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100 LIGHT STREET • BALTIMORE, MARYLAND 21202 • 410.685.1120 • bakerdonelson.com

JOHN J. ELLER, SENIOR COUNSEL
Direct Dial: 410.862.1162
Direct Fax: 443.263.7562
E-Mail Address: jeller@bakerdonelson.com

March 13, 2017

VIA FIRST CLASS MAIL AND EMAIL

Kevin McDonald, Chief
Certificate of Need Division
Maryland Health Care Commission
4160 Paterson Avenue
Baltimore, Maryland 21215

**Re: Riva Road Surgical Center, LLC
Matter No. 17-02-2392
Responses to February 22, 2017 Completeness Questions**

Dear Mr. McDonald:

On behalf of Riva Road Surgical Center, LLC (“RRSC”), we are hereby submitting the required six (6) copies of our responses to the February 22, 2017 completeness questions regarding the above-referenced project. We will also provide Word and electronic copies of our responses and exhibits as appropriate.

I hereby certify that a copy of this response has also been forwarded to the appropriate local health planning agency, as noted below.

If any further information is needed, please let us know.

Sincerely,


John J. Eller

JJE/tjr

Enclosures

cc: Jinlene Chan, M.D., M.P.H.
Health Officer - Anne Arundel County
Ms. Ruby Potter
Health Facilities Coordination Office
Stephanie Leventis, VP of Development
SurgCenter Development
Andrew Solberg, CON Consultant
A.L.S. Healthcare Consultant Services

Riva Road Surgical Center, LLC
Matter No. 17-02-2392
Responses to Completeness Questions
Received on 2/22/17

PART1 – PROJECT IDENTIFICATION AND GENERAL INFORMAITON

- 1. Regarding Exhibit 4, please provide an explanation as to the ownership structure between the thirteen physicians and three LLCs, and explain how the 34.73% ownership interest by Surgical Center Development #3, LLC fits into the ownership structure. If the Surgical Center Development #3, LLC and individual physicians own 64.82% of ownership in RRSC, then who has the remaining 35.18% and how does this entity relate to the ownership structure? An organizational chart should be included with the response.**

At the outset, in reviewing the ownership structure of Riva Road, it is helpful to understand that Riva Road tracks ownership interests in Units, which are equivalent to stock. With that in mind, this narrative and the tables below will focus on both the Unit ownership and percentage of ownership of Riva Road.

In total, there are 99.500 Units that reflect the ownership of Riva Road. 64.500 of these Units are held by individual physicians who operate at the Center, and this equates to a 64.82% ownership percentage in Riva Road. These physicians hold their interests directly in Riva Road and indirectly through Surgical Center Development #3, LLC (“SCD”). Specifically, the physicians hold 45.876 Units in Riva Road and 18.624 Units in SCD. The corporate owners of SCD own 35 Units in Riva Road, which equates to a 35.18% ownership percentage in Riva Road.

So that you can envision this ownership structure we have set out three tables below. Table 1 sets forth the overall ownership structure of Riva Road and is in-line with what was submitted with the initial CON application. Table 2 is an ownership breakdown of SCD’s ownership in Riva Road. Table 3 sets forth the total ownership by the physicians through both Riva Road and SCD.

Lastly, in regard to the other three LLC’s besides SCD identified on Exhibit 4 of the initial CON application, those are LLC’s of individual physicians who hold their interest in Riva Road through those LLC’s. Specifically, (1) Gary Dix, MD holds his interest in Riva Road in Gary A. Dix, LLC; (2) Thomas Dennis, MD holds his interest in Riva Road in Annapolis Hand Center, LLC; and (3) Zvezdomir Zamfirova, MD holds his interest in Riva Road in Zvezdomir Zamfirov, MD, LLC.

Table 1: Overall Ownership of Riva Road

<u>Owner</u>	<u>Units</u>	<u>Ownership %</u>
Samuel Boles, MD	1.404	1.41%

Timothy G. Burke, MD	4.914	4.94%
Gary A. Dix, LLC	4.914	4.94%
Richard Genato, MD	0.351	0.35%
Brian Kahan, DO PA	4.914	4.94%
Edward McDevitt, MD	1.053	1.06%
Lyle Modlin, DPM	1.404	1.41%
Charles Ruland, MD	2.575	2.59%
Louis Ruland III, MD	0.933	0.94%
Vincent Sayan, MD	2.865	2.88%
Tushar Sharma, MD	2.000	2.01%
Garth Smith, MD	4.277	4.30%
Brian Sullivan, MD	4.914	4.94%
Annapolis Hand Center, LLC	5.146	5.17%
Zvezdomir Zamfirov, MD, LLC	4.212	4.23%
Surgical Center Development #3, LLC	53.624	53.89%
Totals	99.500	100.00%

