

From: [Mowry, Jill](#)
To: [Fick, Mackinzey](#)
Cc: [Williams, Laurie](#); [Jordan, Jill](#)
Subject: RE: CON Application
Date: Friday, November 15, 2024 4:10:48 PM
Attachments: [image001.png](#)
[image005.png](#)
[St. Clare daVinci CON additional questions 11.8.24 \(1\).docx](#)

Hello Mackinzey,

Please find the revised additional clarification questions for the St. Clare daVinci #6117 HS attached. The updates specific to this most recent request is as follows:

- 1. Provide revenues and expenses for year 2028.**

After speaking with Mackenzie, it was confirmed she meant 2027. There was a typo on our original submission that we missed and has been corrected for the years shown.



SERVICE-SPECIFIC REVENUES AND EXPENSES

Project Title: SSM St. Clare Hospital DaVinci **Project #:** #6117 HS

Historical Financial Data for Latest Three Full Years plus Projections Through Three Full Years Beyond Project Completion

Use an individual form for each affected service with a sufficient number of copies of this form to cover entire period, and fill in the years in the appropriate blanks.

	Year		
	2025	2026	2027
Amount of Utilization:*	159	240	300
Revenue:			
Average Charge**	\$46,714	\$51,643	\$53,199
Gross Revenue	\$7,427,498	\$12,394,330	\$15,959,612
Revenue Deductions	4,966,317	8,917,570	11,545,078
Operating Revenue	2,461,181	3,476,760	4,414,534
Other Revenue	0	0	0
TOTAL REVENUE	\$2,461,181	\$3,476,760	\$4,414,534
Expenses:			
Direct Expenses			
Salaries	772,839	1,334,280	1,745,365
Fees	239,521	415,439	543,589
Supplies	508,553	828,661	1,070,930
Other	190,389	323,970	423,399
TOTAL DIRECT	\$1,711,303	\$2,902,350	\$3,783,284
Indirect Expenses			
Depreciation	292,444	292,444	292,444
Interest***	0	0	0
Rent/Lease	0	0	0
Overhead****	228,630	390,863	510,973
TOTAL INDIRECT	\$521,074	\$683,307	\$803,417
TOTAL EXPENSES	\$2,232,377	\$3,585,657	\$4,586,700
NET INCOME (LOSS):	\$228,805	-\$108,897	-\$172,167

*Utilization will be measured in "patient days" for licensed beds, "procedures" for equipment, or other appropriate units of measure specific to the service affected.

**Indicate how the average charge/procedure was calculated.

2. The utilization and revenues/expenses do not match, they should match. Please revise and resubmit whichever is incorrect.

	2025	2026	2027
	Yr 1	Yr 2	Yr 3
Urology	15	60	84
Colorectal	24	36	48
Bariatrics	60	72	84
General	60	72	84
Totals	159	240	300

Please advise if you have additional questions.

Have a great weekend.

Thank you,

Jill

Jill M. Mowry | Market Director – Strategy and Business Development

SSM Health – St. Louis Region | South & Central Markets

Executive Assistant: Kathy Zingrich | 636-496-2601

1015 Bowles Ave.

Fenton, MO 63126

Office: 636-496-2520

Cell: 314-960-0006

Jill.mowry@ssmhealth.com

ssmhealth.com



From: Fick, Mackinzey <Mackinzey.Fick@health.mo.gov>

Sent: Friday, November 15, 2024 11:23 AM

To: Mowry, Jill <Jill.Mowry@ssmhealth.com>

Cc: Williams, Laurie <Laurie.Williams@ssmhealth.com>; Jordan, Jill <Jill.Jordan@ssmhealth.com>

Subject: RE: CON Application

CAUTION: This email originated from outside of the SSM Health organization. Do not click links or open attachments unless you recognize the sender and know the content is safe. Think this message could be malicious? Click the Report button or forward it to Phishing@ssmhealth.com

Jill,

After reviewing, some additional information is still needed.

- The utilization and revenues/expenses do not match, they should match. Please revise and resubmit whichever is incorrect. I do see that you went off the incremental value – revenues and expenses should be on the total number.

This information is needed by Friday, November 22nd, 2024.

