in and around Morris. The Replacement Facility will be plumbed to accommodate up to 16 stations, which will allow for a future census capacity of 96 in-center ESRD patients.

There is no capital cost with the alternative of utilizing Existing Facilities. However, as stated above, there will be no other Existing Facilities within 20 minutes of the Replacement Facility, creating hardships for patients.

#### Relocate Morris Dialysis

DaVita determined that the most effective and efficient way to serve its patients and address the dialysis needs of HSA 9 is to relocate the Existing Facility. The proposed site for the Replacement Facility is located 1.05 miles from the current site, and will adequately serve Morris Dialysis' current and projected patient-base.

Thus, the Applicants selected this option.

The cost associated with this option is **\$2,633,643**.

**Section IV, Project Scope, Utilization, and Unfinished/Shell Space**  
**Criterion 1110.234(a), Size of the Project**

The Applicants propose to relocate an existing dialysis facility. Pursuant to Section 1110, Appendix B of the HFSRB's rules, the State standard allows for a maximum of 4,320 to 6,240 gross square feet for 12 dialysis stations. The Replacement Facility will include approximately 5,854 gross square feet of clinical space and 846 gross square feet of non-clinical space for a total of 6,700 gross rentable square feet. The Replacement Facility falls below the State standard by 386 GSF (approximately 32.2 GSF per station).

Table 1110.234(a) SIZE OF PROJECT				
DEPARTMENT/SERVICE	PROPOSED BGSF/DGSF	STATE STANDARD	DIFFERENCE	MET STANDARD?
ESRD	5,854 GSF	6,240 GSF	386	EXCEEDS

**Section IV, Project Scope, Utilization, and Unfinished/Shell Space**  
**Criterion 1110.234(b), Project Services Utilization**

By the second year of operation, the Replacement Facility's annual utilization will meet HFSRB's utilization standard of 80%. Pursuant to Section 1100.1430 of the HFSRB's rules, facilities providing in-center hemodialysis should operate their dialysis stations at or above an annual utilization rate of 80%, assuming three patient shifts per day per dialysis station, operating six days per week.

Teresa Kravets, M.D., the Medical Director for Morris Dialysis, anticipates all 38 current patients will transfer to the Replacement Facility. Furthermore, Dr. Kravets is currently treating 82 Stage 4 & 5 CKD patients who reside within approximately 30 minutes of the proposed facility. See Appendix – 3. Conservatively, based upon attrition due to patient death, transplant, or return of function, it is projected that 51 of these pre-ESRD patients will require dialysis within 12 to 24 months of project completion. In addition, the FMC Morris facility currently treats 14 patients who live approximately 20 minutes from that facility (See App. Proj. No. 14-065 p 83). Fresenius anticipates most of the existing FMC Morris patients will transfer to FMC Plainfield North, FMC Plainfield, FMC Ottawa or DaVita's Morris Dialysis facility. Based upon proximity to the FMC Morris patients' residences, we anticipate at least 9 of the displaced FMC Morris patients will transfer to DaVita's Morris Dialysis facility. We predict at least 58 patients will receive treatment at the Replacement Facility within 24 months of project completion.

	<b>Dept./ Service</b>	<b>Historical Utilization (Treatments)</b>	<b>Projected Utilization</b>	<b>State Standard</b>	<b>Met Standard?</b>
<b>2013</b>	ESRD	4,794	N/A	6,739	No
<b>2014</b>	ESRD	5,199	N/A	6,739	No
<b>2018 Projected</b>	ESRD	N/A	<b>9,048</b>	8,986	Yes

**Section IV, Project Scope, Utilization, and Unfinished/Shell Space**  
**Criterion 1110.234(c), Unfinished or Shell Space**

This project will not include unfinished space designed to meet an anticipated future demand for service. Accordingly, this criterion is not applicable.

**Section IV, Project Scope, Utilization, and Unfinished/Shell Space**  
**Criterion 1110.234(d), Assurances**

This project will not include unfinished space designed to meet an anticipated future demand for service. Accordingly, this criterion is not applicable.

**Section VII, Service Specific Review Criteria**  
**In-Center Hemodialysis**  
**Criterion 1110.1430(b), Planning Area Need**

1. Planning Area Need

The Applicants propose to discontinue the Existing Facility of 9-stations located at 1551 Creek Drive, Morris, Illinois 60450 and establish a 12-station facility 1.05 miles, or 2 minutes away, to 180 Waverly Street, Morris, Illinois 60450 (the "Replacement Facility"). The Existing Facility is suboptimal for both patients and staff. The design and size of the Existing Facility creates operational and logistical inefficiencies and does not comply with DaVita's internal physical plant standards. Additionally, the Existing Facility has privacy and functionality concerns. The parking lot is prone to flooding, with even small amounts of rain, causing safety concerns for the patients and teammates of the Existing Facility. The proposed relocation site will be in a shopping center, with a larger parking lot that is less prone to flooding.

The site of the Replacement Facility will be in a shopping center, approximately 1.05 miles away. The increased size of the Replacement Facility will allow for a larger conference room, a dedicated break room for teammates, separate offices for the social worker and dietitian, a larger treatment floor, adequate restroom facilities for teammates, and proper storage for all medical and office supplies. Thus, the Applicants must relocate to a modern facility with enhanced accommodations and improved utilities to better provide for current and future ESRD patient needs and improve access.

Teresa Kravets, M.D., the Medical Director for Morris Dialysis, anticipates all 38 current patients will transfer to the Replacement Facility. See Appendix – 3. Furthermore, Dr. Kravets is currently treating 82 Stage 4 & 5 CKD patients who reside within approximately 30 minutes of the proposed facility. See Appendix – 3. Conservatively, based upon attrition due to patient death, transplant, or return of function, it is projected that 51 of these pre-ESRD patients will require dialysis within 12 to 24 months of project completion. In addition, the FMC Morris facility currently treats 14 patients who live approximately 20 minutes from that facility. (See App. Proj. No. 14-065 p 83). Fresenius anticipates most of the existing FMC Morris patients will transfer to FMC Plainfield North, FMC Plainfield, FMC Ottawa or DaVita's Morris Dialysis facility. Based upon proximity to the FMC Morris patients' residences, the Applicants anticipate at least 9 of the displaced FMC Morris patients will transfer to DaVita's Morris Dialysis facility. The Applicants predict at least 58 patients will receive treatment at the Replacement Facility within 24 months of project completion.

The relocation of Morris Dialysis is necessary to meet the dialysis needs of these patients. See Appendix – 3.

2. Service to Planning Area Residents

The primary purpose is to ensure that the ESRD patient population of the greater Morris area has access to life sustaining dialysis. As evidenced in the physician referral letter attached at Appendix – 3, all 38 current patients are expected to transfer to the proposed facility and 82 of Dr. Kravet's Stage 4 and 5 pre-ESRD patients live within approximately 30 minutes of the proposed facility. The current 14 patients of FMC Morris will be welcomed as transfer patients to Morris Dialysis and allow them to avoid the hardship of potential farther commutes to FMC Plainfield North, FMC Plainfield, or FMC Ottawa. As stated previously, based upon proximity to the FMC Morris patients' residences, we anticipate at least 9 of the 14 displaced FMC Morris patients will transfer to the Replacement Facility for Morris Dialysis.

### 3. Service Demand – Establishment of In-Center Hemodialysis Service

Teresa Kravets, M.D., the Medical Director for Morris Dialysis, anticipates all 38 current patients will transfer to the Replacement Facility. See Appendix – 3. Furthermore, Dr. Kravets is currently treating 82 Stage 4 & 5 CKD patients who reside within approximately 30 minutes of the proposed facility. See Appendix – 3. Conservatively, based upon attrition due to patient death, transplant, or return of function, it is projected that 51 of these pre-ESRD patients will require dialysis within 12 to 24 months of project completion. In addition, the FMC Morris facility currently treats 14 patients who live approximately 20 minutes from FMC Morris (See App. Proj. No. 14-065 p 83). Fresenius anticipates most of the existing FMC Morris patients will transfer to FMC Plainfield North, FMC Plainfield, FMC Ottawa or DaVita's Morris Dialysis facility. Based upon proximity to the FMC Morris patients' residences, The Applicants anticipate at least 9 of the displaced FMC Morris patients will transfer to DaVita's Morris Dialysis facility. The Applicants predict at least 58 patients will receive treatment at the Replacement Facility within 24 months of project completion.

#### Service Accessibility

As set forth throughout this application, the proposed relocation is needed to maintain access to life-sustaining dialysis for patients in the greater Morris area. With the impending closure of FMC Morris, the relocation is necessary to provide essential care to ESRD patients in the Morris community. Further, the Existing Facility is in need of repair and cannot adequately serve the patients' needs. The Replacement Facility will better accommodate current and future demand for dialysis services and ensure dialysis services are accessible to residents of Morris.

**Section VII, Service Specific Review Criteria**  
**In-Center Hemodialysis**  
**Criterion 1110.1430(c), Unnecessary Duplication/Maldistribution**

1. Unnecessary Duplication

- a. The proposed dialysis facility will be located at 180 East Waverly Street, Morris, Illinois 60450. A map of the Morris Dialysis market area is attached at Attachment – 26A. A list of all zip codes located, in total or in part, within 30 minutes normal travel time of the site of the proposed dialysis facility as well as 2010 census figures for each zip code is provided in Table 1110.1430(c)(1)(A) below.

<b>Table 1110.1430(c)(1)(A)</b>		
<b>Population of Zip Codes within 30 Minutes</b>		
<b>of Proposed Facility</b>		
<b>Zip Code</b>	<b>City</b>	<b>Population</b>
61350	OTTAWA	24,246
60557	WEDRON	155
61360	SENECA	3,393
61341	MARSEILLES	8,234
60420	DWIGHT	6,102
60479	VERONA	760
60450	MORRIS	20,332
60424	GARDNER	2,440
60444	MAZON	1,761
60407	BRACEVILLE	1,684
60416	COAL CITY	9,397
60408	BRAIDWOOD	5,696
60410	CHANNAHON	12,687
60536	MILLBROOK	126
60541	NEWARK	3,148
60560	YORKVILLE	22,415
60447	MINOOKA	13,709
60404	SHOREWOOD	17,395
60586	PLAINFIELD	46,251
60431	JOLIET	22,577
60436	JOLIET	18,315
60435	JOLIET	48,899
60403	CREST HILL	17,529
60433	JOLIET	17,160
<b>TOTAL</b>		<b>324,411</b>

Source: U.S. Census Bureau, Census 2010, Zip Code Fact Sheet available at <http://factfinder2.census.gov/faces/nav/jsf/pages/index.html> (last visited May 11, 2015).

- b. A list of existing and approved dialysis facilities located within 30 minutes normal travel time of the proposed dialysis facility is provided at Attachment – 26B.

**2. Maldistribution of Services**

The proposed dialysis facility will not result in a maldistribution of services. A maldistribution exists when an identified area has an excess supply of facilities, stations, and services characterized by such factors as, but not limited to: (1) ratio of stations to population exceeds one and one-half times the State Average; (2) historical utilization for existing facilities and services is below the State Board's utilization standard; or (3) insufficient population to provide the volume or caseload necessary to utilize the services proposed by the project at or above utilization standards. As discussed more fully below, the ratio of stations to population in the geographic service area is 103.0% of the State average, and the average utilization of existing and approved dialysis facilities within the GSA, as of 3/31/2015, is 61.8%. Importantly, within a 20 minute drive time of the Replacement Facility, there will be no other in-center hemodialysis facilities, once FMC Morris closes. The utilization of Morris Dialysis, should it capture the 9 FMC Morris patients that reside closest to the proposed replacement facility, would immediately climb to 87.0% and exceed the State Board's utilization standard of 80%. Accordingly, there will be insufficient capacity to accommodate all of Dr. Kravets' future projected patients. With this expected growth in patient volume, the Existing Facility must relocate in order to have the capacity to expand in subsequent years. The Replacement Facility will be plumbed to accommodate up to 16 stations, which will allow for a future census capacity of 96 in-center ESRD patients. Sufficient population exists to achieve target utilization. Accordingly, the proposed dialysis facility will not result in a maldistribution of services.

**a. Ratio of Stations to Population**

As shown in Table 1110.1430(c)(2)(A), the ratio of stations to population is 103.0% of the State Average.

<b>Table 1110.1430(c)(2)(A) Ratio of Stations to Population</b>				
	<b>Population</b>	<b>Dialysis Stations</b>	<b>Stations to Population</b>	<b>Standard Met?</b>
Geographic Service Area	324,411	109	1:2,976	Yes
State	12,830,632	4,185	1:3,066	

**b. Historic Utilization of Existing Facilities**

As recently as April 30, 2015, the Existing Facility operated at 70.4% utilization. Following relocation to a more accessible modern space, Dr. Kravets anticipates that she will refer approximately 51 of the current pre-ESRD patients within the first 12 to 24 months of project completion. 11 of these patients reside less than 20 minutes from the proposed Replacement Facility. In addition, the Replacement Facility expects to capture the 9 FMC Morris patients that reside closest to its location, upon the closure of FMC Morris. As a result, the facility will reach target utilization, with a minimum census of 58 patients, within 24 months following project completion. Accordingly, there is sufficient patient population to justify the need for the Replacement Facility. There will be no maldistribution of services.

**c. Sufficient Population to Achieve Target Utilization**

The Applicants propose to discontinue their existing 9-station facility and establish a 12-station facility. The Existing Facility treated 38 patients, as of April 30, 2015. To achieve the State Board's 80% utilization standard for a 12-station facility, within the first two years after project completion, the Applicants would need 20 any additional patient referrals. As stated

in Appendix – 3, conservatively, Dr. Kravets anticipates referring 51 of the current pre-ESRD patients within 12 to 24 months of project completion. 11 of these CKD patients reside less than 20 minutes from the proposed Replacement Facility. In addition, the FMC Morris facility currently treats 14 patients who live approximately 20 minutes from FMC Morris (See App. Proj. No. 14-065 p 83). Fresenius anticipates most of the existing FMC Morris patients will transfer to FMC Plainfield North, FMC Plainfield, FMC Ottawa or DaVita's Morris Dialysis facility. Based upon proximity to the FMC Morris patients' residences, the Applicants anticipate at least 9 of the displaced FMC Morris patients will transfer to DaVita's Morris Dialysis facility. The Applicants predict at least 58 patients will receive treatment at the Replacement Facility within 24 months of project completion.

As the future referrals to Morris Dialysis grow, the proposed dialysis facility will have the capacity to expand to accommodate the additional patients. Accordingly, there is sufficient population to achieve target occupancy.

### 3. Impact to Other Providers

- a. The proposed dialysis facility will not have an adverse impact on existing facilities in the proposed geographic service area. All of the identified patients will either be transfers from the Existing Facility, transfers from \*FMC Morris, or referrals of pre-ESRD patients. No patients will be transferred from other existing dialysis facilities. (\*Any patient transfers from FMC Morris would be expected to occur upon the closing of that facility.)
- b. The proposed dialysis facility will not lower the utilization of other area providers that are operating below the occupancy standards.



End Stage Renal Disease Facility	Address	City	Distance	Drive Time	03-31-2015 Stations	03-31-2015 Patients	03-31-2015 Utilization
Renal Care Group - Ottawa	1601 Mercury Court	Ottawa	23.31	28	12	31	0.4306
Silver Cross Renal Center Morris	1547 Creek Drive	Morris	1.05	2	9	36	0.6667
Renal Care Group - Morris	1401 Lakewood Dr., Suite B,C	Morris	1.28	2	0	14	0.7333
Fresenius Medical Care of Plainfield	2320 Michas Drive	Plainfield	22.52	27	16	74	0.7708
Silver Cross Renal Center West	1051 Essington Road Ste 140	Joliet	20.43	24	29	127	0.7299
Fresenius Medical Care Plainfield North	24020 Riverwalk Court	Plainfield	25.72	30	10	0	0
Sun Health	2121 Oneida St. Ste 104	Joliet	21.18	24	17	56	0.549
Fresenius Medical Care Joliet	721 East Jackson Street	Joliet	24.48	29	16	66	0.6875

**Section VII, Service Specific Review Criteria**  
**In-Center Hemodialysis**  
**Criterion 1110.1430(e), Staffing**

1. The proposed facility will be staffed in accordance with all State and Medicare staffing requirements.
  - a. Medical Director Teresa Kravets M.D. will serve as the Medical Director for the proposed facility. A copy of Dr. Kravets' curriculum vitae is attached at Attachment – 26C.
  - b. As discussed throughout this application, the Applicants seek authority to discontinue their existing 9-station dialysis facility and establish and relocate to a 12-station dialysis facility. The Existing Facility is Medicare certified and fully staffed with a medical director, administrator, registered nurses, patient care technicians, social worker, and registered dietitian. Upon discontinuation of the Existing Facility, all current staff will be transferred to the Replacement Facility.
2. All staff will be trained under the direction of the facility's Governing Body, utilizing DaVita's comprehensive training program. DaVita's training program meets all State and Medicare requirements. The training program includes introduction to the dialysis machine, components of the hemodialysis system, infection control, anticoagulation, patient assessment/data collection, vascular access, kidney failure, documentation, complications of dialysis, laboratory draws, and miscellaneous testing devices used. In addition, it includes in-depth theory on the structure and function of the kidneys; including homeostasis, renal failure, ARF/CRF, uremia, osteodystrophy and anemia, principles of dialysis; components of hemodialysis system; water treatment; dialyzer reprocessing; hemodialysis treatment; fluid management; nutrition; laboratory; adequacy; pharmacology; patient education, and service excellence. A summary of the training program is attached at Attachment – 26D.
3. As set forth in the letter from Arturo Sida, Assistant Corporate Secretary of DaVita HealthCare Partners Inc., attached at Attachment – 26E, the Replacement Facility will maintain an open medical staff.

### CURRICULUM VITAE

**NAME:** Teresa Majka-Kravets, M.D.

(815) 744-5550

#### EDUCATION:

B. Nowodworski 1<sup>st</sup> Licencja  
Ogólnokształcące at Krakow,  
Poland (Sept 1976-June 1980)

College, graduated with honors.  
Major: Biology, Chemistry, Physics

N. Copernicus Medical Academy  
Krakow, Poland  
(1980-1986)

One of the top ten students. Awarded  
for outstanding academic  
achievement. Medical Doctor  
Diploma: June 1986

#### Education in the U.S.A.:

Stanley H. Kaplan Educational Center  
(1988-1989)

FMGEMS Basic and Clinical review  
course

#### PROFESSIONAL EXPERIENCE:

University of Illinois at Chicago,  
Department of Pathology  
(1989-1990)

Research: Fellow, work on  
arteriosclerosis in human

Louis Weiss Memorial Hospital  
Chicago, IL  
(June 1990-June 1991)

Internship: Transitional Medicine  
Direct patients care, experience in  
internal medicine, surgery, oncology,  
emergency medicine.

St. Joseph Hospital  
Chicago, IL  
(June 1991-August 1993)

Residency: Internal Medicine  
Direct patient care including inpatient  
and outpatient experience

University of Illinois  
Chicago, IL  
(October 1993-September 1995)

Nephrology fellowship  
Clinical Nephrology,  
dialysis, Renal Transplant  
follow up. Research.

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Northeast\_Nephology • PD

006/008

Northeast Nephology Consultants  
Joliet, IL  
December 15, 1995-Present

Physician, Nephrology Practice

Silver Cross Hospital  
Joliet, IL  
2001-2005

Chairman,  
Department of Nephrology

Silver Cross Hospital  
Department of Medicine  
2001-Present

Assistant Director of Dialysis

Silver Cross Hospital  
Joliet, IL  
2003-2004

Vice-Chairman  
Department of Medicine

Provena St Joseph Medical Center  
333 Madison  
Joliet, IL 60435  
2007- Present

Director  
Inpatient Dialysis Unit

**BOARD CERTIFIED:**

Internal Medicine - 1995 Recertified 2005-2015  
Nephrology - 1996 Recertified 2006-2016

**TITLE: BASIC TRAINING PROGRAM OVERVIEW**

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**Mission**

DaVita's Basic Training Program for Hemodialysis provides the instructional preparation and the tools to enable teammates to deliver quality patient care. Our core values of *service excellence, integrity, team, continuous improvement, accountability, fulfillment and fun* provide the framework for the Program. Compliance with State and Federal Regulations and the inclusion of DaVita's Policies and Procedures (P&P) were instrumental in the development of the program.

