CERTIFICATE OF NEED Department Staff Project Summary, Analysis & Recommendations Closure of Virtua – West Jersey Hospital Berlin

Name of Facility:	Virtua – West Jersey Hos	pital Berlin	
CN# FR 140501-0	04-01		
Name of Applicant:	Virtua West Jersey Health	System	Total Project Cost:
Location:	Berlin	Equity Contr	ibution: 0
Service Area:	Camden County		

0

Project Description (by applicant):

Virtua West Jersey Health System, a comprehensive healthcare system headquartered in Marlton, New Jersey, is a nonprofit organization which has proposed to close Virtua – West Jersey Hospital Berlin (Virtua-Berlin), a licensed general acute care hospital. The overall acute care bed capacity at Virtua-Berlin consists of 95 acute care beds, of which 89 are medical/surgical beds and six adult ICU/CCU beds. The hospital's licensed service complement includes one Computerized Tomography (CT)-Fixed, three Inpatient Operating Rooms, one MRI-fixed, one MRI-mobile, and one Positron Emission Tomography – Mobile.

The applicant reports that as part of Virtua's on-going planning and analysis of its services and facilities across the health system, it has been systematically renovating, replacing and/or consolidating to create more efficient and effective programs and services across the region. A significant focus of Virtua's analysis, forecasting and facility development planning has been centered on the effective use of the four acute care hospitals (Virtua-Berlin, Virtua-Marlton, Virtua Memorial and Virtua-Voorhees) and has resulted in Virtua responding to the need of improving access to care, minimally, through the development of Health & Wellness Centers over the last decade as well as replacing Virtua-Voorhees with a new facility in 2012.

Presently, the applicant reports that Virtua-Berlin's volume has been steadily declining since 2009 and that regionally, inpatient volumes are projected to further decline due to a shift in inpatient care to the outpatient setting; hence, the applicant's proposal to close the hospital to inpatient acute care services so that it may better meet the evolving needs of the community by converting Virtua-Berlin to a campus comprised of community based and post-acute services.

After the proposed closure, the applicant plans to retain its 128-bed Long Term Care and Sub-Acute Rehab services, and repurpose the campus into an outpatient and emergency service facility, which would include a Satellite Emergency Department (SED) with a point of care laboratory, diagnostic x-ray, and CT services. The proposed imaging services will consist of 24/7 diagnostic imaging (e.g., full-service CT scan and diagnostic X-Ray) to support and meet the needs of all SED patients, and outpatient radiology services will consist of walk-in non-contrast enhanced diagnostic X-Ray and scheduled non-contract enhanced CT studies to support and meet the needs of the community. SED patients requiring hospital admissions would be transported via "Exceptional Medical Transportation Services" to Virtua-Voorhees, Virtua-Marlton, or other area hospitals as patient needs and care require. Twenty-four hour Basic Life Support (BLS) service will continue to be available to the Virtua-Berlin site and surrounding communities. Additionally, the applicant denotes that Virtua Health System is licensed for Advanced Life Support (ALS) services via the Mobile Intensive Care Unit (MICU) located at twelve sites in both Burlington and Camden Counties; therefore, should a patient who presents to the SED is determined to be in need of ALS, the patient would be transported via MICU to the nearest hospital with a full Emergency Department.

The applicant indicates that its action to close the hospital is a realistic assessment of the health care environment in the region. Continued duplication of inpatient services, which compete for the same market share of the population would be counterproductive and any further investment in the facility's inpatient component would not be cost effective. The existing level of care for the service area of Virtua-Berlin would continue to be maintained by the more than ample supply of acute care services available at neighboring hospitals throughout the region and the outpatient and satellite emergency services remaining at the Berlin campus.

Justification of Need by the Applicant:

The decision to close Virtua-Berlin is a result of its declining admissions and the rapid shifting of services from an inpatient to an outpatient setting. The applicant purports that it can better meet the evolving needs of the community by converting Virtua-Berlin to a campus comprised of community-based and post-acute services.

According to the application, utilization of the inpatient services at Virtua-Berlin has declined, particularly since the replacement Voorhees hospital opened. Virtua-Berlin has for some years admitted between 3,400 to 4,400 persons annually. Apart from a slight upward tick in admissions (4,434) during 2009, admissions have been on a downward trend over the past four years. As noted

in the application, admissions were 4,279 in 2011 and are projected to total 2,690 persons by end of the year for 2015. And, the average daily census (ADC) in 2013 was 48 patients (45 inpatient and 3 observation patients), and Year-to-date in 2014 the ADC is 45 patients (41 inpatients and 4 observation). However, over the last few months, the ADC has continued to decline, including several days with a census below 30.

A review of the market share trend results from 2010 to 2012 also yielded a gradual decline from 5.6% to 4.9%. Regionally, the applicant predicts that the inpatient volumes are projected to decline further due to a shift in inpatient care to the outpatient setting. This decline is reportedly attributed to a combination of minimal population growth, a focus on reducing readmissions and preventing avoidable admission, improving the health of the population, and factors like technological advances and epidemiology changes that will allow patients to be treated in an outpatient setting.

The applicant portends that the proposed Virtua-Berlin's closure of its inpatient services shall not affect access to health care services for the community, including the medically indigent and medically underserved population, as many patients in Berlin and surrounding communities are already routinely receiving care at Virtua's other hospitals. In fact, the applicant reports there are 731 acute care beds within a 12-minute travel time from Virtua-Berlin to Virtua-Voorhees, Kennedy Stratford, or Virtua-Marlton, and, further denotes that Virtua-Voorhees has seen a 37% increase in patient admissions from Virtua-Berlin's Primary Service Area (PSA) since 2010. Note: There are ample public transportation services to other area hospital locations (e.g., Virtua-Berlin, Marlton and Voorhees), which are accessible by NJ Transit bus services as well as a variety of taxi services available to the Berlin and surrounding communities.

Applicant's Statement of Compliance with Statutory and Regulatory Requirements:

The applicant has stated the following to demonstrate its compliance with the statutory criteria contained in the Health Care Facilities Planning Act, as amended, at <u>N.J.S.A.</u> 26:2H-1 et seq. and <u>N.J.A.C.</u> 8:33-1.1 et seq., as follows:

1) the availability of facilities or services which may serve as alternatives or substitutes:

According to the applicant:

In the transformation of Virtua-Berlin, only inpatient services would be discontinued, whereas emergency and outpatient services will remain vigorous. Access to inpatient acute care services currently served by

> Virtua-Berlin will be adequate after closure. The applicant's assumption is based on the location of six acute care hospitals that have comparable or expanded capabilities, which are located within 5.2 to 14.2 miles from the Virtua-Berlin campus, for which ample public transportation services are available via NJ Transit bus services as well as a variety of taxi services. The neighboring hospitals are Virtua-Voorhees, which is 5.2 miles from Virtua-Berlin; Kennedy Memorial Hospital-Stratford Division, which is 6.2 miles away; Virtua-Marlton, which is 7.4 miles away; Kennedy Memorial Hospital-Washington Township, which is 10.8 miles away; Kennedy Memorial Hospital-Cherry Hill Division, which is 14.4 miles away; and Our Lady of Lourdes Medical Center, which is 14.2 miles away. These hospitals operate with an average occupancy rate ranging from 46.80% to 78.78% of maintained beds, indicating available capacity to absorb additional acute care admissions.

