



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

525 WEST JEFFERSON ST. • SPRINGFIELD, ILLINOIS 62761 • (217) 782-3516 FAX: (217) 785-4111

DOCKET NO: H-05	BOARD MEETING: October 22, 2019	PROJECT NO: 19-034	PROJECT COST:
FACILITY NAME: Fresenius Medical Care Des Plaines		CITY: Des Plaines	Original: \$487,902
TYPE OF PROJECT: Non-Substantive			HSA: VII

PROJECT DESCRIPTION: The Applicants (Fresenius Medical Care Des Plaines, LLC and Fresenius Medical Care Holdings, Inc.) propose to add 3 stations to its existing 13-station facility located at 1625 Oakton Place, Des Plaines, Illinois. The cost of the project is \$487,902. The expected completion date is March 31, 2021.

EXECUTIVE SUMMARY

PROJECT DESCRIPTION:

- The Applicants (Fresenius Medical Care Des Plaines, LLC, and Fresenius Medical Care Holdings, Inc.) propose to add 3 stations to its existing 13-station facility located at 1625 Oakton Place, Des Plaines, Illinois. The cost of the project is \$487,902. The expected completion date is March 31, 2021.
- The Applicants were approved by the State Board on March 22, 2011 for the establishment of an 12-station facility at a cost of \$487,902 Permit #10-067.
- The purpose of the project is to maintain access to life-sustaining dialysis at a facility located in a Federally Designated Medically Underserved area of Des Plaines.

WHY THE PROJECT IS BEFORE THE STATE BOARD:

- The project is before the State Board because the project proposes substantial change in scope of a health care facility as defined at 77 ILAC 1130.140.
- One of the objectives of the Health Facilities Planning Act is *“to assess the financial burden to patients caused by unnecessary health care construction and modification. Evidence-based assessments, projections and decisions will be applied regarding **capacity, quality, value and equity** in the delivery of health care services in Illinois. Cost containment and support for safety net services must continue to be central tenets of the Certificate of Need process.”* [20 ILCS 3960/2]

PURPOSE OF THE PROJECT:

- The purpose of the project is to maintain patient access to life sustaining dialysis services at Fresenius Medical Care Des Plaines, a 13-station ESRD facility located in a Federally Designated Medically Underserved area.

PUBLIC HEARING/COMMENT:

- A public hearing was offered but was not requested. The project file contains no letters of support and no letters of opposition.

SUMMARY:

- To add stations to an existing facility the State Board does not consider the need or excess of the stations in the ESRD Planning Area or the number of existing ESRD facilities and their utilization.
- The State Board requires a facility that is proposing to add stations to be at target utilization or above for the past 24-months and have a sufficient number of pre-ESRD patients that reside in the ESRD Planning Area that will require dialysis within 12-24 months after the additional stations are added.
- The Applicants have identified 17 pre-ESRD patients that will need dialysis within 12 months, and another 41 patients that will require dialysis in the first two years after project completion. According to the Applicants *“Fresenius Des Plaines has been operating at an average of 79% utilization rate over the past twelve months and 77% over the last 24 months. The facility just added one station as of June 2018 and has already operated over 80% two quarters since that time. High utilization rates restrict access to treatment schedule times for patients new to dialysis causing conflicts with their work or family responsibilities. At high utilization rates, new patients generally are scheduled on the 3rd shift of the day which ends around 8pm. There are fewer transportation options for patients going home from treatment at this time causing hardship for the patient and family members who must transport them.”*
- The Applicants have addressed a total 18 criteria and failed to meet the following:

State Board Standards Not Met	
Criteria	Reasons for Non-compliance
77 ILAC 1120.140 (c) – Reasonableness of Project Costs	<p><i>The applicants report modernization and contingency costs of \$426.04 per GSF, which exceeds the State Board standard (\$206.74) by \$219.30.</i></p> <p>The Applicants state: <i>While the modernization cost of this project per GSF is higher than the State standard, it is for a major renovation that consists of more expensive items such as cabinetry, flooring, doorways, walls and a nurse's station. It is not spread out over the entirety of the clinic but only the space to be renovated of 927 GSF.</i></p>