Table 2: Ownership of Surgical Center Development #3, LLC

	<u>Units</u>	<u>Ownership % of SCD Interest</u>
Samuel Boles, MD	0.596	1.11%
Timothy G. Burke, MD	2.086	3.89%
Gary A. Dix, LLC	2.086	3.89%
Richard Genato, MD	0.149	0.28%
Brian Kahan, DO PA	2.086	3.89%
Edward McDevitt, MD	0.447	0.83%
Lyle Modlin, DPM	0.596	1.11%
Charles Ruland, MD	1.095	2.04%
Louis Ruland III, MD	0.397	0.74%
Vincent Sayan, MD	1.215	2.27%
Garth Smith, MD	1.813	3.38%
Brian Sullivan, MD	2.086	3.89%
Annapolis Hand Center, LLC	2.184	4.07%
Zvezdomir Zamfirov, MD, LLC	1.788	3.33%
Surgical Center Development #3, LLC	35.00	65.27%
Totals	53.624	100.00%

Table 3: Summary of Total Physician Ownership in Riva Road

<u>Owner</u>	<u>Riva Units</u>	<u>SCD Units</u>	<u>Total Units</u>	<u>Ownership %</u>
Samuel Boles, MD	1.404	0.596	2.000	2.01%
Timothy G. Burke, MD	4.914	2.086	7.000	7.04%
Gary A. Dix, LLC	4.914	2.086	7.000	7.04%
Richard Genato, MD	0.351	0.149	0.500	0.50%
Brian Kahan, DO PA	4.914	2.086	7.000	7.04%
Edward McDevitt, MD	1.053	0.447	1.500	1.51%
Lyle Modlin, DPM	1.404	0.596	2.000	2.01%

Charles Ruland, MD	2.575	1.095	3.670	3.69%
Louis Ruland III, MD	0.933	0.397	1.330	1.34%
Vincent Sayan, MD	2.865	1.215	4.080	4.10%
Tushar Sharma, MD	2.000		2.000	2.01%
Garth Smith, MD	4.277	1.813	6.090	6.12%
Brian Sullivan, MD	4.914	2.086	7.000	7.04%
Annapolis Hand Center, LLC	5.146	2.184	6.934	6.97%
Zvezdomir Zamfirov, MD, LLC	4.212	1.788	6.396	6.43%
Totals	45.876	18.624	64.500	64.82%

The attached Exhibit 14 includes the requested organization chart.

2. Please provide an outline of the project schedule based on the events discussed on p. 11.

Our estimated timeline for the project is as follows: The architects have started on the full set of construction drawings as of March 1st. This should take them approximately 6-7 weeks to complete. Once completed, they will be submitted to Anne Arundel County for permitting. Based on our prior history with ASC construction in Anne Arundel County, we expect 6-7 weeks for the permits to be released. Our goal is to have all permits and necessary county approvals prior to the CON. This way, once the CON is approved and received, we can begin the renovations. The expected renovation process is expected to take between 4-6 weeks, at which time the center will be closed for business. The facility Administrator will be supervising the process and ensuring the general contractor is completing work in a timely manner. Once the renovations are completed and we have passed all local and state inspections, we will re-open for business.

Project Budget

3. Based on your response regarding Required Approvals on p. 11, please discuss the applicant’s confidence in meeting the projected cost of \$741,499 if additional architectural work and a bid out to general contractors has not been completed. What is the level of confidence that the costs identified in your Project Budget will not increase?

The cost estimate was provided to RRSC by our General Contractor (CMSI). CMSI was able to come onsite and access the space and review the floor plan with proposed renovations. RRSC asked them to estimate the project based on their experience with the space (they did the initial build out in 2007 and expansion in 2011). We are confident with the scope of work needed that we will not exceed \$741,499.

PART IV – CONSISTENCY WITH GENERAL REVIEW CRITERIA AT COMAR 10.24.01.08G(3)

The State Health Plan

4. Please discuss which newspapers RRSC will post its Charity Care Policy in Anne Arundel County.

RRSC will publish the Charity Care notice in the Capital Gazette, the newspaper serving Anne Arundel County.

