

**CERTIFICATE OF NEED**  
**Department Staff Project Summary, Analysis & Recommendations**  
**Transfer of Ownership**

Name of Facility:	Christ Hospital	CN# FR 120404-09-01
Name of Applicant:	Hudson Hospital Opco, LLC	Acquisition Cost: \$45,271,000
Location:	Jersey City	Equity Contribution: 0
Service Area:	Hudson County	

**Applicant's Project Description:**

This application is for the transfer of ownership of Christ Hospital to Hudson Hospital Opco, LLC (HHO), a for-profit, Delaware limited liability company. The owners of HHO are also the owners of the companies that operate both Bayonne Medical Center (BMC) and Hoboken University Medical Center (HUMC). All of these hospitals are located in Hudson County. HHO proposes to operate Christ Hospital as a general acute care hospital at the same licensed bed complement and service levels provided by the hospital now. However, the applicant is in the process of carefully studying and weighing the recommendations of the July 2011 report by Navigant Consulting entitled *Hudson County Hospital Services Consolidation/Regionalization Assessment* (Navigant Report) to assess the practical application of implementing the goals of this report for the hospitals under their ownership as well as working to achieve these goals through a collaborative effort with the other neighboring hospitals.

When the transfer of ownership is completed, the overall acute care bed capacity would remain at 376 beds, pending the outcome of the applicant's assessment of the Navigant Report. Categorically, at present, the bed composition will continue to reflect 294 Medical/Surgical beds, 13 OB/GYN beds, 31 Pediatric beds, 18 Adult ICU/CCU beds, and 20 Adult Acute Psychiatric beds. The hospital's service complement would include the existing 7 Mixed Operating rooms, 2 Cystoscopy rooms, 1 Cardiac Catheterization Lab, 2 Linear Accelerators, PTC Angioplasty services, and Acute Hemodialysis services. The proposed transfer also continues the operation of the Christ Hospital Imaging Center, a hospital-based, off-site ambulatory care facility, which provides MRI services. In addition, HHO is committed to continuing the hospital's designations as a Community Perinatal Center-- Basic and as a Primary Stroke Center.

HHO's application states that the transfer is being sought in order to rescue and stabilize Christ Hospital and to ensure that the hospital has sufficient financial support and capital investment potential to guarantee its long-term survival. The applicant plans to continue operations for at least seven years and to provide care in a more financially secure manner, especially for patients who have difficulty accessing care elsewhere due to geographic and transportation constraints. If this transfer is approved, it is the

applicant's desire to gain service synergies and economies of scale through sharing services, coordinating administration, and consolidating certain duplicated health care services with its other two hospitals, BMC and HUMC. The approval of this transaction would enable Christ Hospital to continue to serve the patients in its service area without any disruption and potentially enhance the delivery of their health care services.

**Applicant's Justification of Need:**

Christ Hospital has been in financial distress for several years, facing an extremely competitive health care service marketplace in Hudson County making the potential for sale or closure a reality. In late 2011, Prime Healthcare, a for-profit company that has purchased and turned around more than a dozen financially distressed hospitals in California, filed a Certificate of Need application for a transfer of ownership to purchase Christ Hospital. During New Jersey's certificate of need review process, questions were raised regarding Prime Healthcare hospitals' billing practices prompting federal and California state investigations. Most likely these allegations influenced Prime Healthcare decision not to pursue the completion of its application. The Department of Health and Senior Services (Department) declared the application inactive and withdrawn pursuant to the Certificate of Need: Application and Review Process Manual at N.J.A.C. 8:33 on March 21, 2012.

As a result of the financial and marketplace difficulties, the current owners of Christ Hospital filed for Chapter 11 protection from creditors in U.S. Bankruptcy Court on February 6, 2012. Christ Hospital could no longer function efficiently without finding relief from its accumulated debt and inability to finance needed capital improvements. The provisions of the bankruptcy proceedings included requests for proposals to purchase Christ Hospital. HHO was selected as the winning bidder over Jersey City Medical Center. A Certificate of Need for the transfer of ownership was filed by HHO in accordance with the sale order issued by the court on April 5, 2012.

The applicant stated that this proposed transfer is necessary for the survival of Christ Hospital and would improve the delivery of health care services in Hudson County. The prospective new owners plan to implement several initiatives designed to strengthen the long-term position of the hospital as a vital provider of health care services, especially for the medically uninsured and under-insured. First and foremost, HHO expressed intentions to consolidate certain services with BMC and HUMC as well as reach out to Jersey City Medical Center to discuss implementing the goals of the Navigant Report.

HHO divulged plans to initiate several health care quality initiatives, similar to those instituted at BMC and HUMC, to improve the efficiency and quality of care at Christ Hospital. These include a "Transitions in Care Medical Home Management" program to reduce preventable hospital readmissions through aggressive patient follow-up, a "Continuity of Care Clinic" staffed by physicians who will provide care to uninsured and under-insured patients, and a "Hospital Medicine Quality Initiative" to implement

performance metrics and measurements mechanisms. The applicant's plan calls for investments into the Information Technology Infrastructure to ensure high level clinical integration, thereby reducing unnecessary, redundant and non-evidence based care and improving consistent reporting and access to data. It also would enact a staff and provider education program to achieve high levels of quality care and reduce costs. In addition, the applicant will hire and train advanced nurse practitioners to improve the quality of care at Christ Hospital.

Christ Hospital is geographically located on the bluffs of Jersey City. Access to Christ Hospital is compounded by traffic congestion making it difficult to travel to and from neighboring hospitals in a timely manner for urgent medical care. The neighboring hospitals in Hudson County, while duplicating some services, do not match all of the programs and services provided by Christ Hospital, which is the only area hospital that offers Linear Accelerator services. Furthermore, the closing of Christ Hospital would have immediate negative consequences on the delivery of health care services in Hudson County, particularly for Medicaid and uninsured patients. The applicant believes that without approval of this transfer, the hospital will close creating dire circumstances for its patients as well as other hospitals in the county, which would likely absorb an unfavorable payer mix further weakening their financial positions.

In summary, HHO believes this transfer of ownership will result in the financial stabilization of Christ Hospital, improved patient care and access, and a more efficient system of health care service delivery across Hudson County.

### **Applicant's Statement of Compliance with Statutory & 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 N.J.S.A. 26:2H-1 et seq. and N.J.A.C. 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:

The applicant acknowledges that there are five other hospitals in Hudson County, including Bayonne Medical Center, Jersey City Medical Center, Palisades Medical Center, Meadowlands Hospital Medical Center, and Hoboken University Medical Center. The applicant does not believe that these facilities are true alternatives to Christ Hospital, due to its geographic location, assortment of programs and services, and difficult transportation access to each hospital.

**2. The need for special equipment and services in the area:**

According to the Applicant:

HHO states that there is no need for specialized equipment or services for this project. All equipment and services necessary to operate Christ Hospital are included in the transfer of ownership, as specified in the asset transfer agreement. The applicant intends to operate the hospital with basically the same inpatient and outpatient services currently being provided at levels appropriate to address community need. The applicant's future adjustments to its services would be based on need and the region's implementation of the Navigant Report.

**3. The adequacy of financial resources and sources of present and future revenues:**

According to the Applicant:

HHO states that it has adequate financial resources to fund the acquisition and operation of the hospital as well as future capital improvements. The applicant has also outlined how it intends to permit Christ Hospital to become financially stable, without the continued need for state Stabilization Fund support, over the next several years. Patient services revenues and operating revenues are expected to match or exceed expenses by the end of two years of operation, according to HHO financial projections. The sale order issued by the U.S. Bankruptcy Court endorses the applicant's proposal for the recovery of Christ Hospital.

**4. The availability of sufficient manpower in the several professional disciplines:**

According to the Applicant:

The applicant has stated its intent to hire a significant majority of the employees at Christ Hospital at the time of the transfer of ownership. The applicant does not have any concern about sufficient professional experience or the need to recruit additional personnel since the hospital is located so close to New York City and is located in one of the most densely populated counties in the country.

**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:

The applicant does not believe that this transfer will have a direct economic or financial impact, adverse or otherwise, on the delivery of health care services. The applicant does believe that non-approval of the transfer of ownership would result in dire consequences for health care delivery in Hudson County. The applicant recognizes the important role Christ Hospital has historically played in the county as a major provider of health services for Medicaid and uninsured patients. If the transfer is not approved, access to care will be immediately compromised, according to the applicant. The discontinuance of this role would force the remaining hospitals in the county to absorb an unfavorable payer mix and threaten their financial stability. It could also place Jersey City residents in the vicinity of Christ Hospital at greater risk when health care emergencies arise and immediate care is needed.