Mackinzey Fick

Assistant Program Coordinator, Certificate of Need

Department of Health and Senior Services

920 Wildwood Drive, P.O. Box 570

Jefferson City, MO 65102

OFFICE: 573-751-6403

FAX: 573-751-7894

EMAIL: mackinzey.fick@health.mo.gov

<http://health.mo.gov/information/boards/certificateofneed/index.php>

From: Mowry, Jill <Jill.Mowry@ssmhealth.com>

Sent: Thursday, November 14, 2024 10:17 AM

To: Fick, Mackinzey <Mackinzey.Fick@health.mo.gov>

Cc: Williams, Laurie <Laurie.Williams@ssmhealth.com>; Jordan, Jill <Jill.Jordan@ssmhealth.com>

Subject: RE: CON Application

Hello Mackinzey,

I've updated the file to include the additional information requested. Please find the attached outlining each question with supporting information.

Thank you,

Jill

From: Fick, Mackinzey <Mackinzey.Fick@health.mo.gov>

Sent: Friday, November 8, 2024 4:02 PM

To: Mowry, Jill <Jill.Mowry@ssmhealth.com>

Subject: CON Application

CAUTION: This email originated from outside of the SSM Health organization. Do not click links or open attachments unless you recognize the sender and know the content is safe. Think this message could be malicious? Click the Report button or forward it to Phishing@ssmhealth.com

Jill,

After review of application #6117 HS, some additional information is needed.

- Provide documentation or methods of how the fair market value was determined.
- Provide a new timeline.
- Statue 197.315.4. states If any person proposes to develop any new institutional health care service without a certificate of need as required by sections 197.300 to 197.366, the committee shall notify the attorney general, and he shall apply for an injunction or other appropriate legal action in any court of this state against that person. Please advise why the CON timeline indicates the new equipment will be implemented prior to CON approval.

- Provide the projects service area. This is usually a set of counties or zip codes.
- Provide a clearer copy of the newspaper article.
- Provide utilization and number of units for facilities with similar services.
- Provide revenues and expenses for year 2028.
- The utilization and revenues/expenses do not match, they should match. Please revise and resubmit whichever is incorrect.

This information is needed by Monday, November 18th, 2024.

Mackinzey Fick

Assistant Program Coordinator, Certificate of Need

Department of Health and Senior Services

920 Wildwood Drive, P.O. Box 570

Jefferson City, MO 65102

OFFICE: 573-751-6403

FAX: 573-751-7894

EMAIL: mackinzey.fick@health.mo.gov

<http://health.mo.gov/information/boards/certificateofneed/index.php>

Confidentiality Notice: This email message, including any attachments, is for the sole use of the intended recipient(s) and may contain confidential and privileged information. Any unauthorized review, use, disclosure or distribution is prohibited. If you are not the intended recipient, please contact the sender by reply email and destroy all copies of the original message.

Confidentiality Notice: This email message, including any attachments, is for the sole use of the intended recipient(s) and may contain confidential and privileged information. Any unauthorized review, use, disclosure or distribution is prohibited. If you are not the intended recipient, please contact the sender by reply email and destroy all copies of the original message.

St. Clare Hospital CON application #6117 HS

Additional information request email dated 11/8/2024

1. **Provide documentation or methods of how the fair market value was determined.**
Worked with legal, finance and Intuitive using the original purchase price of the unit in 2021 was \$1,609,500 and depreciation financial modeling to establish a FMV of \$919,714.

2. **Provide a new timeline.**
 - a. SSM Capital Approval for new unit at St. Mary’s Hospital June 2024 allowing the old unit to shift to St. Clare Hospital
 - b. MO CON LOI accepted May 20, 2024, team working to gather all required information per project planning.
 - c. Project planning June-Aug 2024
 - d. CON application submitted to state Oct 2, 2024 and asked to hold it and resubmit on Oct 30th.
 - e. Robot move and implementation Oct-Nov 2024 – earlier than anticipated
 - f. Anticipated CON approval January 2024

3. **Please advise why the CON timeline indicates the new equipment will be implemented prior to CON approval.**
Originally planned to run the CON application process in parallel to the project planning with goal to submit and gain approval prior to implementation. Project moved quicker than planned and unexpected staffing resource challenges delayed the CON application process causing us to miss the Sept full app submission date. Full application was submitted to the state on Oct 2, 2024 and we were asked to hold it and resubmit it on Oct 30, 2024.