2) the need for special equipment and services in the area:

According to the applicant:

Currently, Virtua-Berlin does not provide any special equipment or services that will be closed. It is important to recognize that inpatient services at Virtua-Berlin are limited to only 89 licensed medical/surgical beds and six ICU/CCU beds; therefore, the elimination of inpatient services will have minimal impact on the inventory of special services or equipment in the region.

Virtua's on-going priority and focus has been to continue to evolve from an acute-centric organization to one that is better prepared to respond to and manage the needs of a defined population across the entire continuum of care, community-based, acute and recovery and rehab. Due to the declining admissions to Virtua-Berlin and the rapid shifting of services from an inpatient to an outpatient setting, Virtua intends to continue with implementation of the SED at its current Berlin location with a point of care laboratory, diagnostic X-ray and CT services available onsite as well as retain its 128-bed Long Term Care and Sub-Acute Rehab services. Virtua is in the process of exploring other community-based and post-acute services for the campus to complement the full-continuum of services currently offered at other Virtua locations.

3) the adequacy of financial resources and sources of present and future revenues:

According to the applicant:

In view of the continuous trend of declining admissions at Virtua-Berlin, the closure would result in operational efficiencies and improved resource utilization to Virtua. Virtua's rationale to discontinue inpatient services at the Berlin site is a realistic assessment of the healthcare environment in the region. Continued duplication of inpatient services, which compete in the same market share of the population, would be counterproductive and any further investment in the facility's inpatient component would not be cost effective.

By closing Virtua-Berlin, Virtua Health System would reduce its overall operating losses, strengthen the remaining program and services offered at the other three hospital locations and eliminate the needless duplication of services.

4) the availability of sufficient manpower in the several professional disciplines:

According to the applicant:

There is sufficient manpower in the Virtua Health System to accomplish this closure. To ensure continued focus on patient care, employees will not be transferred to open positions within the system until the CN is effective-though these open positions will be held for them by filling the vacancy at the other Virtua locations with per diem, overtime and agency staff. This systematic approach allows for a greater degree of job security and ensures that appropriate staffing is maintained at Virtua-Berlin. After the closure of acute care at Virtua-Berlin, the remaining staff will then transfer to their new role at other Virtua locations without impacting employees' contract or benefit changes. And, for those personnel who choose to seek employment outside Virtua, the applicant assures that there will not be any adverse impact for any pension-eligible employees.

In the event that impacted employees are unsuccessful at securing a position prior to the closure, Virtua's Reduction in Force Policy will be initiated. Employment counseling will be offered in resume writing, interviewing skills and networking. Individual counseling will be made available as needed. In addition, Virtua has an employee assistance program that all impacted employees will be able to access as needed during the transition period.

5) will not have an adverse economic or financial impact on the delivery of health care services in the region or Statewide and will contribute to the orderly development of adequate and effective health care services:

According to the applicant:

According to the application, the total bed capacity at the hospitals within the region shows that there are 1,341 acute care beds in Camden County and 2,425 acute care beds in the primary and secondary service areas. A conservative occupancy estimate of 70% would result in a vacancy of 402 available beds in Camden County and 727 beds in the overall service area. Based on the fact that inpatient services at Virtua-Berlin are limited to only 89 licensed medical/surgical beds and six ICU/CCU beds, with a current monthly census of 30 patients and declining yearly averages at Virtua-Berlin, the redistribution impact of Virtua-Berlin's current patient volume will have minimal, if any, impact on the delivery of health care services in the service area. According to the applicant, this is based on the geographic distribution of acute care providers in close proximity to Virtua-Berlin and the volume of unused capacity at those locations.

Public Hearing:

One public hearing on this application was held at the Berlin Township Municipal Building located at 135 Route 73 South in West Berlin, on October 22, 2014. Approximately 44 people attended this hearing. Five members of the public spoke during the hearing. Of the five-people who presented testimonies during the hearing, four were in support and one was opposed the closure of Virtua-Berlin. The hearing lasted 21 minutes. Two of those who spoke in support of the closure were from Virtua, and spoke of the reasons for the closure. They cited the increased focus on prevention and wellness; Virtua's efforts in opening three major health and lung centers, three urgent care centers, and providing other alternatives to acute care services based on the community's healthcare needs: the fact that fewer people are requiring hospitalization as more healthcare services are provided in non-hospital settings; the fact that, throughout the State, acute care admissions have declined more than 10% in the past 5 years; and the fact that more and more patients who had been served by Virtua-Berlin are choosing to go to the other Virtua hospitals. They also emphasized that Virtua intends to maintain a robust SED at the Virtua-Berlin campus, supported by longterm care and rehabilitation services, as well as diagnostic outpatient services. A resident who spoke in favor of the application to close Virtua-Berlin noted that providers like Virtua are focusing more and more on increasing and expanding alternatives to acute care hospitalization in an effort to keep people healthy, and that Virtua has been a leader in this healthcare evolution by growing its network

of primary and specialty physicians and opening urgent care centers and health and wellness facilities. He stated that he appreciated Virtua's commitment to keep the Virtua-Berlin location in operation with vital health services for the community, and observed that he would not hesitate to use Virtua's Voorhees or Marlton hospitals should he or his family require inpatient services. The Captain of Berlin Emergency Medical Services also spoke in support of the application, and stating that his staff had looked at the plans for Virtua-Berlin, and did not feel that the closure of in-patient services there would have a negative impact on the company or its patients. The fifth, and final, speaker spoke in opposition to the closure, noting that Berlin Borough has increased its population in the past decade, and with the lifting of the sewer moratorium recently in nearby Winslow Township, it was likely that the population of that community would be increasing as well. He expressed concern that there is no hospital between Virtua-Voorhees and Atlantic City, and said that he would rather see an expansion of the Virtua Southern Division, rather than its closure.

Letters were received from Senator Jim Beach; Arthur C. Campbell, President/ CEO of Camden County Regional Chamber of Commerce; and Robert Carullo, Executive Director of Strengthening the Mid-Atlantic Region for Tomorrow (SMART), all encouraging Department of Health (Department) approval of Virtua's Certificate of Need application. Subsequent to these letters, an e-mail was also received by the Department from one person questioning the CN process and expressing concern that the hospital was taking steps to close prior to the Department's formal approval of the application.

Department Staff Analysis:

Department staff concluded that the applicant has adequately documented compliance with the applicable certificate of need rules (<u>N.J.A.C.</u> 8:33-1.1 et. seq.) and general statutory standards at <u>N.J.S.A.</u> 26:2H-1 et seq.