STATE BOARD STAFF REPORT
Project #19-034
Fresenius Medical Care Des Plaines

APPLICATION/CHRONOLOGY/SUMMARY	
Applicants(s)	Fresenius Medical Care Des Plaines, LLC, Fresenius Medical Care Holdings, Inc.
Facility Name	Fresenius Medical Care Des Plaines
Location	1625 Oakton Place, Des Plaines, Illinois
Permit Holder	Fresenius Medical Care Des Plaines, LLC, Fresenius Medical Care Holdings, Inc.
Operating Entity	Fresenius Medical Care Des Plaines, LLC
Owner of Site	Washington Center, LLC
Description	Addition of 3-ESRD Stations
Total GSF	927 GSF
Application Received	July 23, 2019
Application Deemed Complete	July 23, 2019
Review Period Ends	September 21, 2019
Financial Commitment Date	October 22, 2020
Project Completion Date	March 31, 2021
Review Period Extended by the State Board Staff?	No
Can the Applicants request a deferral?	Yes
Expedited Review?	No

I. Project Description

The Applicants (Fresenius Medical Care Des Plaines, LLC and Fresenius Medical Care Holdings, Inc.) propose to add 3-stations to its existing 13-station facility located at 1625 Oakton Place, Des Plaines, Illinois. The cost of the project is \$487,902. The expected completion date is March 31, 2021.

II. Summary of Findings

- A. State Board Staff finds the proposed project appears to be in conformance with the provisions of Part 1110.
- B. State Board Staff finds the proposed project does **not** appear to be in conformance with the provisions of Part 1120.

III. General Information

The Applicants are Fresenius Medical Care Holdings, Inc. and Fresenius Medical Care Des Plaines, LLC d/b/a Fresenius Medical Care Des Plaines. **Fresenius Medical Care Holdings, Inc.**, operating as Fresenius Medical Care North America or FMCNA, operates a network of some 2,100 dialysis clinics located throughout the continent. One of the largest providers of kidney dialysis services, FMCNA offers outpatient and in-home hemodialysis treatments for chronic kidney disease. The company's operating units also market and sell dialysis machines and related equipment and provide renal research, laboratory, and patient support services. FMCNA oversees the North American operations of Fresenius Medical Care Holdings, Inc., which oversees Fresenius Medical Care Ventures, LLC. Fresenius Medical Care Ventures, LLC. has a 60% membership

interest in Fresenius Medical Care Des Plaines, LLC. AIN Ventures, LLC has a 40% membership interest in Fresenius Medical Care Des Plaines, LLC.

This is a non-substantive project subject to an 1110 and 1120 review. Financial commitment will occur after permit issuance.

IV. Project Uses and Sources of Funds

The Applicants are funding the project with cash in the amount of \$442,902 and the FMV of leased space of \$43,000.

TABLE ONE				
Project Uses and Sources of Funds ⁽¹⁾				
Uses of Funds	Reviewable	Non-Reviewable	Total	% of Total
Modernization Contracts	\$359,676	\$0	\$359,676	73.7%
Contingencies	\$35,226	\$0	\$35,226	7.2%
Architectural/Engineering Fees	\$32,000	\$0	\$32,000	6.6%
Movable or Other Equipment (not in construction contracts)	\$18,000	\$0	\$18,000	3.7%
Fair Market Value of Leased Space or Equipment	\$43,000	\$0	\$43,000	8.8%
TOTAL USES OF FUNDS	\$487,902	\$0	\$487,902	100.00%
SOURCE OF FUNDS	Reviewable	Non-Reviewable	Total	% of Total
Cash and Securities	\$444,902	\$0	\$444,902	91.2%
Leases (fair market value)	\$43,000	\$0	\$43,000	8.8%
TOTAL SOURCES OF FUNDS	\$487,902	\$0	\$487,902	100.00%

1. Itemization of Project Costs can be found at Page 6 of the Application for Permit

V. Health Planning Area

The proposed facility will be in the HSA VII ESRD Planning Area. HSA-V includes DuPage and suburban Cook counties. The September 2019 Inventory Update has **projected an excess of one hundred twenty-seven (127) ESRD stations by CY 2022.** The facility is in a Federally Designated Medically Underserved Area within the metropolitan Chicago area.