4. **Provide the projects service area. This is usually a set of counties or zip codes.**

USPS Zip	City Name		USPS Zip	City Name
63010	Arnold		63073	Pacific
63016	Cedar Hill		63088	Valley Park
63021	Ballwin		63122	Saint Louis
63025	Eureka		63123	Saint Louis
63026	Fenton		63125	Saint Louis
63039	Gray Summit		63126	Saint Louis
63049	High Ridge		63127	Saint Louis
63051	House Springs		63128	Saint Louis
63052	Imperial		63129	Saint Louis
63053	Imperial		63151	Saint Louis
63057	Imperial		63040	Grover
63069	Pacific		62236	Columbia
			62298	Waterloo

5. Provide a clearer copy of the newspaper article.

WEDNESDAY, SEPTEMBER 4, 2024 | M1

CLASSIFIED

Dogs

Pincher Pups, Black & shot, Worming, Dew and Tails done, \$700. 704-6903

Shetland Sheepdog Pups! 8 wks, AKC, wormed, shots, pedicaps parents on site, \$1000; 636-485-0887

Poodle Pups. AKC. & 6 Females. Cream, & Red, Health Wmty. \$750 (573) 619-3357

Merchandise Wanted

Postcards, Coming to Missouri, postcards & Memorabilia, 203-767-2407

Historian will pay top \$\$ for Japanese WW II relics 1369

Garage Sales

Overland Heights Front Run / Springtree vision Garage Sale located between 1st & Ameling Rd off Front Run Dr or Rule Ave on, Saturday, Sept 7 25+ families - something for everyone!

Public Notices

The Circuit Court of St. Louis County, Missouri

Anthony Lamar Kelley Jr.

4SL-DR00788
.40

Notice for Change of Name of Minor Child

Anthony Lamar Kelley is the Petitioner in this case by Next Friend.

Public Notices

Anthony Lamar Kelley has filed consent to Minor Child's Change of Name is the father of Petitioner

The court finds that the change of name would be proper and would not be detrimental to the interests of any other person.

The name of Petitioner is changed as follows:
From **Anthony Lamar Kelley**
To **J'Aiden Isaiah Alexander**
Birth Date 11/07/2019

Change of Birth Records
It is further ordered that the Division of Health and Senior Services, Bureau of Vital Statistics for the State of Missouri alter the birth certificate of Petitioner to reflect this judgment. This judgment shall be mailed by the Petitioner to the Division of Health and Senior Services.

Notice
Notice of the change of name shall be published at least once each week for three consecutive weeks in the following newspaper of general circulation: St. Louis Countian

Court Costs
Court Costs are to be paid from the court cost deposit(s) previously posted.

/s/
Judge
Date 04/24/24

NOTICE OF PUBLIC SALE

Transport Funding, LLC, Overland Park, Kansas will offer the following property at public sale at Arrow Truck Sales, Inc. 2100 Liebler Rd., Troy, IL 62294 on 09/13/2024 commencing at 10:00am
**2016 VOLVO VNL780 I
RAISED ROOF OF SLEEPER
4V4NC9EHXGN955406**

The property may be inspected by appointment prior to the sale.

Public Notices

NOTICE OF PUBLIC SALE

Transport Funding, LLC, Overland Park, Kansas will offer the following property at public sale at Arrow Truck Sales, Inc. 2100 Liebler Rd., Troy, IL 62294 on 09/16/2024 commencing at 10:00am
**2017 INTL PROSTAR I
MID ROOF SLEEPER
3HSDJAPR6HN638837**
The property may be inspected by appointment prior to the sale.

Inquiries:
618-667-1236
Cash sales only.

Notice of Self Storage Sale

Please take notice TriLink Storage Hazelwood located at 8784 Pershall Rd Hazelwood, MO 63042 intends to release for sale by auction the personal property stored from the below listed units. The sale will occur as an online auction via www.storageauctions.com on 9/11/2024 at 10:00AM. Unit #307; Unit #318; Unit #706; Unit #762; Unit #763; Unit #805; Unit #808; Unit #810. This sale or units may be withdrawn at any time without notice. Certain terms and conditions apply. See manager for details.