**Explanation of Content**

Two education programs for the new nurse or patient care technician (PCT) are detailed in this section. These include the training of new DaVita teammates **without** previous dialysis experience and the training of the new teammates **with** previous dialysis experience. A program description including specific objectives and content requirements is included.

This section is designed to provide a *quick reference* to program content and to provide access to key documents and forms.

The **Table of Contents** is as follows:

- I. Program Overview (TR1-01-01)
- II. Program Description (TR1-01-02)
  - Basic Training Class Outline (TR1-01-02A)
  - Basic Charge Nurse Training Class Outline (TR1-01-02B)
- III. Education Enrollment Information (TR1-01-03)
- IV. Education Standards (TR1-01-04)
- V. Verification of Competency
  - New teammate without prior experience (TR1-01-05)
  - New teammate with prior experience (TR1-01-06)
  - Medical Director Approval Form (TR1-01-07)
- VI. Evaluation of Education Program
  - Program Evaluation
  - Basic Training Classroom Evaluation (TR1-01-08A)
  - Basic Charge Nurse Training Classroom Evaluation (TR1-01-08B)
  - Curriculum Evaluation
- VII. Additional Educational Forms
  - New Teammate Weekly Progress Report for the PCT (TR1-01-09)
  - New Teammate Weekly Progress Report for Nurses (TR1-01-10)
  - Training hours tracking form (TR1-01-11)
- VIII. State-specific information/forms (as applicable)

**TITLE: BASIC TRAINING FOR HEMODIALYSIS PROGRAM  
DESCRIPTION**

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**Introduction to Program**

The Basic Training Program for Hemodialysis is grounded in DaVita's Core Values. These core values include a commitment to providing *service excellence*, promoting *integrity*, practicing a *team* approach, systematically striving for *continuous improvement*, practicing *accountability*, and experiencing *fulfillment* and *fun*.

The Basic Training Program for Hemodialysis is designed to provide the new teammate with the theoretical background and clinical skills necessary to function as a competent hemodialysis patient care provider.

DaVita hires both non-experienced and experienced teammates. Newly hired teammates must meet all applicable State requirements for education, training, credentialing, competency, standards of practice, certification, and licensure in the State in which he or she is employed. For individuals with experience in the armed forces of the United States, or in the national guard or in a reserve component, DaVita will review the individual's military education and skills training, determine whether any of the military education or skills training is substantially equivalent to the Basic Training curriculum and award credit to the individual for any substantially equivalent military education or skills training.

A **non-experienced teammate** is defined as:

- A newly hired patient care teammate without prior dialysis experience.
- A rehired patient care teammate who left prior to completing the initial training.
- A newly hired or rehired patient care teammate with previous dialysis experience who has not provided at least 3 months of hands on dialysis care to patients within the past 12 months.

An **experienced teammate** is defined as:

- A newly hired or rehired teammate who can show proof of completing a dialysis training program and has provided at least 3 months of hands on dialysis care to patients within the past 12 months.

The curriculum of the Basic Training Program for Hemodialysis is modeled after Federal Law and State Boards of Nursing requirements, the American Nephrology Nurses Association Core Curriculum for Nephrology Nursing, and the Board of Nephrology Examiners Nursing and Technology guidelines. The program also incorporates the policies, procedures, and guidelines of DaVita HealthCare Partners Inc.

“Day in the Life” is DaVita’s learning portal with videos for RNs, LPN/LVNs and patient care technicians. The portal shows common tasks that are done throughout the workday and provides links to policies and procedures and other educational materials associated with these tasks thus increasing their knowledge of all aspects of dialysis. It is designed to be used in conjunction with the “Basic Training Workbook.”

### **Program Description**

The education program for the newly hired patient care provider teammate **without prior dialysis experience** is composed of at least (1) 120 hours didactic instruction and a minimum of (2) 240 hours clinical practicum, unless otherwise specified by individual state regulations.

The **didactic phase** consists of instruction including but not limited to lectures, readings, self-study materials, on-line learning activities, specifically designed hemodialysis workbooks for the teammate, demonstrations and observations. This education may be coordinated by the Clinical Services Specialist (CSS), a nurse educator, the administrator, or the preceptor.

Within the clinic setting this training includes

- Principles of dialysis
- Water treatment and dialysate preparation
- Introduction to the dialysis delivery system and its components
- Care of patients with kidney failure, including assessment, data collection and interpersonal skills
- Dialysis procedures and documentation, including initiation, monitoring, and termination of dialysis
- Vascular access care including proper cannulation techniques
- Medication preparation and administration
- Laboratory specimen collection and processing
- Possible complications of dialysis
- Infection control and safety
- Dialyzer reprocessing, if applicable

The program also introduces the new teammate to DaVita Policies and Procedures (P&P), and the Core Curriculum for Dialysis Technicians.

The **didactic phase** also includes classroom training with the CSS or nurse educator. Class builds upon the theory learned in the Workbooks and introduces the students to more advanced topics. These include:

- Acute Kidney Injury vs. Chronic Renal Failure
- Manifestations of Chronic Renal Failure
- Normal Kidney Function vs. Hemodialysis
- Documentation & Flow Sheet Review

**Training Program Manual**  
**Basic Training for Hemodialysis**  
**DaVita HealthCare Partners Inc.**

**TR1-01-02**

- Patient Self-management
- Motivational Interviewing
- Infection Control
- Data Collection and Assessment
- Water Treatment and Dialyzer Reprocessing
- Fluid Management
- Pharmacology
- Vascular Access
- Renal Nutrition
- Laboratory
- The Hemodialysis Delivery System
- Adequacy of Hemodialysis
- Complications of Hemodialysis
- Importance of P&P
- Role of the Renal Social Worker
- Conflict Resolution
- The DaVita Quality Index

Also included are workshops, role play, and instructional videos. Additional topics are included as per specific state regulations.

A final comprehensive examination score of 80% (unless state requires a higher score) must be obtained to successfully complete this portion of the didactic phase. If a score of less than 80% is attained, the teammate will receive additional appropriate remediation and a second exam will be given.

Also included in the **didactic phase** is additional classroom training covering Health and Safety Training, systems/applications training, One For All orientation training, Compliance training, Diversity training, mandatory water classes, emergency procedures specific to facility, location of disaster supplies, and orientation to the unit.

The **didactic phase** for nurses includes three days of additional classroom training and covers the following topics:

- Nephrology Nursing, Scope of Practice, Delegation and Supervision, Practicing according to P&P
- Nephrology Nurse Leadership
- Impact – Role of the Nurse
- Care Planning including developing a POC exercise
- Achieving Adequacy with focus on assessment, intervention, available tools
- Interpreting laboratory Values and the role of the nurse

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Origination Date: 1995

Revision Date: August 2014, October 2014

Page 3 of 5

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**TR1-01-02**

- Hepatitis B – surveillance, lab interpretation, follow up, vaccination schedules
- TB Infection Control for Nurses
- Anemia Management – ESA Hyporesponse: a StarLearning Course
- Survey Readiness
- CKD-MBD – Relationship with the Renal Dietitian
- Pharmacology for Nurses – video
- Workshop
  - Culture of Safety, Conducting a Homeroom Meeting
  - Nurse Responsibilities, Time Management
  - Communication – Meetings, SBAR (Situation, Background, Assessment, Recommendation)
  - Surfing the VillageWeb – Important sites and departments, finding information

The **clinical practicum phase** consists of supervised clinical instruction provided by the facility preceptor, and/or a registered nurse. During this phase the teammate will demonstrate a progression of skills required to perform the hemodialysis procedures in a safe and effective manner. A *Procedural Skills Verification Checklist* will be completed to the satisfaction of the preceptor, and a registered nurse overseeing the training. The Basic Training workbook for Hemodialysis will also be utilized for this training and must be completed to the satisfaction of the preceptor and the registered nurse.

Those teammates who will be responsible for the Water Treatment System within the facility are required to complete the Mandatory Educational Water courses and the corresponding skills checklists.

Both the didactic phase and/or the clinical practicum phase will be successfully completed, along with completed and signed skills checklists, prior to the new teammate receiving an independent assignment. The new teammate is expected to attend all training sessions and complete all assignments and workbooks.

The education program for the newly hired patient care provider teammate **with previous dialysis experience** is individually tailored based on the identified learning needs. The initial orientation to the *Health Prevention and Safety Training* will be successfully completed prior to the new teammate working/receiving training in the clinical area. The new teammate will utilize the Basic Training Workbook for Hemodialysis and progress at his/her own pace. This workbook should be completed within a timely manner as to also demonstrate acceptable skill-level. The *Procedural Skills Verification Checklist* including verification of review of applicable P&P will be completed by the preceptor, and the registered nurse in charge of the training upon demonstration of an acceptable skill-level by the new teammate, and then signed by the new teammate, the RN trainer and the facility administrator.

Ideally teammates will attend Basic Training Class, however, teammates with experience may opt-out of class by successful passing of the *Initial Competency Exam* with a score of 80% or higher. The CSS or RN Trainer responsible for teaching Basic Training Class will enroll the new teammate with experience in the Initial Competency Exam on the LMS. The new teammate's preceptor will proctor the exam. The new experienced teammate should complete all segments of the workbook including the recommended resources to prepare for taking the *Initial Competency Exam* as questions not only assess common knowledge related to the hemodialysis treatment but also knowledge related to specific DaVita P&P, treatment outcome goals based on clinical initiatives and patient involvement in their care. Prior to the new teammate receiving an independent patient-care assignment, the skills checklist must be completed and signed along with a passing score from the classroom or the *Initial Competency Exam*. If the new teammate receives a score of less than 80% on the *Initial Competency Exam*, this teammate will be required to attend Basic Training Class. If the new teammate receives a score of less than 80% on the final comprehensive classroom exam, this teammate will receive theory instruction pertaining to the area of deficiency and a second competency exam will then be given. If the new teammate receives a score of less than 80% on the second exam, this teammate will be evaluated by the administrator, preceptor, and educator to determine if completion of formal training is appropriate.

Following completion of the training, a *Verification of Competency* form will be completed (see forms TR1-01-05, TR1-01-06). In addition to the above, further training and/or certification will be incorporated as applicable by state law.

The goal of the program is for the trainee to successfully meet all training requirements. Failure to meet this goal is cause for dismissal from the training program and subsequent termination by the facility.

### **Process of Program Evaluation**

The Hemodialysis Education Program utilizes various evaluation tools to verify program effectiveness and completeness. Key evaluation tools include the DaVita Basic Training Class Evaluation (TR1-01-08A) and Basic Training Nursing Fundamentals (TR1-0108B), the New Teammate Satisfaction Survey and random surveys of facility administrators to determine satisfaction of the training program. To assure continuous improvement within the education program, evaluation data is reviewed for trends, and program content is enhanced when applicable to meet specific needs.

**Section VII, Service Specific Review Criteria**  
**In-Center Hemodialysis**  
**Criterion 1110.1430(f), Support Services**

Attached at Attachment – 26E is a letter from Arturo Sida, Assistant Corporate Secretary of DaVita HealthCare Partners Inc. attesting that the proposed facility will participate in a dialysis data system, will make support services available to patients, and will provide training for self-care dialysis, self-care instruction, home and home-assisted dialysis, and home training.

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

**Re: Certification of Support Services**

Dear Chairwoman Olson:

I hereby certify under penalty of perjury as provided in § 1-109 of the Illinois Code of Civil Procedure, 735 ILCS 5/1-109 and pursuant to 77 Ill. Admin. Code § 1110.1430(f) that Morris Dialysis will maintain an open medical staff.

I also certify the following with regard to needed support services:

- DaVita utilizes an dialysis electronic data system;
- Morris Dialysis will have available all needed support services required by CMS which may consist of clinical laboratory services, blood bank, nutrition, rehabilitation, psychiatric services, and social services; and
- Patients, either directly or through other area DaVita facilities, will have access to training for self-care dialysis, self-care instruction, and home hemodialysis and peritoneal dialysis.

Sincerely,



Print Name: Arturo Sida  
Its: Assistant Corporate Secretary  
DaVita HealthCare Partners Inc.

Subscribed and sworn to me  
This \_\_\_ day of \_\_\_\_\_, 2015

\_\_\_\_\_  
Notary Public

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California

County of Los Angeles

On May 18, 2015 before me, Kimberly Ann K. Burgo, Notary Public  
(here insert name and title of the officer)

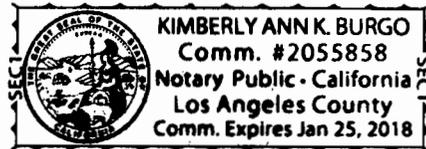
personally appeared \*\* Arturo Sida \*\*

who proved to me on the basis of satisfactory evidence to be the person~~(s)~~ whose name~~(s)~~ is/~~are~~ subscribed to the within instrument and acknowledged to me that he/~~she/they~~ executed the same in his/~~her/their~~ authorized capacity~~(ies)~~, and that by his/~~her/their~~ signature~~(s)~~ on the instrument the person~~(s)~~, or the entity upon behalf of which the person~~(s)~~ acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal

*Kimberly Ann K. Burgo*  
Signature



**OPTIONAL INFORMATION**

Law does not require the information below. This information could be of great value to any person(s) relying on this document and could prevent fraudulent and/or the reattachment of this document to an unauthorized document(s)

**DESCRIPTION OF ATTACHED DOCUMENT**

Title or Type of Document: Ltr. to K.Olson re Certification of Support Services (Morris Dialysis)

Document Date: May 18, 2015 Number of Pages: 1 (one)

Signer(s) if Different Than Above: \_\_\_\_\_

Other Information: \_\_\_\_\_

**CAPACITY(IES) CLAIMED BY SIGNER(S)**

Signer's Name(s):

- Individual
- Corporate Officer

\_\_\_\_\_  
(Title(s))

- Partner
- Attorney-in-Fact
- Trustee
- Guardian/Conservator
- Other: Assistant Corporate Secretary

**SIGNER IS REPRESENTING:** Name of Person or Entity DaVita HealthCare Partners Inc.

**Section VII, Service Specific Review Criteria**  
**In-Center Hemodialysis**  
**Criterion 1110.1430(g), Minimum Number of Stations**

The proposed dialysis facility will be located in the Chicago-Joliet-Naperville metropolitan statistical area ("MSA"). A dialysis facility located within an MSA must have a minimum of eight dialysis stations. The Applicants propose to establish a 12-station dialysis facility. Accordingly, this criterion is met.

**Section VII, Service Specific Review Criteria**  
**In-Center Hemodialysis**  
**Criterion 1110.1430(h), Continuity of Care**

DaVita HealthCare Partners Inc. has an agreement with Morris Hospital to provide inpatient care and other hospital services. Attached at Attachment – 26F is a copy of the service agreement with this area hospital.

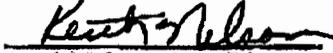


This agreement between Morris Hospital and Silver Cross Hospital Renal Center Morris states that:

1. Morris Hospital can provide inpatient and acute dialysis care in case of the need for hospitalization and emergency care for our outpatients
2. Morris Hospital ensures that hospital services are available to the dialysis facility's patients when needed
3. Patients from Silver Cross Hospital Renal Center Morris are accepted and treated in emergency situations
4. The agreement will be in force unless terminated in writing by either party.

The Silver Cross Hospital Renal Center Morris hours of operation are Monday through Saturday, 5:00 AM to 4:30 PM. The contact at the dialysis facility is Debi Duggins, RN Coordinator, 815-942-3995

  
 Bill Bfude, President and CEO  
 Morris Hospital

  
 Keith Nelson, Adm Director  
 Silver Cross Hospital Renal Morris

**Section VII, Service Specific Review Criteria**  
**In-Center Hemodialysis**  
**Criterion 1110.1430(i), Relocation of Facilities**

The Existing Facility was acquired by DaVita in July of 2012 and is in its sixteenth year of operation. It is suboptimal for patients and staff, and in need of repair. Due to patient safety, privacy, and functionality concerns, the outdated Existing Facility simply cannot accommodate the existing and future patients' needs.

The Existing Facility is located at 1551 Creek Drive in Morris, Illinois. As shown on the flood plain map, attached at Attachment – 10A, the Existing Facility is located near the East Fork Nettle Creek flood plain. The parking lot frequently floods, even with small amounts of rain, and is in a continuous state of disrepair. Extended periods of moisture on the lot's surface create added fall risks for patients, who are often elderly, suffer multiple co-morbidities and/or rely on assistive devices. Relocating to a site with minimal flooding risks will improve patient safety.

The Existing Facility is not equipped to adequately handle deliveries of supplies. The rear door is a single door, not a double door. Drivers must break down most deliveries to fit through the single door and either park near the back door of the facility, blocking an emergency exit, or on the street, making multiple trips to cart in deliveries.

Additionally, the design and size of the Existing Facility creates operational and logistical inefficiencies. While the Existing Facility houses 9 dialysis stations in 4,352 GSF, or 483.6 GSF per station, which meets the Board's standard for in-center hemodialysis facilities of this size, the space is inadequate to meet the facilities storage needs. The dedicated storage area is insufficient for storage of medical and office supplies, requiring some supplies to be stored in the BioMed and mechanical rooms, which have inadequate space to store supplies, creating a risk supplies stored on overloaded countertops and shelves could fall on staff. The Existing Facility has only one restroom for up to 2 male and 7 female teammates. There is no dedicated conference room. The conference room is a multi-purpose room as it serves not only as the conference room but as the teammates' break room, and the social worker's or dietitian's office when both are present at the facility on the same day. If a meeting is taking place, teammates have nowhere to eat or relax during their breaks. Additionally, the break room is an inappropriate setting for plan of care meetings, near the teammates' food, sink, and microwave. The conference room cannot accommodate team meetings with the Medical Director. As a result, teammates frequently block the doorway during these meetings, creating a fire hazard. Patient privacy concerns also exist. The treatment floor is compact, making it difficult for nurses to have telephone conversations with medical providers without being overheard. The Administrative Assistant's office, which also serves as the reception desk has no window, just an opening in the wall between her office and the waiting area, creating additional privacy concerns. Flooring, believed to be original, is breaking up and has seams splitting throughout the clinic, causing a potential tripping hazard for patients and staff. The scale, which was built into the floor and takes up the entire width of the hallway, creates a safety concern whenever it is used by a patient in a large wheelchair. The wheelchair blocks the path to the waiting area, and in the event of an emergency, prevents the use of an exit. Restricted waiting area space also means there is no wheelchair storage in the clinic.

The site of the Replacement Facility will be in a shopping center, approximately 1.05 miles away. Patient safety will be enhanced, as the parking lot is less prone to flooding, reducing the risk of patient falls. The increased size of the Replacement Facility will allow for a larger conference room, a dedicated break room for teammates, separate offices for the social worker and dietitian, a larger treatment floor, adequate restroom facilities for teammates, and proper storage for all medical and office supplies. Thus, the Applicants must relocate to a modern facility with enhanced accommodations and improved facilities to better provide for current and future ESRD patient needs.

**Section VII, Service Specific Review Criteria**  
**In-Center Hemodialysis**  
**Criterion 1110.1430(j), Assurances**

Attached at Attachment – 26G is a letter from Arturo Sida, Assistant Corporate Secretary of DaVita HealthCare Partners Inc. and Total Renal Care, Inc. certifying that the proposed facility will achieve target utilization by the second year of operation

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

**Re: In-Center Hemodialysis Assurances**

Dear Chairwoman Olson:

Pursuant to 77 Ill. Admin. Code § 1110.1430(j), I hereby certify the following:

- By the second year after project completion, Morris Dialysis expects to achieve and maintain 80% target utilization; and
- Morris Dialysis also expects hemodialysis outcome measures will be achieved and maintained at the following minimums:
  - $\geq 85\%$  of hemodialysis patient population achieves urea reduction ratio (URR)  $\geq 65\%$  and
  - $\geq 85\%$  of hemodialysis patient population achieves Kt/V Daugirdas II .1.2

Sincerely,



Print Name: Arturo Sida  
Its: Assistant Corporate Secretary  
DaVita HealthCare Partners Inc.