Department staff reviewed and concluded that the applicant's rationale to discontinue inpatient services at Virtua-Berlin is a realistic assessment of the health care environment in Camden County. Based on the most recent inpatient utilization data (B-2) provided by the Department's Health Care Financing Systems Division, staff found the beds targeted for removal from service as a result of the closure of Virtua-Berlin would not have a significant impact on the delivery of health care for the region's patient population. Staff findings are derived from the fact that the inpatient services at Virtua-Berlin are limited to only two operating bed categories: medical/surgical and ICU/CCU beds. The B-2 data shows that of the 89 licensed medical/surgical beds at Virtua-Berlin, only 77 are being maintained since 2012. In 2012, these 77 maintained medical/surgical beds had an annual occupancy rate of 58.48 percent with an ADC of 45.80. If the 89 licensed medical/surgical beds were considered for 2012, the annual

occupancy rate would be 51.46 percent. The annual B-2 data for 2012 when compared with the annualized 2014 data shows a significant drop in both the annual occupancy rate and ADC for its 77 maintained medical/surgical beds, to 48.43 percent and 37.29 respectively. Using the same annual B-2 data for the 89 licensed medical/surgical beds in 2014, the annualized occupancy rate declines to 41.90 percent and the ADC falls to 37.29. Please refer to Appendices two and three.

With respect to the annual occupancy rate for the ICU/CCU beds at Virtua-Berlin, the number of licensed beds is the same as the number of maintained beds: six. The B-2 data for 2009 showed the annual occupancy rate for these six beds was at 87.35 percent with an ADC of 5.24. The annualized B-2 data for 2014, when compared with 2009 data, showed a decline in both the occupancy rate as well as ADC for these six beds whereby the occupancy rate moved downward to 55.80 percent with an ADC of 3.35. Please refer to Appendices two and three.

A review of the annual occupancy rate and ADC for combined service categories (medical/surgical and ICU/CCU) for Virtua-Berlin shows that the annualized 2014 figures for its 83 maintained beds have also declined in comparison to 2012. In 2012, the combined maintained bed occupancy rate was at 60.22 percent, with an ADC of 49.99 and for 2014, the annualized occupancy rate was 48.96 percent with ADC of 40.64. The annualized 2014 figures for its combined 95 licensed beds have also declined in comparison to 2012. In 2012, the combined licensed bed annual occupancy rate was at 52.62 percent, with an ADC of 49.99 and for 2014, the annualized occupancy rate was 42.77 percent with ADC of 40.64. In addition, admissions by bed category and combined have continued to steadily fall from 4434 in 2009 to 3098 in the 2014 annualized data. Over the last five years, occupancy and admissions rates for these beds have eroded. All of the other hospitals in the region have a substantially higher number of admissions for these combined bed categories. Please refer to Appendices two, three and four.

Staff does not anticipate the inpatient volume generated from the closure of the Virtua-Berlin will exceed the number of available licensed or maintained medical/surgical and ICU/CCU beds in either Camden County or the region. Virtua-Voorhees, the closest hospital to Virtua-Berlin at 5.1 miles away or 10 minutes has 222 licensed medical/surgical and 24 ICU/CCU beds and could absorb the current patient population at Virtua-Berlin. In fact, when you examine the B-2 annualized 2014 data for Virtua-Voorhees, it discloses the annual occupancy rate for its 222 licensed medical/surgical beds was at 67.60 percent with an ADC of 150.08 and for its 24 licensed ICU/CCU beds, the annual occupancy rate was at 69.50 percent with an ADC of 16.33. The data for its maintained medical/surgical and ICU/CCU beds are somewhat different. In the annualized 2014 data, Virtua-Voorhees maintained 222 medical/surgical beds with annual occupancy rate of 67.60 percent and an ADC of 150.08, and

maintained 26 ICU/CCU beds with an annual occupancy rate of 62.81 percent and an ADC of 16.33. Please refer to Appendices two and three.

There are five other hospitals within the region that may also serve as possible alternatives within a 17-mile radius of Virtua-Berlin. Kennedy Memorial Hospital-Stratford Division and Virtua-Marlton are within a 7-mile radius of Virtua-Berlin. The B-2 annualized data for 2014 shows there is more than an ample supply of maintained medical/surgical and ICU/CCU beds available at these hospitals to treat the patients currently receiving services at Virtua-Berlin. The data indicates that between these two hospitals, there are 302 maintained medical/surgical and 37 ICU/CCU beds; neither of these hospitals exceeds an annual occupancy rate of 62 percent or an ADC of 107 for their individual medical/surgical beds. Kennedy Memorial Hospital – Washington Township, Kennedy Memorial Hospital - Cherry Hill Division and Our Lady of Lourdes Medical Center are located within an 11- to 17-mile radius of Virtua-Berlin. These three hospitals all operate the same licensed bed services that are offered at Virtua-Berlin; each has more than an ample supply of beds to accommodate the patients from Virtua-Berlin. Staff believes bed capacity in Camden County and the region is more than adequate to bridge any gaps in services possibly resulting from this closure. The overall occupancy levels and ADC at the hospitals near Virtua-Berlin further strengthen the applicant's position that Virtua-Berlin's discontinuance of inpatient services would not have an adverse impact on health care services in the region. Please refer to Appendices 1, 2 and 3.

From its assessment of the regional hospitals noted above, staff has concluded that the annual occupancy rate at Virtua-Voorhees would be relatively high if it absorbed all the patients at Virtua-Berlin on its own. The Department's experience with these types of closures has shown it is unlikely that all the patients currently treated at Virtua-Berlin would select to receive their future care only at Virtua-Voorhees. A more reasonable assumption would be the redistribution of these patients throughout the region, with Virtua-Marlton as well as the other nearest hospitals treating a substantial number of these patients.

Staff believes that the applicant's decision to close Virtua-Berlin is sound and would improve the viability of the remaining area hospitals so that they can continue to provide ongoing care in each of their respective service areas and enhance resource utilization within the Virtua Health System. The evidence demonstrates a declining patient population at Virtua-Berlin. Staff is satisfied that the objectives of this closure would be accomplished since current levels of accessibility and availability will remain relatively undisturbed in the affected areas. Staff is confident Virtua-Voorhees, Virtua-Marlton and the existing regional hospitals have sufficient bed capacity to absorb the small number of patients presently being cared for at Virtua-Berlin. Department staff believes the implementation of a SED and the continuation of diagnostic imaging services at the hospital site are vital components in assuring the availability and accessibility of emergency services for the population historically served by Virtua-

Berlin. Staff is convinced that the health status of the patients in Camden County or the region would not be compromised as a result of the closure of Virtua-Berlin.