**Public Hearing:**

On May 23, 2012, a public hearing was held at Hudson County Community College on Newkirk Street in Jersey City from 6:00 p.m. to 8:00 p.m. Approximately 120 people were in attendance. Of the 32 people who presented testimony during the hearing, 31 of the speakers supported the transfer without any reservations. They included hospital union representatives and employees, the hospital's president and CEO, and area residents. Most of these supporters cited the need to keep the hospital open and the applicant's positive track record with BMC and HUMC in hiring current employees, investing needed resources, enhancing efficiency, and improving financial stability as reasons to support approval of this application. Three speakers expressed concern regarding the transaction and advocated for safeguards to be placed on the transfer of ownership.

Please also note that in the applicant's response to completeness questions, letters of support for this transfer of ownership were submitted from Hudson County Executive Thomas DeGise, Hudson County Mental Health Administrator Robin James, Hoboken Mayor Dawn Zimmer, and physicians currently practicing at Christ Hospital.

**Department Staff Analysis:**

Department staff has concluded that the applicant has adequately documented proposed compliance with the applicable Certificate of Need rules (N.J.A.C. 8:33-1.1 et

seq.) and general statutory standards at N.J.S.A. 26:2H-1 et seq. For the purposes of this review, this application is considered a transfer of ownership of a licensed facility currently offering health care services and not a reduction, elimination, or relocation of health care services.

Department staff reviewed the applicant’s Certificate of Need and determined that the applicant’s rationale to transfer the ownership of Christ Hospital is a good assessment of the hospital’s service area and the health care services environment for Hudson County. Considering that once transferred, HHO is committing to operate Christ at the same bed capacity levels and outpatient service levels with future bed adjustments based on collaboration with other hospitals and the goals of the Navigant Report. The proposed transfer appears to be a good option for ensuring quality health care services in the community and the long-term survival of the hospital. If several initiatives, efficiencies and revenue enhancements are implemented, as described by the applicant, operating revenues should equal or exceed operating costs by the end of two years, making the hospital profitable and competitive to survive in the future (see Appendix A). Under this scenario, this transfer of ownership would create a more financially stable hospital without causing disruption in the continuity of patient care.

In reviewing the availability of facilities or services which may serve as alternatives or substitutes, Department staff notes that there are five other hospitals serving Hudson County, with distances and travel times from Christ Hospital listed in Table 1 below.

**Table 1**  
**Distance from Christ Hospital**  
**176 Palisade Avenue, Jersey City, N.J. 07036**  
**to Area Hospitals**

<b>Provider/Location</b>	<b>Distance from Christ Hospital</b>	<b>Travel times from Christ Hospital</b>
Jersey City Medical Center 355 Grand Street Jersey City, NJ 07302	1.62 miles	6 minutes
Hoboken University Medical Center 308 Willow Ave. Hoboken, NJ 07030	1.81 miles	6 minutes
Meadowlands Hospital Medical Center 55 Meadowlands Pkwy Secaucus, NJ 07094	6.71 miles	13 minutes
Palisades Medical Center 7600 River Road North Bergen, NJ 07047	5.38 miles	14 minutes
Bayonne Medical Center 29 East 29th St Bayonne, NJ 07002	7.42 miles	15 minutes

Department staff also notes there are distinct advantages that would take place when the transfer is completed and the applicant and other Hudson County providers jointly agree to implement the recommendations in the Navigant Report to consolidate health care delivery services and eliminate the duplication of services. The common ownership of Christ Hospital, Bayonne Medical Center and Hoboken University Medical Center would allow for serious discussion and partnership, at least among these three hospitals, towards improving the efficient delivery of health care services in the region. This transfer of ownership may be the catalyst for all operating hospitals in the region to take the first step together in redefining and restructuring county wide health services.

After carefully reviewing the data (see Appendices), Department staff believes that the decision to transfer the ownership of Christ Hospital is in the best interest of the residents in Hudson County as well as the hospital's primary patient base in Jersey City and those patients it serves from the surrounding municipalities of Bayonne, Hoboken, North Bergen, Union City and West New York. This transfer is the only option presented to the Department and is a result of a U.S. Bankruptcy Court decision. Staff is convinced that this transfer would not be disruptive to the area's health care delivery system, nor would it significantly affect any of the existing providers or create access problems, since the new ownership is committed to serving the same population as its predecessor. On balance, at this time the stability to the community by this provider outweighs the alternative of an unplanned reduction or significant disruption of services, especially absent an adopted county-wide plan for inpatient hospital services. Department staff is satisfied that the health status of patients in Hudson County would not be compromised based on the completion of this transfer.

The need for special equipment and services in the area will not be impacted as the applicant's plan is to maintain the facility as an acute care general hospital at the same licensed bed complement and service levels while carefully studying and weighing the recommendations of the Navigant Report for Hudson County. Department staff relies on the applicant's statement to maintain inpatient services and acknowledgement that the applicant's business plan does not establish any new inpatient services or duplication of existing services provided at neighboring hospitals. Staff believes the applicant's efforts to reshape the financial and patient care models at Christ Hospital can be applied without adversely impacting the existing area providers.

#### **Adequacy of financial resources and sources of present and future revenues:**

Year-end 2011 unaudited financial statements for Christ Hospital provided by the New Jersey Health Care Facilities Financing Authority (NJHCFFA) shows a loss from operations of \$3,058,000 on revenues of \$144,009,000, which translates to a negative 2.1 percent operating margin. The March 2012 unaudited income statement, the most recent available, shows a loss from operations of \$3,389,000 on revenues of \$32,449,000, which translates to a negative 10.4 percent operating margin. Cash at year-end 2011 was \$2,972,000 or 7.6 days cash on hand. As of March 31, 2012, cash

was \$716,000 or 1.9 days cash on hand. Although the hospital has no long-term debt, as of March 31, 2012, it did have \$18.3 million in an accounts receivable loan and as of April 28, 2012, short-term borrowing was up to \$21,946,000.

According to projections provided by the applicant, the hospital is forecast to incur negative operating margins of 1.3 percent in 2012 and 2013 but will increase to positive .9 percent in 2014 and 1.4 percent in 2015 (see Appendix A). The improvement is attributed to increased revenue due to better documentation and decreased expenses due to a reduction in length of stay and better purchasing contracts. Cash on hand is projected to range from 26 days to 47 days as a result of a cash infusion by the buyer. Short-term borrowing is expected to drop to between \$7 million and \$10 million. Long-term debt will start at \$30 million in 2012 but will be paid down at a rate of \$1.5 million per year. Please refer to Appendix A.

### **Staff Recommendations:**

Based on this documentation of compliance with regulatory and statutory criteria, Department staff recommends approving the transfer of ownership of Christ Hospital to Hudson Hospital Opco for the following reasons and with the conditions noted below.

### **Reasons:**

1. Financial conditions at Christ Hospital have continued to decline as evidenced by its recent filing for protection from creditors in U.S. Bankruptcy Court. The applicant is focusing its efforts on rebuilding the internal health care delivery system at Christ Hospital by enhancing its medical and non-medical supportive technology as well as creating a more structured physician and patient environment for better care. The applicant's proposed actions for sharing services and administrative efficiencies with BMC and HUMC as well as promoting consolidation and elimination of duplicated services county-wide, are measures that should at the very least reduce or stabilize the escalation of hospital costs at Christ Hospital.
2. Since 2007, the overall annual occupancy rate and average daily census (ADC) at Christ Hospital has been relatively stable for the four bed categories of medical/surgical, OB/GYN, Pediatrics and ICU/CCU. However, without additional funding to strengthen its delivery system, it is doubtful that the present ownership would be able to continue providing services at their present levels. The applicant's business model and marketing strategies for Christ Hospital could stimulate an increase in patient volume, principally by reducing the out-migration of patients and, in turn, return the hospital to financial stability.
3. The applicant's planned investments in hospital quality initiatives and medical home management programs at Christ Hospital target improving patient care and

follow-up, reducing readmissions, establishing performance metrics and enacting educational programs for providers. The applicant's plan also includes the institution of a continuity of care clinic for the under-insured and charity care patients to curb misuse of the Emergency Room and the implementation of improvements for the information technology infrastructure. Collectively, the implementation of these interlocking components should achieve a higher level of quality and control the cost of care.

4. Christ Hospital has operated in the region serving Jersey City and the nearby communities with limited effect on the surrounding hospitals. No data exist to suggest that this transfer of ownership would negatively affect its relationship with the other Hudson County hospitals or adversely impact the health status of the community.
5. The applicant complies with the Department's general transfer of ownership criteria: there is a willing buyer and seller; the buyer has presented a financially feasible project; and the buyer has an acceptable licensing track record. In addition, this transfer to HHO has the approval of the U.S. Bankruptcy Court.