Need – Minimum Utilization for Expansion of an Existing Facility

5. Please reconcile the difference reported in 2015 in the number of OR minutes in Table 1 (3,217 hours or 193,020 minutes) on p. 25 versus the OR minutes in Table 2 (2,578 hours or 154,680 minutes) on p. 26. The difference in the number of hours reported is 639, which is significant and skews number of ORs needed. Please review the numbers reported on Tables 1 and 2 for accuracy and consistency.

RRSC erred in the original Table 2 by showing the actual 2014 OR minutes (154,680) in 2015, rather than the actual 2015 minutes (193,020). One can see from Table 1 that this is what happened, as the OR minutes shown in Table 1 for 2014 are 154,680. A corrected Table 2 follows:

**Table 2 (Corrected)
Population for Counties in RRSC's Service Area
Projected Cases at RRSC
2015-2020**

County	<u>2010</u>	<u>2015</u>	2016	2017	2018	2019	<u>2020</u>	CAGR 2015-2020
Anne Arundel County	537,656	559,600	563,622	567,672	571,752	575,861	580,000	0.007187
Prince George's County	863,420	900,350	903,162	905,984	908,814	911,652	914,500	0.003124
Calvert County	88,737	91,650	92,427	93,210	94,000	94,797	95,600	0.008475
Charles County	146,551	157,100	160,408	163,785	167,234	170,755	174,350	0.021055
Caroline County	33,066	33,900	34,319	34,744	35,174	35,609	36,050	0.012374
Kent County	20,197	20,600	20,758	20,916	21,076	21,238	21,400	0.007649
Queen Anne's County	47,798	50,150	50,822	51,503	52,192	52,892	53,600	0.013395
Talbot County	37,782	39,100	39,444	39,791	40,141	40,494	40,850	0.008795
Total	1,775,207	1,852,450	1,864,961	1,877,605	1,890,383	1,903,297	1,916,350	
Cases		2,145	2,184	2,199	2,214	2,229	2,244	
Use Rate			0.00117107					
Additional In-Network Cases				0	50	51	52	
Cases		2,145	2,184	2,199	2,264	2,280	2,296	
Minutes /Case		90	80	80	80	80	80	
OR Minutes		193,020	174,720	175,920	181,120	182,400	183,680	

Cleanup Minutes @ 25/Case	53,625	54,600	54,975	56,600	57,000	57,400	
Total Minutes	246,645	229,320	230,895	237,720	239,400	241,080	
Capacity/OR	97,920	97,920	97,920	97,920	97,920	97,920	
Needed ORs	2.52	2.34	2.36	2.43	2.44	2.46	

Table 2 now comports with Table 1 and Table F (Entire Facility-Stats). All other numbers are correct.

This error only affects the need for ORs in 2015 and does not affect the Need projections in 2020, as RRSC used the 2016 Use Rate and 2016 Minutes per Case (not 2015) for the projections in the future years.

- 6. On Table 2 of p. 26, please discuss the basis for the increase in Surgical Minutes/Case from 72 minutes in 2015 to 80 minutes by 2016, an increase of over 11%. What assumptions or facts do you have to support this increase in minutes per case?**

The correction that was made in response to Completeness Question 5 results in a reduction in OR Minutes/Case from 2015 (90 Minutes/Case) to the 2016 Minutes/Case (80). Both 2015 and 2016 reflect the actual OR minutes, and RRSC anticipates that the 2016 experience should be used in all future projections.

Design Requirements

- 7. Standard .05B(4) – Design Requirements. Please provide the status of when the applicant will receive the attestation letter from the architect.**

Please see Exhibit 15.

Availability of More Cost-Effective Alternatives

- 8. Based on your statements on p. 38, please discuss (a) which days of the week and how late the RRSC expanded hours of operation during the week days and (b) how often on weekends the facility scheduled surgical cases.**

(a) RRSC runs late most days of the week (after 5pm). This would be Monday thru Friday. The normal business hours are 7am to 5pm, but the center is now staffed daily (M-F) until 7 or 8pm.

(b) RRSC was open for one Saturday in December last year. The main problem with utilizing Saturdays is that, many times, patients are not willing to have elective surgery on the weekend and prefer to have a day during the week (thus the expanded hours).

Viability of the Proposal

9. Regarding Exhibit 11, please have the independent Certified Public Accountant verify that RRSC has sufficient cash and/or assets to fund approximately \$750,000 and more in cash for this project should the Total Project Cost exceed these financial estimates.

Please see Exhibit 16.

Impact on Existing Providers and the Health Care Delivery System

10. Please provide a summary description of the impact of the proposed project on the applicant's costs and charges, consistent with the information provided in the Project Budget, the projections of revenues and expenses, and the work force information.