SSM Health is applying for two certificates of needs from Missouri Health facilities review committee. One to support adding a DaVinci Xi dual console surgical robot to support the growth of the academic surgical needs at SSM Health St. Mary's Hospital - St. Louis. The second is to relocate the existing single console DaVinci Xi to SSM Health St. Clare Hospital - Fenton to support the increasing robotic surgery needs of the incoming surgeons.

Bids and Proposals

NOTICE TO CONTRACTORS

6. Provide utilization and number of units for facilities with similar services.

We only have internal data on SSM Health Hospitals and there are none located within the primary service area of St. Clare Hospital. We did attempt to retrieve data from other hospitals within the primary service area (Mercy, St. Luke's and BJC MO Bap) who declined to share.

7. Provide revenues and expenses for year 2028.

After speaking with Mackenzie, it was confirmed she meant 2027. There was a typo on our original submission that we missed and has been corrected for the years shown.



Certificate of Need Program

SERVICE-SPECIFIC REVENUES AND EXPENSES

Project Title: SSM St. Clare Hospital DaVinci **Project #:** #6117 HS

Historical Financial Data for Latest Three Full Years plus Projections Through Three Full Years Beyond Project Completion

Use an individual form for each affected service with a sufficient number of copies of this form to cover entire period, and fill in the years in the appropriate blanks.

	Year		
	2025	2026	2027
Amount of Utilization:*	159	240	300
Revenue:			
Average Charge**	\$46,714	\$51,643	\$53,199
Gross Revenue	\$7,427,498	\$12,394,330	\$15,959,612
Revenue Deductions	4,966,317	8,917,570	11,545,078
Operating Revenue	2,461,181	3,476,760	4,414,534
Other Revenue	0	0	0
TOTAL REVENUE	\$2,461,181	\$3,476,760	\$4,414,534
Expenses:			
Direct Expenses			
Salaries	772,839	1,334,280	1,745,365
Fees	239,521	415,439	543,589
Supplies	508,553	828,661	1,070,930
Other	190,389	323,970	423,399
TOTAL DIRECT	\$1,711,303	\$2,902,350	\$3,783,284
Indirect Expenses			
Depreciation	292,444	292,444	292,444
Interest***	0	0	0
Rent/Lease	0	0	0
Overhead****	228,630	390,863	510,973
TOTAL INDIRECT	\$521,074	\$683,307	\$803,417
TOTAL EXPENSES	\$2,232,377	\$3,585,657	\$4,586,700
NET INCOME (LOSS):	\$228,805	-\$108,897	-\$172,167

*Utilization will be measured in "patient days" for licensed beds, "procedures" for equipment, or other appropriate units of measure specific to the service affected.

**Indicate how the average charge/procedure was calculated.

8. The utilization and revenues/expenses do not match, they should match. Please revise and resubmit whichever is incorrect.

	2025	2026	2027
	Yr 1	Yr 2	Yr 3
Urology	15	60	84
Colorectal	24	36	48
Bariatrics	60	72	84
General	60	72	84
Totals	159	240	300

From: [Mowry, Jill](#)
 To: [Fark, Mackinzev](#)
 CC: [Williams, Laura](#); [Finnegan, Patti](#)
 Subject: RE: #6117 HS
 Date: Thursday, January 9, 2025 2:44:15 PM
 Attachments: [image005.png](#)
[image006.png](#)
[image006.png](#)
[image007.png](#)
[image008.png](#)
[image009.png](#)
[image010.png](#)

Hello Mackinzev,

Please see my notes below:

- Provide what items are included in the \$439,805 cost and provide either 3rd party documentation or methods and assumptions used.
 - DaVinci requires a special water system and washers to support the robot that St. Clare needed to install. This cost was focused on that need.