**Conditions:**

Based on this documentation of compliance with regulatory and statutory criteria, Department staff recommends approving this transfer of ownership with the following conditions:

1. The applicant shall file a licensing application with the Department's Certificate of Need and Healthcare Facility Licensure Program (CNHCFL) to execute the transfer of the ownership of Christ Hospital's license to HHO.
2. The applicant shall notify the Department's CNHCFL in writing, specifically who is responsible for the safekeeping and accessibility of all patient medical records at the hospital (both active and stored) in accordance with N.J.S.A. 26:8-5 et seq. and N.J.A.C. 8:43G-15.2.
3. HHO shall hire at least 90 percent of the employees of Christ Hospital as of the closing date in accordance with Section 5.15 of the Asset Purchase Agreement.
4. HHO shall operate Christ Hospital as a general acute care hospital, in compliance with all regulatory requirements, for at least seven years. This condition shall be imposed as a contractual condition of any subsequent sale or transfer, subject to appropriate regulatory or legal review, by HHO within the seven year period.

5. HHO shall continue all clinical services and community health programs currently offered at Christ Hospital by the previous ownership. Any changes in this commitment involving either a reduction, relocation out of Christ Hospital's current service area, or elimination of clinical services or community health programs offered by Christ Hospital's former ownership shall require prior written approval from the Department and shall be subject to all applicable statutory and regulatory requirements. Any request for any of the above-noted changes shall also include comments and recommendations from the Community Advisory Board in response to HHO's request (see Condition 12 below).
6. HHO shall continue compliance with N.J.A.C. 8:43G-5.21(a), which requires that "[a]ll hospitals . . . provide on a regular and continuing basis, out-patient and preventive services, including clinical services for medically indigent patients, for those services provided on an in-patient basis." Documentation of compliance shall be submitted within 30 days of the issuance of the license and quarterly thereafter for a period of seven years.
7. In accordance with N.J.S.A. 26:2H-18.64 and N.J.A.C. 8:43G-5.2(c), HHO shall not only comply with federal EMTALA requirements, but also provide care for all patients, including those eligible for charity care, who present themselves at Christ Hospital without regard to their ability to pay or payment source.
8. HHO shall acknowledge that the value of indigent care that shall be provided by Christ Hospital, which shall be determined by the dollar value of documented charity care calculated at the prevailing Medicaid rate, shall not be limited to the amount of charity care provided historically at the hospital.
9. HHO shall establish a functioning Board of Trustees responsible for implementing hospital-wide policy, adopting bylaws, maintaining quality of care, and providing institutional management and planning consistent with the Christ Hospital organizational structure. This Board shall maintain suitable representation of the residing population of the hospital's service area who are neither themselves owners or employees of, nor related to employees or owners of, any HHO parent company, holding company, subsidiary corporation or corporate affiliate. Annual notice shall be made to the Department of this Board's roster, along with any policies governing Board composition, governance authority and Board appointments.
10. Within 30 days of the issuance of the hospital's new license, HHO shall provide the Department with an organizational chart of the hospital and each service that shows lines of authority, responsibility, and communication between HHO and the hospital's management and board. HHO, as licensee, shall be responsible for compliance.

11. HHO shall report the progress on the implementation and measured outcomes of the following initiatives to improve the efficiency and quality of care at Christ Hospital every six months, starting on the date a license is issued to HHO:
  - a. Transitions in Care Medical Home Management Program;
  - b. Institution of a Continuity of Care Clinic; and
  - c. Hospital Medicine Quality Program.
  
12. Within three months of approval of this application, HHO shall develop and participate in a Community Advisory Board (CAB) to provide ongoing community input to the hospital's CEO and the hospital's Board on ways that Christ Hospital can meet the needs of the residents in its service area.
  - a. Subject to the provisions below, HHO shall determine the membership, structure, governance, rules, goals, timeframes, and the role of the CAB in accordance with the primary objectives set forth above, and shall provide a written report setting forth same to the hospital's Board of Trustees, with a copy to the Department and subject to the Department's approval, within 60 days from the date of formation of the CAB.
  - b. HHO shall minimally seek participation from each town in the service area of Christ Hospital by offering a seat on the CAB to each town's mayor or his/her designee. Membership on the CAB shall include patient advocates, local public health officials, clinical practitioners whose mission is to ensure that New Jersey residents are provided fully-integrated and comprehensive health services, labor unions and community advocates.
  - c. HHO shall designate co-chairs of the CAB, one of whom shall be a member of the hospital's Board and one of whom shall be a community member. The community member cannot be an owner or employee of, nor be related to an employee or owner of any HHO parent company, holding company, corporate subsidiary or corporate affiliate.
  - d. A CAB representative shall be given a seat, ex-officio, on the hospital's Board of Trustees.
  - e. The co-chairs of the CAB shall jointly submit to the hospital's Board of Trustees, with a copy to the Department, a semi-annual report of the progress toward the goals of the CAB.

- f. The co-chairs of the CAB shall jointly transmit to the hospital's Board, with a copy to the Department, quarterly and any special reports relative to the implementation of these conditions.
  - g. Each member of the CAB shall be required to publicly disclose any and all conflicts of interest to the CAB members and the hospital's Board of Trustees.
  - h. HHO may petition the Department to disband the CAG not earlier than three years from the date of CN approval and on showing that all of the above conditions have been satisfied for at least one year.
13. HHO shall submit to the Department, on an annual basis for the initial seven years following the transfer of ownership, with the first report due one year from the date the transfer occurs or upon Department request, the following:
  - a. An annual audit report prepared by an independent external auditor. The audit shall report all related party transactions in accordance with Generally Accepted Accounting Principles. The hospital shall also include an annual report on investments, capital expenditures, and transfers of funds from the hospital to any parent, holding company, subsidiary corporation, or corporate affiliate, which shall indicate the amount of funds transferred. Transfers of funds shall include, but not be limited to, assessments for corporate services, transfers of cash and investment balances to centrally controlled accounts, management fees, capital assessments, and/or special one-time assessments for any purpose.
  - b. All financial data and measures required pursuant to N.J.A.C. 8:31B. In addition, the Early Warning System monthly indicators authorized by N.J.S.A. 26:2H-5(e) shall be submitted monthly to the Health Care Facilities Financing Authority. These monthly indicators include the following:
    - Days Cash on Hand
    - Days Account Payable
    - Days Account Receivable
    - Operational Margin
    - Average Monthly Census (vs. Occupancy Rates).
  - c. An annual analysis of the service synergies and economies of scale through consolidation and sharing of services with Bayonne Medical Center and Hoboken University Medical Center, and how these address the recommendations in the Navigant Report related to consolidation.

14. Within 15 days of approval of this application, HHO shall provide a report to the CNHCFL detailing the communication plan to Christ Hospital staff and the community, including but not limited to elected officials, clinical practitioners, EMS providers, concerning the approval of the transfer of license and the availability of fully-integrated and comprehensive health services. This shall include reference to the outreach plan referenced in Condition 15 below.
15. HHO shall hold an annual public meeting pursuant to N.J.S.A. 26:2H-12.50 and develop mechanisms for the meeting that address the following:
  - a. An opportunity for members of the local community to present their concerns regarding local health care needs and hospital operations and how HHO should address these; and
  - b. A method for HHO to publicly respond to the concerns expressed by community members at the annual public board meeting.

HHO shall develop these mechanisms within 90 days of this approval and share them with Department's CNHCFL Program.

16. At the time HHO is licensed as the owner of Christ Hospital, it shall participate in all of the Medicaid managed care contracts in which Christ Hospital participated prior to this transfer approval.
17. An outreach plan shall be placed into effect to ensure that all residents of the hospital service area, especially the medically indigent, have access to the available services at the location. A self-evaluation of this effort shall be conducted on a yearly basis for seven years after licensure to measure its effectiveness including any payments accounted for activities, including but not limited to, outreach, community programs, and health professional education, and shall be submitted to the Department by December 31 of every year for review and comment and presented to the public at the hospital's annual public meeting.
18. All insurance contracts in place or in effect between Christ Hospital and any insurers on April 12, 2012, the date of this Certificate of Need submission, shall remain fully in place and in effect between these same insurers and HHO for 30 days following the licensure of HHO as the licensed operator of Christ Hospital. There shall be no balance billing to any patient for this 30-day period.
19. During the 30-day period noted in Condition 18 above, HHO shall make reasonable attempts to renegotiate the current HMO and commercial insurance contracts of Christ Hospital. If HHO provides notice to any insurer that it will not assume or it will terminate a contract at any time, it shall meet with the Department and the New Jersey Department of Banking and Insurance (DOBI) to

discuss access issues and public notice to patients and other providers. Such a meeting shall occur at least 30 days prior to the termination of any insurance contracts.