This project is not going to change charges or reimbursement, neither of which includes a component for capital expenses. In fact, RRSC anticipates a slight reduction in Revenue/Case (-0.7%). As for costs, there will be a modest (1.8%) increase in costs/case in 2020 over 2017, mainly because of increased staff (1 Nurse and 1 Scrub Tech) to accommodate the new OR and increased volumes. The following data are taken from Table G in the CON Table Package that was in Exhibit 1 of the CON application. It shows the differences in revenue and cost/OR case between 2017 and 2020.

	2017	2,020	Difference
OR Cases	2,199	2,296	
Total Revenue	\$7,781,303	\$8,070,864	
Revenue/Case	\$3,539	\$3,515	-\$23
Total Expenses	\$4,752,649	\$5,051,415	
Expenses/Case	\$2,161	\$2,200	\$39
Total Salaries	\$1,783,745	\$1,955,068	
Salaries/Case	\$811	\$852	\$40
Contract Services	\$226,671	\$236,751	
Contract/Case	\$103	\$103	\$0
Total Depreciation	\$77,393	\$92,710	
Depreciation/Case	\$35	\$40	\$5
Supplies	\$2,015,778	\$2,105,421	
Supplies/Case	\$917	\$917	\$0
Other	\$647,324	\$659,727	
Other/Case	\$294	\$287	-\$7

Table G

11. Regarding Table G, under Patient Mix, Section a., please identify the source for “Other Revenue.”

2016 - “Other Revenue” is made up of the following payers: Worker’s Comp, UnitedHealthCare, Cigna, Aetna, Coventry, and Auto claims.

2015 - “Other Revenue” category is made up of the following payers: Worker’s Comp, UnitedHealthCare, Cigna, Aetna, Coventry, and Humana.

Further, we note that the “Commercial” category includes nearly 3 dozen insurers, most of which are smaller self-funded plans.

Table L

12. Does Riva Road provide benefits to its employees? If yes, please revise Tables G and L to include benefits in the salaries and wages.

Yes, RRSC included the benefits in the salary calculations in the original Table L. A corrected Table L which shows them separately is attached as Exhibit 17. Due to rounding differences, this requires a minor revision to Table G, changing the 2020 Salaries entry from \$1,955,068 to \$1,955,803. A revised Table G is also included in Exhibit 17.

Exhibits

14. Organization Chart
15. Architect Attestation of Consistency with FGI Guidelines
16. Certified Public Accountant Verification of Adequate Funds
17. Revised Tables G and L
18. Affirmations