Subscribed and sworn to me  
This \_\_\_ day of \_\_\_\_\_, 2015

Notary Public

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California

County of Los Angeles

On May 18, 2015 before me, Kimberly Ann K. Burgo, Notary Public  
(here insert name and title of the officer)

personally appeared \*\* Arturo Sida \*\*

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

*Kimberly Ann K. Burgo*  
Signature



**OPTIONAL INFORMATION**

Law does not require the information below. This information could be of great value to any person(s) relying on this document and could prevent fraudulent and/or the reattachment of this document to an unauthorized document(s)

**DESCRIPTION OF ATTACHED DOCUMENT**

Title or Type of Document: Ltr. to K.Olson re In-Center Hemodialysis Assurances (Morris Dialysis)

Document Date: May 18, 2015 Number of Pages: 1 (one)

Signer(s) if Different Than Above: \_\_\_\_\_

Other Information: \_\_\_\_\_

**CAPACITY(IES) CLAIMED BY SIGNER(S)**

Signer's Name(s):

- Individual
- Corporate Officer

\_\_\_\_\_  
(Title(s))

- Partner
- Attorney-in-Fact
- Trustee
- Guardian/Conservator
- Other: Assistant Corporate Secretary

**SIGNER IS REPRESENTING:** Name of Person or Entity DaVita HealthCare Partners Inc.

**Section VIII, Financial Feasibility**  
**Criterion 1120.120 Availability of Funds**

The project will be funded entirely with cash and cash equivalents, and a lease from Arthur Hornsby. A copy of DaVita's 2014 10-K Statement evidencing sufficient internal resources to fund the project was previously submitted with the application for Project No. 15-020. A letter of intent to lease the facility is attached at Attachment - 36.



**JOHNSON CONTROLS REAL ESTATE SERVICES INC.**  
*A JOHNSON CONTROLS COMPANY*

June 3, 2015

Mr. Shawn Hornsby  
Century 21 Coleman-Hornsby  
1802 N Division St #108  
Morris, IL 60450

**RE: LOI – 180 E Waverly St, Morris, IL 60450**

Dear Shawn:

Johnson Controls Real Estate Services, Inc. ("JCI") has been exclusively authorized by Total Renal Care, Inc – a subsidiary of DaVita HealthCare Partners, Inc. ("DaVita") to assist in securing a lease requirement. DaVita is a Fortune 500 company with approximately 2,000 locations across the US and revenues of approximately \$11.5 billion.

Below is the proposal outlining the terms and conditions wherein the Tenant is willing to lease the subject premises, with some modifications as the entirety of the then circumstances may require:

**PREMISES:** **180 E Waverly St, Morris, IL 60450**

Lot 22 of Roseman's Subdivision of 95.32 acres of the Northeast Quarter of Section 4, Township 33 North, Range 7 East of the Third Principal Meridian, in the City of Morris, in Grundy County, Illinois.

**TENANT:** Total Renal Care, Inc. or related entity to be named

**LANDLORD:** Arthur Hornsby

**SPACE REQUIREMENTS:** Approximately 6,700 square contiguous rentable square feet. Tenant shall have the right to measure space based on most recent BOMA standards.

**PRIMARY TERM:** Ten (10) years

**BASE RENT:** \$13.00 psf NNN Y1;  
Base rent for Y2 through Y10 will be the previous year's base rent plus a cost of living increase. The cost of living increase to the base rent shall be made annually on the anniversary of the lease and shall be a percentage increase over the previous year's base rent equal to the percentage increase in the Consumer Price Index, comparing the CPI for March before the anniversary date of this lease to the CPI for March one year earlier. The Consumer price index employed shall be the index as maintained by the Federal Bureau of Labor Statistics, Consumer Price index for All Urban Consumers, selected areas, all item index for the Chicago, Gary and Kenosha area. The cost of living increase shall be no greater than 5% in any given year.

**ADDITIONAL EXPENSES:** *Please provide an estimated annual cost per square foot for any and all additional operating expenses for which the Tenant will be responsible for paying including Taxes, Insurance and CAM.*

*Estimated to be \$1.50 psf.*

All utilities separately metered to Tenant and Tenant responsibility.

Landlord to limit the cumulative operating expense costs to \$1.50 psf in the first full lease year and no greater than 5% increases annually thereafter on controllable expense costs.

**LANDLORD'S MAINTENANCE:**

Landlord, at its sole cost and expense, shall be responsible for the structural and capitalized items (treated per GAAP standards) for the Property.

**POSSESSION AND RENT COMMENCEMENT:**

Landlord shall deliver Possession of the Premises to the Tenant upon the later of completion of Landlord's required work, (if any) mutual lease execution, or waiver of CON contingency. Rent Commencement shall be the earlier of six (6) months from Possession or the date each of the following conditions have occurred:

- a. Construction improvements within the Premises have been completed in accordance with the final construction documents (except for nominal punch list items); and
- b. A certificate of occupancy for the Premises has been obtained from the city or county; and
- c. Tenant has obtained all necessary licenses and permits to operate its business.

**LEASE FORM:**

Tenant's standard lease form.

**USE:**

The operation of an outpatient renal dialysis clinic, renal dialysis home training, aphaeresis services and similar blood separation and cell collection procedures, general medical offices, clinical laboratory, including all incidental, related and necessary elements and functions of other recognized dialysis disciplines which may be necessary or desirable to render a complete program of treatment to patients of Tenant and related office and administrative uses or for any other lawful purpose.

**PARKING:**

Tenant shall receive four (4) stalls per 1,000 rsf, and two (2) handicapped stalls or such greater number as is required by applicable law or regulation.

**BASE BUILDING:**

Landlord shall deliver to the Premises the Base Building improvements outlined below subject to Tenant's architect and project manager approval:

- 2" inch water supply;
- 4" inch sanitary sewer line.

*Tenant will otherwise take possession of the premises in its "as is" condition to be further defined in lease agreement.*

*Tenant will take possession of the premises in its "as is" condition and will have the opportunity to examine the premises and perform whatever test or inspections that they deem necessary to determine that the premises is acceptable.*

**TENANT IMPROVEMENTS:**

None.

**OPTION TO RENEW:**

Three, five (5) year options to renew the lease. Option period base rents shall be increased annually by the same cost of living increase method used for Years 1-10 with the same maximum increase of 5% in any given year.

**RIGHT OF FIRST OPPORTUNITY ON ADJACENT SPACE:**

Tenant shall have the on-going right of first opportunity on any adjacent space that may become available during the initial term of the lease and any extension thereof, under the same terms and conditions of Tenant's existing lease.

**FAILURE TO DELIVER PREMISES:**

If Landlord has not delivered possession of the premises to Tenant with all base building items substantially completed by ninety days (90) from the later of lease execution or waiver of CON contingency, Tenant may elect to receive one day of rent abatement for every day of delay beyond the delivery period.

**HOLDING OVER:**

Tenant shall be obligated to pay 125% for the then current rate.

**TENANT SIGNAGE:**

Tenant shall have the right to install building, monument and pylon signage at the Premises, subject to compliance with all applicable laws and regulations and Landlord approval. Landlord, at Landlord's expense, will furnish Tenant with any standard building directory signage.

**BUILDING HOURS:**

Tenant requires building hours of 24 hours a day, 7 days a week.

**SUBLEASE/ASSIGNMENT:**

Tenant will have the right at any time to sublease or assign its interest in this Lease to any majority owned subsidiaries or related entities of DaVita, Inc. without the consent of the Landlord, or to unrelated entities with Landlord reasonable approval.

**ROOF RIGHTS:**

Tenant shall have the right to place a satellite dish on the roof at no additional fee.

**NON COMPETE:**

Landlord agrees not to lease space to another dialysis provider within a five mile radius of the Premises.

**HVAC:**

Existing units.

**DELIVERIES:**

*Tenant will take deliveries from a common area alley behind the building.*

**OTHER CONCESSIONS:**

None.

**SECURITY DEPOSIT:**

None, in lieu of provided financials.

**GOVERNMENTAL COMPLIANCE:**

Landlord shall represent and warrant to Tenant that Landlord, at Landlord's sole expense, will cause the Premises, common areas, the building and parking facilities to be in full compliance with any governmental laws, ordinances,

regulations or orders relating to, but not limited to, compliance with the Americans with Disabilities Act (ADA), and environmental conditions relating to the existence of asbestos and/or other hazardous materials, or soil and ground water conditions, and shall indemnify and hold Tenant harmless from any claims, liabilities and cost arising from environmental conditions not caused by Tenant(s).

**CERTIFICATE OF NEED:**

Tenant CON Obligation: Landlord and Tenant understand and agree that the establishment of any chronic outpatient dialysis facility in the State of Illinois is subject to the requirements of the Illinois Health Facilities Planning Act, 20 ILCS 3960/1 et seq. and, thus, the Tenant cannot establish a dialysis facility on the Premises or execute a binding real estate lease in connection therewith unless Tenant obtains a Certificate of Need (CON) permit from the Illinois Health Facilities and Services Review Board (HFSRB). Based on the length of the HFSRB review process, Tenant does not expect to receive a CON permit prior to six (6) months from lease execution. In light of the foregoing facts, the parties agree that they shall promptly proceed with due diligence to negotiate the terms of a definitive lease agreement and execute such agreement prior to approval of the CON permit provided, however, the lease shall not be binding on either party prior to approval of the CON permit and the lease agreement shall contain a contingency clause indicating that the lease agreement is not effective prior to CON permit approval. Assuming CON approval is granted, the effective date of the lease agreement shall be the first day of the calendar month following CON permit approval. In the event that the HFSRB does not award Tenant a CON permit to establish a dialysis center on the Premises within six (6) months from lease execution neither party shall have any further obligation to the other party with regard to the negotiations, lease, or Premises contemplated by this Letter of Intent.

**BROKERAGE FEE:**

Landlord recognizes as the Tenant's sole representative Johnson Controls Real Estate Services, Inc. and shall pay a brokerage fee equal to fifty-cents (\$0.50) per square foot per lease term year, 50% shall be due upon lease execution and waiver of CON contingency and 50% shall be due upon rent commencement. The Tenant shall retain the right to offset rent for failure to pay the brokerage fee.

**PLANS:**

The landlord has no site or construction drawings.

*Please submit your response to this Request for Proposal via e-mail to: [Matt.Gramlich@jci.com](mailto:Matt.Gramlich@jci.com)*

It should be understood that this LOI is subject to the terms of Exhibit A attached hereto. The information in this email is confidential and may be legally privileged. It is intended solely for the addressee. Access to this information by anyone but addressee is unauthorized.

Thank you for your time and consideration to partner with DaVita.

Sincerely,

Matthew J. Gramlich

Cc: DaVita Team Genesis Real Estate  
DaVita Regional Operational Leadership  
John Steffens, Johnson Controls Real Estate Services, Inc.

SIGNATURE PAGE

LETTER OF INTENT:

180 E Waverly St, Morris, IL 60450

AGREED TO AND ACCEPTED THIS 15<sup>th</sup> DAY OF JUNE 2015

By: Jenny Davis DHP

On behalf of Total Renal Care, a wholly owned subsidiary of DaVita Healthcare Partners, Inc.  
("Tenant")

AGREED TO AND ACCEPTED THIS 12<sup>th</sup> DAY OF JUNE 2015

By: Andrew Frank

Andrew F. Hornsby  
("Landlord")

**EXHIBIT A**

**NON-BINDING NOTICE**

**NOTICE: THE PROVISIONS CONTAINED IN THIS LETTER OF INTENT ARE AN EXPRESSION OF THE PARTIES' INTEREST ONLY. SAID PROVISIONS TAKEN TOGETHER OR SEPERATELY ARE NEITHER AN OFFER WHICH BY AN "ACCEPTANCE" CAN BECOME A CONTRACT, NOR A CONTRACT. BY ISSUING THIS LETTER OF INTENT NEITHER TENANT NOR LANDLORD (OR JCI) SHALL BE BOUND TO ENTER INTO ANY (GOOD FAITH OR OTHERWISE) NEGOTIATIONS OF ANY KIND WHATSOEVER. TENANT RESERVES THE RIGHT TO NEGOTIATE WITH OTHER PARTIES. NEITHER TENANT, LANDLORD NOR JCI INTENDS ON THE PROVISIONS CONTAINED IN THIS LETTER OF INTENT TO BE BINDING IN ANY MANNER, AS THE ANALYSIS FOR AN ACCEPTABLE TRANSACTION WILL INVOLVE ADDITIONAL MATTERS NOT ADDRESSED IN THIS LETTER, INCLUDING, WITHOUT LIMITATION, THE TERMS OF ANY COMPETING PROJECTS, OVERALL ECONOMIC AND LIABILITY PROVISIONS CONTAINED IN ANY LEASE DOCUMENT AND INTERNAL APPROVAL PROCESSES AND PROCEDURES. THE PARTIES UNDERSTAND AND AGREE THAT A CONTRACT WITH RESPECT TO THE PROVISIONS IN THIS LETTER OF INTENT WILL NOT EXIST UNLESS AND UNTIL THE PARTIES HAVE EXECUTED A FORMAL, WRITTEN LEASE AGREEMENT APPROVED IN WRITING BY THEIR RESPECTIVE COUNSEL. JCI IS ACTING SOLELY IN THE CAPACITY OF SOLICITING, PROVIDING AND RECEIVING INFORMATION AND PROPOSALS AND NEGOTIATING THE SAME ON BEHALF OF OUR CLIENTS. UNDER NO CIRCUMSTANCES WHATSOEVER DOES JCI HAVE ANY AUTHORITY TO BIND OUR CLIENTS TO ANY ITEM, TERM OR COMBINATION OF TERMS CONTAINED HEREIN. THIS LETTER OF INTENT IS SUBMITTED SUBJECT TO ERRORS, OMISSIONS, CHANGE OF PRICE, RENTAL OR OTHER TERMS; ANY SPECIAL CONDITIONS IMPOSED BY OUR CLIENTS; AND WITHDRAWAL WITHOUT NOTICE. WE RESERVE THE RIGHT TO CONTINUE SIMULTANEOUS NEGOTIATIONS WITH OTHER PARTIES ON BEHALF OF OUR CLIENT. NO PARTY SHALL HAVE ANY LEGAL RIGHTS OR OBLIGATIONS WITH RESPECT TO ANY OTHER PARTY, AND NO PARTY SHOULD TAKE ANY ACTION OR FAIL TO TAKE ANY ACTION IN DETRIMENTAL RELIANCE ON THIS OR ANY OTHER DOCUMENT OR COMMUNICATION UNTIL AND UNLESS A DEFINITIVE WRITTEN LEASE AGREEMENT IS PREPARED AND SIGNED BY TENANT AND LANDLORD**

**Section IX, Financial Feasibility**  
**Criterion 1120.130 – Financial Viability Waiver**

The project will be funded entirely with cash. A copy of DaVita's 2014 10-K Statement evidencing sufficient internal resources to fund the project was previously submitted with the application for Project No. 15-020.

**Section X, Economic Feasibility Review Criteria**  
**Criterion 1120.140(a), Reasonableness of Financing Arrangements**

Attached at Attachment – 39A is a letter from Arturo Sida, Assistant Corporate Secretary of DaVita HealthCare Partners Inc. and Total Renal Care, Inc. attesting that the total estimated project costs will be funded entirely with cash and cash equivalents.

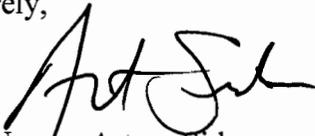
Kathryn Olson  
Chair  
Illinois Health Facilities and Services Review Board  
525 West Jefferson Street, 2nd Floor  
Springfield, Illinois 62761

**Re: Reasonableness of Financing Arrangements**

Dear Chairwoman Olson:

I hereby certify under penalty of perjury as provided in § 1-109 of the Illinois Code of Civil Procedure, 735 ILCS 5/1-109 and pursuant to 77 Ill. Admin. Code § 1120.140(a) that the total estimated project costs and related costs will be funded in total with cash and cash equivalents.

Sincerely,



Print Name: Arturo Sida  
Its: Assistant Corporate Secretary  
DaVita HealthCare Partners Inc.

Subscribed and sworn to me  
This \_\_\_ day of \_\_\_\_\_, 2015

Notary Public

*See Attached*

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California

County of Los Angeles

On May 18, 2015 before me, Kimberly Ann K. Burgo, Notary Public  
(here insert name and title of the officer)

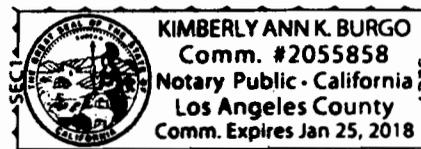
personally appeared \*\* Arturo Sida \*\*

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

*Kimberly Ann K. Burgo*  
Signature



**OPTIONAL INFORMATION**

Law does not require the information below. This information could be of great value to any person(s) relying on this document and could prevent fraudulent and/or the reattachment of this document to an unauthorized document(s)

**DESCRIPTION OF ATTACHED DOCUMENT**

Title or Type of Document: Ltr. to K.Olson re Reasonableness of Financing Arrangements (Morris Dialysis)

Document Date: May 18, 2015 Number of Pages: 1 (one)

Signer(s) if Different Than Above: \_\_\_\_\_

Other Information: \_\_\_\_\_

**CAPACITY(IES) CLAIMED BY SIGNER(S)**

Signer's Name(s): \_\_\_\_\_

- Individual
- Corporate Officer

\_\_\_\_\_  
(Title(s))

- Partner
- Attorney-in-Fact
- Trustee
- Guardian/Conservator
- Other: Assistant Corporate Secretary

**SIGNER IS REPRESENTING:** Name of Person or Entity DaVita HealthCare Partners Inc.

**Section X, Economic Feasibility Review Criteria**  
**Criterion 1120.140(b), Conditions of Debt Financing**

This project will be funded in total with cash and cash equivalents. Accordingly, this criterion is not applicable.

**Section X, Economic Feasibility Review Criteria**  
**Criterion 1120.310(c), Reasonableness of Project and Related Costs**

1. The Cost and Gross Square Feet by Department is provided in the table below.

Table 1120.310(c)									
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	Mod.	Gross Sq. Ft. New Circ.*		Gross Sq. Ft. Mod. Circ.*		Const. \$ (A x C)	Mod. \$ (B x E)	
<b>Clinical</b>									
ESRD		\$172.53			5,854			\$1,010,000	\$1,010,000
Contingency Clinical		\$10.24			5,854			\$60,000	\$60,000
<b>TOTAL CLINICAL</b>		<b>\$182.77</b>			<b>5,854</b>			<b>\$1,070,000</b>	<b>\$1,070,000</b>
<b>Non-Clinical</b>									
ESRD		\$172.58			846			\$146,000	\$146,000
Contingency – Non-Clinical		\$11.82			846			\$10,000	\$10,000
<b>TOTAL NON- CLINICAL</b>		<b>\$184.40</b>			<b>846</b>			<b>\$156,000</b>	<b>\$156,000</b>
<b>TOTALS</b>		<b>\$182.99</b>			<b>6,700</b>			<b>\$1,226,000</b>	<b>\$1,226,000</b>

\* Include the percentage (%) of space for circulation

2. As shown in Table 1120.310(c) below, the project costs are below the State Standard.

Table 1120.310(c)			
	Proposed Project	State Standard	Above/Below State Standard
Modernization Construction Contracts and Contingencies	\$1,070,000	\$183.68 per gross square foot x 5,854 gross square feet = \$1,075,262	Below State Standard
Contingencies	\$60,000	10% - 15% of Modernization Construction Costs = 10% - 15% x \$1,010,000 = \$101,000 - \$151,500	Below State Standard
Architectural/Engineering Fees	\$93,000	6.90% – 10.36% x (Construction Costs + Contingencies) = 6.90% – 10.36% x (\$1,010,000 + 60,000) = 6.90% – 10.36% x \$1,070,000 = \$73,830 - \$110,852	Meets State Standard

<b>Table 1120.310(c)</b>			
	<b>Proposed Project</b>	<b>State Standard</b>	<b>Above/Below State Standard</b>
Consulting and Other Fees	\$94,000	No State Standard	No State Standard
Moveable Equipment	\$295,585	\$50,601.13 per station \$50,601.13 x 12 = \$607,213	Below State Standard
Other Costs to be Capitalized	\$127,286	No State Standard	No State Standard

**Section X, Economic Feasibility Review Criteria**  
**Criterion 1120.310(d), Projected Operating Costs**

Operating Expenses: \$1,838,096

Treatments: 9,048

Operating Expense per Treatment: \$203.14

**Section X, Economic Feasibility Review Criteria**  
**Criterion 1120.310(e), Total Effect of Project on Capital Costs**

Capital Costs

Depreciation:	\$151,988
Amortization:	\$8,337
Total Capital Costs:	\$160,325

Treatments: 9,048

Capital Costs per Treatment: \$17.72

**Section XI, Safety Net Impact Statement**

1. This criterion is required for all substantive and discontinuation projects. DaVita HealthCare Partners Inc. and its affiliates are safety net providers of dialysis services to residents of the State of Illinois. DaVita is a leading provider of dialysis services in the United States and is committed to innovation, improving clinical outcomes, compassionate care, education and Kidney Smarting patients, and community outreach. A copy of DaVita's 2014 Community Care report, which details DaVita's commitment to quality, patient centric focus and community outreach, was previously included in the application for Proj. No. 15-025. As referenced in the report, DaVita led the industry in quality, with 50 percent of its dialysis centers earning four or five stars in the federal Five-Star Ratings, compared to the 21 percent industry average. DaVita also led the industry in Medicare's Quality Incentive Program, ranking No. 1 in three out of four clinical measures and receiving the fewest penalties. DaVita has taken on many initiatives to improve the lives of patients suffering from CKD and ESRD. These programs include the Kidney Smart, IMPACT, CathAway, and transplant assistance programs. Furthermore, DaVita is an industry leader in the rate of fistula use and has the lowest day-90 catheter rates among large dialysis providers. During 2000 - 2014, DaVita improved its fistula adoption rate by 103 percent. Its commitment to improving clinical outcomes directly translated into 7% reduction in hospitalizations among DaVita patients. DaVita has improved clinical outcomes each year since 2000, generating an estimated \$204 million in net savings to the American healthcare system in 2013.
  
