



## Capitol Project Reporting Form (CPR-1)

### Reporting Entity Identification and Contact

#### Facility

**Name:** Grande Ronde Hospital, Inc.  
**Federal Tax ID#:** 93-0505325  
**Address:** 900 Sunset Drive  
**City:** La Grande **State:** OR **Zip Code:** 97850

#### Individual completing form

**Name:** Wade E. Weis  
**Title:** Sr. Director of Finance/CFO  
**Email:** wade.weis@grh.org  
**Phone:** (541) 963-1463  
**Fax #:** (541) 962-2505

*If address is different than facility listed above, please provide:*

**Address:**  
**City:** **State:** **Zip Code:**

### Capital Project Qualitative Information

#### 1. Provide a brief description of the project.

The Regional Medical Plaza (RMP), 710 Sunset Drive, La Grande, OR, is an existing, but outdated medical office facility that Grande Ronde Hospital (GRH) is improving and expanding into approximately 27,000 square feet of new and remodeled functional space to meet increasing patient demand for services. Once completed, this facility will accommodate GRH's specialty services clinics to include OB/GYN, Pediatrics, Orthopedics, Otolaryngology, Neurology, and General Surgery.

#### 2. Proposed start date: 08/15/2014

#### 3. Expected completion date: 10/01/2015

#### 4. What is the expected project cost? \$6,836,928

#### 5. Describe the expected benefits to the community that your facility serves. Include both direct financial benefits such as charity care as well as qualitative benefits such as access to care and quality improvements. Attach additional pages if needed.

GRH's OB/GYN and Pediatric services currently share one small building and are functioning without the required space for dedicated exam rooms and provider offices. Medical Providers are sharing space which is cramped for the accompanying staff. By moving these clinics into the RMP, GRH will be able to provide patients with additional services such as imaging, lab and behavioral health services.

In addition, Neurology and General Surgery are currently located at the Regional Medical Clinic (RMC), which is GRH's primary care clinic. Due to the significant local enrollment in the new health insurance exchanges, local patient demand for primary care has increased. GRH needs more providers which requires more space to provide services. Neurology and general surgery providers and their support staff are currently located in the RMC but will be relocated to the newly expanded and remodeled RMP to allow for additional primary care services at the RMC.

6. **In what ways may this project negatively impact the community that your facility serves? Include direct cost such as bonds as well as indirect impacts such as service interruptions. Attach additional pages if needed.**

There are no negative impacts to the community.

7. **How has your facility evaluated the need for this project within the community that you serve?**

At the end of 2014, 14 RMC providers cared for 9,000 patients with a number of new patients requesting services on a daily basis. Much of the increased demand was due to the more than 2,300 people in Union County who became eligible for Medicaid for the first time in January 2014. In addition, the RMC is one of only two certified Patient-Centered Primary Care Medical Homes in La Grande (the other being GRH's Children's Clinic), which resulted in some existing Medicaid patients change providers to take advantage of the medical home patient care model. Added to this is the impact of patients now enrolling under the Affordable Care Act.

8. **Are the medical services created by this project already available in the community that your facility serves?**

These services are performed in cramped and/or outdated space. It can take weeks to months for new patients to become established in one of GRH's clinics. In addition, existing patients are enduring longer waiting times for an appointment to accommodate new patients.

## Public Notice and Comment

1. **Provide a link to the webpage where public notice of the capital project was posted. If your facility does not maintain a webpage provide the name of the newspaper where the public notice was made and date of publication. Attach additional pages if needed.**

No public notice is required. However, GRH gave notice of the project to the neighbors of the RMP clinic through a letter which is enclosed with this CPR-1.

2. Describe your facility's method of collecting and reviewing public comments on the capital project. Attach additional pages if needed.

N/A

<b>*Signature:</b>	Wade E. Weis
<b>Date:</b>	July 24, 2015

*\*Entry of name connotes signature*

Please **email** the completed form to: [OHPR.DataSubs@state.or.us](mailto:OHPR.DataSubs@state.or.us)

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