Exhibit 14
Organization Chart

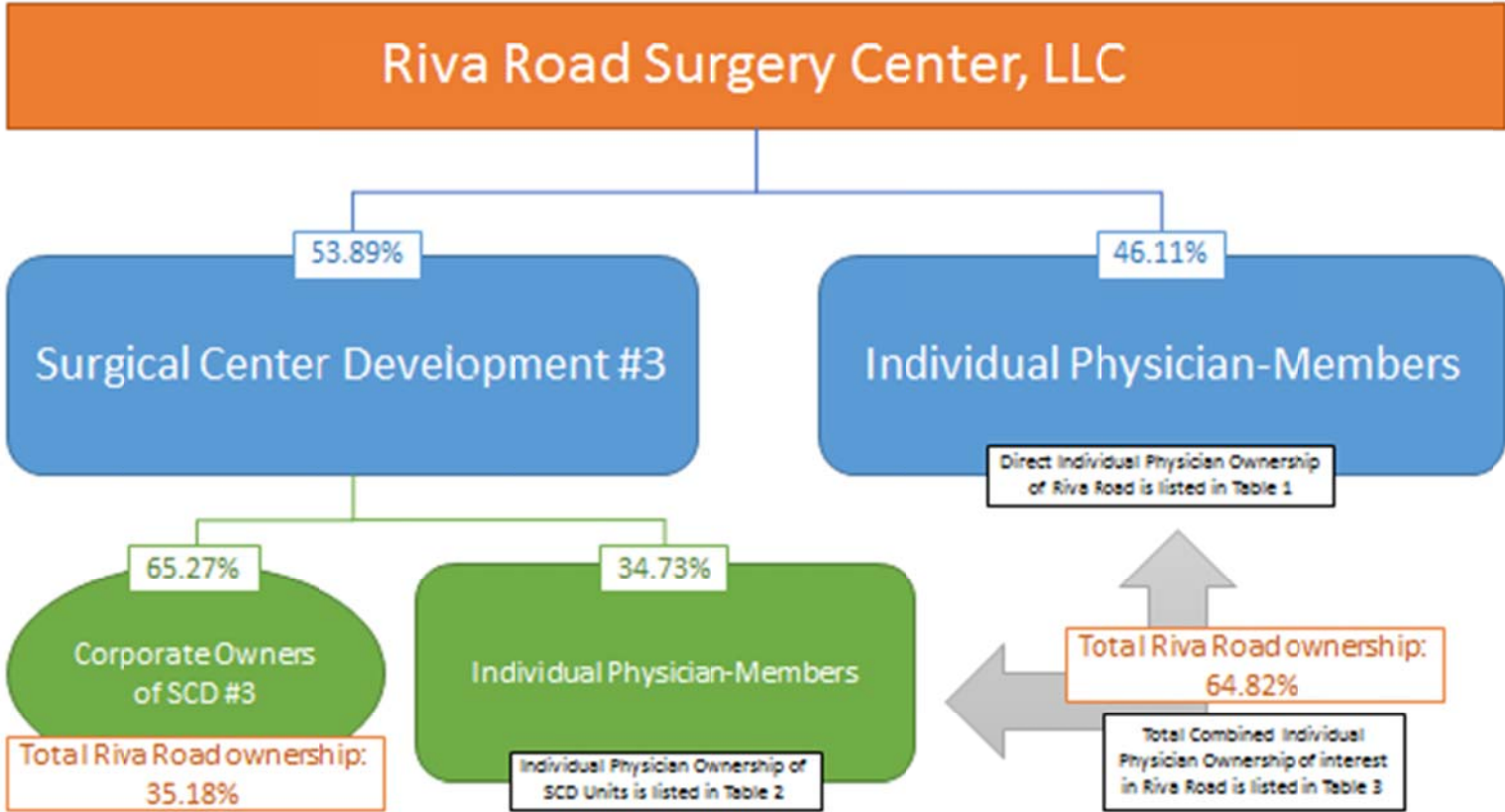


Exhibit 15
Architect Attestation of Consistency with FGI Guidelines

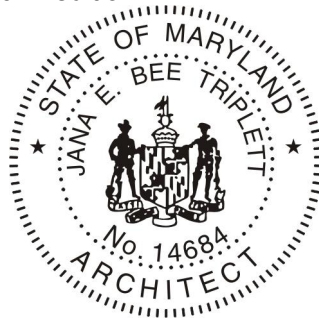
15 February 2017

Karen Albright
Nurse Administrator
Riva Road Surgical Center, LLC
2635 Riva Road, Suite 118
Annapolis, MD 21401

RE: Riva Road Surgical Center CON application

Dear Karen,

I hereby certify that I am a licensed architect in the State of Maryland. To the best of my knowledge, information and belief, Riva Road Surgical Center's proposed OR and corridor access are designed in accordance with the applicable laws, codes and ordinances, including COMAR Title 10 Department of Health and Mental Hygiene, Subtitle 05 Freestanding Ambulatory Care Facilities, Chapter 05 Freestanding Ambulatory Care Facilities, the NFPA 101 Life Safety Code as required by Medicare, and the requirements of the FGI Guidelines for Design and Construction of Hospitals and Outpatient Facilities, 2014 edition.



Sincerely,

A handwritten signature in blue ink that reads "Jana Bee Triplett". The signature is fluid and cursive.

Jana Bee Triplett, AIA
Managing Partner

Exhibit 16
Certified Public Accountant Verification of Adequate Funds



ANDREW M. HAYNIE, CPA
SUSAN P. KEEN, CPA
MICHAEL C. KLEGER, CPA
JEFFREY A. MICHALIK, CPA
DANIEL M. O'CONNELL II, CPA
JOHN M. STERN, JR., CPA

www.pkscpa.com

Salisbury
1801 SWEETBAY DRIVE
P.O. BOX 72
SALISBURY, MD 21803
TEL: 410.546.5600
FAX: 410.548.9576

Ocean City
12216 OCEAN GATEWAY
SUITE 800
OCEAN CITY, MD 21842
TEL: 410.213.7185
FAX: 410.213.7638

Lewes
1143 SAVANNAH ROAD
SUITE 1
LEWES, DE 19958
TEL: 302.645.5757
FAX: 302.645.1757

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PKF INTERNATIONAL

March 1, 2017

Ian I. Friedman
General Counsel
SurgCenter Development

Re: Riva Road Surgical Center, LLC

Dear Mr. Friedman,

Pursuant to a request from the Maryland Health Care Commission, we hereby update our original correspondence dated January 18, 2017.