■ Below is the breakdown

DEPT #	DEPT	VENDOR	PROJECT DETAIL	COMMITTED and PAID
			SC-SL allocation	439,805
4403000113	Surgey	Interface	Install Evoqua DI Water System + Robotic Arm (Jul '24) for used daVinci trf from SM-SL	15,893
4403000113	Surgey	Interface	Install Evoqua DI Water System + Robotic Arm (Aug '24) for used daVinci trf from SM-SL	34,938
4403000113	Surgey	Interface	Install Evoqua DI Water System + Robotic Arm (Sep '24) for used daVinci trf from SM-SL	109,673
4403000113	Surgey	Interface	Install Evoqua DI Water System + Robotic Arm (Oct '24) for used daVinci trf from SM-SL	66,825
4403000113	Surgey	Interface	Install Evoqua DI Water System + Robotic Arm (Nov '24) for used daVinci trf from SM-SL	3,863
4403000113	Surgey	Interface	Install Evoqua DI Water System + Robotic Arm (committed not billed) for used daVinci trf from SM-SL	63,249
4403000113	Surgey	Christner	Architect Fees for Evoqua DI Water System + Robotic Arm	18,000
4403000113	Surgey	EMSL	Air-O-Cell Analysis of Fungal Spores & Particulates by Optical Microscopy	84
4403000113	Surgey	EMSL	Air-O-Cell Analysis of Fungal Spores & Particulates by Optical Microscopy	152
4403000113	Surgey	EMSL	Air-O-Cell Analysis of Fungal Spores & Particulates by Optical Microscopy	152
4403000113	Surgey	Steris	(1) AMSCO Reprocessing Sink for Evoqua DI Water System	20,437
4403000113	Surgey	Steris	(2) Robotic Assisted Surgery (RAS) Cycles, etc.	64,805
				398,071
			TOTAL BUDGET	439,805
			TOTAL COMMITTED and PAID	398,071
			Variance between Projected Quotes and ACTUALS at time of purchase	41,734

Quotes for each item:

INTERFACE CONSTRUCTION CORP. PROPOSAL COST BREAKDOWN SHEET	
Project: SSM St. Clare - DI Water System & Robotic Arm Install	Date: 6/24/2024
Attn: Pat Guichet	Prep. By: AJG
<p>Proposal: Our proposal includes providing room ready conditions for a new RO/DI water system by Absolute Water. Furnishing and installing a new RO/DI Water system is included in this proposal. This work includes reworking existing 1 hour fire rated partitions at rooms 1E205 & 1E210 to accommodate manufacturer's recommended layout. We include necessary electrical circuitry for new Xi DaVinci Robotic arm system. Provide disconnect to existing hi-low table in the SPD and reconnect new</p>	
Subcontractors	Cost
1) Painting (taping/painting new walls, door infills and fire taping above grid)	4,895.00
2) Flooring (Sheet vinyl patch/flash coving & VCT repair in DI room & storage)	2,850.00
3) 3rd Party Firestopping (Allowance)	6,500.00
4) Murphy	132,820.00
5) Kaiser Electric	24,200.00
6) SLASCO (Relocate sprinklers as needs & permits)	4,250.00
7) Contingency (3%)	8,833.23
Major Material / Equipment / Truck & Driver	
Materials (drywall, framing, ceilings, wall protection, etc.)	6,708.00
Materials (Temp walls, plastic, walk off mats, HEPA)	1,250.00
Permits	2,944.41
Dumpsters	900.00
ICC Work	
1) General Conditions (Supervision/PM/Safety)	28,118.84
2) Laborer	28,287.20
3) Carpenter	27,863.20
Subtotal	280,419.88
Fee	14,020.99
Total Proposal	294,440.87
<p>Remarks:</p> <ol style="list-style-type: none"> 1) Work to be performed in accordance with our Master Agreement with SSM Health 2) Work to be performed during normal working hours. 3) Evening work is included for excessively noisy work or making final connections to existing/new equipment in the SPD 	