- a. HHO shall negotiate in good faith during the renegotiation of these contracts and the negotiation of any new contracts with HMO or commercial insurers. HHO shall provide to the Department written documentation of all on-going negotiations on a monthly basis. If any existing HMO or commercial insurer fails to respond to a request for negotiations, HHO shall notify the Department and DOBI to request assistance.
  - b. Within 10 days after HHO is licensed to operate Christ Hospital, it shall post on the websites of each hospital owned by its principals (Christ Hospital, Bayonne Medical Center and UMC Hoboken) the definitive status of all health insurance contracts between each of the hospitals and each insurance plan for which contracts exist. All three hospitals shall update this posted information on a monthly basis.
  - c. These website postings shall make clear which insurance plans are participating, in-network providers, using language such as "X Hospital is participating as an in-network facility with the following insurance carriers." The website shall also be clear on which insurance carriers do not participate as in-network providers using such language as "For all other insurance carriers listed below, X Hospital is not participating as an in-network facility."
  - d. Christ Hospital's website shall also indicate to the public that some insurance plans only provide full benefits for in-network services with clear language such as "Some insurance plans only provide benefits for in-network services, while other insurance plans provide benefits for out-of-network services, but with greater patient cost-sharing. You should contact your insurance company for more detailed information about your benefits and any cost-sharing or co-pays that may be required."
20. For at least two years after licensure, HHO shall report annually to the Department on the hospital's payer mix and the number and percent of total hospital admissions that came through the hospital's emergency department.
21. HHO shall, in accordance with the provisions of N.J.S.A. 26:2H-18.59h, "offer to its employees who were affected by the transfer, health insurance coverage at substantially equivalent levels, terms and conditions to those that were offered to the employees prior to the transfer."

22. HHO shall report annually and/or as required by a specific condition to the Department's Office of Certificate of Need and Healthcare Facility Licensure.
23. All the above conditions shall also apply to any successor organization to HHO which acquires Christ Hospital within seven years from the date of the Certificate of Need approval.

### Appendix A – Financial Projections

Christ Hospital – In Thousands \$

	<u>Base</u>	<u>Year 1</u>	<u>Year 2</u>	<u>Year 3</u>
<b>Revenues:</b>				
Net patient services revenues	125,242	132,154	136,119	137,542
Other operating revenues	<u>30,317</u>	<u>23,317</u>	<u>23,317</u>	<u>23,317</u>
<b>Total</b>	<b>155,559</b>	<b>155,471</b>	<b>159,436</b>	<b>160,859</b>
<b>Expenses:</b>				
Salaries and wages	76,530	75,820	75,368	74,911
Contract labor	893	884	878	872
Physician fees	6,425	6,353	6,307	6,260
Fringe benefits	14,493	14,327	14,221	14,113
Medical supplies	12,572	11,887	11,769	11,649
Drugs	5,381	5,259	5,181	5,102
Other supplies	2,050	2,026	2,011	1,996
Purchased services	9,096	8,401	8,277	8,152
Utilities	2,501	2,501	2,501	2,501
Other expenses	9,302	9,186	9,112	9,037
Interest	2,826	4,800	4,800	4,800
Depreciation	3,948	4,448	5,948	7,448
Bad debt provision	<u>11,606</u>	<u>11,606</u>	<u>11,606</u>	<u>11,606</u>
<b>Total</b>	<b>157,623</b>	<b>157,497</b>	<b>157,978</b>	<b>158,446</b>
<b>Net income from operations</b>	<b><u>(2,064)</u></b>	<b><u>(2,026)</u></b>	<b><u>1,458</u></b>	<b><u>2,413</u></b>

<b>Balance Sheet:</b>	Opening	End of Year 1	End of Year 2	End of Year 3
Current Assets:				
Cash	18,100	10,565	9,959	13,090
Patient accounts receivable, net	14,000	14,773	15,216	15,375
Other receivables	2,000	2,000	2,000	2,000
Supplies	<u>2,000</u>	<u>2,000</u>	<u>2,000</u>	<u>2,000</u>
	<b>36,100</b>	<b>29,338</b>	<b>29,175</b>	<b>32,465</b>
Property, plant and equipment	35,000	45,000	55,000	65,000
Less accumulated depreciation	<u>0</u>	<u>(4,448)</u>	<u>(10,396)</u>	<u>(17,844)</u>
	<b>35,000</b>	<b>40,552</b>	<b>44,604</b>	<b>47,156</b>
<b>Total Assets</b>	<b><u>71,100</u></b>	<b><u>69,890</u></b>	<b><u>73,779</u></b>	<b><u>79,621</u></b>
Current Liabilities:				
Accounts payable	1,900	3,272	3,238	3,203
Accrued salaries, wages and benefits	5,700	5,644	5,609	5,573
Revolving AR credit line	7,000	8,000	9,000	10,000
Due To Third Party Payors	<u>1,000</u>	<u>1,000</u>	<u>1,000</u>	<u>1,000</u>
	<b>15,600</b>	<b>17,916</b>	<b>18,847</b>	<b>19,776</b>
Due to Third Parties, non current	2,700	2,700	2,700	2,700
Equipment line	-	-	3,000	7,000
Long-term debt	<u>30,000</u>	<u>28,500</u>	<u>27,000</u>	<u>25,500</u>
	<b>32,700</b>	<b>31,200</b>	<b>32,700</b>	<b>35,200</b>
Equity	<u>22,800</u>	<u>20,774</u>	<u>22,232</u>	<u>24,645</u>
<b>Total Liabilities and Equity</b>	<b><u>71,100</u></b>	<b><u>69,890</u></b>	<b><u>73,779</u></b>	<b><u>79,621</u></b>

<b>Statement of Cash Flows</b>	<b>Year 1</b>	<b>Year 2</b>	<b>Year 3</b>
Cash flows from operating activities:			
Net income	(2,026)	1,458	2,413
Adjustments to reconcile net income to cash provided by (used in) operating activities:			
Depreciation	4,448	5,948	7,448
Changes in assets and liabilities:			
(Increase) decrease in patient accounts receivable	(773)	(443)	(159)
Increase (decrease) in Accounts payable	1,372	(34)	(35)
Increase (decrease) in accrued salaries, wages and benefits	(56)	(35)	(36)
Increase (decrease) in revolving AR credit line	<u>1,000</u>	<u>1,000</u>	<u>1,000</u>
Net cash provided by (used in) operating activities	<b>3,965</b>	<b>7,893</b>	<b>10,632</b>
Cash flows from investing activities:			
Expenditures for plant improvements and equipment	<b>(10,000)</b>	<b>(10,000)</b>	<b>(10,000)</b>
Cash flows from financing activities:			
Proceeds from equipment line of credit	-	3,000	4,000
Payments of long-term debt	(1,500)	(1,500)	(1,500)
Net cash provided by (used in) financing activities	(1,500)	1,500	2,500
Net increase (decrease) in cash	(7,535)	(607)	3,132
Cash at beginning of period	<u>18,100</u>	<u>10,565</u>	<u>9,959</u>
<u>Cash at end of period</u>	<b><u>10,565</u></b>	<b><u>9,958</u></b>	<b><u>13,091</u></b>

Source: Christ Hospital and Applicant

**Appendix B - Licensed Beds**

<b>2007</b>						
		<b>Med/Surg</b>	<b>OB/GYN</b>	<b>PEDs</b>	<b>ICU/CCU</b>	<b>Combined</b>
<b>Christ</b>	Beds	294	18	31	18	361
	OccRt	52.35%	55.04%	23.01%	87.38%	51.67%
	ADC	153.92	9.73	7.13	15.73	201.60
<b>Hoboken</b>	Beds	218	25	20	16	279
	OccRt	41.37%	47.98%	29.59%	40.50%	41.07%
	ADC	90.19	12.00	5.92	6.48	114.58
<b>Bayonne</b>	Beds	205	10	17	14	246
	OccRt	47.68%	0%	14.57%	84.74%	45.56%
	ADC	97.75	0	2.48	11.89	112.08
<b>Palisades</b>	Beds	166	20	6	10	202
	OccRt	70.04%	59.34%	36.30%	61.40%	67.55%
	ADC	116.27	11.87	2.18	6.14	162.42
<b>Meadowlands</b>	Beds	138	22	26	14	200
	OccRt	40.15%	29.78%	32.48%	67.65%	39.94%
	ADC	55.41	6.55	8.44	9.47	79.87
<b>Jersey City Medical Center</b>	Beds	153	26	26	40	245
	OccRt	75.95%	68.23%	28.17%	52.89%	66.29%
	ADC	116.2	17.74	7.32	21.16	162.42
<b>Countywide Averages</b>	Beds	196	20	21	19	256
	OccRt	53.64%	47.84%	26.57%	63.25%	51.66%
	ADC	104.95	9.65	5.58	11.81	131.99