Based on our review and analysis of the information and documents noted in the original correspondence, our conclusion is that the Riva Road Surgical Center, LLC has sufficient cash flow and assets to fund an additional operating room facility at the estimated cost of \$750,000 and reasonable overages.

Certified Public Accountants

Exhibit 17
Revised Tables G and L

TABLE G. REVENUES & EXPENSES, UNINFLATED - ENTIRE FACILITY

INSTRUCTION: Complete this table for the entire facility, including the proposed project. Table G should reflect current dollars (no inflation). Projected revenues and expenses should be consistent with the projections in Table F and with the costs of Manpower listed in Table L. Manpower. Indicate on the table if the reporting period is Calendar Year (CY) or Fiscal Year (FY). In an attachment to the application, provide an explanation or basis for the projections and specify all assumptions used. Applicants must explain why the assumptions are reasonable. Specify the sources of non-operating income. See additional instruction in the column to the right of the table.

	Two Most Recent Years (Actual)		Current Year Projected	Projected Years (ending at least two years after project completion and full occupancy) Add columns if needed in order to document that the hospital will generate excess revenues over total expenses consistent with the Financial Feasibility standard.		
	2015	2016	2017	2018	2019	2020
Indicate CY or FY						
1. REVENUE						
a. Inpatient Services	\$ -					
b. Outpatient Services	\$ 48,969,970	\$ 61,092,798	\$ 61,520,448	\$63,366,061	\$63,809,623	\$64,256,291
Gross Patient Service Revenues	\$ 48,969,970	\$ 61,092,798	\$ 61,520,448	\$63,366,061	\$63,809,623	\$64,256,291
c. Allowance For Bad Debt						
d. Contractual Allowance	\$ 41,336,351	\$ 53,298,447	\$ 53,718,084	\$55,384,680	\$55,772,487	\$56,162,991
e. Charity Care	\$ 43,786	\$69,822	\$ 23,763	\$ 25,116	\$ 25,178	\$ 25,257
Net Patient Services Revenue	\$ 7,589,833	\$ 7,724,529	\$ 7,778,601	\$ 7,956,265	\$ 8,011,959	\$ 8,068,042
f. Other Operating Revenues (Medical Record Fees)	\$ 1,556	\$ 2,683	\$ 2,702	\$ 2,783	\$ 2,803	\$ 2,822
NET OPERATING REVENUE	\$ 7,591,390	\$ 7,727,212	\$ 7,781,303	\$ 7,959,048	\$ 8,014,761	\$ 8,070,864
2. EXPENSES						
a. Salaries & Wages (including benefits)	\$ 1,660,298	\$ 1,731,826	\$ 1,783,745	\$ 1,955,068	\$ 1,955,068	\$ 1,955,803
b. Contractual Services	\$ 138,097	\$ 225,095	\$ 226,671	\$ 233,471	\$ 235,105	\$ 236,751
c. Interest on Current Debt	\$ -	\$ -	\$ -			
d. Interest on Project Debt	\$ -	\$ -	\$ -			
e. Current Depreciation	\$ 52,117	\$ 76,551	\$ 77,393	\$ 55,176	\$ 47,707	\$ 43,443
f. Project Depreciation		\$ -		\$ 49,267	\$ 49,267	\$ 49,267
g. Current Amortization	\$ 1,738	\$ 1,738	\$ 1,738	\$ 1,738	\$ 1,738	\$ 1,738
h. Project Amortization	\$ -	\$ -	\$ -			
i. Supplies	\$ 1,515,213	\$ 2,001,766	\$ 2,015,778	\$ 2,076,252	\$ 2,090,785	\$ 2,105,421
j. Other Expenses (Specify/add rows if needed)						
Lease and Equipment Costs	\$ 442,861	\$ 445,804	\$ 448,767.23	\$451,749.92	\$454,752.43	\$457,774.90
Other Operating Costs						
Advertising	\$ 3,092					
Bank Service Charges	\$ 515	\$ 395	\$ 455	\$ 455	\$ 455	\$ 455
Conference Seminar	\$ 2,039	\$ 1,767	\$ 1,903	\$ 1,903	\$ 1,903	\$ 1,903
Continuing Education	\$ 4,053	\$ 4,375	\$ 4,722.58	\$ 5,097.78	\$ 5,502.78	\$ 5,939.96