Staff Recommendations:

Based on this documentation of compliance with regulatory and statutory criteria, Department staff recommends approving the closure of Virtua – West Jersey Hospital Berlin for the following reasons and with the conditions noted below:

Reasons:

- 1. Since 2009, the overall annual occupancy rate and ADC at Virtua-Berlin has been steadily declining for both its medical/surgical and ICU/CCU beds. As a result of this closure, Virtua Health System would be strengthened if Virtua-Berlin closes because this would eliminate duplication of inpatient services that compete for the same market share of the population, and any further investment in Virtua-Berlin inpatient component would be counterproductive and not cost effective. It is doubtful that the hospital would be able to recapture the lost market share and rebuild its service levels as the applicant's efforts thus far have not been able to stimulate an increase in patient volume. In addition, such a small inpatient volume could have an adverse impact on quality.
- 2. Future growth in the hospital's established markets seems unlikely, as little population growth is anticipated in its service area. This, together with an established downward patient volume trend and duplication of inpatient services, which compete for the same market share, further supports the termination of inpatient services at Virtua-Berlin.
- 3. No data exists to suggest that the closure of Virtua-Berlin would either compromise or adversely impact the health status of the hospital's primary service area, county or region.
- 4. This hospital closure would be accomplished without any disruption in the scope or level of services being eliminated at Virtua-Berlin since there are a sufficient number of hospitals in the region offering the same or similar services. Continuity and access for the population historically served by Virtua-Berlin should remain unimpaired given the ample number of available medical/surgical and ICU/CCU beds in both the county and region.
- 5. The applicant is proposing not only to establish a SED to provide emergency care, but also plans to establish an outpatient clinic providing

a point of care laboratory, diagnostic x-ray and CT services at Berlin's closed hospital site. Twenty-four hour BLS service will continue to be available to the Virtua-Berlin site and surrounding communities, and SED patients requiring hospital admission will be transported via "Exceptional Medical Transportation Services" to other area hospitals as patient needs and care require. Virtua Health System's MICU services will be utilized for transporting any patients whose condition is assessed as requiring ALS while in the process of receiving care at the SED. This combination of inpatient and outpatient services within the county and region appear to be more than adequate to bridge any health care service gaps that may arise as a result of this closure.

- 6. The established regional health care network would serve as the foundation for an orderly transition for Virtua-Berlin from providing inpatient care to emergency and outpatient services as well as the anchor for continuing to provide effective preventive and outpatient health care services for all patients throughout the region.
- 7. The Board of Trustees of Virtua-Berlin exercised its fiduciary duty in researching, reviewing and discussing proposals to address the closure of Virtua-Berlin. Department Staff note the recommendation of the Board is that the proposed closure best meets the needs of the community.

Conditions:

- 1. The applicant shall submit a detailed communication plan to the Department for review and approval. The purpose of the communication plan is to indicate how Virtua would inform all residents in Virtua-Berlin's primary service area and surrounding communities, as well as local governments, emergency service providers and alternative area service providers regarding the approval of this closure and the availability of the SED and outpatient health services as of the closure date of Virtua-Berlin. The plan shall include a mechanism for responding to questions from the public regarding implementation of the closure and transportation/access concerns. Written communication shall be developed and published in at least two newspapers of general circulation in Virtua-Berlin's service area prior to the closure, and within 15 days of CN approval and 30 days prior to the actual closure of inpatient services.
- 2. An outreach effort shall be placed into effect to ensure that all residents of the former hospital's primary service area, especially the medically indigent, have access to the available services in the area. A selfevaluation of this effort shall be conducted on a yearly basis for five years after certificate of need approval to measure its effectiveness and

submitted to the Department annually on the anniversary of the certificate of need approval for review and comment.

- 3. Virtua Health System shall establish and maintain a SED at the former Virtua-Berlin site.
 - a. The SED shall be operated and licensed in accordance with the Department's regulations for such services at <u>N.J.A.C.</u> 8:43G-36.
 - b. The SED shall remain in operation for a minimum of three years and Virtua-Berlin must provide 120 days' notice and receive written approval from the Department prior to ceasing or reducing services or hours of operation.
- 4. Virtua Health System shall periodically reassess its bed inventory by category to ensure that an adequate number of beds for each would be available. In the first year after approval, this reassessment shall be done on a quarterly basis and the results reported to the Department within ten business days of completion. This report shall include admissions, patient days, and percent of occupancy, ADC and average length of stay. In the second year after approval, this reassessment shall be completed on a biannual basis and the results reported to the Department within ten business days of completion. If any reassessment indicates the need for additional beds, Virtua Health System shall file the appropriate application for either its Voorhees and/or Marlton hospitals to increase beds.
- The applicant shall notify the Department's CNHCFL in writing, specifying who is responsible for the safekeeping and accessibility of all Virtua-Berlin's patients' medical records (both active and stored) in accordance with <u>N.J.S.A.</u> 8:26-8.5 et seq. and <u>N.J.A.C</u>. 8:43G-15.2.
- In accordance with <u>N.J.S.A.</u> 26:2H-18.64 and <u>N.J.A.C.</u> 8:43G-5.2(c), Virtua Health System shall not only comply with federal EMTALA requirements, but also provide care for all patients who present themselves at any Virtua Health System's hospitals or hospital based offsite ambulatory care facilities without regard to their ability to pay or payment source.
- 7. All reports required in these conditions shall be reported annually and/or as required by a specific condition to the Department's Office of Certificate of Need and Healthcare Facility Licensure.
- 8. The applicant shall report to the Department's CNHFL concerning the status of all of the conditions referenced within the time frames noted in the conditions.

Appendix 1 Distance from Virtua - West Jersey Hospital Berlin - 1040 White Horse Pike & Townsend Ave Berlin, NJ 08009 To Area Hospitals

Provider/Location	Distance from Virtua - West Jersey Hospital Berlin (miles)	Travel times from Virtua - West Jersey Hospital Berlin
Virtua - West Jersey Hospital Voorhees – 10405 100 Bowman Dr. Voorhees, NJ 08043	5.1 mi	10 min
Kennedy Mem. Hospitals-Univ. M.CStratford Div 10403 18 Laurel Rd E Stratford, NJ 08084	6.14 mi	11 min
Virtua - West Jersey Hospital Marlton – 10302 90 Brick Rd Marlton, NJ 08053	7.28 mi	12 min
Kennedy Mem. Hospitals-Univ. M.CWashington Twp. – 10802 438 Hurffville Crosskeys Rd Turnersville, NJ 08012	11.28 mi	20 min
Our Lady of Lourdes Medical Center – 10404 1600 Haddon Ave Camden, NJ 08103	16.51 mi	27 min
Kennedy Mem. Hospitals-Univ. M.CCherry Hill Div. – 10401 221 Chapel Ave W Cherry Hill, NJ 08002	14.2 mi	28 min