2. The proposed project will not impact the ability of other health care providers or health care systems to cross-subsidize safety net services. As shown in Table 1110.1430(b), average utilization at existing dialysis facilities within 30 minutes normal travel time of the Replacement Facility is 61.8%, as of March 31, 2015. The Existing Facility already has 70.4% utilization rate, as of April 30, 2015, which is below the State Board's 80% standard. However, within a 20 minute drive time of the Replacement Facility, there will be no other in-center hemodialysis facilities, once FMC Morris closes. The utilization of Morris Dialysis, should it capture the 9 FMC Morris patients that reside closest to the proposed replacement facility, would immediately climb to 87.0% and exceed the State Board's utilization standard of 80%. Accordingly, there will be insufficient capacity to accommodate all of Dr. Kravets' future projected patients. Dr. Kravets anticipates all 38 current patients will transfer to the Replacement Facility. Dr. Kravets is currently treating 82 Stage 4 & 5 CKD patients who reside within approximately 30 minutes of the Replacement Facility. Conservatively, based upon attrition due to patient death, transplant, or return of function, it is projected that 51 of these pre-ESRD patients will require dialysis within 12 to 24 months of project completion. 11 of these CKD patients reside less than 20 minutes from the proposed Replacement Facility. We predict at least 58 patients will receive treatment at the Replacement Facility within 24 months of project completion. The Replacement Facility is needed to address the growing need for dialysis in the Morris community.
  
3. The proposed project is for the relocation of Morris Dialysis just 1.05 miles from its current location. Patients currently treated at Morris Dialysis will receive treatment at the new facility. As such, the discontinuation of service at the current location will not negatively impact the safety net.

<b>Safety Net Information per PA 96-0031</b>			
<b>CHARITY CARE</b>			
	<b>2012</b>	<b>2013</b>	<b>2014</b>
<b>Charity (# of patients)</b>	152	187	146
<b>Charity (cost in dollars)</b>	\$1,199,657	\$2,175,940	\$2,477,363
<b>MEDICAID</b>			
	<b>2012</b>	<b>2013</b>	<b>2014</b>
<b>Medicaid (# of patients)</b>	651	679	708
<b>Medicaid (revenue)</b>	\$11,387,229	\$10,371,416	\$8,603,971

**Section XII. Charity Care Information**

The table below provides charity care information for all dialysis facilities located in the State of Illinois that are owned or operated by the Applicants.

CHARITY CARE			
	2012	2013	2014
<b>Net Patient Revenue</b>	<b>\$228,403,979</b>	<b>\$244,115,132</b>	<b>\$266,319,949</b>
Amount of Charity Care (charges)	\$1,199,657	\$2,175,940	\$2,477,363
Cost of Charity Care	\$1,199,657	\$2,175,940	\$2,477,363

**Appendix 1 – Time & Distance Determination: Discontinuation**

Attached as Appendix 1 is the list of all existing facilities within 45 minutes normal travel time from the Existing Facility as determined by MapQuest.

Notes

FMC Ottawa to Existing Facility for Morris Dialysis



Trip to:

**1551 Creek Dr**

Morris, IL 60450-6857

21.53 miles / 27 minutes

Download  
Free App



**1601 Mercury Ct, Ottawa, IL 61350-9308**



1. Start out going **northeast** on **Mercury Ct** toward **Starfire Dr**. [Map](#)

**0.03 Mi**

0.03 Mi Total



2. Take the 1st **right** onto **Starfire Dr**. [Map](#)

**0.2 Mi**

*Ottawa Blooms & Baskets is on the corner*

0.3 Mi Total

*If you reach the end of Polaris Cir you've gone a little too far*



3. Take the 2nd **left** onto **E Norris Dr / US-6 E / IL-71**. Continue to follow **IL-71**. [Map](#)

**2.3 Mi**

*IL-71 is just past Gemini Cir*

2.6 Mi Total

*Gladfelder Funeral Home is on the corner*



4. Turn **right** onto **N 30th Rd / County Hwy-4**. [Map](#)

**4.2 Mi**

6.8 Mi Total



5. Turn **left** onto **E 24th Rd / County Hwy-15**. [Map](#)

**0.4 Mi**

*E 24th Rd is 0.4 miles past E 2360th Rd*

7.2 Mi Total

*If you reach E 25th Rd you've gone about 0.8 miles too far*



6. Merge onto **I-80 E** toward **Joliet**. [Map](#)

**7.4 Mi**

*If you are on E 24th Rd and reach N 3050th Rd you've gone about 0.2 miles too far*

14.6 Mi Total



7. Take **EXIT 105** toward **Seneca**. [Map](#)

**0.3 Mi**

15.0 Mi Total



8. Keep **right** at the fork in the ramp. [Map](#)

**0.03 Mi**

15.0 Mi Total



9. Merge onto **Seneca Rd**. [Map](#)

**0.4 Mi**

15.4 Mi Total



10. Turn **left** onto **W US Route 6 / US-6 E**. [Map](#)

**6.1 Mi**

*If you are on W US Route 6 and reach Long Point Rd you've gone about 1 mile too far*

21.4 Mi Total



11. Turn **left** onto **Creek Dr**. [Map](#)

**0.09 Mi**

*Creek Dr is 0.1 miles past Lakewood Dr*

21.5 Mi Total

*Los Burritos Ricos is on the left*

*If you reach Park Blvd you've gone about 0.1 miles too far*



**1551 Creek Dr, Morris, IL 60450-6857**

Notes

FMC Sandwich to Existing Morris Dialysis Facility



Trip to:

**1551 Creek Dr**

Morris, IL 60450-6857

30.16 miles / 43 minutes



**[1185 - 1199] N Main St, Sandwich, IL 60548**

Download  
Free App



1. Start out going **south** on **N Main St** toward **W Knights Rd**. [Map](#)

**1.8 Mi**

1.8 Mi Total



2. **N Main St** becomes **E 29th Rd**. [Map](#)

**1.5 Mi**

3.3 Mi Total



3. Turn **left** onto **N 4650th Rd**. [Map](#)

**1.0 Mi**

*If you reach N 4639th Rd you've gone about 0.1 miles too far*

4.3 Mi Total



4. **N 4650th Rd** becomes **Rogers Rd**. [Map](#)

**1.9 Mi**

6.3 Mi Total



5. Turn **right** onto **Whitfield Rd**. [Map](#)

**1.0 Mi**

*Whitfield Rd is 0.2 miles past Oak Brook Rd*

*If you reach Valley Rd you've gone a little too far*

7.3 Mi Total



6. Turn **left** onto **Fox River Dr / County Hwy-1**. [Map](#)

**0.06 Mi**

7.3 Mi Total



7. Take the 1st **right** onto **Millbrook Rd / County Hwy-14**. Continue to follow **Millbrook Rd**. [Map](#)

**2.1 Mi**

*If you reach Meadow Ln you've gone about 0.6 miles too far*

9.4 Mi Total



8. Turn **left** onto **State Highway 71 / IL-71**. [Map](#)

**0.09 Mi**

9.5 Mi Total



9. Take the 1st **right** onto **Walker Rd / County Hwy-17**. [Map](#)

**5.5 Mi**

*If you are on State Highway 71 and reach Hollenback Rd you've gone about 0.4 miles too far*

15.0 Mi Total



10. Turn **right** onto **State Route 47 / IL-47**. Continue to follow **IL-47**. [Map](#)

**14.1 Mi**

*If you reach Penman Rd you've gone about 0.5 miles too far*

29.1 Mi Total



11. Turn **right** onto **Bedford Rd / US-6 W**. Continue to follow **US-6 W**. [Map](#)

**1.0 Mi**

*US-6 W is just past W Commercial St  
CIRCLE K is on the corner*

30.1 Mi Total



12. Turn **right** onto **Creek Dr**. [Map](#)

**0.09 Mi**

*Creek Dr is 0.1 miles past Park Blvd*

*Los Burritos Ricos is on the corner*

*If you reach Lakewood Dr you've gone about 0.1 miles too far*

30.2 Mi Total



**1551 CREEK DR** is on the **right**. [Map](#)

*If you reach Michael Dr you've gone a little too far*



Notes

FMC Morris to Existing Facility for Morris Dialysis



Trip to:

**1551 Creek Dr**

Morris, IL 60450-6857

0.40 miles / 1 minute



**1401 Lakewood Dr, STE B C, Morris, IL 60450-1237**

Download  
Free App



1. Start out going north on Lakewood Dr toward Commons Dr. [Map](#)

**0.2 Mi**

*0.2 Mi Total*



2. Turn right onto W US Route 6 / US-6 E. [Map](#)

**0.2 Mi**

*0.3 Mi Total*



3. Take the 1st left onto Creek Dr. [Map](#)

**0.09 Mi**

*Los Burritos Ricos is on the left*

*If you reach Park Blvd you've gone about 0.1 miles too far*

*0.4 Mi Total*



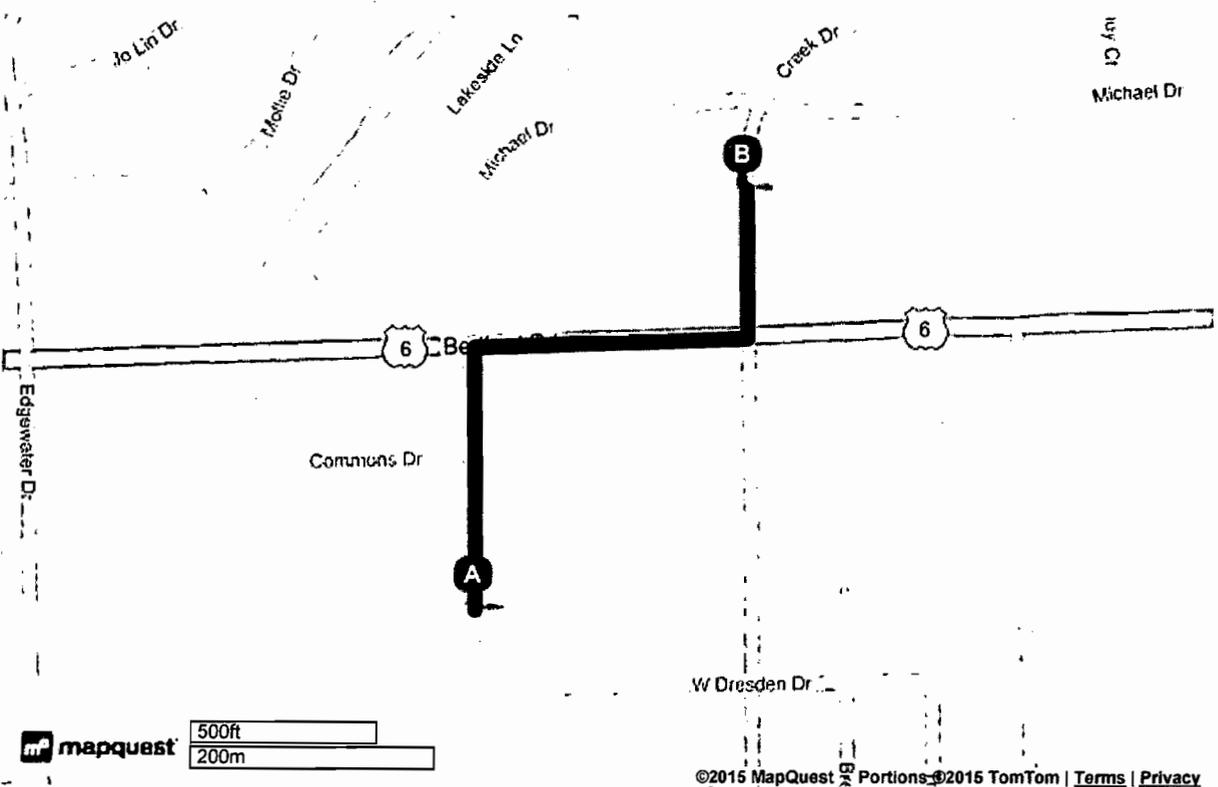
4. **1551 CREEK DR** is on the right. [Map](#)

*If you reach Michael Dr you've gone a little too far*



**1551 Creek Dr, Morris, IL 60450-6857**

Total Travel Estimate: **0.40 miles - about 1 minute**



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Notes

Yorkville Dialysis to Existing Morris Dialysis Facility



Trip to:

**1551 Creek Dr**

Morris, IL 60450-6857

22.69 miles / 32 minutes

Download  
Free App



**[1400 - 1646] Beecher Rd, Yorkville, IL 60560-5600**



1. Start out going **south** on **Beecher Rd** toward **Erica Ln.** [Map](#)

**0.03 Mi**  
0.03 Mi Total



2. Take the **1st right.** [Map](#)

**0.1 Mi**  
0.2 Mi Total



3. Turn **left.** [Map](#)

**0.2 Mi**  
0.4 Mi Total



4. Turn **left** onto **US Highway 34 / US-34 E.** Continue to follow **US-34 E.** [Map](#)

**1.3 Mi**  
1.6 Mi Total



5. Turn **right** onto **N Bridge St / IL-47.** Continue to follow **IL-47.** [Map](#)  
*IL-47 is 0.1 miles past Center Pkwy  
McDonald's is on the corner*

**20.0 Mi**  
21.6 Mi Total



6. Turn **right** onto **Bedford Rd / US-6 W.** Continue to follow **US-6 W.** [Map](#)  
*US-6 W is just past W Commercial St  
CIRCLE K is on the corner*

**1.0 Mi**  
22.6 Mi Total



7. Turn **right** onto **Creek Dr.** [Map](#)  
*Creek Dr is 0.1 miles past Park Blvd  
Los Burritos Ricos is on the corner  
If you reach Lakewood Dr you've gone about 0.1 miles too far*

**0.09 Mi**  
22.7 Mi Total



8. **1551 CREEK DR** is on the **right.** [Map](#)  
*If you reach Michael Dr you've gone a little too far*



**1551 Creek Dr, Morris, IL 60450-6857**

Notes

FMC Oswego to Existing Facility for Morris Dialysis



Trip to:

**1551 Creek Dr**

Morris, IL 60450-6857

25.60 miles / 34 minutes

Download  
Free App



**[100 - 102] Station Dr, Oswego, IL 60543**



1. Start out going **south** on **Station Dr** toward **Mill Rd**. [Map](#)

**0.1 Mi**

*0.1 Mi Total*



2. Take the **1st left** onto **Mill Rd**. [Map](#)

**0.07 Mi**

*If you reach Lewis St you've gone about 0.3 miles too far*

*0.2 Mi Total*



3. Take the **1st right** onto **Orchard Rd**. [Map](#)

**1.4 Mi**

*If you reach Bucktail Dr you've gone about 0.1 miles too far*

*1.6 Mi Total*



4. **Orchard Rd** becomes **Minkler Rd**. [Map](#)

**0.08 Mi**

*1.7 Mi Total*



5. Turn **right** onto **IL-71 / State Route 71**. Continue to follow **IL-71**. [Map](#)

**5.5 Mi**

*If you reach Hunt Club Dr you've gone about 1.3 miles too far*

*7.2 Mi Total*



6. Turn **left** onto **S Bridge St / IL-47**. Continue to follow **IL-47**. [Map](#)

**17.3 Mi**

*IL-47 is 0.1 miles past Walnut Dr*

*CIRCLE K is on the corner*

*If you are on State Route 71 and reach Tommy Hughes Way you've gone a little too far*

*24.5 Mi Total*



7. Turn **right** onto **Bedford Rd / US-6 W**. Continue to follow **US-6 W**. [Map](#)

**1.0 Mi**

*US-6 W is just past W Commercial St*

*CIRCLE K is on the corner*

*25.5 Mi Total*



8. Turn **right** onto **Creek Dr**. [Map](#)

**0.09 Mi**

*Creek Dr is 0.1 miles past Park Blvd*

*Los Burritos Ricos is on the corner*

*If you reach Lakewood Dr you've gone about 0.1 miles too far*

*25.6 Mi Total*



**1551 Creek Dr, Morris, IL 60450-6857**



Notes

Fox Valley Dialysis Center to Existing Morris Dialysis Facility

Trip to:

**1551 Creek Dr**

Morris, IL 60450-6857

31.37 miles / 43 minutes



**1300 Waterford Dr, Aurora, IL 60504-5502**

Download  
Free App



1. Start out going east on Waterford Dr toward Walcott Rd. [Map](#)

0.2 Mi

0.2 Mi Total



2. Take the 1st right onto Ogden Ave / US-34 W. Continue to follow US-34 W. [Map](#)

4.9 Mi

5.1 Mi Total

US-34 W is just past Walcott Rd  
AURORA SHELL is on the corner  
If you are on Ridge Ave and reach Kautz Rd you've gone about 0.1 miles too far



3. Stay straight to go onto IL-71 / State Route 71. Continue to follow IL-71. [Map](#)

7.9 Mi

13.0 Mi Total



4. Turn left onto S Bridge St / IL-47. Continue to follow IL-47. [Map](#)

17.3 Mi

30.3 Mi Total

IL-47 is 0.1 miles past Walnut Dr  
CIRCLE K is on the corner  
If you are on State Route 71 and reach Tommy Hughes Way you've gone a little too far



5. Turn right onto Bedford Rd / US-6 W. Continue to follow US-6 W. [Map](#)

1.0 Mi

31.3 Mi Total

US-6 W is just past W Commercial St  
CIRCLE K is on the corner



6. Turn right onto Creek Dr. [Map](#)

0.09 Mi

31.4 Mi Total

Creek Dr is 0.1 miles past Park Blvd  
Los Burritos Ricos is on the corner  
If you reach Lakewood Dr you've gone about 0.1 miles too far



**1551 Creek Dr, Morris, IL 60450-6857**

Notes

FMC Plainfield to Existing Morris Dialysis Facility



Trip to:

**1551 Creek Dr**

Morris, IL 60450-6857

23.30 miles / 28 minutes

- |   | <b>Download<br/>Free App</b>    |
|---|---------------------------------|
| <b>A</b> <b>2320 Michas Dr, Plainfield, IL 60586-5045</b>   |                                 |
| 1. Start out going north on Michas Dr toward Caton Farm Rd / County Hwy-5. <a href="#">Map</a>  | <b>0.05 Mi</b><br>0.05 Mi Total |
| 2. Take the 1st right onto Caton Farm Rd / County Hwy-5. <a href="#">Map</a>  | <b>1.1 Mi</b><br>1.2 Mi Total   |
| 3. Turn right onto S Route 59 / IL-59. Continue to follow IL-59. <a href="#">Map</a><br><i>IL-59 is 0.1 miles past Olde Mill Rd<br/>Panera Bread is on the corner<br/>If you reach Cryder Ln you've gone about 0.1 miles too far</i>      | <b>3.0 Mi</b><br>4.2 Mi Total   |
| 4. Turn left onto W Jefferson St / US-52 E. <a href="#">Map</a><br><i>W Jefferson St is 0.3 miles past Sunrise Dr<br/>Starbucks is on the right<br/>If you are on Cottage St and reach Riffles St you've gone about 0.1 miles too far</i> | <b>0.4 Mi</b><br>4.6 Mi Total   |
| 5. Merge onto I-55 S toward Bloomington-Normal. <a href="#">Map</a>   | <b>2.2 Mi</b><br>6.8 Mi Total   |
| 6. Merge onto I-80 W via EXIT 250B toward Iowa. <a href="#">Map</a>   | <b>14.0 Mi</b><br>20.8 Mi Total |
| 7. Take the IL-47 exit, EXIT 112, toward Morris / Yorkville. <a href="#">Map</a>  | <b>0.2 Mi</b><br>21.0 Mi Total  |
| 8. Keep left to take the ramp toward Morris. <a href="#">Map</a>  | <b>0.1 Mi</b><br>21.1 Mi Total  |
| 9. Turn left onto IL-47 / Illinois Route 47. Continue to follow IL-47. <a href="#">Map</a>  | <b>1.1 Mi</b><br>22.2 Mi Total  |
| 10. Turn right onto Bedford Rd / US-6 W. Continue to follow US-6 W. <a href="#">Map</a><br><i>US-6 W is just past W Commercial St<br/>CIRCLE K is on the corner</i>   | <b>1.0 Mi</b><br>23.2 Mi Total  |
| 11. Turn right onto Creek Dr. <a href="#">Map</a><br><i>Creek Dr is 0.1 miles past Park Blvd<br/>Los Burritos Ricos is on the corner<br/>If you reach Lakewood Dr you've gone about 0.1 miles too far</i>                                 | <b>0.09 Mi</b><br>23.3 Mi Total |
| 12. 1551 CREEK DR is on the right. <a href="#">Map</a><br><i>If you reach Michael Dr you've gone a little too far</i>   |                                 |
| <b>B</b> <b>1551 Creek Dr, Morris, IL 60450-6857</b>  |                                 |



Notes

Renal Center West Joliet to Existing Morris Dialysis Facility

Trip to:

**1551 Creek Dr**

Morris, IL 60450-6857

21.21 miles / 25 minutes



**1051 Essington Rd, STE 140, Joliet, IL 60435-2869**

Download  
Free App



1. Start out going **south** on **Essington Rd** toward **Executive Dr.** [Map](#)

**0.3 Mi**

0.3 Mi Total



2. Take the **2nd right** onto **Black Rd.** [Map](#)

**0.9 Mi**

*Black Rd is 0.2 miles past Executive Dr*

1.2 Mi Total

*If you are on Essington Rd and reach Big Timber Dr you've gone about 0.1 miles too far*



3. Turn **left** onto **NE Frontage Rd.** [Map](#)

**1.2 Mi**

*NE Frontage Rd is just past Woodcreek Dr*

2.4 Mi Total

*If you are on County Hwy-56 and reach NW Frontage Rd you've gone about 0.1 miles too far*



4. Turn **right** onto **W Jefferson St / US-52 W.** [Map](#)

**0.2 Mi**

*W Jefferson St is 0.4 miles past Deer Run Trl*

2.5 Mi Total

*If you are on SE Frontage Rd and reach Enterprise Dr you've gone about 0.1 miles too far*



5. Merge onto **I-55 S** via the ramp on the **left** toward **Bloomington-Normal.** [Map](#)

**2.2 Mi**

*If you are on E Jefferson St and reach NW Frontage Rd you've gone a little too far*

4.7 Mi Total



6. Merge onto **I-80 W** via **EXIT 250B** toward **Iowa.** [Map](#)

**14.0 Mi**

18.7 Mi Total



7. Take the **IL-47** exit, **EXIT 112**, toward **Morris / Yorkville.** [Map](#)

**0.2 Mi**

18.9 Mi Total



8. Keep **left** to take the ramp toward **Morris.** [Map](#)

**0.1 Mi**

19.0 Mi Total



9. Turn **left** onto **IL-47 / Illinois Route 47.** Continue to follow **IL-47.** [Map](#)

**1.1 Mi**

20.2 Mi Total



10. Turn **right** onto **Bedford Rd / US-6 W.** Continue to follow **US-6 W.** [Map](#)

**1.0 Mi**

*US-6 W is just past W Commercial St*

21.1 Mi Total

*CIRCLE K is on the corner*



11. Turn **right** onto **Creek Dr.** [Map](#)

**0.09 Mi**

*Creek Dr is 0.1 miles past Park Blvd*

21.2 Mi Total

*Los Burritos Ricos is on the corner  
If you reach Lakewood Dr you've gone about 0.1 miles too far*



12. **1551 CREEK DR** is on the **right.** [Map](#)

*If you reach Michael Dr you've gone a little too far*



**1551 Creek Dr, Morris, IL 60450-6857**

Notes

FMC Plainfield North to Existing Morris Dialysis Facility



Trip to:

**1551 Creek Dr**

Morris, IL 60450-6857

26.51 miles / 31 minutes



**24020 Riverwalk Ct, Plainfield, IL 60544-7102**

Download  
Free App

- 

1. Start out going east on **W Riverwalk Ct** toward **S Route 59 / US-30 E / IL-59**. [Map](#) **0.03 Mi**  
0.03 Mi Total
- 


2. Take the 1st right onto **S Route 59 / US-30 E / IL-59**. Continue to follow **US-30 E / IL-59**. [Map](#) **1.0 Mi**  
*Aurelio's Pizza is on the corner*  
1.0 Mi Total
- 


3. Turn left onto **S Joliet Rd / US-30 E**. Continue to follow **US-30 E**. [Map](#) **2.2 Mi**  
*US-30 E is just past W Ottawa St*  
*Overman-Jones Funeral Home & Cremation Services is on the left*  
*If you are on S Route 59 and reach W Newkirk Dr you've gone a little too far*  
3.2 Mi Total
- 


4. Merge onto **I-55 S** toward **Bloomington**. [Map](#) **6.8 Mi**  
10.0 Mi Total
- 


5. Merge onto **I-80 W** via **EXIT 250B** toward **Iowa**. [Map](#) **14.0 Mi**  
24.0 Mi Total
- 

6. Take the **IL-47** exit, **EXIT 112**, toward **Morris / Yorkville**. [Map](#) **0.2 Mi**  
24.2 Mi Total
- 

7. Keep left to take the ramp toward **Morris**. [Map](#) **0.1 Mi**  
24.3 Mi Total
- 


8. Turn left onto **IL-47 / Illinois Route 47**. Continue to follow **IL-47**. [Map](#) **1.1 Mi**  
25.4 Mi Total
- 


9. Turn right onto **Bedford Rd / US-6 W**. Continue to follow **US-6 W**. [Map](#) **1.0 Mi**  
*US-6 W is just past W Commercial St*  
*CIRCLE K is on the corner*  
26.4 Mi Total
- 

10. Turn right onto **Creek Dr**. [Map](#) **0.09 Mi**  
*Creek Dr is 0.1 miles past Park Blvd*  
*Los Burritos Ricos is on the corner*  
*If you reach Lakewood Dr you've gone about 0.1 miles too far*  
26.5 Mi Total
- 

11. **1551 CREEK DR** is on the right. [Map](#)  
*If you reach Michael Dr you've gone a little too far*



**1551 Creek Dr, Morris, IL 60450-6857**



Notes

Sun Health to Existing Morris Dialysis Facility

Trip to:

**1551 Creek Dr**

Morris, IL 60450-6857

21.96 miles / 25 minutes



**2121 Oneida St, STE 104, Joliet, IL 60435-6525**

Download Free App



1. Start out going east on Oneida St toward N Hammes Ave. [Map](#)

**0.4 Mi**

0.4 Mi Total



2. Take the 2nd right onto N Larkin Ave / IL-7. [Map](#)

*N Larkin Ave is 0.3 miles past N Hammes Ave*

*Taco Bell is on the corner*

*If you reach N Emery St you've gone a little too far*

**0.7 Mi**

1.1 Mi Total



3. Merge onto I-80 W toward Moline-Rock Island. [Map](#)

**18.3 Mi**

19.5 Mi Total



4. Take the IL-47 exit, EXIT 112, toward Morris / Yorkville. [Map](#)

**0.2 Mi**

19.7 Mi Total



5. Keep left to take the ramp toward Morris. [Map](#)

**0.1 Mi**

19.8 Mi Total



6. Turn left onto IL-47 / Illinois Route 47. Continue to follow IL-47. [Map](#)

**1.1 Mi**

20.9 Mi Total



7. Turn right onto Bedford Rd / US-6 W. Continue to follow US-6 W. [Map](#)

*US-6 W is just past W Commercial St*

*CIRCLE K is on the corner*

**1.0 Mi**

21.9 Mi Total



8. Turn right onto Creek Dr. [Map](#)

*Creek Dr is 0.1 miles past Park Blvd*

*Los Burritos Ricos is on the corner*

*If you reach Lakewood Dr you've gone about 0.1 miles too far*

**0.09 Mi**

22.0 Mi Total



9. **1551 CREEK DR** is on the right. [Map](#)

*If you reach Michael Dr you've gone a little too far*



**1551 Creek Dr, Morris, IL 60450-6857**

Notes

FMC Naperbrook to Existing Morris Dialysis Facility



Trip to:

**1551 Creek Dr**

Morris, IL 60450-6857

34.06 miles / 39 minutes

- |   | <b>Download<br/>Free App</b>           |
|---|--|
|  <b>2451 S Washington St, Naperville, IL 60565-5419</b>  |  |
|  1. Start out going <b>southeast</b> on <b>S Washington St</b> toward <b>Oak Bluff Ct</b> . <a href="#">Map</a>  | <b>0.3 Mi</b><br><i>0.3 Mi Total</i>   |
|  2. Turn <b>right</b> to stay on <b>S Washington St</b> . <a href="#">Map</a><br><i>S Washington St is 0.1 miles past Oak Bluff Ct</i><br><i>If you are on S Naper Blvd and reach River Woods Dr you've gone about 0.1 miles too far</i> | <b>0.7 Mi</b><br><i>1.1 Mi Total</i>   |
|  3. <b>S Washington St</b> becomes <b>N Weber Rd</b> . <a href="#">Map</a>   | <b>3.5 Mi</b><br><i>4.6 Mi Total</i>   |
|  4. Merge onto <b>I-55 S</b> toward <b>Bloomington</b> . <a href="#">Map</a>  | <b>13.0 Mi</b><br><i>17.5 Mi Total</i> |
|  5. Merge onto <b>I-80 W</b> via <b>EXIT 250B</b> toward <b>Iowa</b> . <a href="#">Map</a>   | <b>14.0 Mi</b><br><i>31.6 Mi Total</i> |
|  6. Take the <b>IL-47</b> exit, <b>EXIT 112</b> , toward <b>Morris / Yorkville</b> . <a href="#">Map</a>  | <b>0.2 Mi</b><br><i>31.8 Mi Total</i>  |
|  7. Keep <b>left</b> to take the ramp toward <b>Morris</b> . <a href="#">Map</a>  | <b>0.1 Mi</b><br><i>31.9 Mi Total</i>  |
|  8. Turn <b>left</b> onto <b>IL-47 / Illinois Route 47</b> . Continue to follow <b>IL-47</b> . <a href="#">Map</a>  | <b>1.1 Mi</b><br><i>33.0 Mi Total</i>  |
|  9. Turn <b>right</b> onto <b>Bedford Rd / US-6 W</b> . Continue to follow <b>US-6 W</b> . <a href="#">Map</a><br><i>US-6 W is just past W Commercial St</i><br><i>CIRCLE K is on the corner</i>  | <b>1.0 Mi</b><br><i>34.0 Mi Total</i>  |
|  10. Turn <b>right</b> onto <b>Creek Dr</b> . <a href="#">Map</a><br><i>Creek Dr is 0.1 miles past Park Blvd</i><br><i>Los Burritos Ricos is on the corner</i><br><i>If you reach Lakewood Dr you've gone about 0.1 miles too far</i>   | <b>0.09 Mi</b><br><i>34.1 Mi Total</i> |
|  <b>1551 CREEK DR</b> is on the <b>right</b> . <a href="#">Map</a><br><i>If you reach Michael Dr you've gone a little too far</i>  |  |

Notes

FMC Joliet to Existing Morris Dialysis Facility



Trip to:

**1551 Creek Dr**

Morris, IL 60450-6857

25.26 miles / 30 minutes



**721 E Jackson St, Joliet, IL 60432-2560**

Download  
Free App



1. Start out going **west** on **E Jackson St / US-6 W** toward **Abe St**. [Map](#)

**0.5 Mi**  
0.5 Mi Total



2. Turn **left** onto **Collins St / US-6 W**. Continue to follow **Collins St**. [Map](#)  
*Collins St is 0.1 miles past Parks Ave  
Churchs Chicken is on the corner  
If you reach Herkimer St you've gone a little too far*

**0.5 Mi**  
1.0 Mi Total



3. **Collins St** becomes **E Jefferson St**. [Map](#)

**0.07 Mi**  
1.1 Mi Total



4. Turn **left** onto **Richards St**. [Map](#)  
*If you reach N Eastern Ave you've gone a little too far*

**0.7 Mi**  
1.8 Mi Total



5. Merge onto **I-80 W** toward **Moline-Rock Island**. [Map](#)

**21.0 Mi**  
22.8 Mi Total



6. Take the **IL-47** exit, **EXIT 112**, toward **Morris / Yorkville**. [Map](#)

**0.2 Mi**  
23.0 Mi Total



7. Keep **left** to take the ramp toward **Morris**. [Map](#)

**0.1 Mi**  
23.1 Mi Total



8. Turn **left** onto **IL-47 / Illinois Route 47**. Continue to follow **IL-47**. [Map](#)

**1.1 Mi**  
24.2 Mi Total



9. Turn **right** onto **Bedford Rd / US-6 W**. Continue to follow **US-6 W**. [Map](#)  
*US-6 W is just past W Commercial St  
CIRCLE K is on the corner*

**1.0 Mi**  
25.2 Mi Total



10. Turn **right** onto **Creek Dr**. [Map](#)  
*Creek Dr is 0.1 miles past Park Blvd  
Los Burritos Ricos is on the corner  
If you reach Lakewood Dr you've gone about 0.1 miles too far*

**0.09 Mi**  
25.3 Mi Total



**1551 Creek Dr, Morris, IL 60450-6857**



Notes

FMC Lemont to Existing Morris Dialysis Facility

Trip to:

**1551 Creek Dr**

Morris, IL 60450-6857

39.39 miles / 41 minutes



**16177 W 127th St, Lemont, IL 60439-7501**

Download Free App



1. Start out going **west** on **W 127th St** toward **Timberline Dr**. [Map](#)

**0.2 Mi**

*0.2 Mi Total*



2. Merge onto **I-355 N / Veterans Memorial Tollway N** toward **Northwest Suburbs** (Portions toll). [Map](#)

**3.6 Mi**

*3.7 Mi Total*



3. Merge onto **I-55 S** via **EXIT 12B** toward **St Louis**. [Map](#)

**19.1 Mi**

*22.9 Mi Total*



4. Merge onto **I-80 W** via **EXIT 250B** toward **Iowa**. [Map](#)

**14.0 Mi**

*36.9 Mi Total*



5. Take the **IL-47** exit, **EXIT 112**, toward **Morris / Yorkville**. [Map](#)

**0.2 Mi**

*37.1 Mi Total*



6. Keep left to take the ramp toward **Morris**. [Map](#)

**0.1 Mi**

*37.2 Mi Total*



7. Turn left onto **IL-47 / Illinois Route 47**. Continue to follow **IL-47**. [Map](#)

**1.1 Mi**

*38.3 Mi Total*



8. Turn right onto **Bedford Rd / US-6 W**. Continue to follow **US-6 W**. [Map](#)  
*US-6 W is just past W Commercial St*  
*CIRCLE K is on the corner*

**1.0 Mi**

*39.3 Mi Total*



9. Turn right onto **Creek Dr**. [Map](#)

**0.09 Mi**

*Creek Dr is 0.1 miles past Park Blvd*  
*Los Burritos Ricos is on the corner*  
*If you reach Lakewood Dr you've gone about 0.1 miles too far*

*39.4 Mi Total*



**1551 Creek Dr, Morris, IL 60450-6857**



Notes

Renal Center New Lenox to Existing Morris Dialysis Facility

Trip to:

**1551 Creek Dr**

Morris, IL 60450-6857

30.36 miles / 34 minutes



**1890 Silver Cross Blvd, New Lenox, IL 60451-9508**

Download Free App



1. Start out going **south** on **Silver Cross Blvd** toward **Abraham Dr**. [Map](#)

**0.7 Mi**

*0.7 Mi Total*



2. Turn **right** onto **W Francis Rd / County Hwy-64**. Continue to follow **W Francis Rd**. [Map](#)

**1.0 Mi**

*1.7 Mi Total*



3. Turn **left** onto **Gougar Rd / County Hwy-52**. [Map](#)

**0.3 Mi**

*2.0 Mi Total*



4. Turn **left** onto **W Maple St / US-30 E**. Continue to follow **US-30 E**. [Map](#)  
*US-30 E is 0.2 miles past Pilcher Park*  
*If you reach Lancaster Dr you've gone about 0.1 miles too far*

**0.6 Mi**

*2.6 Mi Total*



5. Merge onto **I-80 W** toward **Moline / Rock Island**. [Map](#)  
*If you are on W Lincoln Hwy and reach Old Hickory Rd you've gone about 0.2 miles too far*

**25.3 Mi**

*27.9 Mi Total*



6. Take the **IL-47** exit, **EXIT 112**, toward **Morris / Yorkville**. [Map](#)

**0.2 Mi**

*28.1 Mi Total*



7. Keep **left** to take the ramp toward **Morris**. [Map](#)

**0.1 Mi**

*28.2 Mi Total*



8. Turn **left** onto **IL-47 / Illinois Route 47**. Continue to follow **IL-47**. [Map](#)

**1.1 Mi**

*29.3 Mi Total*



9. Turn **right** onto **Bedford Rd / US-6 W**. Continue to follow **US-6 W**. [Map](#)  
*US-6 W is just past W Commercial St*  
*CIRCLE K is on the corner*

**1.0 Mi**

*30.3 Mi Total*



10. Turn **right** onto **Creek Dr**. [Map](#)  
*Creek Dr is 0.1 miles past Park Blvd*  
*Los Burritos Ricos is on the corner*  
*If you reach Lakewood Dr you've gone about 0.1 miles too far*

**0.09 Mi**

*30.4 Mi Total*



11. **1551 CREEK DR** is on the **right**. [Map](#)  
*If you reach Michael Dr you've gone a little too far*



**1551 Creek Dr, Morris, IL 60450-6857**



Notes

USRC Bolingbrook Dialysis to Existing Morris Dialysis Facility

Trip to:

**1551 Creek Dr**

Morris, IL 60450-6857

33.02 miles / 36 minutes

Download Free App

**A 396 Remington Blvd, Bolingbrook, IL 60440-4923**

- 1. Start out going **southwest** on **Remington Blvd** toward **S Schmidt Rd**. [Map](#)

**1.5 Mi**  
1.5 Mi Total
- ↑

2. **Remington Blvd** becomes **W 115th St**. [Map](#)

**0.4 Mi**  
1.9 Mi Total
- ↑

3. **W 115th St** becomes **Remington Blvd**. [Map](#)