Credit Card Discount Fees	\$ 19,587	\$ 20,883	\$ 21,029	\$ 21,660	\$ 21,812	\$ 21,965
Gifts	\$ 1,389	\$ 2,133	\$ 1,761.05	\$ 1,946.95	\$ 1,854.00	\$ 1,900.48
Insurance	\$ 24,118	\$ 33,859	\$ 33,859	\$ 33,859	\$ 33,859	\$ 33,859
Licenses and Permits	\$ 3,180	\$ 2,946	\$ 3,062.82	\$ 3,062.82	\$ 3,062.82	\$ 3,062.82
Meals and Entertainment	\$ 18,937	\$ 9,662	\$ 14,299	\$ 14,299	\$ 14,299	\$ 14,299
Parking Fees	\$ 171					
Patient Transport & After Care	\$ 3,989	\$ 5,263	\$ 5,300	\$ 5,459	\$ 5,497	\$ 5,514
Postage & Delivery	\$ 5,807	\$ 5,481	\$ 5,644	\$ 5,644	\$ 5,644	\$ 5,644
Printing & Reproduction	\$ 16,953	\$ 19,845	\$ 19,984.29	\$ 20,584	\$ 20,728	\$ 20,873
Reference Materials	\$ 462	\$ 523	\$ 493	\$ 493	\$ 493	\$ 493
Travel Expense	\$ 1,010	\$ 950	\$ 980	\$ 980	\$ 980	\$ 980
Tax Expense	\$ 36,895	\$ 36,799	\$ 36,847	\$ 36,847	\$ 36,847	\$ 36,847
Utilities	\$ 48,714	\$ 47,721	\$ 48,218	\$ 48,218	\$ 48,218	\$ 48,218
TOTAL OPERATING EXPENSES	\$ 4,001,234	\$ 4,675,381	\$ 4,752,649	\$ 5,023,229	\$ 5,035,577	\$ 5,052,150
3. INCOME						
a. Income From Operation	\$ 3,590,156	\$ 3,051,831	\$ 3,028,653	\$ 2,935,818	\$ 2,979,184	\$ 3,018,714
b. Non-Operating Income	\$ (1,715)					
SUBTOTAL	\$ 3,588,441	\$ 3,051,831	\$ 3,028,653	\$ 2,935,818	\$ 2,979,184	\$ 3,018,714
c. Income Taxes						
NET INCOME (LOSS)	\$ 3,588,441	\$ 3,051,831	\$ 3,028,653	\$ 2,935,818	\$ 2,979,184	\$ 3,018,714
4. PATIENT MIX						
a. Percent of Total Revenue						
1) Medicare	23.0%	26.0%	26.0%	25.0%	25.0%	25.0%
2) Medicaid	0.0%	2.0%	3.0%	3.0%	3.0%	3.0%
3) Blue Cross	36.0%	42.0%	42.0%	42.0%	42.0%	42.0%
4) Commercial Insurance	9.0%	8.0%	10.0%	11.0%	11.0%	11.0%
5) Self-pay	0.0%	0.0%	0.0%			
6) Other	32.0%	22.0%	19.0%	19.0%	19.0%	19.0%
TOTAL	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
b. Percent of Equivalent Inpatient Days						
1) Medicare						
2) Medicaid						
3) Blue Cross						
4) Commercial Insurance						
5) Self-pay						
6) Other						
TOTAL	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

TABLE L. WORK FORCE INFORMATION

INSTRUCTION: List the facility's existing staffing and changes required by this project. Include all major job categories under each heading provided in the table. The number of Full Time Equivalents (FTEs) should be calculated on the basis of 2,080 paid hours per year equals one FTE. In an attachment to the application, explain any factor used in converting paid hours to worked hours. Please ensure that the projections in this table are consistent with expenses provided in uninflated projections in Tables G and J. See additional instruction in the column to the right of the table.