Quote No: JHONEY1735385



SSM ST CLARE HEALTH CENTER
Account: 37695 GLN: 1100005709683

Item	Equipment #	Description	Quantity	Extended Discount Price
1.0000	SINK50120 GTIN: 00724995162320	AMSCO 53 Reprocessing Sink 120" Triple Bay Don't let your cleaning standards sink. The AMSCO 53 Reprocessing Sink will help your facility provide a comfortable and flexible work environment for your staff. The sink is ergonomic as it offers a height adjustable counter and magnetic backsplash for accessories that help streamline workflow. When you purchase this unit, it will include: 30" bays, air & water pistols with the various tip attachments plus magnetic holders, 2 pre-rinse & faucet combos, treated water faucet, external drain lever handles and etched gallon markers in bay to ensure proper water to chemistry ratios. • Contract: GR VIZIENT CE7599 TIER 4 CLEANING & DECONTAMINATION	1	13,074.50
1.1000	SINKAC010	Chemistry Mount (Fits 1 and 2.5 Gallon Containers) • Contract: GR VIZIENT CE7599 TIER 4 CLEANING & DECONTAMINATION	2	264.78
1.2000	SINKAC011	Backsplash Bracket for AcuSinq Dosing System	3	556.20
1.4000	SE101482	Install AMSCO 50 Reprocessing Sink STERIS installation includes all necessary labor (non-union) and materials required to uncrate, set-in-place and assemble STERIS equipment. Price is for normal working hours, Monday – Friday 8 am -5 pm unless otherwise noted. STERIS also includes with its Installation Services an operational check-out test, any necessary adjustments and a demonstration of the equipment for appropriate facility personnel! Please refer to the STERIS terms and conditions of installation found later in this quotation for a more detailed description of the scope of work.	1	3,159.31
2.0000	SHIPPING & HANDLING	CHARGES STERIS's designated carriers are extensively trained to best handle our complex equipment needs and ensure safe and timely delivery of all products. Our carrier representatives work to ensure accurate deliveries specific to your timeline as well as problem resolution should there be any delays, damages or redelivery required.	1	3,382.44
Currency: USD			Quote Total Excluding Taxes	20,437.23

Quote No: JHONEY1665479



SSM ST CLARE HEALTH CENTER
Account: 37695 GLN: 1100005709683

Item	Equipment #	Description	Quantity	Extended Discount Price
1.0000	FD256 GTIN: 00724995176723	Robotic Assisted Surgery (RAS) 12 Rack (For AMSCO 7052HP Only) • Contract: GR VIZIENT CE7599 TIER 4 CLEANING & DECONTAMINATION	2	12,869.98
2.0000	FD258	Robotic Assisted Surgery (RAS) Cycle for AMSCO 7000HP Washers (Field installed) • Contract: GR VIZIENT CE7599 TIER 4 CLEANING & DECONTAMINATION	2	46,603.20
3.0000	SE60315	Add RAS Cycle to 7052/53HP	2	1,110.00
4.0000	FD21800	Transfer Cart (unassembled) Transfer Cart • Pharmaceutical Grade Washers • Accessories for Model 450 Washer • Contract: GR VIZIENT CE7599 TIER 4 CLEANING & DECONTAMINATION	2	2,717.56
5.0000	SE104052	Assembly Cost for Transfer Cart	2	783.20
6.0000	SHIPPING & HANDLING	CHARGES STERIS's designated carriers are extensively trained to best handle our complex equipment needs and ensure safe and timely delivery of all products. Our carrier representatives work to ensure accurate deliveries specific to your timeline as well as problem resolution should there be any delays, damages or redelivery required.	1	720.96
Currency: USD			Quote Total Excluding Taxes	64,804.90

CHRISTNER ARCHITECTS

P.O. Box 790379
 St. Louis, MO 63179
 Phone 314-725-2927

patricia.guichet@ssmhealth.com
 Ms. Patricia Guichet, Project Manager
 SSM Health Design/Construction
 1015 Corporate Square-Suite 101
 St. Louis, MO 63132

October 10, 2024
 Project No: 24000.006
 Invoice No: 0050041

Project 24000.006 SSM ST. CLARE DI WATER SYSTEM
Professional Services from August 31, 2024 to September 27, 2024

Fee			
Total Fee	18,000.00		
Percent Complete	100.00	Total Earned	18,000.00
		Previous Fee Billing	0.00
		Current Fee Billing	18,000.00
		Total Fee	18,000.00
		Total this Invoice	\$18,000.00

Billings to Date

	Current	Prior	Total
Fee	18,000.00	0.00	18,000.00
Totals	18,000.00	0.00	18,000.00

I have reviewed this invoice with our project personnel and believe it to be correct. Please call if you have any questions. We appreciate the opportunity to serve you.