VI. Background of the Applicants

A) Criterion 1110.110 (a) (1) & (3) – Background of the Applicants

An applicant must demonstrate that it is fit, willing and able, and has the qualifications, background and character to adequately provide a proper standard of health care service for the community. To demonstrate compliance with this criterion the Applicants must provide

- A) A listing of all health care facilities currently owned and/or operated by the applicant in Illinois or elsewhere, including licensing, certification and accreditation identification numbers, as applicable;
- B) A listing of all health care facilities currently owned and/or operated in Illinois, by any corporate officers or directors, LLC members, partners, or owners of at least 5% of the proposed health care facility;
- C) Authorization permitting HFSRB and IDPH access to any documents necessary to verify the information submitted, including, but not limited to: official records of IDPH or other State agencies; the licensing or certification records of other states, when applicable; and the records of nationally recognized accreditation organizations. Failure to provide the authorization shall constitute an abandonment or withdrawal of the application without any further action by HFSRB.
- D) An attestation that the Applicants have had no *adverse action*¹ taken against any facility they own or operate, or a certified listing of any adverse action taken.

1. The Applicants attested that there has been no adverse action taken against any of the facilities owned or operated by Metropolis Dialysis Services, LLC or Fresenius Medical Care Holdings, Inc. during the three (3) years prior to filing the application. [Application for Permit pages 39-40]
2. The Applicants have authorized the Illinois Health Facilities and Services Review Board and the Illinois Department of Public Health to have access to any documents necessary to verify information submitted in connection to the Applicants' certificate of need to add four ESRD stations. The authorization includes but is not limited to: official records of IDPH or other State agencies; the licensing or certification records of other states, when applicable; and the records of nationally recognized accreditation organizations. [Application for Permit pages 39-40]
3. The site is owned by Washington Center, LLC. This facility is currently operating; therefore, a copy of the lease is not required.
4. This is a modernization project and evidence of compliance with Executive Order #2006-05 and the Illinois State Agency Historic Resources Preservation Act is not required.

¹Adverse action is defined as a disciplinary action taken by IDPH, CMMS, or any other State or federal agency against a person or entity that owns or operates or owns and operates a licensed or Medicare or Medicaid certified healthcare facility in the State of Illinois. These actions include, but are not limited to, all Type "A" and Type "AA" violations." (77 IAC 1130.140)

VII. Purpose of Project, Safety Net Impact Statement and Alternatives

The following three (3) criteria are informational; no conclusion on the adequacy of the information submitted.

A) **Criterion 1110.110 (b) Purpose of the Project**

To demonstrate compliance with this criterion the Applicants must document that the project will provide health services that improve the health care or well-being of the market area population to be served.

The purpose of this project is as stated:

“The goal of Fresenius Medical Care is to keep dialysis access available to this underserved patient population. There is no direct empirical evidence relating to this project other than that when chronic kidney care patients have adequate access to services, it tends to reduce overall healthcare costs and results in less complications. This facility participates in the Value Based CMS ESRD Seamless Care Organization (ESCO) which increases patient monitoring resulting in higher quality, fewer hospitalizations/readmissions and significant cost savings to Medicare. It is expected that this facility would continue to have similar quality outcomes after the expansion. The Des Plaines facility has a 4-star CMS quality rating, and the patients have quality values as listed: URR > 65%: 94% Kt/V > 1.2: 94%.” [Application for Permit page 41]

B) **Criterion 1110.110 (c) - Safety Net Impact Statement**

To demonstrate compliance with this criterion the Applicants must document that the project will provide health services that improve the health care or well-being of the market area population to be served.

Information regarding the Safety Net Impact Statement was provided as required and can be reviewed at page 68 of the Application for Permit.

TABLE ONE ⁽¹⁾
SAFETY NET INFORMATION
Fresenius Medical Care Facilities in Illinois

	2016	2017	2018
Net Revenue	\$450,657,245	\$461,658,707	\$436,811,409
CHARITY			
Charity (# of self-pay patients)	233	280	294
Charity (self-pay) Cost	\$3,269,127	\$4,598,897	\$5,295,686
% of Charity Care to Net Rev.	.072%	.098%	1.2%
MEDICAID			
Medicaid (Patients)	396	320	328
Medicaid (Revenue)	\$7,310,484	\$4,383,383	\$6,630,014
% of Medicaid to Net Revenue	1.67%	.097%	1.43%

1. Source: Page 64 of the Application for Permit.

2. Charity Care is defined by the State Board as 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]. As a for profit entity Fresenius Medical Care does not provide charity care the numbers reported are for self-pay patients.