<b>2008</b>						
		<b>Med/Surg</b>	<b>OB/GYN</b>	<b>PEDs</b>	<b>ICU/CCU</b>	<b>Combined</b>
<b>Christ</b>	Beds	294	15	31	18	358
	OccRt	51.91%	61.40%	26.08%	77.75%	51.37%
	ADC	152.61	9.21	8.08	14.00	183.90
<b>Hoboken</b>	Beds	218	25	20	16	279
	OccRt	40.24%	50.66%	26.19%	43.68%	40.36%
	ADC	87.72	12.66	5.24	6.99	112.61
<b>Bayonne</b>	Beds	205	10	17	14	246
	OccRt	42.84%	0%	9.18%	82.51%	41.03%
	ADC	87.83	0	1.56	11.55	100.94
<b>Palisades</b>	Beds	166	20	6	10	202
	OccRt	63.50%	55.04%	36.93%	21.89%	59.81%
	ADC	105.41	11.01	2.22	2.19	120.82
<b>Meadowlands</b>	Beds	138	22	26	14	200
	OccRt	39.56%	32.49%	23.15%	67.85%	38.63%
	ADC	54.60	7.15	6.02	9.50	77.27
<b>Jersey City Medical Center</b>	Beds	153	26	26	40	245
	OccRt	79.01%	58.38%	6.31%	62.83%	66.45%
	ADC	120.88	15.18	1.64	25.13	162.83
<b>Countywide Averages</b>	Beds	196	20	21	19	255
	OccRt	51.88%	46.79%	19.65%	61.93%	49.57%
	ADC	101.51	9.20	4.13	11.56	126.39

2009						
		Med/Surg	OB/GYN	PEDs	ICU/CCU	Combined
<b>Christ</b>	Beds	294	13	31	18	356
	OccRt	46.31%	70.26%	26.70%	75.83%	46.97%
	ADC	136.16	9.13	8.28	13.65	167.22
<b>Hoboken</b>	Beds	218	25	20	16	279
	OccRt	37.10%	50.18%	22.75%	42.91%	37.57%
	ADC	80.87	12.55	4.55	6.87	104.83
<b>Bayonne</b>	Beds	205	10	17	14	246
	OccRt	38.04%	0%	4.56%	74.19%	36.24%
	ADC	77.98	0	0.78	10.39	89.14
<b>Palisades</b>	Beds	166	20	6	10	202
	OccRt	62.21%	54.60%	36.21%	60.19%	60.58%
	ADC	103.27	10.92	2.17	6.02	122.38
<b>Meadowlands</b>	Beds	138	22	26	14	200
	OccRt	39.32%	27.77%	21.09%	65.64%	37.52%
	ADC	54.26	6.11	5.48	9.19	75.04
<b>Jersey City Medical Center</b>	Beds	153	26	26	40	245
	OccRt	91.60%	57.96%	16.90%	63.16%	75.46%
	ADC	140.14	15.07	4.39	25.27	184.87
<b>Countywide Averages</b>	Beds	196	19	21	19	255
	OccRt	50.48%	46.36%	20.36%	63.73%	48.66%
	ADC	98.72	8.96	4.28	1.90	123.92

2010						
		Med/Surg	OB/GYN	PEDs	ICU/CCU	Combined
<b>Christ</b>	Beds	294	13	31	18	356
	OccRt	40.67%	73.28%	17.55%	61.66%	40.91%
	ADC	119.56	9.53	5.44	11.10	145.63
<b>Hoboken</b>	Beds	218	25	20	16	279
	OccRt	36.44%	46.65%	17.40%	42.33%	36.33%
	ADC	79.44	11.66	3.48	6.77	101.35
<b>Bayonne</b>	Beds	205	10	17	14	246
	OccRt	39.96%	0%	1.76%	70.16%	37.42%
	ADC	81.92	0	0.30	9.82	92.04
<b>Palisades</b>	Beds	166	20	6	10	202
	OccRt	58.34%	56.60%	52.69%	79.89%	59.07%
	ADC	96.85	11.32	3.16	7.99	119.32
<b>Meadowlands</b>	Beds	138	22	26	14	200
	OccRt	33.00%	23.55%	13.44%	50.00%	30.61%
	ADC	45.54	5.18	3.49	7.00	61.21
<b>Jersey City Medical Center</b>	Beds	153	26	26	35	240
	OccRt	86.10%	63.06%	18.09%	80.31%	75.39%
	ADC	131.73	16.40	4.70	28.11	180.93
<b>Countywide Averages</b>	Beds	196	19	21	18	254
	OccRt	47.28%	46.62%	16.33%	66.16%	45.99%
	ADC	92.51	9.01	3.43	11.80	116.75

		<b>2011</b>				
		<b>Med/Surg</b>	<b>OB/GYN</b>	<b>PEDs</b>	<b>ICU/CCU</b>	<b>Combined</b>
<b>Christ</b>	Beds	294	13	31	18	356
	OccRt	40.17%	79.81%	14.67%	56.96%	40.25%
	ADC	118.10	10.38	4.55	10.25	143.28
<b>Hoboken</b>	Beds	218	25	20	16	279
	OccRt	29.38%	47.07%	17.79%	33.63%	30.38%
	ADC	64.04	11.77	3.56	5.38	84.75
<b>Bayonne</b>	Beds	205	10	17	14	246
	OccRt	32.36%	0%	1.32%	73.60%	31.25%
	ADC	66.34	0	0.22	10.30	76.87
<b>Palisades</b>	Beds	166	20	6	10	202
	OccRt	58.06%	52.21%	69.86%	78.77%	58.86%
	ADC	96.38	10.44	4.19	7.88	118.89
<b>Meadowlands</b>	Beds	138	22	26	14	200
	OccRt	28.03%	23.33%	18.28%	43.87%	27.36%
	ADC	38.69	5.13	4.75	6.14	54.71
<b>Jersey City Medical Center</b>	Beds	153	26	26	34	239
	OccRt	70.88%	67.89%	16.85%	81.35%	66.17%
	ADC	108.45	17.65	4.38	27.66	158.14
<b>Countywide Averages</b>	Beds	196	19	21	18	254
	OccRt	41.91%	47.73%	17.19%	63.79%	41.83%
	ADC	82.00	9.23	3.61	11.27	106.11

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

**Appendix C – Maintained Beds**

<b>2007</b>						
		<b>Med/Surg</b>	<b>OB/GYN</b>	<b>PEDs</b>	<b>ICU/CCU</b>	<b>Combined</b>
<b>Christ</b>	Beds	199	26	15	18	258
	OccRt	77.35%	37.42%	47.56%	87.38%	72.29%
	ADC	153.92	9.73	7.13	15.73	201.60
<b>Hoboken</b>	Beds	127	22	15	15	179
	OccRt	71.01%	54.52%	39.45%	43.20%	64.01%
	ADC	90.19	12.00	5.92	6.48	114.58
<b>Bayonne</b>	Beds	195	7	17	14	233
	OccRt	50.13%	0%	14.57%	84.74%	48.11%
	ADC	97.75	0	2.48	11.89	112.08
<b>Palisades</b>	Beds	144	20	6	10	180
	OccRt	80.74%	59.34%	36.30%	61.40%	75.81%
	ADC	116.27	11.87	2.18	6.14	162.42
<b>Meadowlands</b>	Beds	78	24	12	14	128
	OccRt	71.03%	27.29%	70.37%	67.65%	62.40%
	ADC	55.41	6.55	8.44	9.47	79.87
<b>Jersey City Medical Center</b>	Beds	152	26	26	34	238
	OccRt	76.45%	68.23%	28.17%	62.22%	68.24%
	ADC	116.2	17.74	7.32	21.16	162.42
<b>Countywide Averages</b>	Beds	149	21	15	18	203
	OccRt	70.36%	46.31%	36.78%	67.47%	65.13%
	ADC	104.95	9.65	5.58	11.81	131.99

<b>2008</b>						
		<b>Med/Surg</b>	<b>OB/GYN</b>	<b>PEDs</b>	<b>ICU/CCU</b>	<b>Combined</b>
<b>Christ</b>	Beds	199	19	15	18	251
	OccRt	76.69%	48.48%	53.90%	77.75%	73.27%
	ADC	152.61	9.21	8.08	14.00	183.90
<b>Hoboken</b>	Beds	127	22	15	15	179
	OccRt	69.07%	57.56%	34.92%	46.59%	62.91%
	ADC	87.72	12.66	5.24	6.99	112.61
<b>Bayonne</b>	Beds	165	0	17	14	196
	OccRt	53.23%	0%	9.18%	82.51%	51.50%
	ADC	87.83	0	1.56	11.55	100.94
<b>Palisades</b>	Beds	144	20	6	10	180
	OccRt	73.20%	55.04%	36.93%	21.89%	67.12%
	ADC	105.41	11.01	2.22	2.19	120.82
<b>Meadowlands</b>	Beds	78	24	12	14	128
	OccRt	70.00%	29.78%	50.16%	67.85%	60.37%
	ADC	54.60	7.15	6.02	9.50	77.27
<b>Jersey City Medical Center</b>	Beds	152	26	22	37	237
	OccRt	79.53%	58.38%	7.45%	67.93%	68.70%
	ADC	120.88	15.18	1.64	25.13	162.83
<b>Countywide Averages</b>	Beds	144	19	15	18	195
	OccRt	70.41%	49.74%	28.46%	64.22%	64.76%
	ADC	101.51	9.20	4.13	11.56	126.39