Shanna J. Vichet

PRINCIPAL



EMSL Analytical, Inc.

EMSL Analytical, Inc.
 Federal Tax ID 22-2357101
 100 Green Park Industrial Court, Saint Louis, MO 63123
 (314) 577-0150

INVOICE NO.	PAGE
39159561	1 of 1
INVOICE DATE	
09/23/2024	

BILL TO:

SSM Health
 Attn: SSM Accounts Payable
 1015 Corporate Square Drive
 Saint Louis, MO 63132
 US

REPORT TO:

SSM Health
 Attn: Johnnie Stevens
 1015 Corporate Square Drive
 Saint Louis, MO 63132
 US

SLSM.	SHIP VIA	TERMS	BILLING FREQ	REPT ID	BILLING ID		
swiersgalla	Drop Box	Net 30	With Report	SSMH75	SSMH75		
DATE	ORDER NO.	QTY	TEST CODE	TEST DESCRIPTION	UNIT	UNIT PRICE	AMOUNT
9/19/2024	392405099	2	M001 Air-O-Cell	Air-O-Cell™ Analysis of Fungal Spores & Particulates by Optical Microscopy (Methods MICRO-SOP-201, ASTM D7391) 3 Hour Project: SC-SL DI Water Anesthesia Rm Clearance	EA	76.00	152.00
SUB TOTAL							152.00
INVOICE TOTAL							\$152.00

Please review your invoice promptly. We will gladly correct any errors within 30 days of the invoice date. After that, we deem the invoice to be correct and reserve the right not to issue credits, in whole or part. A 1.5% finance charge will be added to invoices over 30 days.

Billing Inquiries - please call 1-800-220-3675



EMSL Analytical, Inc.

EMSL Analytical, Inc.
 Federal Tax ID 22-2357101
 100 Green Park Industrial Court, Saint Louis, MO 63123
 (314) 577-0150

INVOICE NO.	PAGE
39158682	1 of 1
INVOICE DATE	
07/31/2024	

BILL TO:

SSM Health
 Attn: SSM Accounts Payable
 1015 Corporate Square Drive
 Saint Louis, MO 63132
 US

REPORT TO:

SSM Health
 Attn: Johnnie Stevens
 1015 Corporate Square Drive
 Saint Louis, MO 63132
 US

SLSM.	SHIP VIA	TERMS	BILLING FREQ	REPT ID	BILLING ID		
swiersgalla	Walk In	Net 30	With Report	SSMH75	SSMH75		
DATE	ORDER NO.	QTY	TEST CODE	TEST DESCRIPTION	UNIT	UNIT PRICE	AMOUNT
7/18/2024	392403904	3	M001 Air-O-Cell	Air-O-Cell™ Analysis of Fungal Spores & Particulates by Optical Microscopy (Methods MICRO-SOP-201, ASTM D7391) 24 Hour Project: SC-SL OR D1 Water Project Baseline	EA	27.95	83.85
SUB TOTAL							83.85
INVOICE TOTAL							\$83.85

Please review your invoice promptly. We will gladly correct any errors within 30 days of the invoice date. After that, we deem the invoice to be correct and reserve the right not to issue credits, in whole or part. A 1.5% finance charge will be added to invoices over 30 days.

Billing Inquiries - please call 1-800-220-3675



EMSL Analytical, Inc.

EMSL Analytical, Inc.
 Federal Tax ID 22-2357101
 199 Green Park Industrial Court, Saint Louis, MO 63123
 (314) 577-6150

INVOICE NO.	PAGE
39158688	1 of 1
INVOICE DATE	
07/31/2024	

BILL TO:
SSM Health
 Attn: SSM Accounts Payable
 1015 Corporate Square Drive
 Saint Louis, MO 63132
 US

REPORT TO:
 SSM Health
 Attn: Johnnie Stevens
 1015 Corporate Square Drive
 Saint Louis, MO 63132
 US