Source: Map Quest

Appendix 2
Licensed Beds

2009				
		Med/Surg	ICU/CCU	Combined
Virtua - West	Beds	89	6	95
Jersey Hospital	OccRt	57.87%	87.35%	59.73%
Berlin - 10407	ADC	51.51	5.24	56.75
Virtua - West	Beds	145	17	162
Jersey Hospital	OccRt	85.00%	100.05%	86.58%
Voorhees – 10405	ADC	123.25	17.01	140.26
Kennedy Mem.	Beds	164	19	183
Hospitals-Univ.	OccRt	46.73%	50.22%	47.09%
M.CStratford Div 10403	ADC	76.64	9.54	86.18
Virtua - West	Beds	180	18	198
Jersey Hospital	OccRt	72.97%	65.57%	72.30%
Marlton – 10302	ADC	131.35	11.80	143.16
Kennedy Mem.	Beds	166	23	189
Hospitals-Univ.	OccRt	62.98%	66.11%	63.36%
M.CWashington Twp. – 10802	ADC	104.55	15.21	119.75
Our Lady of	Beds	277	42	319
Lourdes Medical	OccRt	65.36%	59.10%	64.54%
Center – 10404	ADC	181.05	24.82	205.87
Kennedy Mem. Hospitals-Univ.	Beds	131	14	145
	OccRt	48.67%	69.98%	50.72%
M.CCherry Hill Div. – 10401	ADC	63.75	9.80	73.55

		2010		
		Med/Surg	ICU/CCU	Combined
Virtua - West	Beds	89	6	95
Jersey Hospital	OccRt	62.07%	84.84%	63.50%
Berlin - 10407	ADC	55.24	5.09	60.33
Virtua - West	Beds	145	17	162
Jersey Hospital	OccRt	86.25%	102.01%	87.91%
Voorhees – 10405	ADC	125.07	17.34	142.41
Kennedy Mem.	Beds	164	19	183
Hospitals-Univ.	OccRt	44.93%	52.57%	45.73%
M.CStratford Div 10403	ADC	73.69	9.99	83.68
Virtua - West	Beds	180	18	198
Jersey Hospital	OccRt	74.36%	72.40%	74.19%
Marlton – 10302	ADC	133.85	13.03	146.89
Kennedy Mem.	Beds	150	23	173
Hospitals-Univ.	OccRt	79.42%	78.25%	79.26%
M.CWashington Twp. – 10802	ADC	119.12	18.00	137.12
Our Lady of	Beds	277	42	319
Lourdes Medical Center – 10404	OccRt	55.35%	53.07%	55.05%
	ADC	153.31	22.29	175.60
Kennedy Mem. Hospitals-Univ.	Beds	131	14	145
	OccRt	51.52%	67.36%	53.05%
M.CCherry Hill Div. – 10401	ADC	67.49	9.43	76.92

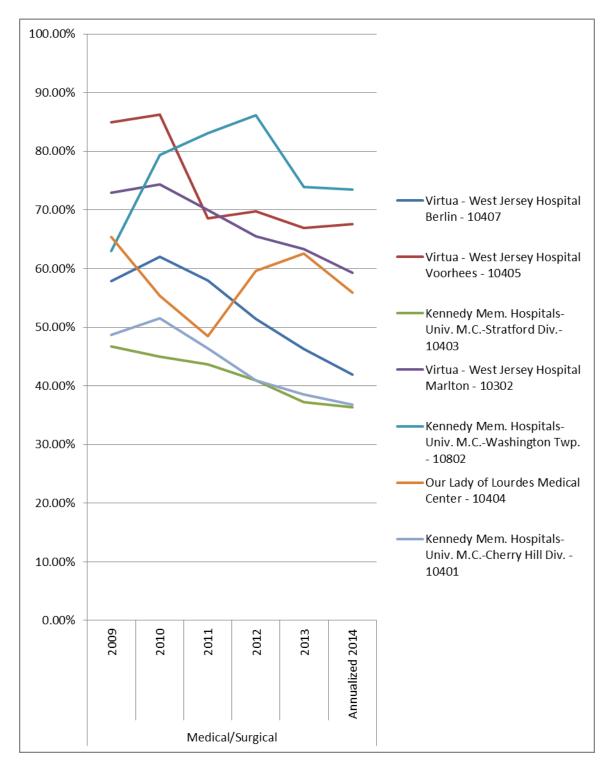
		2011		
		Med/Surg	ICU/CCU	Combined
Virtua - West	Beds	89	6	95
Jersey Hospital	OccRt	57.95%	81.37%	59.43%
Berlin - 10407	ADC	51.58	4.88	56.46
Virtua - West	Beds	180	20	200
Jersey Hospital	OccRt	68.60%	80.96%	69.84%
Voorhees – 10405	ADC	123.48	16.19	139.67
Kennedy Mem.	Beds	162	19	181
Hospitals-Univ.	OccRt	43.65%	48.91%	44.20%
M.CStratford Div 10403	ADC	70.71	9.29	80.00
Virtua - West	Beds	180	18	198
Jersey Hospital	OccRt	70.01%	95.74%	72.35%
Marlton – 10302	ADC	126.02	17.23	143.25
Kennedy Mem.	Beds	150	23	173
Hospitals-Univ.	OccRt	83.05%	80.89%	82.76%
M.CWashington Twp. – 10802	ADC	124.57	18.61	143.18
Our Lady of	Beds	277	42	319
Lourdes Medical Center – 10404	OccRt	48.45%	51.50%	48.85%
	ADC	134.21	21.63	155.84
Kennedy Mem. Hospitals-Univ.	Beds	131	14	145
	OccRt	46.43%	71.04%	48.81%
M.CCherry Hill Div. – 10401	ADC	60.83	9.95	70.77