**1.0 Mi**  
2.9 Mi Total
- ↶

4. Turn **left** onto **S Weber Rd**. [Map](#)  
*S Weber Rd is just past N Weber Rd  
If you are on Rodeo Dr and reach Waterside Dr you've gone a little too far*

**0.7 Mi**  
3.6 Mi Total
- ↗

5. Merge onto **I-55 S** toward **Bloomington**. [Map](#)

**13.0 Mi**  
16.5 Mi Total
- 6. Merge onto **I-80 W** via **EXIT 250B** toward **Iowa**. [Map](#)

**14.0 Mi**  
30.5 Mi Total
- 7. Take the **IL-47** exit, **EXIT 112**, toward **Morris / Yorkville**. [Map](#)

**0.2 Mi**  
30.7 Mi Total
- 8. Keep **left** to take the ramp toward **Morris**. [Map](#)

**0.1 Mi**  
30.8 Mi Total
- 9. Turn **left** onto **IL-47 / Illinois Route 47**. Continue to follow **IL-47**. [Map](#)

**1.1 Mi**  
32.0 Mi Total
- 10. Turn **right** onto **Bedford Rd / US-6 W**. Continue to follow **US-6 W**. [Map](#)  
*US-6 W is just past W Commercial St  
CIRCLE K is on the corner*

**1.0 Mi**  
32.9 Mi Total
- 11. Turn **right** onto **Creek Dr**. [Map](#)  
*Creek Dr is 0.1 miles past Park Blvd  
Los Burritos Ricos is on the corner  
If you reach Lakewood Dr you've gone about 0.1 miles too far*

**0.09 Mi**  
33.0 Mi Total
- 12. **1551 CREEK DR** is on the **right**. [Map](#)  
*If you reach Michael Dr you've gone a little too far*

**B 1551 Creek Dr, Morris, IL 60450-6857**

Notes

FMC Bolingbrook to Existing Morris Dialysis Facility



Trip to:

**1551 Creek Dr**

Morris, IL 60450-6857

35.79 miles / 39 minutes



**538 W Boughton Rd, Bolingbrook, IL 60440-5705**

Download  
Free App



1. Start out going **east** on **W Boughton Rd** toward **N Schmidt Rd**. [Map](#)

**1.1 Mi**

1.1 Mi Total



**53**

2. Turn **right** onto **N Bolingbrook Dr / IL-53**. [Map](#)

**1.7 Mi**

*N Bolingbrook Dr is 0.1 miles past Aspen Dr*

2.8 Mi Total

*CIRCLE K #6798 is on the right*

*If you are on E Boughton Rd and reach Barbers Corner Rd you've gone about 0.1 miles too far*



**SOUTH**  
**55**

3. Merge onto **I-55 S** toward **Bloomington**. [Map](#)

**16.5 Mi**

19.3 Mi Total



**WEST**  
**80**

4. Merge onto **I-80 W** via **EXIT 250B** toward **Iowa**. [Map](#)

**14.0 Mi**

33.3 Mi Total



5. Take the **IL-47** exit, **EXIT 112**, toward **Morris / Yorkville**. [Map](#)

**0.2 Mi**

33.5 Mi Total



6. Keep **left** to take the ramp toward **Morris**. [Map](#)

**0.1 Mi**

33.6 Mi Total



**47**

7. Turn **left** onto **IL-47 / Illinois Route 47**. Continue to follow **IL-47**. [Map](#)

**1.1 Mi**

34.7 Mi Total



**WEST**  
**6**

8. Turn **right** onto **Bedford Rd / US-6 W**. Continue to follow **US-6 W**. [Map](#)

**1.0 Mi**

*US-6 W is just past W Commercial St*

35.7 Mi Total

*CIRCLE K is on the corner*



9. Turn **right** onto **Creek Dr**. [Map](#)

**0.09 Mi**

*Creek Dr is 0.1 miles past Park Blvd*

35.8 Mi Total

*Los Burritos Ricos is on the corner*

*If you reach Lakewood Dr you've gone about 0.1 miles too far*



**1551 Creek Dr, Morris, IL 60450-6857**

Notes

FMC Willowbrook to Existing Morris Dialysis Facility



Trip to:

**1551 Creek Dr**

Morris, IL 60450-6857

42.48 miles / 45 minutes

Download  
Free App



**Willowbrook, IL 60527**



1. Start out going **southwest** on **S Frontage Rd** toward **S Madison St.** [Map](#)

**0.2 Mi**

0.2 Mi Total



2. Turn **left** onto **S Madison St.** [Map](#)

**0.07 Mi**

0.2 Mi Total



3. Take the **1st right** onto **S Frontage Rd.** [Map](#)  
*If you reach 80th St you've gone about 0.1 miles too far*

**1.0 Mi**

1.2 Mi Total



4. Turn **left** onto **Kingery Hwy / IL-83.** [Map](#)  
*Kingery Hwy is 0.1 miles past Meadowbrook Dr  
Falco's Pizza is on the corner.*

**0.6 Mi**

1.8 Mi Total



5. Merge onto **I-55 S** toward **Joliet.** [Map](#)

**24.2 Mi**

26.0 Mi Total



6. Merge onto **I-80 W** via **EXIT 250B** toward **Iowa.** [Map](#)

**14.0 Mi**

40.0 Mi Total



7. Take the **IL-47** exit, **EXIT 112**, toward **Morris / Yorkville.** [Map](#)

**0.2 Mi**

40.2 Mi Total



8. Keep **left** to take the ramp toward **Morris.** [Map](#)

**0.1 Mi**

40.3 Mi Total



9. Turn **left** onto **IL-47 / Illinois Route 47.** Continue to follow **IL-47.** [Map](#)

**1.1 Mi**

41.4 Mi Total



10. Turn **right** onto **Bedford Rd / US-6 W.** Continue to follow **US-6 W.** [Map](#)  
*US-6 W is just past W Commercial St  
CIRCLE K is on the corner*

**1.0 Mi**

42.4 Mi Total



11. Turn **right** onto **Creek Dr.** [Map](#)  
*Creek Dr is 0.1 miles past Park Blvd  
Los Burritos Ricos is on the corner  
If you reach Lakewood Dr you've gone about 0.1 miles too far*

**0.09 Mi**

42.5 Mi Total



**1551 Creek Dr, Morris, IL 60450-6857**



Notes

FMC Mokena to Existing Morris Dialysis Facility

Trip to:

**1551 Creek Dr**

Morris, IL 60450-6857

38.25 miles / 41 minutes



**8910 W 192nd St, Mokena, IL 60448-8109**

Download  
Free App

- 1. Start out going **east** on **W 192nd St** toward **88th Ave.** [Map](#)

**0.2 Mi**  
*0.2 Mi Total*
- ↩

2. Turn **left** onto **88th Ave.** [Map](#)  
*Breakfast Nook is on the left*

**0.2 Mi**  
*0.4 Mi Total*
- ↩

3. Take the 1st **left** onto **W 191st St / County Hwy-84.** [Map](#)  
*If you reach Spring Lake Dr you've gone about 0.4 miles too far*

**0.9 Mi**  
*1.3 Mi Total*
- ↪

4. Turn **right** onto **Old LaGrange Rd / US-45 N.** Continue to follow **US-45 N.** [Map](#)  
*US-45 N is just past W Frontage Rd S*

**0.8 Mi**  
*2.1 Mi Total*
- ↗

5. Merge onto **I-80 W** toward **Joliet.** [Map](#)

**33.7 Mi**  
*35.8 Mi Total*
- EXIT 112

6. Take the **IL-47** exit, **EXIT 112**, toward **Morris / Yorkville.** [Map](#)

**0.2 Mi**  
*35.9 Mi Total*
- RAMP

7. Keep **left** to take the ramp toward **Morris.** [Map](#)

**0.1 Mi**  
*36.1 Mi Total*
- ↩ 47

8. Turn **left** onto **IL-47 / Illinois Route 47.** Continue to follow **IL-47.** [Map](#)

**1.1 Mi**  
*37.2 Mi Total*
- ↪ WEST 6

9. Turn **right** onto **Bedford Rd / US-6 W.** Continue to follow **US-6 W.** [Map](#)  
*US-6 W is just past W Commercial St*  
*CIRCLE K is on the corner*

**1.0 Mi**  
*38.2 Mi Total*
- ↪

10. Turn **right** onto **Creek Dr.** [Map](#)  
*Creek Dr is 0.1 miles past Park Blvd*  
*Los Burritos Ricos is on the corner*  
*If you reach Lakewood Dr you've gone about 0.1 miles too far*

**0.09 Mi**  
*38.3 Mi Total*
- 11. **1551 CREEK DR** is on the **right.** [Map](#)  
*If you reach Michael Dr you've gone a little too far*



**1551 Creek Dr, Morris, IL 60450-6857**



Notes

Tinley Park Dialysis to Existing Morris Dialysis Facility

Trip to:

**1551 Creek Dr**

Morris, IL 60450-6857

39.63 miles / 43 minutes



**[18491 - 18547] S 80th Ave, Tinley Park, IL 60487**

Download  
Free App



1. Start out going **south** on **80th Ave** toward **186th St**. [Map](#)

**0.7 Mi**

0.7 Mi Total



2. Take the 3rd **right** onto **W 191st St / County Hwy-84**. [Map](#)

**1.9 Mi**

*W 191st St is 0.3 miles past 189th St*

2.7 Mi Total

*If you are on S 80th Ave and reach Greenway Blvd you've gone about 0.2 miles too far*



3. Turn **right** onto **Old LaGrange Rd / US-45 N**. Continue to follow **US-45 N**. [Map](#)

**0.8 Mi**

*US-45 N is just past W Frontage Rd S*

3.4 Mi Total



4. Merge onto **I-80 W** toward **Joliet**. [Map](#)

**33.7 Mi**

37.1 Mi Total



5. Take the **IL-47** exit, **EXIT 112**, toward **Morris / Yorkville**. [Map](#)

**0.2 Mi**

37.3 Mi Total



6. Keep **left** to take the ramp toward **Morris**. [Map](#)

**0.1 Mi**

37.4 Mi Total



7. Turn **left** onto **IL-47 / Illinois Route 47**. Continue to follow **IL-47**. [Map](#)

**1.1 Mi**

38.6 Mi Total



8. Turn **right** onto **Bedford Rd / US-6 W**. Continue to follow **US-6 W**. [Map](#)

**1.0 Mi**

*US-6 W is just past W Commercial St*

39.5 Mi Total

*CIRCLE K is on the corner*



9. Turn **right** onto **Creek Dr**. [Map](#)

**0.09 Mi**

*Creek Dr is 0.1 miles past Park Blvd*

39.6 Mi Total

*Los Burritos Ricos is on the corner*

*If you reach Lakewood Dr you've gone about 0.1 miles too far*



**1551 Creek Dr, Morris, IL 60450-6857**

**Appendix 2 – Discontinuation Impact Letters**

Attached as Appendix 2 is documentation that Letters of Impact of Discontinuation and Relocation were sent to all existing dialysis facilities within 45 minutes normal driving distance, as determined by MapQuest.

Morris Dialysis  
1551 Creek Drive  
Morris, Illinois 60450

May 14, 2015

**FEDERAL EXPRESS**

Ms. Lori Wright  
Senior CON Specialist  
Fresenius Medical Care  
3500 Lacey Road, Suite 900  
Downers Grove, IL 60515

Ms. Wright:

I am writing on behalf of DaVita HealthCare Partners Inc. and Total Renal Care Inc. to inform you of the proposed relocation of Morris Dialysis located at 1551 Creek Drive, Morris, Illinois 60450 (the "Existing Facility"). DaVita plans to relocate the Existing Facility to a nearby location. The 13 Fresenius facilities listed in the attached spreadsheet are all within 45 minutes travel time of the Existing Facility.

The estimated date of discontinuation and relocation is approximately April 30, 2017.

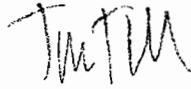
Over the past two years, the facility has served between 33 and 43 end-stage renal disease patients at any given time and the census at the end of April 2015 was 38. We expect all existing patients of the Existing Facility will be transferred to the replacement facility.

While we do not anticipate the project will impact access to care for residents of the area or area health care facilities because we will accommodate the Morris Dialysis patient base at another nearby location, the Illinois Health Facilities and Services Review Board requires us to inform you of these plans to provide you an option to provide impact statements from your facilities.

If you choose to provide such a response, please detail whether your individual facility's admissions policies place any restrictions or limitations on providing service to residents of the market area and your capacity by shift. Please send any such response within fifteen days of receipt of this letter to Tim Tincknell, DaVita HealthCare Partners Inc., 1333 North Kingsbury Street, Suite 305, Chicago, Illinois 60642. If we do not receive a response from you within fifteen days, it will be assumed that you agree that the relocation of the Existing Facility will not affect your facility.

If you have any questions about DaVita's plans to relocate the facility, please feel free to contact me at [timothy.tincknell@davita.com](mailto:timothy.tincknell@davita.com) or 312-649-9289.

Sincerely,

A handwritten signature in black ink, appearing to read 'Tim Tincknell', written in a cursive style.

Tim Tincknell

On behalf of

DaVita HealthCare Partners Inc.  
Total Renal Care Inc.

Facility	Ownership	Medicare #	Address	City	State	Zip Code	HSA
Renal Care Group - Pontiac	Fresenius	142611	804 West Madison Street	Pontiac	Illinois	61764	4
Renal Care Group - Ottawa	Fresenius	142576	1601 Mercury Court	Ottawa	Illinois	61350	2
Fresenius Medical Care Sandwich	Fresenius	142700	1310 N Main Street	Sandwich	Illinois	60548	1
Renal Care Group - Morris	Fresenius	142596	1401 Lakewood Dr., Suite B,C	Morris	Illinois	60450	9
Fresenius Medical Care of Oswego	Fresenius	142677	1051 Station Drive	Oswego	Illinois	60543	9
Fresenius Medical Care of Plainfield	Fresenius	142707	2320 Michas Drive	Plainfield	Illinois	60586	9
Fresenius Medical Care Plainfield North	Fresenius		24020 Riverwalk Court	Plainfield	Illinois	60544	9
Fresenius Medical Care Naperville	Fresenius	142765	2451 S. Washington Street	Naperville	Illinois	60565	9
Fresenius Medical Care Joliet	Fresenius	142739	721 East Jackson Street	Joliet	Illinois	60435	9
Fresenius Medical Care Lemont	Fresenius		16177 West 127th Street	Lemont	Illinois	60439	7
Bolingbrook Dialysis Center	Fresenius	142605	538 Boughton Road	Bolingbrook	Illinois	60446	9
FMC Dialysis Services of Willowbrook	Fresenius	142632	6300 South Kingery Highway #408	Willowbrook	Illinois	60527	7
Fresenius Medical Care of Mokena	Fresenius	142689	8910 W. 192nd Street	Mokena	Illinois	60448	9

From: (312) 649-9289  
Tim Tincknell  
DaVita  
1333 N Kingsbury St  
Suite 305  
CHICAGO, IL 60642

Origin ID: GYYA



J151215022303uv

Ship Date: 14MAY15  
ActWgt: 0.5 LB  
CAD: 104010597/NET3610

Delivery Address Bar Code



SHIP TO: (630) 960-6807

BILL SENDER

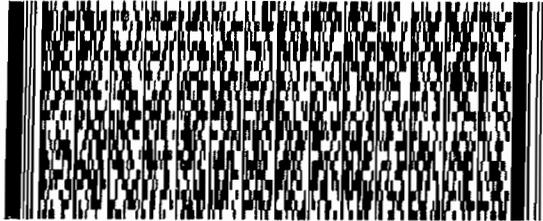
**Ms. Lori Wright**  
**Fresenius Medical Care**  
**3500 Lacey Road**  
**Suite 900**  
**DOWNERS GROVE, IL 60515**

Ref #  
Invoice #  
PO #  
Dept #

**FRI - 15 MAY 10:30A**  
**PRIORITY OVERNIGHT**

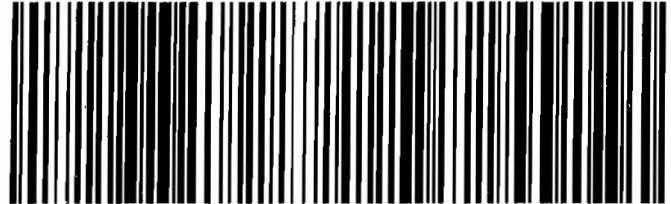
TRK# 7736 0282 7918

0201



**79 ENLA**

**60515**  
IL-US  
**ORD**



537J3/C918/EE4B

**After printing this label:**

1. Use the 'Print' button on this page to print your label to your laser or inkjet printer.
2. Fold the printed page along the horizontal line.
3. Place label in shipping pouch and affix it to your shipment so that the barcode portion of the label can be read and scanned.

**Warning:** Use only the printed original label for shipping. Using a photocopy of this label for shipping purposes is fraudulent and could result in additional billing charges, along with the cancellation of your FedEx account number.

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## Timothy Tincknell

---

**From:** trackingupdates@fedex.com  
**Sent:** Friday, May 15, 2015 9:40 AM  
**To:** Timothy Tincknell  
**Subject:** FedEx Shipment 773602827918 Delivered

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## Your package has been delivered

Tracking # 773602827918

Ship (P/U) date:  
Thursday, 5/14/15

Tim Tincknell  
DaVita  
CHICAGO, IL 60642  
US



Delivery date:  
Friday, 5/15/15 9:37 AM

Ms. Lori Wright  
Fresenius Medical Care  
3500 Lacey Road Suite 900  
DOWNERS GROVE, IL 60515  
US



### Shipment Facts

Our records indicate that the following package has been delivered.

**Tracking number:** 773602827918  
**Status:** Delivered: 05/15/2015 09:37 AM  
Signed for By: L.SCHATZ  
**Signed for by:** L.SCHATZ  
**Delivery location:** DOWNERS GROVE, IL  
**Delivered to:** Mailroom  
**Service type:** FedEx Priority Overnight  
**Packaging type:** FedEx Envelope  
**Number of pieces:** 1  
**Weight:** 0.50 lb.  
**Special handling/Services:** Deliver Weekday

 Please do not respond to this message. This email was sent from an unattended mailbox. This report was generated at approximately 9:39 AM CDT on 05/15/2015.

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Morris Dialysis  
1551 Creek Drive  
Morris, Illinois 60450

May 14, 2015

**FEDERAL EXPRESS**

Yorkville Dialysis Center  
1400 Beecher Road  
Yorkville, IL 60560

To Whom It May Concern:

I am writing on behalf of DaVita HealthCare Partners Inc. and Total Renal Care Inc. to inform you of the proposed relocation of Morris Dialysis, located at 1551 Creek Drive, Morris, Illinois 60450 (the "Existing Facility"). DaVita plans to relocate the Existing Facility to a nearby location. Your facility is within 45 minutes travel time of the Existing Facility.

The estimated date of discontinuation and relocation is approximately April 30, 2017.

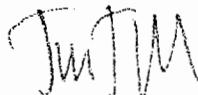
Over the past two years, the facility has served between 33 and 43 end-stage renal disease patients at any given time and the census at the end of April 2015 was 38. We expect all existing patients of the Existing Facility will be transferred to the replacement facility.

While we do not anticipate the project will impact access to care for residents of the area or area health care facilities because we will accommodate the Morris Dialysis patient base at another nearby location, the Illinois Health Facilities and Services Review Board requires us to inform you of these plans to provide you an option to provide an impact statement from your facility.

If you choose to provide such a response, please detail whether your facility's admissions policies place any restrictions or limitations on providing service to residents of the market area and your capacity by shift. Please send any such response within fifteen days of receipt of this letter to Tim Tincknell, DaVita HealthCare Partners Inc., 1333 North Kingsbury Street, Suite 305, Chicago, Illinois 60642. If we do not receive a response from you within fifteen days, it will be assumed that you agree that the relocation of the Existing Facility will not affect your facility.

If you have any questions about DaVita's plans to relocate the facility, please feel free to contact me at [timothy.tincknell@davita.com](mailto:timothy.tincknell@davita.com) or 312-649-9289.

Sincerely,

A handwritten signature in black ink, appearing to read 'Tim Tincknell', written in a cursive style.