Job Category	CURRENT ENTIRE FACILITY-2017			PROJECTED CHANGES AS A RESULT OF THE PROPOSED PROJECT THROUGH THE LAST YEAR OF PROJECTION (CURRENT DOLLARS)-2020			OTHER EXPECTED CHANGES IN OPERATIONS THROUGH THE LAST YEAR OF PROJECTION (CURRENT DOLLARS)			PROJECTED ENTIRE FACILITY THROUGH THE LAST YEAR OF PROJECTION (CURRENT DOLLARS) *	
	Current Year FTEs	Average Salary per FTE	Current Year Total Cost	FTEs	Average Salary per FTE	Total Cost (should be consistent with projections in Table J)	FTEs	Average Salary per FTE	Total Cost	FTEs	Total Cost (should be consistent with projections in Table G)
1. Regular Employees											
Administration (List general categories, add rows if needed)											
Administrator	1.0	\$136,092	\$136,092			\$0			\$0	1.0	\$136,091.73
Business Office Manager	1.0	\$82,173	\$84,638			\$0			\$0	1.0	\$84,637.96
			\$0			\$0			\$0	0.0	\$0
			\$0			\$0			\$0	0.0	\$0
Total Administration	2.0	\$218,265	\$220,730			\$0			\$0	2.0	\$220,730
Direct Care Staff (List general categories, add rows if needed)											
Nurse	8.8	\$93,829	\$ 838,831	1.0	\$93,829	\$93,829			\$0	9.8	\$932,660
Scrub Tech	2.1	\$68,490	\$140,685	1.0	\$68,490	\$68,490			\$0	3.1	\$209,175
Central Sterile Processing Instrument Tech	1.2	\$49,254	\$60,715			\$0			\$0	1.2	\$60,715
			\$0			\$0			\$0	0.0	\$0
Total Direct Care	12.1	\$211,573	\$1,040,231			\$162,319			\$0	14.1	\$1,202,550
Support Staff (List general categories, add rows if needed)											
Front Desk Staff	3.1	\$46,290	\$144,475			\$0			\$0	3.1	\$144,475
Accounts Recievable Staff	1.2	\$53,704	\$63,180			\$0			\$0	1.2	\$63,180
Billers	1.8	\$53,730	\$94,335			\$0			\$0	1.8	\$94,335
			\$0			\$0			\$0	0.0	\$0
Total Support	6.1	\$153,725	\$301,991			\$0			\$0	6.1	\$301,991
REGULAR EMPLOYEES TOTAL	20.1	583,562.4	1,562,951.9			162,319.0			0.0	20.1	\$1,725,271
2. Contractual Employees											
Administration (List general categories, add rows if needed)											
			\$0			\$0			\$0	0.0	\$0
			\$0			\$0			\$0	0.0	\$0
			\$0			\$0			\$0	0.0	\$0
			\$0			\$0			\$0	0.0	\$0
Total Administration			\$0			\$0			\$0	0.0	\$0
Direct Care Staff (List general categories, add rows if needed)											
PRN Nurses	1.1	\$ 97,129.78	\$110,394			\$0			\$0	1.1	\$110,394
Scrub Tech	0.2	\$70,614	\$16,669			\$0			\$0	0.2	\$16,669
			\$0			\$0			\$0	0.0	\$0
			\$0			\$0			\$0	0.0	\$0
Total Direct Care Staff	1.4	\$167,744	\$127,063			\$0			\$0	1.4	\$127,063
Support Staff (List general categories, add rows if needed)											
			\$0			\$0			\$0	0.0	\$0
			\$0			\$0			\$0	0.0	\$0
			\$0			\$0			\$0	0.0	\$0
			\$0			\$0			\$0	0.0	\$0
Total Support Staff			\$0			\$0			\$0	0.0	\$0
CONTRACTUAL EMPLOYEES TOTAL	1.4	167,744.3	127,063.2			0.0			\$0	1.4	\$127,063
Benefits (State method of calculating benefits below):											
Benefits were calculated as 6% of salaries of Regular Employees. This percentage is what was seen with actual benefit costs in 2016			\$93,730			\$9,739					\$103,469
TOTAL COST	21.5		\$1,783,745	\$0		\$172,058	0.0		\$0		\$1,955,803

Exhibit 18
Affirmations

I hereby declare and affirm under the penalties of perjury that the facts stated in this Completeness and Additional Information response are true and correct to the best of my knowledge, information, and belief.

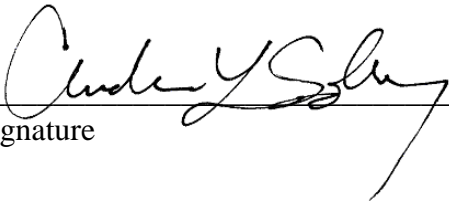
Handwritten signature of Stephanie Genest in black ink.

03/08/2017

Signature

Date

I hereby declare and affirm under the penalties of perjury that the facts stated in this Completeness and Additional Information response are true and correct to the best of my knowledge, information, and belief.




Signature

3/8/17

Date

I hereby declare and affirm under the penalties of perjury that the facts stated in this Completeness and Additional Information response are true and correct to the best of my knowledge, information, and belief.



Signature

3/9/17

Date