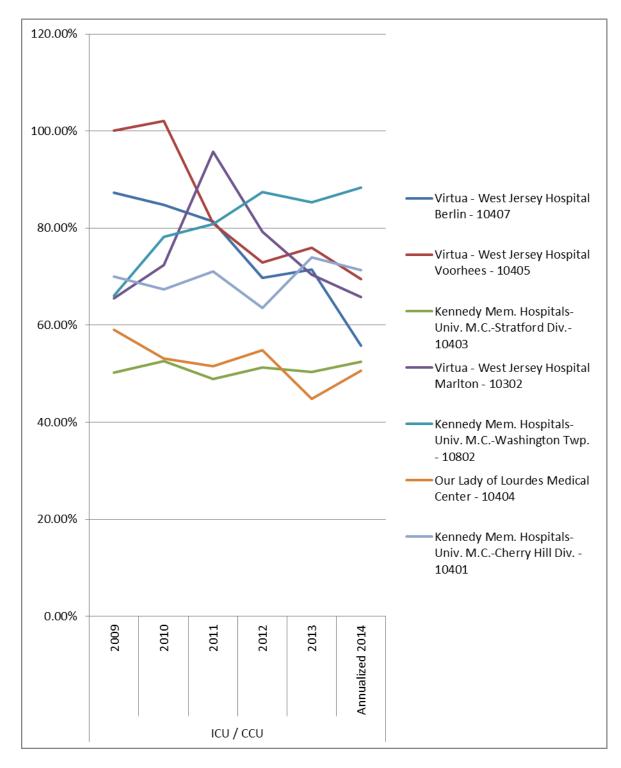
		2012		
		Med/Surg	ICU/CCU	Combined
Virtua - West	Beds	89	6	95
Jersey Hospital	OccRt	51.46%	69.76%	52.62%
, Berlin - 10407	ADC	45.80	4.19	49.99
Virtua - West	Beds	200	21	221
Jersey Hospital	OccRt	69.75%	72.94%	70.06%
Voorhees – 10405	ADC	139.51	15.32	154.83
Kennedy Mem.	Beds	162	19	181
Hospitals-Univ.	OccRt	40.91%	51.28%	42.00%
M.CStratford Div 10403	ADC	66.28	9.74	76.02
Virtua - West	Beds	180	18	198
Jersey Hospital	OccRt	65.50%	79.27%	66.75%
Marlton – 10302	ADC	117.90	14.27	132.17
Kennedy Mem.	Beds	151	23	174
Hospitals-Univ.	OccRt	86.16%	87.42%	86.33%
M.CWashington Twp. – 10802	ADC	130.11	20.11	150.21
Our Lady of	Beds	229	42	271
Lourdes Medical	OccRt	59.64%	54.83%	58.89%
Center – 10404	ADC	135.57	23.03	158.60
Kennedy Mem. Hospitals-Univ.	Beds	131	14	145
	OccRt	40.94%	63.51%	43.12%
M.CCherry Hill Div. – 10401	ADC	53.63	8.89	62.52

		2013		
		Med/Surg	ICU/CCU	Combined
Virtua - West	Beds	89	6	95
Jersey Hospital	OccRt	46.34%	71.51%	47.93%
, Berlin - 10407	ADC	41.24	4.29	45.53
Virtua - West	Beds	222	21	243
Jersey Hospital	OccRt	66.97%	75.90%	67.74%
Voorhees – 10405	ADC	148.67	15.94	164.61
Kennedy Mem.	Beds	162	19	181
Hospitals-Univ.	OccRt	37.19%	50.35%	38.58%
M.CStratford Div 10403	ADC	60.25	9.57	69.82
Virtua - West	Beds	180	18	198
Jersey Hospital	OccRt	63.35%	70.38%	63.99%
Marlton – 10302	ADC	114.02	12.67	126.69
Kennedy Mem.	Beds	169	23	192
Hospitals-Univ.	OccRt	73.97%	85.32%	75.33%
M.CWashington Twp. – 10802	ADC	125.01	19.63	144.63
Our Lady of	Beds	213	42	255
Lourdes Medical	OccRt	62.61%	44.87%	59.69%
Center – 10404	ADC	133.37	18.85	152.22
Kennedy Mem. Hospitals-Univ.	Beds	131	14	145
	OccRt	38.56%	74.01%	41.98%
M.CCherry Hill Div. – 10401	ADC	50.51	10.36	60.87

Annualized – last 2 Qs 2013, 1 st 2 Qs 2014				
		Med/Surg		Combined
Virtua - West	Beds	89	6	95
Jersey Hospital	OccRt	41.90%	55.80%	42.77%
Berlin - 10407	ADC	37.29	3.35	40.64
Virtua - West	Beds	222	24	246
Jersey Hospital	OccRt	67.60%	69.50%	67.78%
Voorhees – 10405	ADC	150.08	16.33	166.41
Kennedy Mem.	Beds	162	19	181
Hospitals-Univ.	OccRt	36.32%	52.42%	38.01%
M.CStratford Div 10403	ADC	58.84	9.96	68.80
Virtua - West	Beds	180	18	198
Jersey Hospital	OccRt	59.28%	65.86%	59.88%
Marlton – 10302	ADC	106.71	11.86	118.57
Kennedy Mem.	Beds	174	23	197
Hospitals-Univ.	OccRt	73.44%	88.41%	75.19%
M.CWashington Twp. – 10802	ADC	127.78	20.33	148.12
Our Lady of	Beds	213	42	255
Lourdes Medical	OccRt	55.85%	50.62%	54.99%
Center – 10404	ADC	118.97	21.26	140.23
Kennedy Mem. Hospitals-Univ.	Beds	131	14	145
	OccRt	36.81%	71.29%	40.14%
M.CCherry Hill Div. – 10401	ADC	48.23	9.98	58.21

Source: Department's Health Care Financing Systems Summary of Inpatient Utilization (B-2)





2009				
		Med/Surg	ICU/CCU	Combined
Virtua - West	Beds	89	6	95
Jersey Hospital	OccRt	57.87%	87.35%	59.73%
Berlin - 10407	ADC	51.51	5.24	56.75
Virtua - West	Beds	145	17	162
Jersey Hospital	OccRt	85.00%	100.05%	86.58%
Voorhees – 10405	ADC	123.25	17.01	140.26
Kennedy Mem.	Beds	107	19	126
Hospitals-Univ.	OccRt	71.62%	50.22%	68.40%
M.CStratford Div 10403	ADC	76.64	9.54	86.18
Virtua - West	Beds	180	18	198
Jersey Hospital	OccRt	72.97%	65.57%	72.30%
Marlton – 10302	ADC	131.35	11.80	143.16
Kennedy Mem.	Beds	137	22	159
Hospitals-Univ.	OccRt	76.31%	69.12%	75.32%
M.CWashington Twp. – 10802	ADC	104.55	15.21	119.75
Our Lady of	Beds	276	36	312
Lourdes Medical	OccRt	65.60%	68.95%	65.98%
Center – 10404	ADC	181.05	24.82	205.87
Kennedy Mem.	Beds	85	14	99
Hospitals-Univ.	OccRt	75.00%	69.98%	74.29%
M.CCherry Hill Div. – 10401	ADC	63.75	9.80	73.55

Appendix 3 Maintained Beds

		2010		
		Med/Surg	ICU/CCU	Combined
Virtua - West	Beds	89	6	95
Jersey Hospital	OccRt	62.07%	84.84%	63.50%
Berlin - 10407	ADC	55.24	5.09	60.33
Virtua - West	Beds	145	17	162
Jersey Hospital	OccRt	86.25%	102.01%	87.91%
Voorhees – 10405	ADC	125.07	17.34	142.41
Kennedy Mem.	Beds	107	19	126
Hospitals-Univ.	OccRt	68.87%	52.57%	66.41%
M.CStratford Div 10403	ADC	73.69	9.99	83.68
Virtua - West	Beds	180	18	198
Jersey Hospital	OccRt	74.36%	72.40%	74.19%
Marlton – 10302	ADC	133.85	13.03	146.89
Kennedy Mem.	Beds	138	23	161
Hospitals-Univ.	OccRt	86.32%	78.25%	85.17%
M.CWashington Twp. – 10802	ADC	119.12	18.00	137.12
Our Lady of Lourdes Medical Center – 10404	Beds	276	36	312
	OccRt	55.55%	61.91%	56.28%
	ADC	153.31	22.29	175.60
Kennedy Mem. Hospitals-Univ.	Beds	85	14	99
	OccRt	79.40%	67.36%	77.69%
M.CCherry Hill Div. – 10401	ADC	67.49	9.43	76.92