Note: Medicaid reported numbers are impacted by many patients who switch from Medicaid to Medicaid Risk Insurance (managed care plan) which pays similar to Medicaid. These patients are reported under commercial insurance however, in 2016 of our commercial patients we had 1,230 Medicaid Risk patients with Revenues of \$22,664,352.

- C) **Criterion 1110.110 (d) - Alternatives to the Project**
To demonstrate compliance with this criterion the Applicants must document all alternatives to the proposed project that were considered.

The only applicants considered four alternatives:

- 1) **Do Nothing/Maintain Status Quo**
The applicants rejected this alternative, as it would do nothing to address access issues at FMC Des Plaines. There were no costs identified with this alternative.
- 2) **Admit Patients to Other Facilities**
The applicants note that Associates in Nephrology (AIN) physicians already admit ESRD patients to several area clinics in Chicago and the Chicago metropolitan area. The applicants rejected this alternative based on the local need and supplied no project costs.
- 3) **Establish a Joint Venture**
The applicants note that FMC Des Plaines is already classified as a joint venture, which is not a determinant of overall project costs, or a determinant to alleviate the high utilization. No project costs were identified with this alternative.
- 4) **Project as Proposed**
The applicants deemed this alternative as most acceptable, due to the immediate need to resolve the over-utilization and maintain cost effectiveness. The option of adding three stations to the existing thirteen-station ESRD facility was seen as most effective way to serve a planning area deemed as underserved. Cost of this alternative: \$487,000.

VIII. **Project Scope and Size, Utilization and Unfinished/Shell Space**

- A) **Criterion 1110.120 (a) - Size of Project**
To demonstrate compliance with this criterion the Applicants must document that the proposed size of the project is in compliance with Part 1110 Appendix B.

The Applicants are proposing to add 3 additional ESRD stations, resulting in a 16-ESRD station facility, in 9,500 BGSF of clinical space. The project involves the conversion of 927 GSF of existing office space, and this addition equates to approximately 593.7 BGSF per station. The State Board standard is 450-650 GSF per station or 10,400 BGSF. The Applicants have successfully addressed this criterion. (See Application for Permit page 33)

STATE BOARD STAFF FINDS THE PROPOSED PROJECT IN CONFORMANCE WITH CRITERION SIZE OF PROJECT (77 ILAC 1110.120 (a))

- B) **Criterion 1110.120 (b) – Projected Utilization**
To demonstrate compliance with this criterion the Applicants must document that the proposed project will be at the target occupancy of 80% within two years after project completion.

As of July 2019, the facility had 60 patients dialyzing in 13 stations, resulting in a utilization rate of 76.9%. Per the Applicants there are “41 pre-ESRD patients from the service area identified to be referred to the Des Plaines facility after project completion.

The facility will be at 85% utilization upon initiating operations of the two additional stations surpassing target utilization.”

$$\begin{aligned} 60 + 41 &= 101 \text{ patients} \times 156 \text{ treatments per year} = 15,756 \text{ total treatments} \\ 16 \text{ stations} \times 936 \text{ treatments per year} &= 14,976 \text{ total treatments} \\ 15,756 \text{ treatments} \div 14,976 \text{ treatments} &= 95\% \end{aligned}$$

STATE BOARD STAFF FINDS THE PROPOSED PROJECT IN CONFORMANCE WITH CRITERION PROJECTED UTILIZATION (77 ILAC 1110.120 (b))

C) Criterion 1110.120 (e) – Assurances

To demonstrate compliance with this criterion the Applicants must document that the proposed facility will be at target occupancy two years after project completion.

The Applicants provided the necessary assurance that they will be at target occupancy within two years after project completion. (See Application for Permit page 60)

STATE BOARD STAFF FINDS THE PROPOSED PROJECT IN CONFORMANCE WITH CRITERION ASSURANCES (77 ILAC 1110.120(e))

VIII. In-Center Hemo-dialysis Projects

A) **Criterion 1110.230 (b)(2) & (4) - Planning Area Need** **The Applicants must document the following:**

2) **Service to Planning Area Residents**

To demonstrate compliance with this sub-criterion the Applicants must document that the proposed dialysis facility will provide service to the residents of the proposed ESRD Planning Area.

Fifty-nine (98%) of the current patients dialyzing at the facility reside in the HSA VII ESRD Planning Area. The applicants also note that all (100%) of the 41 pre-ESRD patients reside within this Planning Area.