Tim Tincknell

On behalf of

DaVita HealthCare Partners Inc.  
Total Renal Care Inc.

From: (312) 649-9289  
Tim Tincknell  
DaVita  
1333 N Kingsbury St  
Suite 305  
CHICAGO, IL 60642

Origin ID: GYYA



J151215022303uv

Ship Date: 14MAY15  
ActWgt: 0.5 LB  
CAD: 104010597/NET3610

Delivery Address Bar Code



SHIP TO: (630) 553-6952  
**Facility Administrator**  
**Yorkville Dialysis Center**  
**1400 Beecher Road**

**BILL SENDER**

**YORKVILLE, IL 60560.**

Ref #  
Invoice #  
PO #  
Dept #

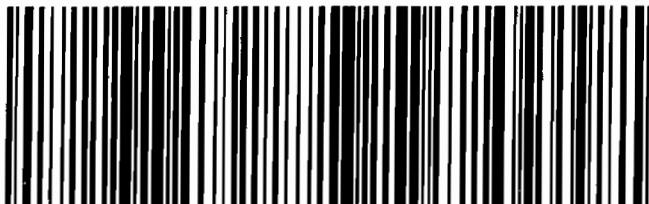
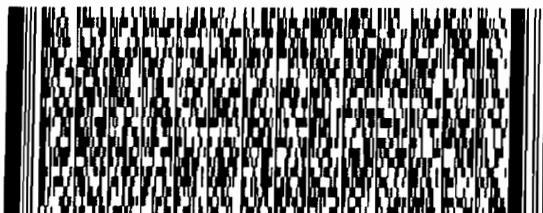
**FRI - 15 MAY 10:30A**  
**PRIORITY OVERNIGHT**

TRK# 7736 0262 5850

0201

**79 GBGA**

**60560**  
IL-US  
**ORD**



537J3/C918/EE4B

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**Timothy Tincknell**

---

**From:** trackingupdates@fedex.com  
**Sent:** Friday, May 15, 2015 9:52 AM  
**To:** Timothy Tincknell  
**Subject:** FedEx Shipment 773602625850 Delivered

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## Your package has been delivered

Tracking # 773602625850

Ship (P/U) date:  
Thursday, 5/14/15

Tim Tincknell  
DaVita  
CHICAGO, IL 60642  
US



Delivered

Delivery date:  
Friday, 5/15/15 9:49 AM

Facility Administrator  
Yorkville Dialysis Center  
1400 Beecher Road  
YORKVILLE, IL 60560  
US



### Shipment Facts

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**Tracking number:** 773602625850  
**Status:** Delivered: 05/15/2015 09:49 AM  
Signed for By: M.FRY  
**Signed for by:** M.FRY  
**Delivery location:** YORKVILLE, IL  
**Delivered to:** Receptionist/Front Desk  
**Service type:** FedEx Priority Overnight  
**Packaging type:** FedEx Envelope  
**Number of pieces:** 1  
**Weight:** 0.50 lb.  
**Special handling/Services:** Deliver Weekday

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Morris Dialysis  
1551 Creek Drive  
Morris, Illinois 60450

May 14, 2015

**FEDERAL EXPRESS**

Fox Valley Dialysis Center  
1300 Waterford Drive  
Aurora, IL 60504

To Whom It May Concern:

I am writing on behalf of DaVita HealthCare Partners Inc. and Total Renal Care Inc. to inform you of the proposed relocation of Morris Dialysis, located at 1551 Creek Drive, Morris, Illinois 60450 (the "Existing Facility"). DaVita plans to relocate the Existing Facility to a nearby location. Your facility is within 45 minutes travel time of the Existing Facility.

The estimated date of discontinuation and relocation is approximately April 30, 2017.

Over the past two years, the facility has served between 33 and 43 end-stage renal disease patients at any given time and the census at the end of April 2015 was 38. We expect all existing patients of the Existing Facility will be transferred to the replacement facility.

While we do not anticipate the project will impact access to care for residents of the area or area health care facilities because we will accommodate the Morris Dialysis patient base at another nearby location, the Illinois Health Facilities and Services Review Board requires us to inform you of these plans to provide you an option to provide an impact statement from your facility.

If you choose to provide such a response, please detail whether your facility's admissions policies place any restrictions or limitations on providing service to residents of the market area and your capacity by shift. Please send any such response within fifteen days of receipt of this letter to Tim Tincknell, DaVita HealthCare Partners Inc., 1333 North Kingsbury Street, Suite 305, Chicago, Illinois 60642. If we do not receive a response from you within fifteen days, it will be assumed that you agree that the relocation of the Existing Facility will not affect your facility.

If you have any questions about DaVita's plans to relocate the facility, please feel free to contact me at [timothy.tincknell@davita.com](mailto:timothy.tincknell@davita.com) or 312-649-9289.

Sincerely,

A handwritten signature in black ink, appearing to read "Tim Tincknell". The signature is stylized with a large initial "T" and a cursive "m".

Tim Tincknell

On behalf of

DaVita HealthCare Partners Inc.  
Total Renal Care Inc.

From: (312) 649-9289  
Tirn Tincknell  
DaVita  
1333 N Kingsbury St  
Suite 305  
CHICAGO, IL 60642

Origin ID: GYYA



J151215022303uv

Ship Date: 14MAY15  
Act/Wgt: 0.5 LB  
CAD: 104010597/INET3610

Delivery Address Bar Code



SHIP TO: (630) 236-1300

BILL SENDER

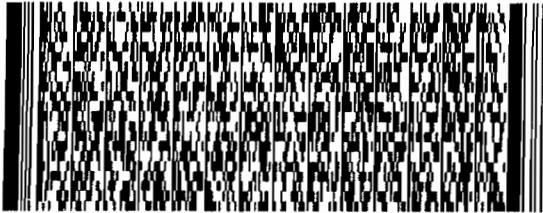
Facility Administrator  
Fox Valley Dialysis Center  
1300 Waterford Drive

AURORA, IL 60504

Ref #  
Invoice #  
PO #  
Dept #

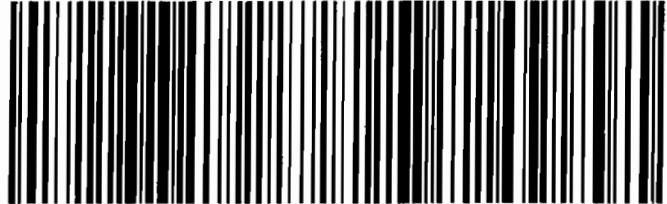
FRI - 15 MAY 10:30A  
PRIORITY OVERNIGHT

TRK# 7736 0296 2739  
0201



79 GBGA

60504  
IL-US  
ORD



537J3/C918/EE4B

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## Timothy Tincknell

---

**From:** trackingupdates@fedex.com  
**Sent:** Friday, May 15, 2015 10:03 AM  
**To:** Timothy Tincknell  
**Subject:** FedEx Shipment 773602962739 Delivered

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## Your package has been delivered

Tracking # 773602962739

Ship (P/U) date:  
Thursday, 5/14/15

Tim Tincknell  
DaVita  
CHICAGO, IL 60642  
US



Delivered

Delivery date:  
Friday, 5/15/15 10:00  
AM

Facility Administrator  
Fox Valley Dialysis Center  
1300 Waterford Drive  
AURORA, IL 60504  
US



### Shipment Facts

Our records indicate that the following package has been delivered.

**Tracking number:** 773602962739

**Status:** Delivered: 05/15/2015 10:00 AM  
Signed for By: V.LOPEZ

**Signed for by:** V.LOPEZ

**Delivery location:** AURORA, IL

**Delivered to:** Receptionist/Front Desk

**Service type:** FedEx Priority Overnight

**Packaging type:** FedEx Envelope

**Number of pieces:** 1

**Weight:** 0.50 lb.

**Special handling/Services:** Deliver Weekday

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Morris Dialysis  
1551 Creek Drive  
Morris, Illinois 60450

May 14, 2015

**FEDERAL EXPRESS**

Sun Health  
2121 Oneida St. Ste 104  
Joliet, IL 60435

To Whom It May Concern:

I am writing on behalf of DaVita HealthCare Partners Inc. and Total Renal Care Inc. to inform you of the proposed relocation of Morris Dialysis, located at 1551 Creek Drive, Morris, Illinois 60450 (the "Existing Facility"). DaVita plans to relocate the Existing Facility to a nearby location. Your facility is within 45 minutes travel time of the Existing Facility.

The estimated date of discontinuation and relocation is approximately April 30, 2017.

Over the past two years, the facility has served between 33 and 43 end-stage renal disease patients at any given time and the census at the end of April 2015 was 38. We expect all existing patients of the Existing Facility will be transferred to the replacement facility.

While we do not anticipate the project will impact access to care for residents of the area or area health care facilities because we will accommodate the Morris Dialysis patient base at another nearby location, the Illinois Health Facilities and Services Review Board requires us to inform you of these plans to provide you an option to provide an impact statement from your facility.

If you choose to provide such a response, please detail whether your facility's admissions policies place any restrictions or limitations on providing service to residents of the market area and your capacity by shift. Please send any such response within fifteen days of receipt of this letter to Tim Tincknell, DaVita HealthCare Partners Inc., 1333 North Kingsbury Street, Suite 305, Chicago, Illinois 60642. If we do not receive a response from you within fifteen days, it will be assumed that you agree that the relocation of the Existing Facility will not affect your facility.

If you have any questions about DaVita's plans to relocate the facility, please feel free to contact me at [timothy.tincknell@davita.com](mailto:timothy.tincknell@davita.com) or 312-649-9289.

Sincerely,

A handwritten signature in black ink, appearing to read 'Tim Tincknell', written in a cursive style.

Tim Tincknell

On behalf of

DaVita HealthCare Partners Inc.  
Total Renal Care Inc.

Appendix - 2

From: (312) 649-9289  
Tim Tincknell  
DaVita  
1333 N Kingsbury St  
Suite 305  
CHICAGO, IL 60642

Origin ID: GYYA



J151215022303uv

Ship Date: 14MAY15  
ActWgt: 0.5 LB  
CAD: 104010597/NET3610

Delivery Address Bar Code



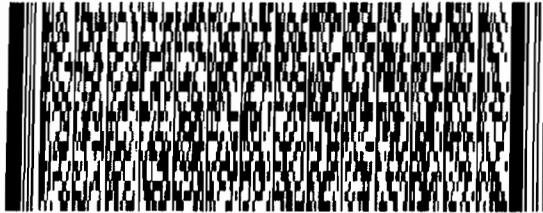
SHIP TO: (815) 744-9300  
**Facility Administrator**  
**Sun Health**  
**2121 Oneida Street**  
**Suite 104**  
**JOLIET, IL 60435**

**BILL SENDER**

Ref #  
Invoice #  
PO #  
Dept #

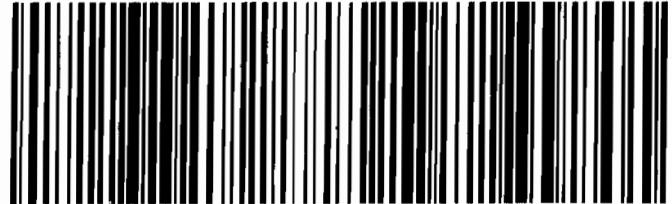
**FRI - 15 MAY 10:30A**  
**PRIORITY OVERNIGHT**

TRK# 7736 0299 7906  
0201



**79 DPAA**

**60435**  
IL-US  
**ORD**



537 J3/C918/EE4B

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**Timothy Tincknell**

---

**From:** trackingupdates@fedex.com  
**Sent:** Friday, May 15, 2015 10:17 AM  
**To:** Timothy Tincknell  
**Subject:** FedEx Shipment 773602997906 Delivered

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Tracking # 773602997906

Ship (P/U) date:  
Thursday, 5/14/15

Tim Tincknell  
DaVita  
CHICAGO, IL 60642  
US

Delivery date:  
Friday, 5/15/15 10:14  
AM



Delivered

Facility Administrator  
Sun Health  
2121 Oneida Street Suite 104  
JOLIET, IL 60435  
US



### Shipment Facts

Our records indicate that the following package has been delivered.

**Tracking number:** 773602997906

**Status:** Delivered: 05/15/2015 10:14 AM  
Signed for By: H.HERRERA

**Signed for by:** H.HERRERA

**Delivery location:** JOLIET, IL

**Delivered to:** Receptionist/Front Desk

**Service type:** FedEx Priority Overnight

**Packaging type:** FedEx Envelope

**Number of pieces:** 1

**Weight:** 0.50 lb.

**Special handling/Services:** Deliver Weekday

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Morris Dialysis  
1551 Creek Drive  
Morris, Illinois 60450

May 14, 2015

**FEDERAL EXPRESS**

USRC Bolingbrook Dialysis  
396 Remington Blvd  
Bolingbrook, IL 60440

To Whom It May Concern:

I am writing on behalf of DaVita HealthCare Partners Inc. and Total Renal Care Inc. to inform you of the proposed relocation of Morris Dialysis, located at 1551 Creek Drive, Morris, Illinois 60450 (the "Existing Facility"). DaVita plans to relocate the Existing Facility to a nearby location. Your facility is within 45 minutes travel time of the Existing Facility.

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Sincerely,

A handwritten signature in black ink, appearing to read 'Tim Tincknell', written in a cursive style.

Tim Tincknell

On behalf of

DaVita HealthCare Partners Inc.  
Total Renal Care Inc.

From: (312) 649-9289  
Tim Tincknell  
DaVita  
1333 N Kingsbury St  
Suite 305  
CHICAGO, IL 60642

Origin ID: GYYA



Ship Date: 14MAY15  
ActWgt: 0.5 LB  
CAD: 104010597/NET3610

Delivery Address Bar Code



SHIP TO: (630) 759-1943  
**Facility Administrator**  
**USRC Bolingbrook Dialysis**  
**396 Remington Boulevard**

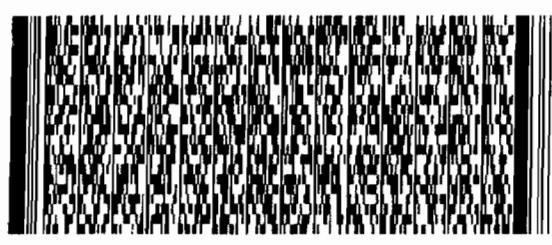
**BILL SENDER**

Ref #  
Invoice #  
PO #  
Dept #

**BOLINGBROOK, IL 60440**

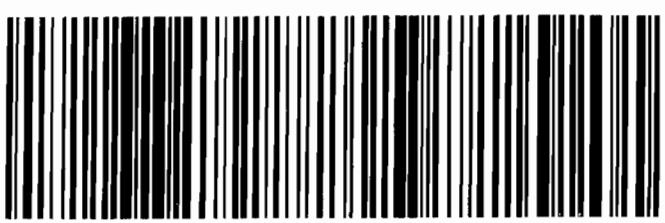
**FRI - 15 MAY 10:30A**  
**PRIORITY OVERNIGHT**

TRK# 7736 0302 7901  
8201



**79 ENLA**

**60440**  
IL US  
**ORD**



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## Timothy Tincknell

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**Sent:** Friday, May 15, 2015 9:15 AM  
**To:** Timothy Tincknell  
**Subject:** FedEx Shipment 773603027901 Delivered

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Tracking # 773603027901

Ship (P/U) date:  
Thursday, 5/14/15

Tim Tincknell  
DaVita  
CHICAGO, IL 60642  
US



Delivered

Delivery date:  
Friday, 5/15/15 9:11 AM

Facility Administrator  
USRC Bolingbrook Dialysis  
396 Remington Boulevard  
BOLINGBROOK, IL 60440  
US



## Shipment Facts

Our records indicate that the following package has been delivered.

**Tracking number:** 773603027901  
**Status:** Delivered: 05/15/2015 09:11 AM  
Signed for By: E.MALL  
**Signed for by:** E.MALL  
**Delivery location:** BOLINGBROOK, IL  
**Delivered to:** Receptionist/Front Desk  
**Service type:** FedEx Priority Overnight  
**Packaging type:** FedEx Envelope  
**Number of pieces:** 1  
**Weight:** 0.50 lb.  
**Special handling/Services:** Deliver Weekday

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**Appendix 3 – Physician Referral Letter**

Attached as Appendix 3 is the physician referral letter from Dr. Kravets confirming all 38 current ESRD patients will transfer from the Existing Facility to the Replacement Facility for Morris Dialysis and projecting 51 pre-ESRD patients will initiate dialysis within the next 12 to 24 months.

Teresa Majka-Kravets, M.D.  
Northeast Nephrology Consultants, Ltd.  
3100 Theodore Street, Suite 201  
Joliet, Illinois 60435

Kathryn J. Olson  
Chair  
Illinois Health Facilities and Services Review Board  
525 West Jefferson Street, 2<sup>nd</sup> Floor  
Springfield, Illinois 62761

Dear Chair Olson:

I am pleased to support DaVita's relocation of Morris Dialysis. The proposed 12-station chronic renal dialysis facility, to be located at 180 East Waverly Street, Morris, IL 60450, will directly benefit my patients.

DaVita's proposed replacement facility will improve access to necessary dialysis services in the Morris community. DaVita is well-positioned to provide these services, as it delivers life sustaining dialysis for residents of similar communities throughout the country and abroad. It has also invested in many quality initiatives to improve its patients' health and outcomes.

The site of the proposed replacement facility is located approximately 2 minutes from the existing facility and will provide better access to my patients. According to March 31, 2015 reported census data, utilization of existing operating facilities within 30 minutes of the proposed facility was 61.8%. However, it is important to note that within a 20 minute drive time of the Proposed Facility, there will be no other in-center hemodialysis facilities once FMC Morris closes. The utilization of Morris Dialysis, should it capture the 9 FMC Morris patients that reside closest to the proposed replacement facility, would climb to 87.0%, and would exceed the State Board's utilization standard of 80%, even without factoring in any new patient referrals.

I have identified 82 patients from my practice who are suffering from Stage 4 or 5 CKD, who all reside within an approximate 30 minute commute of the proposed replacement facility. Conservatively, I predict at least 51 of these patients will initiate dialysis within 12 to 24 months of the proposed replacement facility becoming operational. My large patient base and the lack of nearby facilities in Health Service Area 9 demonstrate considerable demand for this facility.

Morris Dialysis treated 38 ESRD patients as of April 30, 2015 for a utilization rate of 70.4%. All of the patients at the existing facility are expected to transfer to the new facility. A list of patients who have received care at existing facilities in the area over the past 3 years and most recent quarter is provided at Attachment – 1. A list of new patients my practice has referred for in-center hemodialysis for the past 1 1/4 years is provided at Attachment – 2. The

list of zip codes for the 82 pre-ESRD patients previously referenced is provided at Attachment – 3.

These patient referrals have not been used to support another pending or approved certificate of need application. The information in this letter is true and correct to the best of my knowledge.

DaVita is a leading provider of dialysis services in the United States, and I support the proposed relocation of Morris Dialysis.