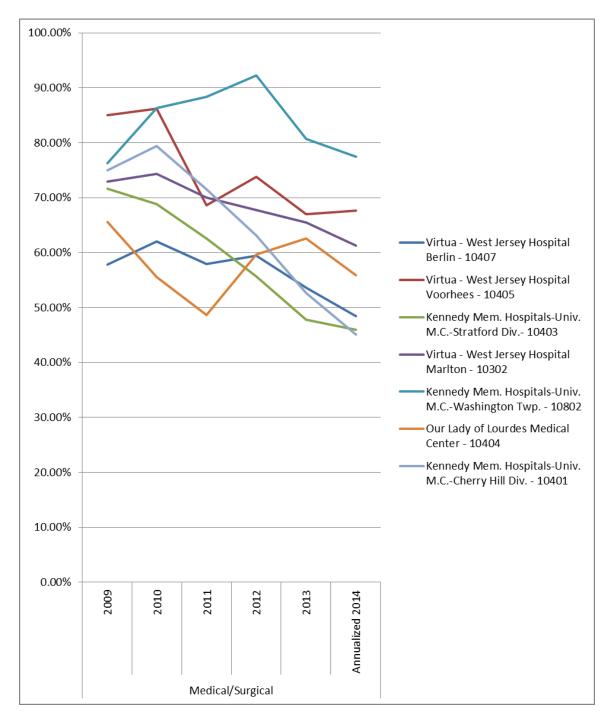
		2011		
		Med/Surg	ICU/CCU	Combined
Virtua - West	Beds	89	6	95
Jersey Hospital	OccRt	57.95%	81.37%	59.43%
Berlin - 10407	ADC	51.58	4.88	56.46
Virtua - West	Beds	180	24	204
Jersey Hospital	OccRt	68.60%	67.47%	68.47%
Voorhees – 10405	ADC	123.48	16.19	139.67
Kennedy Mem.	Beds	113	19	132
Hospitals-Univ.	OccRt	62.57%	48.91%	60.61%
M.CStratford Div 10403	ADC	70.71	9.29	80.00
Virtua - West	Beds	180	18	198
Jersey Hospital	OccRt	70.01%	95.74%	72.35%
Marlton – 10302	ADC	126.02	17.23	143.25
Kennedy Mem.	Beds	141	23	164
Hospitals-Univ.	OccRt	88.35%	80.89%	87.30%
M.CWashington Twp. – 10802	ADC	124.57	18.61	143.18
Our Lady of	Beds	276	36	312
Lourdes Medical	OccRt	48.63%	60.08%	49.95%
Center – 10404	ADC	134.21	21.63	155.84
Kennedy Mem. Hospitals-Univ.	Beds	85	14	99
	OccRt	71.56%	71.04%	71.49%
M.CCherry Hill Div. – 10401	ADC	60.83	9.95	70.77

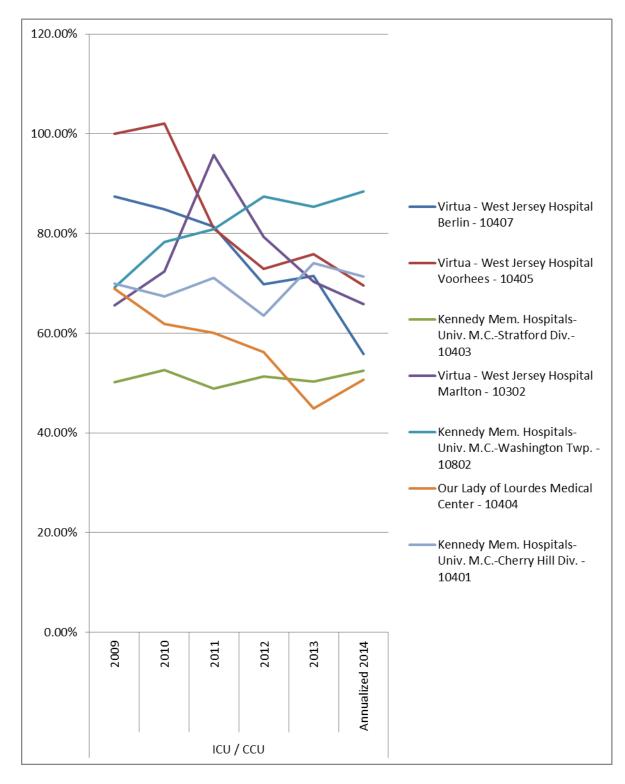
2012				
		Med/Surg	ICU/CCU	Combined
Virtua - West	Beds	77	6	83
Jersey Hospital	OccRt	58.48%	69.76%	60.22%
Berlin - 10407	ADC	45.80	4.19	49.99
Virtua - West	Beds	189	26	215
Jersey Hospital	OccRt	73.81%	58.91%	72.01%
Voorhees – 10405	ADC	139.51	15.32	154.83
Kennedy Mem.	Beds	119	19	138
Hospitals-Univ.	OccRt	55.70%	51.28%	55.09%
M.CStratford Div 10403	ADC	66.28	9.74	76.02
Virtua - West	Beds	174	18	192
Jersey Hospital Marlton – 10302	OccRt	67.76%	79.27%	68.84%
	ADC	117.90	14.27	132.17
Kennedy Mem.	Beds	141	23	164
Hospitals-Univ.	OccRt	92.27%	87.42%	91.59%
M.CWashington Twp. – 10802	ADC	130.11	20.11	150.21
Our Lady of	Beds	229	41	270
Lourdes Medical Center – 10404	OccRt	59.64%	56.16%	59.11%
	ADC	135.57	23.03	158.60
Kennedy Mem.	Beds	85	14	99
Hospitals-Univ.	OccRt	63.10%	63.51%	63.16%
M.CCherry Hill Div. – 10401	ADC	53.63	8.89	62.52

		2013		
		Med/Surg	ICU/CCU	Combined
Virtua - West	Beds	77	6	83
Jersey Hospital	OccRt	57.87%	71.51%	54.86%
Berlin - 10407	ADC	41.24	4.29	45.53
Virtua - West	Beds	222	26	248
Jersey Hospital	OccRt	66.97%	61.31%	66.38%
Voorhees – 10405	ADC	148.67	15.94	164.61
Kennedy Mem.	Beds	126	19	145
Hospitals-Univ.	OccRt	47.82%	50.35%	48.15%
M.CStratford Div 10403	ADC	60.25	9.57	69.82
Virtua - West	Beds	174	18	192
Jersey Hospital Marlton – 10302	OccRt	65.53%	70.38%	65.98%
	ADC	114.02	12.67	126.69
Kennedy Mem. Hospitals-Univ.	Beds	155	23	178
	OccRt	80.65%	85.32%	81.25%
M.CWashington Twp. – 10802	ADC	125.01	19.63	144.63
Our Lady of	Beds	213	42	255
Lourdes Medical	OccRt	62.61%	44.87%	59.69%
Center – 10404	ADC	133.37	18.85	152.22
Kennedy Mem. Hospitals-Univ.	Beds	96	14	110
	OccRt	52.62%	74.01%	55.34%
M.CCherry Hill Div. – 10401	ADC	50.51	10.36	60.87