4) **Service Demand – Expansion of In-Center Hemodialysis Service**

To demonstrate compliance with this sub-criterion the Applicants must document that the number of stations to be added for each category of service is necessary to reduce the facility's experienced high utilization and to meet a projected demand for service.

Historical Utilization

Fresenius Des Plaines has been operating at an average of 79% utilization rate over the past twelve months and 77% over the last 24 months. The facility just added one station as of June 2018 and has already operated over 80% two quarters since that time. High utilization rates restrict access to treatment schedule times for patients new to dialysis causing conflicts with their work or family responsibilities. At high utilization rates, new patients generally are scheduled on the 3rd shift of the day which ends around 8pm. There are fewer transportation options for patients going home from treatment at this time causing hardship for the patient and family members who must transport them.”

Projected Referrals

The Applicants provided a referral letter from Dr. Daniel Kniaz, M.D. from Associates in Nephrology, S.C., and Medical Director of the Fresenius Medical Care Des Plaines dialysis facility. The Applicants stated

“In the past year, the patients requiring dialysis at this facility has continually increased. A recent addition of one station was not enough to meet the demand. The facility has room for 3 more stations that can provide access to accommodate this demand which will quickly meet the immediate need. At the Fresenius Medical Care Des Plaines facility I was treating 24 in-center hemodialysis patients at the end of 2016, 36 at the end of 2017, 38 at the end of 2018, and 41 as of March 2019. In the most recent 12-month period I also referred 15 new ESRD patients to the Des Plaines facility. I currently have 148 chronic kidney disease (CKD) patients that reside in Des Plaines and surrounding areas. Of these I expect approximately 41 to be referred to the facility in the first two years the new stations are operating” [Application for Permit pages 48-50]

Based upon the information provided in the Application for Permit the Applicants have successfully addressed this criterion.

STATE BOARD STAFF FINDS THE PROPOSED PROJECT IN CONFORMANCE WITH CRITERION PLANNING AREA NEED (77 ILAC 1110.230 (b)(2) and (4))

- B) Criterion 1110.230 (e) - Staffing**
- C) Criterion 1110.230(f) - Support Services**
- D) Criterion 1110.230 (j) – Assurances**

The 13-station facility is certified by Medicare/Medicaid and if approved the 3-station addition will be certified as well. Dr. Daniel Kniaz, M.D, is the Medical Director. Support services including nutritional counseling, psychiatric/social services, and clinical laboratory services will be provided at the proposed facility, while home therapies/home training will be provided at Fresenius Medical Care, Des Plaines. The following services will be provided via referral to Advocate Lutheran General Hospital, blood bank services, rehabilitation services and psychiatric services. Additionally, the appropriate assurances have been provided by the Applicants asserting the proposed facility will be at the target occupancy of eighty percent (80%) two years after project completion and that the proposed facility will meet the adequacy outcomes stipulated by the State Board. (See Application for Permit Pages 59-60)

STATE BOARD STAFF FINDS THE PROPOSED PROJECT IN CONFORMANCE WITH CRITERIA STAFFING, SUPPORT SERVICES, ASSURANCES (77 ILAC 1110.230 (e), (f), and (j))

IX. FINANCIAL VIABILITY

- A) Criterion 1120.120 – Availability of Funds**
- B) Criterion 1120.130 – Financial Viability**
To demonstrate compliance with these two criteria the Applicants must document if the resources are available to fund the proposed project.

The Applicants are funding this project with cash and securities in the amount of \$444,902 and the fair market value of leased equipment totaling \$43,000. A review of the audited financial statements indicates there is sufficient cash to fund the project. Because the project will be funded with cash no viability ratios need to be provided because the Applicants have qualified for the financial viability waiver.

TABLE EIGHT
FMC Holdings Inc. Audited Financial Statements
(Dollars in Thousands 000)
December 31st

	2014	2015	2016	2017	2018
Cash & Investments	\$195,280	\$249,300	\$357,899	\$569,818	\$1,842,592
Current Assets	\$4,027,091	\$4,823,714	\$5,208,339	\$4,519,571	\$2,553,285
Total Assets	\$18,489,619	\$19,332,539	\$20,135,661	\$19,822,127	\$20,666,711
Current Liabilities	\$2,058,123	\$2,586,607	\$2,799,192	\$2,900,783	\$3,280,491
Long Term Debt	\$2,669,500	\$2,170,018	\$2,085,331	\$1,755,960	\$1,243,728