Sincerely,



Teresa Majka-Kravets, M.D.  
Nephrologist  
Northeast Nephrology Consultants, Ltd.  
3100 Theodore Street, Suite 201  
Joliet, Illinois 60435

Subscribed and sworn to me  
This 7 day of July, 2015

Notary Public: 



**Attachment 1**  
**Historical Patient Utilization**

Morris Dialysis							
2012		2013		2014		2015 YTD 3/31	
Zip Code	Pt Count	Zip Code	Pt Count	Zip Code	Pt Count	Zip Code	Pt Count
60408	2	60404	1	60404	1	60404	1
60410	1	60408	3	60408	2	60408	1
60416	2	60410	1	60410	2	60410	2
60420	2	60416	1	60416	1	60416	1
60424	3	60420	3	60420	2	60420	3
60450	15	60421	1	60421	1	60421	1
60481	1	60424	5	60424	4	60424	4
61341	1	60447	1	60428	1	60435	1
61350	1	60450	19	60435	1	60444	1
		60479	1	60444	1	60447	1
		60609	1	60447	1	60450	16
		61341	2	60450	15	61341	3
		61360	2	60619	1	61360	2
				60649	1		
				61360	2		

**Historical Patient Utilization**

West Joliet					
2013		2014		2015 YTD 03/31	
Zip Code	Pt Count	Zip Code	Pt Count	Zip Code	Pt Count
60403	8	60014	1	60435	27
60404	5	60135	1	60403	11
60408	1	60140	1	60436	13
60410	1	60403	15	60433	4
60421	2	60404	5	60432	9
60431	8	60410	2	60586	13
60432	6	60420	1	60135	1
60433	6	60421	1	60446	7
60435	30	60431	10	60481	1
60436	12	60432	10	60404	10
60440	1	60433	4	60450	2
60441	1	60435	35	60441	3
60442	1	60436	17	60431	12
60446	8	60440	1	60410	7
60462	1	60441	4	60440	1
60481	2	60442	1	60421	1
60490	1	60446	8	60490	1
60544	2	60481	1	60544	1
60586	9	60490	1		
64035	1	60532	1		
		60544	3		
		60586	13		

**Historical Patient Utilization**

New Lenox							
2012		2013		2014		2015 YTD 03/31	
Zip Code	Pt Count	Zip Code	Pt Count	Zip Code	Pt Count	Zip Code	Pt Count
60421	2	60421	2	60406	1	60406	1
60423	2	60423	3	60421	1	60421	1
60426	1	60426	1	60423	2	60423	2
60432	20	60432	10	60426	1	60426	1
60433	18	60433	17	60428	1	60431	1
60435	6	60435	6	60431	1	60432	12
60436	7	60436	7	60432	12	60433	19
60439	2	60439	4	60433	18	60435	2
60441	7	60441	9	60435	3	60436	5
60442	4	60442	2	60436	6	60439	7
60448	4	60448	1	60439	7	60441	8
60451	9	60448	1	60441	10	60446	1
60462	1	60451	13	60442	2	60448	2
60467	5	60462	1	60448	1	60450	1
60491	2	60467	4	60450	1	60451	12
		60481	1	60451	10	60462	1
		60491	2	60462	1	60467	5
		62822	1	60467	5	60477	1
		62902	1	60481	1	60481	1
				60487	1	60487	2
				60491	5	60491	4
						60621	1

**Attachment 2**  
**New Patients**

<b>Morris Dialysis</b>			
2014		2015 YTD 03/31	
Zip Code	Pt Count	Zip Code	Pt Count
60410	1	60420	1
60416	4	60450	4
60420	2	61341	3
60421	1		
60428	1		
60435	1		
60444	1		
60447	1		
60450	9		
60452	1		
60479	1		
61341	3		
61360	2		
60619	2		

**New Patients**

<b>West Joliet</b>			
2014		2015 YTD 3/31	
Zip Code	Pt Count	Zip Code	Pt Count
60014	1	60403	2
60140	1	60404	4
60403	4	60410	3
60404	1	60431	3
60410	1	60432	1
60420	1	60435	3
60431	3	60436	1
60432	2	60441	1
60435	10	60446	1
60436	4	60450	1
60441	2	60586	1
60442	1		
60446	1		
60481	1		
60532	1		
60544	2		
60586	2		

**New Patients**

<b>New Lenox</b>			
2014		2015 YTD 3/31	
Zip Code	Pt Count	Zip Code	Pt Count
60406	1	60406	1
60411	1	60431	1
60428	1	60432	1
60431	1	60433	4
60432	5	60436	1
60433	9	60436	1
60435	2	60439	2
60436	2	60446	1
60439	8	60448	1
60441	4	60451	2
60442	3	60467	1
60445	1	60477	1
60448	2	60481	1
60448	1	60487	1
60450	1	60491	1
60451	9	60621	1
60467	7		
60468	1		
60481	2		
60487	2		
60491	5		
60625	1		
65079	1		
67203	1		

**Attachment 3**  
**Pre-ESRD Patients**

<b>Zip Code</b>	<b>Total</b>
60404	4
60435	21
60420	2
60450	4
60407	1
60403	6
60433	15
60436	9
60586	6
60431	5
60447	6
60410	2
61360	1
<b>Total</b>	<b>82</b>

**Appendix 4 – Time & Distance Determination: Replacement Facility**

Attached as Appendix 4 are the distance and normal travel time from the proposed facility to all existing dialysis facilities within 30 minutes normal travel time as determined by MapQuest.



Notes

FMC Ottawa to proposed relocation site for Morris Dialysis

Trip to:

**180 E Waverly St**

Morris, IL 60450-1420

23.31 miles / 28 minutes

Download Free App

- A
**1601 Mercury Ct, Ottawa, IL 61350-9308**
0.03 Mi  
0.03 Mi Total
- **1. Start out going northeast on Mercury Ct toward Starfire Dr. [Map](#)**
- ➔
**2. Take the 1st right onto Starfire Dr. [Map](#)**  
*Ottawa Blooms & Baskets is on the corner  
If you reach the end of Polaris Cir you've gone a little too far*
0.2 Mi  
0.3 Mi Total
- ↶
71 **3. Take the 2nd left onto E Norris Dr / US-6 E / IL-71. Continue to follow IL-71. [Map](#)**  
*IL-71 is just past Gemini Cir  
Gladfelter Funeral Home is on the corner*
2.3 Mi  
2.6 Mi Total
- ➔
**4. Turn right onto N 30th Rd / County Hwy-4. [Map](#)**
4.2 Mi  
6.8 Mi Total
- ↶
**5. Turn left onto E 24th Rd / County Hwy-15. [Map](#)**  
*E 24th Rd is 0.4 miles past E 2360th Rd  
If you reach E 25th Rd you've gone about 0.8 miles too far*
0.4 Mi  
7.2 Mi Total
- ↗
EAST  
80 **6. Merge onto I-80 E toward Joliet. [Map](#)**  
*If you are on E 24th Rd and reach N 3050th Rd you've gone about 0.2 miles too far*
14.6 Mi  
21.8 Mi Total
- ↘
112  
EXIT **7. Take the IL-47 exit, EXIT 112, toward Morris / Yorkville. [Map](#)**
0.3 Mi  
22.1 Mi Total
- ↗
47 **8. Merge onto IL-47 toward Morris. [Map](#)**  
*If you reach I-80 E you've gone about 0.4 miles too far*
1.1 Mi  
23.2 Mi Total
- ➔
**9. Turn right onto E Waverly St. [Map](#)**  
*E Waverly St is just past Maple Dr  
Turtle's Tap is on the corner  
If you reach McKinley St you've gone about 0.1 miles too far*
0.10 Mi  
23.3 Mi Total
- **10. 180 E WAVERLY ST is on the right. [Map](#)**  
*If you reach Liberty St you've gone a little too far*

B **180 E Waverly St, Morris, IL 60450-1420**



Notes

Existing Morris Dialysis facility to proposed relocation site

Trip to:

**180 E Waverly St**

Morris, IL 60450-1420

1.05 miles / 2 minutes

- |  |  |  |
|--|--|--|
|  | <b>1547 Creek Dr, Morris, IL 60450-6857</b>  | <b>Download<br/>Free App</b>           |
|  | 1. Start out going <b>south</b> on <b>Creek Dr</b> toward <b>W US Route 6 / US-6 E / US-6 W</b> . <a href="#">Map</a>  | <b>0.08 Mi</b><br><i>0.08 Mi Total</i> |
|  | <b>2. Take the 1st left</b> onto <b>W US Route 6 / US-6 E</b> . Continue to follow <b>US-6 E</b> . <a href="#">Map</a> | <b>0.8 Mi</b><br><i>0.9 Mi Total</i>   |
|  | 3. Turn <b>right</b> onto <b>Liberty St</b> . <a href="#">Map</a>  | <b>0.1 Mi</b><br><i>1.0 Mi Total</i>   |
|  | 4. Turn <b>left</b> onto <b>E Waverly St</b> . <a href="#">Map</a>   | <b>0.02 Mi</b><br><i>1.0 Mi Total</i>  |
|  | 5. <b>180 E WAVERLY ST</b> is on the <b>left</b> . <a href="#">Map</a>   |  |
|  | <b>180 E Waverly St, Morris, IL 60450-1420</b>   |  |



Notes

FMC Morris to proposed relocation site for Morris Dialysis

Trip to:

**180 E Waverly St**

Morris, IL 60450-1420

1.28 miles / 2 minutes



**1401 Lakewood Dr, STE B C, Morris, IL 60450-1237**

Download Free App



1. Start out going **north** on **Lakewood Dr** toward **Commons Dr.** [Map](#)

**0.2 Mi**

*0.2 Mi Total*



2. Turn **right** onto **W US Route 6 / US-6 E**. Continue to follow **US-6 E.** [Map](#)

**1.0 Mi**

*1.1 Mi Total*



3. Turn **right** onto **Liberty St.** [Map](#)

**0.1 Mi**

*1.3 Mi Total*



4. Turn **left** onto **E Waverly St.** [Map](#)

**0.02 Mi**

*1.3 Mi Total*



5. **180 E WAVERLY ST** is on the **left.** [Map](#)



**180 E Waverly St, Morris, IL 60450-1420**



Notes

FMC Plainfield to proposed relocation site for Morris Dialysis

Trip to:  
**180 E Waverly St**  
 Morris, IL 60450-1420  
 22.52 miles / 27 minutes

Download  
Free App

- A
**2320 Michas Dr, Plainfield, IL 60586-5045**
0.05 Mi  
0.05 Mi Total
- 1. Start out going north on Michas Dr toward Caton Farm Rd / County Hwy-5. [Map](#)
- ➡
2. Take the 1st right onto Caton Farm Rd / County Hwy-5. [Map](#)
1.1 Mi  
1.2 Mi Total
- ➡

59
 3. Turn right onto S Route 59 / IL-59. Continue to follow IL-59. [Map](#)  
*IL-59 is 0.1 miles past Olde Mill Rd  
 Panera Bread is on the corner  
 If you reach Cryder Ln you've gone about 0.1 miles too far*
3.0 Mi  
4.2 Mi Total
- ⬅

EAST 52
 4. Turn left onto W Jefferson St / US-52 E. [Map](#)  
*W Jefferson St is 0.3 miles past Sunrise Dr  
 Starbucks is on the right  
 If you are on Cottage St and reach Riffles St you've gone about 0.1 miles too far*
0.4 Mi  
4.6 Mi Total
- ⬆

SOUTH 55
 5. Merge onto I-55 S toward Bloomington-Normal. [Map](#)
2.2 Mi  
6.8 Mi Total
- ➡

250B EXIT
WEST 80
 6. Merge onto I-80 W via EXIT 250B toward Iowa. [Map](#)
14.0 Mi  
20.8 Mi Total
- ➡

112 EXIT
 7. Take the IL-47 exit, EXIT 112, toward Morris / Yorkville. [Map](#)
0.2 Mi  
21.0 Mi Total
- RAMP
8. Keep left to take the ramp toward Morris. [Map](#)
0.1 Mi  
21.1 Mi Total
- ⬅

47
 9. Turn left onto IL-47 / Illinois Route 47. Continue to follow IL-47. [Map](#)
1.3 Mi  
22.4 Mi Total
- ➡
10. Turn right onto E Waverly St. [Map](#)  
*E Waverly St is just past Maple Dr  
 Turtle's Tap is on the corner  
 If you reach McKinley St you've gone about 0.1 miles too far*
0.10 Mi  
22.5 Mi Total
- 11. 180 E WAVERLY ST is on the right. [Map](#)  
*If you reach Liberty St you've gone a little too far*
- B
**180 E Waverly St, Morris, IL 60450-1420**



Notes

Renal Center West Joliet to proposed relocation site for Morris Dialysis

Trip to:  
**180 E Waverly St**  
 Morris, IL 60450-1420  
 20.43 miles / 24 minutes

- A** **1051 Essington Rd, STE 140, Joliet, IL 60435 -2869** Download Free App
- 
**1. Start out going south on Essington Rd toward Executive Dr. [Map](#)** **0.3 Mi**  
*0.3 Mi Total*
  - 
**2. Take the 2nd right onto Black Rd. [Map](#)** **0.9 Mi**  
*1.2 Mi Total*  
*Black Rd is 0.2 miles past Executive Dr*  
*If you are on Essington Rd and reach Big Timber Dr you've gone about 0.1 miles too far*
  - 
**3. Turn left onto NE Frontage Rd. [Map](#)** **1.2 Mi**  
*2.4 Mi Total*  
*NE Frontage Rd is just past Woodcreek Dr*  
*If you are on County Hwy-56 and reach NW Frontage Rd you've gone about 0.1 miles too far*
  - 

**4. Turn right onto W Jefferson St / US-52 W. [Map](#)** **0.2 Mi**  
*2.5 Mi Total*  
*W Jefferson St is 0.4 miles past Deer Run Trl*  
*If you are on SE Frontage Rd and reach Enterprise Dr you've gone about 0.1 miles too far*
  - 

**5. Merge onto I-55 S via the ramp on the left toward Bloomington-Normal. [Map](#)** **2.2 Mi**  
*4.7 Mi Total*  
*If you are on E Jefferson St and reach NW Frontage Rd you've gone a little too far*
  - 

**6. Merge onto I-80 W via EXIT 250B toward Iowa. [Map](#)** **14.0 Mi**  
*18.7 Mi Total*
  - 
**7. Take the IL-47 exit, EXIT 112, toward Morris / Yorkville. [Map](#)** **0.2 Mi**  
*18.9 Mi Total*
  - 
**8. Keep left to take the ramp toward Morris. [Map](#)** **0.1 Mi**  
*19.0 Mi Total*
  - 

**9. Turn left onto IL-47 / Illinois Route 47. Continue to follow IL-47. [Map](#)** **1.3 Mi**  
*20.3 Mi Total*
  - 
**10. Turn right onto E Waverly St. [Map](#)** **0.10 Mi**  
*20.4 Mi Total*  
*E Waverly St is just past Maple Dr*  
*Turtle's Tap is on the corner*  
*If you reach McKinley St you've gone about 0.1 miles too far*
  - 
**11. 180 E WAVERLY ST is on the right. [Map](#)**  
*If you reach Liberty St you've gone a little too far*
- B** **180 E Waverly St, Morris, IL 60450-1420**



Notes

*MCTH*

FMC Plainfield to proposed relocation site for Morris Dialysis

Trip to:

**180 E Waverly St**  
 Morris, IL 60450-1420  
 25.72 miles / 30 minutes

Download Free App

**A** 24020 Riverwalk Ct, Plainfield, IL 60544-7102

● 1. Start out going **east** on **W Riverwalk Ct** toward **S Route 59 / US-30 E / IL-59**. [Map](#) **0.03 Mi**  
 0.03 Mi Total

➔  2. Take the 1st **right** onto **S Route 59 / US-30 E / IL-59**. Continue to follow **US-30 E / IL-59**. [Map](#) **1.0 Mi**  
 1.0 Mi Total  
*Aurelio's Pizza is on the corner*

↶  3. Turn **left** onto **S Joliet Rd / US-30 E**. Continue to follow **US-30 E**. [Map](#) **2.2 Mi**  
 3.2 Mi Total  
*US-30 E is just past W Ottawa St  
 Overman-Jones Funeral Home & Cremation Services is on the left  
 If you are on S Route 59 and reach W Newkirk Dr you've gone a little too far*

⤴  4. Merge onto **I-55 S** toward **Bloomington**. [Map](#) **6.8 Mi**  
 10.0 Mi Total

  5. Merge onto **I-80 W** via **EXIT 250B** toward **Iowa**. [Map](#) **14.0 Mi**  
 24.0 Mi Total

 6. Take the **IL-47** exit, **EXIT 112**, toward **Morris / Yorkville**. [Map](#) **0.2 Mi**  
 24.2 Mi Total

 7. Keep **left** to take the ramp toward **Morris**. [Map](#) **0.1 Mi**  
 24.3 Mi Total

↶  8. Turn **left** onto **IL-47 / Illinois Route 47**. Continue to follow **IL-47**. [Map](#) **1.3 Mi**  
 25.6 Mi Total

➔ 9. Turn **right** onto **E Waverly St**. [Map](#) **0.10 Mi**  
 25.7 Mi Total  
*E Waverly St is just past Maple Dr  
 Turtle's Tap is on the corner  
 If you reach McKinley St you've gone about 0.1 miles too far*

■ 10. **180 E WAVERLY ST** is on the **right**. [Map](#)  
*If you reach Liberty St you've gone a little too far*

**B** 180 E Waverly St, Morris, IL 60450-1420

Notes

Sun Health to proposed relocation site for Morris Dialysis



Trip to:

**180 E Waverly St**

Morris, IL 60450-1420

21.18 miles / 24 minutes



**2121 Oneida St, STE 104, Joliet, IL 60435-6525**

Download Free App



1. Start out going **east** on **Oneida St** toward **N Hammes Ave.** [Map](#)

**0.4 Mi**

*0.4 Mi Total*



2. Take the 2nd **right** onto **N Larkin Ave / IL-7.** [Map](#)

**0.7 Mi**

*N Larkin Ave is 0.3 miles past N Hammes Ave*

*Taco Bell is on the corner*

*If you reach N Emery St you've gone a little too far*

*1.1 Mi Total*



3. Merge onto **I-80 W** toward **Moline-Rock Island.** [Map](#)

**18.3 Mi**

*19.5 Mi Total*



4. Take the **IL-47** exit, **EXIT 112**, toward **Morris / Yorkville.** [Map](#)

**0.2 Mi**

*19.7 Mi Total*



5. Keep **left** to take the ramp toward **Morris.** [Map](#)

**0.1 Mi**

*19.8 Mi Total*



6. Turn **left** onto **IL-47 / Illinois Route 47.** Continue to follow **IL-47.** [Map](#)

**1.3 Mi**

*21.1 Mi Total*



7. Turn **right** onto **E Waverly St.** [Map](#)

**0.10 Mi**

*E Waverly St is just past Maple Dr*

*Turtle's Tap is on the corner*

*If you reach McKinley St you've gone about 0.1 miles too far*

*21.2 Mi Total*



8. **180 E WAVERLY ST** is on the **right.** [Map](#)

*If you reach Liberty St you've gone a little too far*



**180 E Waverly St, Morris, IL 60450-1420**



Notes

FMC Joliet to proposed relocation site for Morris Dialysis

Trip to:

**180 E Waverly St**

Morris, IL 60450-1420

24.48 miles / 29 minutes

Download Free App

**A** **721 E Jackson St, Joliet, IL 60432-2560**

**0.5 Mi**  
*0.5 Mi Total*

1. Start out going **west** on **E Jackson St / US-6 W** toward **Abe St**. [Map](#)

**0.5 Mi**  
*1.0 Mi Total*

2. Turn **left** onto **Collins St / US-6 W**. Continue to follow **Collins St**. [Map](#)

*Collins St is 0.1 miles past Parks Ave  
Churchs Chicken is on the corner  
If you reach Herkimer St you've gone a little too far*

**0.07 Mi**  
*1.1 Mi Total*

3. **Collins St** becomes **E Jefferson St**. [Map](#)

**0.7 Mi**  
*1.8 Mi Total*

4. Turn **left** onto **Richards St**. [Map](#)  
*If you reach N Eastern Ave you've gone a little too far*

**21.0 Mi**  
*22.8 Mi Total*

5. Merge onto **I-80 W** toward **Moline-Rock Island**. [Map](#)

**0.2 Mi**  
*23.0 Mi Total*

6. Take the **IL-47** exit, **EXIT 112**, toward **Morris / Yorkville**. [Map](#)

**0.1 Mi**  
*23.1 Mi Total*

7. Keep **left** to take the ramp toward **Morris**. [Map](#)

**1.3 Mi**  
*24.4 Mi Total*

8. Turn **left** onto **IL-47 / Illinois Route 47**. Continue to follow **IL-47**. [Map](#)

**0.10 Mi**  
*24.5 Mi Total*

9. Turn **right** onto **E Waverly St**. [Map](#)  
*E Waverly St is just past Maple Dr  
Turtle's Tap is on the corner  
If you reach McKinley St you've gone about 0.1 miles too far*

10. **180 E WAVERLY ST** is on the **right**. [Map](#)  
*If you reach Liberty St you've gone a little too far*

**B** **180 E Waverly St, Morris, IL 60450-1420**

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