2009						
		Med/Surg	OB/GYN	PEDs	ICU/CCU	Combined
<b>Christ</b>	Beds	181	17	15	18	231
	OccRt	75.23%	53.73%	55.18%	75.83%	72.39%
	ADC	136.16	9.13	8.28	13.65	167.22
<b>Hoboken</b>	Beds	127	22	15	15	179
	OccRt	63.68%	57.02%	30.34%	45.77%	58.57%
	ADC	80.87	12.55	4.55	6.87	104.83
<b>Bayonne</b>	Beds	156	0	16	14	186
	OccRt	49.99%	0%	4.85%	74.19%	47.93%
	ADC	77.98	0	0.78	10.39	89.14
<b>Palisades</b>	Beds	144	20	6	10	180
	OccRt	71.71%	54.60%	36.21%	60.19%	67.99%
	ADC	103.27	10.92	2.17	6.02	122.38
<b>Meadowlands</b>	Beds	78	24	12	14	128
	OccRt	69.57%	25.46%	45.68%	65.64%	58.63%
	ADC	54.26	6.11	5.48	9.19	75.04
<b>Jersey City Medical Center</b>	Beds	153	26	10	44	233
	OccRt	91.60%	57.96%	43.95%	57.42%	79.34%
	ADC	140.14	15.07	4.39	25.27	184.87
<b>Countywide Averages</b>	Beds	140	18	12	19	190
	OccRt	70.64%	49.34%	34.66%	62.07%	65.39%
	ADC	98.72	8.96	4.28	11.90	123.92

2010						
		Med/Surg	OB/GYN	PEDs	ICU/CCU	Combined
<b>Christ</b>	Beds	156	17	21	18	212
	OccRt	76.64%	56.04%	25.91%	61.66%	68.69%
	ADC	119.56	9.53	5.44	11.10	145.63
<b>Hoboken</b>	Beds	124	22	15	15	176
	OccRt	64.06%	53.01%	23.20%	45.15%	57.59%
	ADC	79.44	11.66	3.48	6.77	101.35
<b>Bayonne</b>	Beds	127	0	17	14	158
	OccRt	64.51%	0%	1.76%	70.16%	58.26%
	ADC	81.92	0	0.30	9.82	92.04
<b>Palisades</b>	Beds	144	20	6	10	180
	OccRt	67.26%	56.60%	52.69%	79.89%	66.29%
	ADC	96.85	11.32	3.16	7.99	119.32
<b>Meadowlands</b>	Beds	78	24	12	14	128
	OccRt	58.38%	21.59%	29.11%	50.00%	47.82%
	ADC	45.54	5.18	3.49	7.00	61.21
<b>Jersey City Medical Center</b>	Beds	152	26	10	44	232
	OccRt	86.66%	63.06%	47.04%	63.89%	77.99%
	ADC	131.73	16.40	4.70	28.11	180.93
<b>Countywide Averages</b>	Beds	130	18	14	19	181
	OccRt	71.07%	49.62%	25.41%	61.56%	64.50%
	ADC	92.51	9.01	3.43	11.80	116.75

2011						
		Med/Surg	OB/GYN	PEDs	ICU/CCU	Combined
<b>Christ</b>	Beds	156	16	21	18	211
	OccRt	75.71%	64.85%	21.66%	56.96%	67.90%
	ADC	118.10	10.38	4.55	10.25	143.28
<b>Hoboken</b>	Beds	117	22	15	15	169
	OccRt	54.74%	53.49%	23.73%	35.87%	50.15%
	ADC	64.04	11.77	3.56	5.38	84.75
<b>Bayonne</b>	Beds	127	10	17	14	158
	OccRt	52.23%	0%	1.32%	73.60%	48.65%
	ADC	66.37	0	0.22	10.30	76.87
<b>Palisades</b>	Beds	144	20	6	10	180
	OccRt	66.93%	52.21%	69.86%	78.77%	66.05%
	ADC	96.38	10.44	4.19	7.88	118.89
<b>Meadowlands</b>	Beds	57	26	16	14	113
	OccRt	67.87%	19.74%	29.71%	43.87%	48.42%
	ADC	38.69	5.13	4.75	6.14	54.71
<b>Jersey City Medical Center</b>	Beds	152	26	10	44	232
	OccRt	71.35%	67.89%	43.81%	62.86%	66.16%
	ADC	108.45	17.65	4.38	27.66	158.14
<b>Countywide Averages</b>	Beds	126	18	14	19	177
	OccRt	65.34%	50.33%	25.48%	58.79%	58.89%
	ADC	82.00	9.23	3.61	11.27	106.11

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

**Appendix D – Insurance Plans**

CHRIST HOSPITAL LIST OF INSURANCE PLANS AND REVENUE/PERCENTAGE BY PATIENT TYPE 2010								
INSURANCE PLANS	INPATIENT		OTHER PATIENT TYPE		SAME DAY SURGERY		TOTAL	
	Revenue	Pct	Revenue	Pct	Revenue	Pct	Revenue	Pct
10641 AETNNUSHC SENIOR	\$ 1,366,498.00	5.45%	\$ 296,725.00	1.74%	\$ 125,861.00	1.35%	\$ 1,789,084.00	3.48%
10710 AETNNUSHC/ HMO	\$ 718,175.00	2.87%	\$ 436,103.00	2.56%	\$ 253,276.00	2.72%	\$ 1,407,554.00	2.74%
10840 AETNA/USHC POS	\$ 1,848,312.00	7.38%	\$ 1,042,584.00	6.11%	\$ 580,268.00	6.24%	\$ 3,471,164.00	6.75%
10942 AETNNUSHC/P PO	\$ 220,724.00	0.88%	\$ 47,489.00	0.28%	\$ 43,840.00	0.47%	\$ 312,053.00	0.61%
12501 ALICARE	\$ 4,970.00	0.02%	\$ 10,783.00	0.06%	\$ 1,640.00	0.02%	\$ 17,393.00	0.03%
14110 AMERIVANTA GE HMO 0	\$ 280,404.00	1.12%	\$ 17.00	0.00%	\$ 3,956.00	0.04%	\$ 284,377.00	0.55%
14210 HEALTHFIRST	\$ 523,494.00	2.09%	\$ 453.00	0.00%		0.00%	\$ 523,947.00	1.02%
14410 EVERCARE IP		0.00%	\$ 913.00	0.01%		0.00%	\$ 913.00	0.00%
14610 AMERIVANTA GE HMO 0		0.00%	\$ 83,326.00	0.49%	\$ 25,028.00	0.27%	\$ 108,354.00	0.21%
14710 HEALTHFIRST IP		0.00%	\$ 83,406.00	0.49%	\$ 37,449.00	0.40%	\$ 120,855.00	0.24%
14910 HEALTHFIRST OP SEC		0.00%	\$ 34.00	0.00%		0.00%	\$ 34.00	0.00%
15001 AMALGAMATE D INSURA	\$ 52,636.00	0.21%	\$ 18,505.00	0.11%	\$ 13,125.00	0.14%	\$ 84,266.00	0.16%
15610 AMERICHoice PRSNL		0.00%	\$ 69.00	0.00%	\$ 38,241.00	0.41%	\$ 38,310.00	0.07%
16415 AMERIGROUP/ MEDICAL	\$ 705,373.00	2.82%	\$ 782,303.00	4.58%	\$ 112,089.00	1.20%	\$ 1,599,765.00	3.11%
16440 AMERIGROUP CAID 2N		0.00%	\$ 12.00	0.00%		0.00%	\$ 12.00	0.00%
16601 AMERIHEALTH	\$ 24,691.00	0.10%	\$ 23,042.00	0.14%	\$ 10,531.00	0.11%	\$ 58,264.00	0.11%
16615 AMERIHEALTH	\$ 14,969.00	0.06%	\$ 11,703.00	0.07%	\$ 15,455.00	0.17%	\$ 42,127.00	0.08%
16810 AMERICHoice MCARE	\$ 481,794.00	1.92%	\$ 103,839.00	0.61%	\$ 9,240.00	0.10%	\$ 594,873.00	1.16%
16815 AMERICHoice	\$ 2,911,766.00	11.62%	\$ 1,904,143.00	11.16%	\$ 1,334,862.00	14.35%	\$ 6,150,771.00	11.96%
17001 APWU HEALTH PLAN	\$ 3,406.00	0.01%	\$ 4,605.00	0.03%		0.00%	\$ 8,011.00	0.02%
17401 FISERY HEALTH PLAN	\$ 42,124.00	0.17%	\$ 8,720.00	0.05%	\$ 6,187.00	0.07%	\$ 57,031.00	0.11%
17601 BENESIGHT PPO		0.00%	\$ 189.00	0.00%		0.00%	\$ 189.00	0.00%
17810 AMERICHoice MCAID		0.00%	\$ 118,473.00	0.69%	\$ 72,775.00	0.78%	\$ 191,248.00	0.37%