TABLE EIGHT
FMC Holdings Inc. Audited Financial Statements
(Dollars in Thousands 000)
December 31st

	2014	2015	2016	2017	2018
Total Liabilities	\$9,029,351	\$9,188,251	\$9,602,364	\$9,279,633	\$8,492,116
Total Revenues	\$10,373,232	\$11,691,408	\$12,806,949	\$13,919,204	\$13,587,028
Expenses	\$9,186,489	\$10,419,012	\$11,185,474	\$12,003,776	\$11,268,979
Income Before Tax	\$1,186,743	\$1,272,396	\$1,621,175	\$1,915,428	\$2,318,049
Income Tax	\$399,108	\$389,050	\$490,932	\$407,606	\$451,500
<i>Net Income</i>	\$787,635	\$883,346	\$1,130,243	\$1,507,822	\$1,866,549

Source: 2014/2015/2016/2017/2018 Audited Financial Statements

STATE BOARD STAFF FINDS THE PROPOSED PROJECT IN CONFORMANCE WITH CRITERIA AVAILABILITY OF FUNDS FINANCIAL VIABILITY (77 ILAC 1110.140(a) & (b))

X. ECONOMIC FEASIBILITY

A) Criterion 1120.140(a) – Reasonableness of Financing Arrangements

B) Criterion 1120.140(b) – Terms of Debt Financing

To demonstrate compliance with these criteria the Applicants must attest that a lease is less costly and that the terms of the lease are reasonable.

The applicant is paying for the project with cash on hand, and not borrowing any funds for the project. However, per the Board's rules the entering of a lease is treated as borrowing. As such, we are attesting that the entering into of a lease (borrowing) is less costly than the liquidation of existing investments which would be required for the applicant to buy the property and build a structure itself to house a dialysis clinic. Further, should the applicant be required to pay off the lease in full, its existing investments and capital retained could be converted to cash or used to retire the outstanding lease obligations within a sixty (60) day period. [Application for Permit pages 64-65]

Based upon the information provided in the Application for Permit; the Applicants have met the requirements of this criterion.

STATE BOARD STAFF FINDS THE PROPOSED PROJECT IN CONFORMANCE WITH CRITERIA REASONABLENESS OF FINANCING TERMS OF DEBT FINANCING (77 ILAC 1110.140(a) & (b))

C) Criterion 1120.140(c) – Reasonableness of Project Costs

To demonstrate compliance with this criterion the Applicant must document that the costs are reasonable.

Modernization and contingency costs - are \$394,942 or \$426.04 per GSF. This is **not** in compliance with the State Board Standard of \$206.74 (2020 mid-point). [$394,942 \div 927$ GSF for modernization = \$426.04 per GSF]

Contingencies Costs are \$35,226 or 9.7% of modernization costs. This appears reasonable when compared to the State Board Standard of 10%-15%.

Architectural and Engineering Costs are \$32,000 and are 8.1% of the modernization and contingency costs. This appears reasonable when compared to the State Board Standard of the 7.96% - 11.94%.

Movable Equipment - is \$18, 000 or \$6,000 per station. This is in compliance with the State Board Standard of \$52,293 per station. [\$18, 000 ÷ 3 stations = \$6,000 per station]

Fair Market Value of Leased Equipment is \$43,000. The State Board does not have a standard for this criterion.

D) Criterion 1120.140(d) - Direct Operating Costs

To demonstrate compliance with this criterion the Applicants must provide the direct operating cost for the first year when the Applicants reach target occupancy but no more than two years after project completion.

The Applicants are estimating \$233.14 per treatment in direct operating costs. The State Board does not have a standard for these costs.

Estimated Personnel Expense:	\$1,223,093
Estimated Medical Supplies:	\$218,618
Estimated Other Supplies (Exc. Dep/Amort):	\$1,136,610
Total	\$2,578,321
Estimated Annual Treatments:	11,059
Cost Per Treatment:	\$233.14

E) Criterion 1120.140(e) - Total Effect of the Project on Capital Costs

The Applicants are estimating \$14.16 in capital costs. The State Board does not have a standard for these costs.

Depreciation/Amortization:	\$156,648
Interest	\$0
Capital Costs:	\$156,648
Treatments:	11,059
Capital Cost per Treatment	\$14.16

19-034 Fresenius Medical Care Des Plaines - Des Plaines