Annualized – last 2 Qs 2013, 1 st 2 Qs 2014						
Med/Surg ICU/CCU Combined						
Virtua - West	Beds	77	6	83		
Jersey Hospital	OccRt	48.43%	55.80%	48.96%		
Berlin - 10407	ADC	37.29	3.35	40.64		
Virtua - West	Beds	222	26	248		
Jersey Hospital	OccRt	67.60%	62.81%	67.10%		
Voorhees – 10405	ADC	150.08	16.33	166.41		
Kennedy Mem.	Beds	128	19	147		
Hospitals-Univ.	OccRt	45.97%	52.42%	46.80%		
M.CStratford Div 10403	ADC	58.84	9.96	68.80		
Virtua - West Jersey Hospital Marlton – 10302	Beds	174	18	192		
	OccRt	61.33%	65.86%	61.75%		
	ADC	106.71	11.86	118.57		
Kennedy Mem.	Beds	165	23	188		
Hospitals-Univ.	OccRt	77.44%	88.41%	78.78%		
M.CWashington Twp. – 10802	ADC	127.78	20.33	148.12		
Our Lady of	Beds	213	42	255		
Lourdes Medical Center – 10404	OccRt	55.85%	50.62%	54.99%		
	ADC	118.97	21.26	140.23		
Kennedy Mem.	Beds	107	14	121		
Hospitals-Univ.	OccRt	45.07%	71.29%	48.11%		
M.CCherry Hill Div. – 10401	ADC	48.23	9.98	58.21		

Source: Department's Health Care Financing Systems Summary of Inpatient Utilization (B-2)





Appendix 4

Admissions from 2009 – 2013, and annualized for 2014, B-2 data representing admissions to the 6 area Hospitals for the Service Categories Virtua - West Jersey Hospital Berlin provided

2009					
	Med/Surg	ICU/CCU	Combined		
Virtua - West Jersey Hospital Berlin - 10407	4102	332	4434		
Virtua - West Jersey Hospital Voorhees – 10405	9468	1003	10471		
Kennedy Mem. Hospitals-Univ. M.C Stratford Div 10403	6304	854	7158		
Virtua - West Jersey Hospital Marlton – 10302	8456	1349	9805		
Kennedy Mem. Hospitals-Univ. M.C Washington Twp 10802	10356	1283	11639		
Our Lady of Lourdes Medical Center – 10404	14351	278	14629		
Kennedy Mem. Hospitals-Univ. M.C Cherry Hill Div 10401	5963	896	6859		
Total	59000	5995	64995		

2010					
	Med/Surg	ICU/CCU	Combined		
Virtua - West Jersey Hospital Berlin - 10407	4085	300	4385		
Virtua - West Jersey Hospital Voorhees – 10405	9663	987	10650		
Kennedy Mem. Hospitals-Univ. M.C Stratford Div 10403	6327	1027	7354		
Virtua - West Jersey Hospital Marlton – 10302	9694	959	10653		
Kennedy Mem. Hospitals-Univ. M.C Washington Twp 10802	10847	1486	12333		
Our Lady of Lourdes Medical Center – 10404	12686	286	12972		
Kennedy Mem. Hospitals-Univ. M.C Cherry Hill Div 10401	6154	998	7152		
Total	59456	6043	65499		

2011					
	Med/Surg	ICU/CCU	Combined		
Virtua - West Jersey Hospital Berlin - 10407	3921	358	4279		
Virtua - West Jersey Hospital Voorhees – 10405	11413	359	11772		
Kennedy Mem. Hospitals-Univ. M.C Stratford Div 10403	5945	1137	7082		
Virtua - West Jersey Hospital Marlton – 10302	10245	678	10923		
Kennedy Mem. Hospitals-Univ. M.C Washington Twp 10802	11309	1508	12817		
Our Lady of Lourdes Medical Center – 10404	11136	278	11414		
Kennedy Mem. Hospitals-Univ. M.C Cherry Hill Div 10401	5490	1012	6502		
Total	59459	5330	64789		

2012					
	Med/Surg	ICU/CCU	Combined		
Virtua - West Jersey Hospital Berlin - 10407	3441	299	3740		
Virtua - West Jersey Hospital Voorhees – 10405	13207	90	13297		
Kennedy Mem. Hospitals-Univ. M.C Stratford Div 10403	5884	1073	6957		
Virtua - West Jersey Hospital Marlton – 10302	9048	1216	10264		
Kennedy Mem. Hospitals-Univ. M.C Washington Twp 10802	10989	1791	12780		
Our Lady of Lourdes Medical Center – 10404	11458	343	11801		
Kennedy Mem. Hospitals-Univ. M.C Cherry Hill Div 10401	4844	1046	5890		
Total	58871	5858	64729		

2012

2013					
	Med/Surg	ICU/CCU	Combined		
Virtua - West Jersey Hospital Berlin - 10407	3090	303	3393		
Virtua - West Jersey Hospital Voorhees – 10405	14209	87	14296		
Kennedy Mem. Hospitals-Univ. M.C Stratford Div 10403	5094	1123	6217		
Virtua - West Jersey Hospital Marlton – 10302	8266	918	9184		
Kennedy Mem. Hospitals-Univ. M.C Washington Twp 10802	10168	1893	12061		
Our Lady of Lourdes Medical Center – 10404	11689	348	12037		
Kennedy Mem. Hospitals-Univ. M.C Cherry Hill Div 10401	3962	1056	5018		
Total	56478	5728	62206		

2014 – Annualized

(using the last 2 quarters of 2013 and the first 2 quarters of 2014)

	Med/Surg	ICU/CCU	Combined
Virtua - West Jersey Hospital Berlin - 10407	2809	289	3098
Virtua - West Jersey Hospital Voorhees – 10405	14218	77	14295
Kennedy Mem. Hospitals-Univ. M.C Stratford Div 10403	4844	1141	5985
Virtua - West Jersey Hospital Marlton – 10302	7844	871	8715
Kennedy Mem. Hospitals-Univ. M.C Washington Twp 10802	9691	1916	11607
Our Lady of Lourdes Medical Center – 10404	11151	414	11565
Kennedy Mem. Hospitals-Univ. M.C Cherry Hill Div 10401	3667	1077	4744
Total	54415	5755	60170

Source: DHSS Health Care Financing Systems Summary of Inpatient Utilization (B-2)