SLSM		SHIP VIA	TERMS	BILLING FREQ	REPT ID	BILLING ID	
swiersgala		Walk In	Net 30	With Report	SSMH75	SSMH75	
DATE	ORDER NO.	QTY	TEST CODE	TEST DESCRIPTION	UNIT	UNIT PRICE	AMOUNT
7/30/2024	392404130	2	M001 Air-O-Cell	Air-O-Cell(™) Analysis of Fungal Spores & Particulates by Optical Microscopy (Methods MICRO-SOP-201, ASTM D7391) 3 Hour Project: SC-SL OR 5 DI Water Project Clearance	EA	76.00	152.00
						SUB TOTAL	152.00
						INVOICE TOTAL	\$152.00

Please review your invoice promptly. We will gladly correct any errors within 30 days of the invoice date. After that, we deem the invoice to be correct and reserve the right not to issue credits, in whole or part. A 1.5% finance charge will be added to invoices over 30 days.

Billing Inquiries - please call 1-800-220-3675

- Provide documentation or state how the renovations were financed.
 - Purchased via capital funding, no financing required
- The revenues and expenses forms show a continue loss in revenue. How is sustainable?
 - Robotic Surgery is now considered the standard of care for many procedures and specialties in addition to being demanded by both providers and patients. If we don't offer robotic surgery we are at high risk to:
 - Not being able to recruit specialists to serve the community
 - not meeting the patient demands and losing patients to competitors who are often strapped with robotic capacity leading to potential delay in care
 - We recognize a robotic surgical platform isn't a profit driving strategy but it is a required service in the future of medicine. We (in parallel to our colleagues in the industry) plan to subsidize with other more profitable services to offset any potential losses associated with a robotic surgical platform. SSM also has an initiative to improve our payor contract renewals to support a stronger reimbursement for surgical services as we're currently the lowest in the region.
 - Of all the specialties that utilize the technology, Bariatrics is a "robotic technology must have" for certain patient level BMI's for surgery to occur. Our surgical Bariatric program is one of the profitable services planned for the robot and the goal is to exceed our growth projections which would bring us favorable bottom line.
- Questions 9 states "Document that consumer needs and preferences have been included in planning this project and describe how consumers had an opportunity to provide input." N/A is not an acceptable answer, as the applicant is required to get input on projects. If this didn't occur, please state so.
 - Confirmed during negotiations with updating payor contracts in 2023 it become evident that robotic surgery is considered "standard of care" for the future and a necessary service.
 - Our General Surgery, OB-GYN, Urology and Bariatric provider offices have been monitoring requests for robotic surgical technology options in addition to the number of patients referred to or lost to other hospitals. Both have reached a level that became a greater loss to the organization if we didn't choose to move forward.

Thank you,
 Jill

From: Fick, Mackinzezy <Mackinzezy.Fick@health.mo.gov>
Sent: Monday, January 6, 2025 12:17 PM
To: Mowry, Jill <Jill.Mowry@ssmhealth.com>
Subject: #6117 HS
Importance: High

CAUTION: This email originated from outside of the SSM Health organization. Do not click links or open attachments unless you recognize the sender and know the content is safe. Think this message could be malicious? Click the Report button or forward it to phishing@ssmhealth.com

Jill,

After final review of everything, some additional information is still needed.

- Provide what items are included in the \$439,805 cost and provide either 3rd party documentation or methods and assumptions used.
- Provide documentation or state how the renovations were financed.
- The revenues and expenses forms show a continue loss in revenue. How is sustainable?
- Questions 9 states "Document that consumer needs and preferences have been included in planning this project and describe how consumers had an opportunity to provide input." N/A is not an acceptable answer, as the applicant is required to get input on projects. If this didn't occur, please state so.

This information is needed by Friday, January 10th, 2025.

Mackinzezy Fick

Assistant Program Coordinator, Certificate of Need
 Department of Health and Senior Services
 920 Wildwood Drive, P.O. Box 570
 Jefferson City, MO 65102
 OFFICE: 573-751-6403
 FAX: 573-751-7894
 EMAIL: mackinzezy.fick@health.mo.gov
<http://health.mo.gov/information/boards/certificateofneed/index.php>

Confidentiality Notice: This email message, including any attachments, is for the sole use of the intended recipient(s) and may contain confidential and privileged information. Any unauthorized review, use, disclosure or distribution is prohibited. If you are not the intended recipient, please contact the sender by reply email and destroy all copies of the original message.