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CHRIST HOSPITAL LIST OF INSURANCE PLANS AND REVENUE/PERCENTAGE BY PATIENT TYPE 2010								
INSURANCE PLANS	INPATIENT		OTHER PATIENT TYPE		SAME DAY SURGERY		TOTAL	
	Revenue	Pct	Revenue	Pct	Revenue	Pct	Revenue	Pct
18201 HEALTHFIRST NJ IP	\$ 283,300.00	1.13%	\$ 240.00	0.00%	\$ 2,974.00	0.03%	\$ 286,514.00	0.56%
18301 HEALTHFIRST NJ OP	\$ 3,441.00	0.01%	\$ 245,030.00	1.44%	\$ 15,424.00	0.17%	\$ 263,895.00	0.51%
18401 HEALTHFIRST NJ SDS		0.00%	\$ 896.00	0.01%	\$ 71,464.00	0.77%	\$ 72,360.00	0.14%
18710 HEALTHFIRST NJ OP		0.00%	\$ 1,916.00	0.01%		0.00%	\$ 1,916.00	0.00%
19501 HORIZON BC/BS S		0.00%	\$ 59.00	0.00%		0.00%	\$ 59.00	0.00%
19801 HORIZON ACCESS OP		0.00%	\$ 1,948,540.00	11.42%	\$ 1,653,706.00	17.78%	\$ 3,602,246.00	7.01%
20110 HORIZON BCBS HMO 0	\$ -	0.00%	\$ 159,791.00	0.94%	\$ 156,567.00	1.68%	\$ 316,358.00	0.62%
20210 HORIZON INDEMN OP		0.00%	\$ 230,538.00	1.35%	\$ 142,096.00	1.53%	\$ 372,634.00	0.72%
20310 HORIZON BCBS PPO 0	\$ -	0.00%	\$ 1,419,751.00	8.32%	\$ 1,082,452.00	11.64%	\$ 2,502,203.00	4.87%
20410 HORIZON CARE HMO 0	\$ -	0.00%	\$ 240,290.00	1.41%	\$ 78,249.00	0.84%	\$ 318,539.00	0.62%
20701 HORIZON BC/BS I	\$ 4,240.00	0.02%		0.00%		0.00%	\$ 4,240.00	0.01%
20942 HORIZON BC/BS P		0.00%	\$ 479.00	0.00%		0.00%	\$ 479.00	0.00%
21210 HORIZON DIRCT ACCE	\$ 2,355,973.00	9.40%	\$ 492.00	0.00%	\$ 5,767.00	0.06%	\$ 2,362,232.00	4.59%
21310 HORIZON BCBS POS 0	\$ -	0.00%	\$ 172,171.00	1.01%	\$ 209,248.00	2.25%	\$ 381,419.00	0.74%
21410 HORIZON HMO IP	\$ 149,725.00	0.60%		0.00%		0.00%	\$ 149,725.00	0.29%
21610 HORIZON INDEMN IP	\$ 319,463.00	1.28%	\$ 79.00	0.00%		0.00%	\$ 319,542.00	0.62%
21710 HORIZON PPO IP	\$ 1,321,638.00	5.28%	\$ 1,882.00	0.01%	\$ 5,648.00	0.06%	\$ 1,329,168.00	2.58%
21810 HORIZON MEDICARE I	\$ 275,812.00	1.10%		0.00%		0.00%	\$ 275,812.00	0.54%
21910 HORIZON POS IP	\$ 240,397.00	0.96%		0.00%		0.00%	\$ 240,397.00	0.47%
22801 CIGNA BEHAV HLTH 2	\$ 74,804.00	0.30%	\$ 2,663.00	0.02%		0.00%	\$ 77,467.00	0.15%
22901 VALUE OPTIONS		0.00%	\$ -	0.00%		0.00%	\$ -	0.00%

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INSURANCE PLANS	INPATIENT		OTHER PATIENT TYPE		SAME DAY SURGERY		TOTAL	
	Revenue	Pct	Revenue	Pct	Revenue	Pct	Revenue	Pct
23210 CIGNNHMO HMO	\$ 49,519.00	0.20%	\$ 68,821.00	0.40%	\$ 37,100.00	0.40%	\$ 155,440.00	0.30%
23340 CIGNA PPO SECONDAR		0.00%	\$ 869.00	0.01%		0.00%	\$ 869.00	0.00%
23342 CIGNA/PPO PPO	\$ 295,268.00	1.18%	\$ 127,709.00	0.75%	\$ 44,913.00	0.48%	\$ 467,890.00	0.91%
23710 CIGNA POS	\$ 542,986.00	2.17%	\$ 611,063.00	3.58%	\$ 294,154.00	3.16%	\$ 1,448,203.00	2.82%
25210 DEVON HEALTH	\$ 4,041.00	0.02%	\$ 8,518.00	0.05%	\$ 26,523.00	0.29%	\$ 39,082.00	0.08%
25410 CHESTERFIELD RESO		0.00%	\$ 7,856.00	0.05%	\$ 502.00	0.01%	\$ 8,358.00	0.02%
25501 COMMERCIAL/ ALL OTH	\$ 58,247.00	0.23%	\$ 185,865.00	1.09%	\$ 50,072.00	0.54%	\$ 294,184.00	0.57%
25601 COMMERCIAL SUB ACU		0.00%	\$ 16.00	0.00%		0.00%	\$ 16.00	0.00%
33610 EMPIREIWELL CHOICE	\$ 17,847.00	0.07%	\$ 24,007.00	0.14%	\$ 17,571.00	0.19%	\$ 59,425.00	0.12%
33740 EMPIREIWELL CHOICE	\$ 471,827.00	1.88%	\$ 184,387.00	1.08%	\$ 187,703.00	2.02%	\$ 843,917.00	1.64%
33842 EMPIREIWELL CHOICE	\$ 1,045,753.00	4.17%	\$ 288,543.00	1.69%	\$ 347,989.00	3.74%	\$ 1,682,285.00	3.27%
33901 EMPIREIWELL CHOICE	\$ 7,922.00	0.03%	\$ 12,179.00	0.07%	\$ 21,696.00	0.23%	\$ 41,797.00	0.08%
36301 FIRST HEALTH PPO		0.00%	\$ 527.00	0.00%	\$ 14,275.00	0.15%	\$ 14,802.00	0.03%
38501 GEHA INSURANCE	\$ 14,669.00	0.06%	\$ 8,303.00	0.05%		0.00%	\$ 22,972.00	0.04%
39501 GROUP HLTH INC/GHI	\$ 179,431.00	0.72%	\$ 3,973.00	0.02%		0.00%	\$ 183,404.00	0.36%
39601 GROUP HLTH INC 2ND		0.00%	\$ 325,675.00	1.91%	\$ 98,841.00	1.06%	\$ 424,516.00	0.83%
40210 GREAT WEST HLTCARE	\$ 89,592.00	0.36%	\$ 62,278.00	0.36%	\$ 28,356.00	0.30%	\$ 180,226.00	0.35%
41501 GUARDIAN LIFE		0.00%	\$ 4,788.00	0.03%	\$ 2,595.00	0.03%	\$ 7,383.00	0.01%
42001 HARTFORD LIFE		0.00%	\$ 830.00	0.00%		0.00%	\$ 830.00	0.00%
42610 HEALTH PARTNERS		0.00%	\$ 8,094.00	0.05%	\$ 8,032.00	0.09%	\$ 16,126.00	0.03%
43910 HIP NY EPO	\$ 5,846.00	0.02%	\$ 24,255.00	0.14%	\$ 24,695.00	0.27%	\$ 54,796.00	0.11%
44010 HIP OF NY HMO H	\$ 10,037.00	0.04%	\$ 28,075.00	0.16%		0.00%	\$ 38,112.00	0.07%
44215 HORIZON MERCY HEAL	\$ 3,338,999.00	13.33%	\$ 2,314,777.00	13.56%	\$ 480,641.00	5.17%	\$ 6,134,417.00	11.93%
45510 HUMANA HLTHCRE HMO		0.00%	\$ 2,858.00	0.02%		0.00%	\$ 2,858.00	0.01%

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CHRIST HOSPITAL LIST OF INSURANCE PLANS AND REVENUE/PERCENTAGE BY PATIENT TYPE 2010								
INSURANCE PLANS	INPATIENT		OTHER PATIENT TYPE		SAME DAY SURGERY		TOTAL	
	Revenue	Pct	Revenue	Pct	Revenue	Pct	Revenue	Pct
45710 HUMANA MEDICARE IP	\$ 17,761.00	0.07%		0.00%		0.00%	\$ 17,761.00	0.03%
45810 HUMANA MEDICARE OP		0.00%	\$ 296.00	0.00%	\$ 2,129.00	0.02%	\$ 2,425.00	0.00%
47001 INS DESIGN ADMIN		0.00%		0.00%	\$ 2,791.00	0.03%	\$ 2,791.00	0.01%
50001 LIBERTY MUTUAL		0.00%	\$ 338.00	0.00%		0.00%	\$ 338.00	0.00%
50020 LIBERTY MUTUAL C	\$ 33,085.00	0.13%	\$ 375.00	0.00%		0.00%	\$ 33,460.00	0.07%
52042 MAGNET/MAG NACARE P	\$ 457,689.00	1.83%	\$ 223,035.00	1.31%	\$ 130,278.00	1.40%	\$ 811,002.00	1.58%
55501 MAIL HANDLER BNFT	\$ 104,372.00	0.42%	\$ 133,714.00	0.78%	\$ 50,915.00	0.55%	\$ 289,001.00	0.56%
56101 MAGNET DIRECT PLUS	\$ 4,999.00	0.02%	\$ 6,132.00	0.04%	\$ 1,232.00	0.01%	\$ 12,363.00	0.02%
56201 ANTHEM HEALTH & LI		0.00%	\$ 305.00	0.00%		0.00%	\$ 305.00	0.00%
57110 MEDICARE HMO	\$ 115,334.00	0.46%		0.00%		0.00%	\$ 115,334.00	0.22%
57201 WELLCARE HLTH NJ	\$ 391,861.00	1.56%	\$ 528.00	0.00%	\$ 608.00	0.01%	\$ 392,997.00	0.76%
57301 WELLCARE HLTH NJ 0	\$ -	0.00%	\$ 88,137.00	0.52%	\$ 79,874.00	0.86%	\$ 168,011.00	0.33%
57410 MEDICARE HMO OTHER	\$ 10,095.00	0.04%	\$ 7,504.00	0.04%		0.00%	\$ 17,599.00	0.03%
62642 MULTIPLAN PPO	\$ 138,617.00	0.55%	\$ 84,266.00	0.49%	\$ 29,979.00	0.32%	\$ 252,862.00	0.49%
62742 CHN SOLUTIONS	\$ 1,605.00	0.01%	\$ 5,196.00	0.03%	\$ 5,656.00	0.06%	\$ 12,457.00	0.02%
63001 NALC		0.00%	\$ 373.00	0.00%		0.00%	\$ 373.00	0.00%
67010 HMO (OTHER) H		0.00%	\$ 1,150.00	0.01%		0.00%	\$ 1,150.00	0.00%
67710 OXFORD GOVT M	\$ 770,481.00	3.08%	\$ 681,838.00	4.00%	\$ 172,552.00	1.85%	\$ 1,624,871.00	3.16%
67840 OXFORD FREEDOM P	\$ 255,066.00	1.02%	\$ 212,412.00	1.24%	\$ 56,130.00	0.60%	\$ 523,608.00	1.02%
67910 OXFORD LIBERTY H	\$ 499,591.00	1.99%	\$ 218,760.00	1.28%	\$ 96,744.00	1.04%	\$ 815,095.00	1.59%
68210 QUALCARE PPO	\$ 70,199.00	0.28%	\$ 225,160.00	1.32%	\$ 179,035.00	1.92%	\$ 474,394.00	0.92%
68310 QUALCARE HMO PRIMR		0.00%	\$ 9,340.00	0.05%	\$ 12,674.00	0.14%	\$ 22,014.00	0.04%
68410 EMBLEM HEALTH	\$ 45,352.00	0.18%	\$ 21,288.00	0.12%	\$ 16,701.00	0.18%	\$ 83,341.00	0.16%
69115 HEALTHNET NJ HLTHY	\$ 107,745.00	0.43%	\$ 95,287.00	0.56%	\$ 16,703.00	0.18%	\$ 219,735.00	0.43%
69642 HEALTHNET/A CS P	\$ 4,087.00	0.02%	\$ 5,789.00	0.03%	\$ 6,588.00	0.07%	\$ 16,464.00	0.03%

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CHRIST HOSPITAL LIST OF INSURANCE PLANS AND REVENUE/PERCENTAGE BY PATIENT TYPE 2010								
INSURANCE PLANS	INPATIENT		OTHER PATIENT TYPE		SAME DAY SURGERY		TOTAL	
	Revenue	Pct	Revenue	Pct	Revenue	Pct	Revenue	Pct
69710 HEALTHNET/A CS H	\$ 40,592.00	0.16%	\$ 30,048.00	0.18%	\$ 58,711.00	0.63%	\$ 129,351.00	0.25%
69840 HEALTHNET/A CS P	\$ 73,868.00	0.29%	\$ 62,224.00	0.36%	\$ 84,957.00	0.91%	\$ 221,049.00	0.43%
71610 BEECHSTREET PPO		0.00%	\$ 1,454.00	0.01%		0.00%	\$ 1,454.00	0.00%
71710 BEECHSTREET PPO	\$ 115,076.00	0.46%	\$ 19,472.00	0.11%	\$ 5,546.00	0.06%	\$ 140,094.00	0.27%
71842 PRIVATE HEALTH CAR	\$ 54,203.00	0.22%	\$ 39,665.00	0.23%	\$ 88,811.00	0.95%	\$ 182,679.00	0.36%
72001 PRINCIPAL MUTUAL L		0.00%	\$ 177.00	0.00%		0.00%	\$ 177.00	0.00%
85502 HORIZON HC ADMINIS		0.00%	\$ 4,367.00	0.03%		0.00%	\$ 4,367.00	0.01%
86210 UNISON HEALTH PLN		0.00%	\$ 846.00	0.00%		0.00%	\$ 846.00	0.00%
92201 LOCAL 148		0.00%	\$ 116.00	0.00%		0.00%	\$ 116.00	0.00%
92901 LOCAL 210		0.00%	\$ 11,024.00	0.06%	\$ 2,500.00	0.03%	\$ 13,524.00	0.03%
93701 LOCAL 284		0.00%	\$ 2,097.00	0.01%		0.00%	\$ 2,097.00	0.00%
94201 LOCAL 348		0.00%	\$ 2,094.00	0.01%		0.00%	\$ 2,094.00	0.00%
96301 LOCAL 1199	\$ 60,543.00	0.24%	\$ 74,475.00	0.44%	\$ 31,257.00	0.34%	\$ 166,275.00	0.32%
96401 LOCAL 1964		0.00%	\$ 1,047.00	0.01%		0.00%	\$ 1,047.00	0.00%
97110 UNITED BEHAV HLTH	\$ 45,780.00	0.18%	\$ 3,504.00	0.02%		0.00%	\$ 49,284.00	0.10%
97401 UNITED HEALTHCARE		0.00%	\$ 5,258.00	0.03%	\$ 9,931.00	0.11%	\$ 15,189.00	0.03%
98410 UNITED HEALTHCARE		0.00%	\$ 401.00	0.00%		0.00%	\$ 401.00	0.00%
98801 UNITED HEALTHCARE	\$ 1,730.00	0.01%	\$ 4,389.00	0.03%	\$ 1,587.00	0.02%	\$ 7,706.00	0.01%
98810 UNITED HEALTHCARE	\$ 36,493.00	0.15%	\$ 42,753.00	0.25%	\$ 21,661.00	0.23%	\$ 100,907.00	0.20%
98840 UNITED HEALTHCARE	\$ 941,518.00	3.76%	\$ 837,688.00	4.91%	\$ 270,635.00	2.91%	\$ 2,049,841.00	3.99%
98841 UNITED HEALTHCARE	\$ 10,200.00	0.04%		0.00%	\$ 927.00	0.01%	\$ 11,127.00	0.02%
98842 UNITED HEALTHCARE	\$ 186,621.00	0.74%	\$ 109,950.00	0.64%	\$ 67,270.00	0.72%	\$ 363,841.00	0.71%
99201 UNIVERSITY HEALTH		0.00%	\$ 260.00	0.00%		0.00%	\$ 260.00	0.00%
99215 UNIVERSITY HEALTH	\$ 96,354.00	0.38%	\$ 85,710.00	0.50%	\$ 5,209.00	0.06%	\$ 187,273.00	0.36%
Grand Total	\$ 25,051,030.00	100.00%	\$ 17,066,781.00	100.00%	\$ 9,302,667.00	100.00%	\$ 51,420,478.00	100.00%

Source: Christ Hospital and Applicant