

# Supervisors approve agreement with Alliant

## Solar project continues to move forward

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Alliant Energy continues to progress towards the start of a major solar panel project in Lee County, with the approval of a joint development agreement with the Lee County Supervisors. The board approved the agreement at its regular meeting on Monday.

Justin Foss, strategic project manager with Alliant, was at the meeting to give an update and explain the

agreement. He said while Lee County does not have zoning, the company wanted to work in good faith with the county, so residents and county officials know the company is a responsible partner during the construction of the project and after its completion.

Alliant also is working with the Iowa DNR and the Green Bay Levee District, as some of the project lies in the flood plane. Foss said whether the project has to look at whether equipment needs to fit into a 100 year flood or 500 year flood will mold some of the plans going forward. He said the company can move some panels to higher ground if

need be. Board member Chuck Holmes asked if there was land out of the flood plane available, why is the company not putting the panels there. Foss said its the economics of it. The flatter, lower land will see easier and cheaper installation, where the higher ground could require more equipment and extra lines to be installed.

Supervisor Chair Matt Pflug asked if the electricity produced was going into the grid. Foss said yes, the electricity produced at the Lee County site will be going into the overall grid to benefit many of its Iowa customers.

Supervisor Ron Fedler wanted the public to know that this agreement will not mean any tax dollars from Lee County will go into this project.

"This is an Alliant Energy project," he said. The construction is expected to start in the third quarter of 2023 and progress through the third or fourth quarter of 2024. Foss said several hundred people will be employed over that time to help in the construction of the solar panel project.

The supervisors also mentioned that there was no use of imminent domain

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**HAMILTON**  
Bell choir plays in Keokuk and other Hamilton news.

# Catching the Christmas spirit

## Keokuk Community Chorale kicks off this season of concerts

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The Keokuk Community Chorale, under the direction of Dan Proctor, helped a couple of hundred people celebrate the season as they presented the annual "Christmas for Keokuk" concert. It was held on Sunday afternoon, Dec. 4 at the tastefully decorated St. John's Episcopal Church. Barbara Tuttle was the organist for many numbers on the program, and the prelude and postlude as well.

A brass quartet consisting of Damon Cackley, Ed West, Ben Moser, and Elsa Cackley started things off with a festive sounding fanfare and the chorale members sang "Adeste Fidelis," with the audience joining in after the Latin verse. About half of the chorale stood and sang from the left aisle during the processional, while the other half was in the right aisle, creating a great antiphonal effect for the audience. The



The Keokuk Community Chorale filled St. John's Episcopal Church with the sounds of the season on Sunday afternoon. Here, conductor Dan Proctor is leading the Chorale in a piece that was accompanied by Julie Ramsey, and with Damon Cackley on trumpet (pictured on the far right).

Chorale members then took their seats in the first rows during the welcome and while three soloists performed.

After a welcome from the

Rev. Larry Snyder, Mary Lynne Arms performed "Gesù Bambino" accompanied by Sarah Vigen, who also did the piano work in

the evening. Arms led the audience in singing the chorus.

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**SANTA STOP**  
St. Nick makes an appearance in Warsaw.

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**In Empty Nest,** Curt Swarm talks to a lady who bought her first date with her future husband at an auction. See page 4.

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# Who? Where? The Rural Emergency Hospital dilemma

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Before the Keokuk Chiefs, there were the Keokuk Medics. Aside from the lack of emergency care in the area, perhaps another reason why Keokukians are so devastated by the closure of their hospital is the medical history that has been the lifeblood of community.

On Main Street, a plaque denotes the site of the Estes House; a hospital for Confederate and Union soldiers that operated for three years during the Civil War.

In its history, Keokuk has had two hospitals Mercy Hospital (which became W.G. Graham

Protestant Hospital), founded in 1886, and St. Joseph Hospital. In 1975, Graham and St. Joseph hospitals merged, creating the Keokuk Area Hospital (KAH), which was constructed in 1981.

In 2017, Keokuk Area Hospital became officially part of UnityPoint Health Systems. Blessings Health bought the hospital from Unity Point in 2021. The Keokuk Area Hospital closed in October 2022.

Keokuk Area Hospital missed the opportunity to convert to a Critical Access Hospital (CAH). The designation would have granted access to federal aid, helping the campus with maintenance, staffing,



PHOTO COURTESY OF KEOKUK, IOWA HISTORIANS

Left: Graham Hospital located at 426 N. 15th St. in 1900. Right: a postcard of the hospital circa 1902 with a brick addition. The Graham and St. Joseph's hospitals merged in 1975, creating the Keokuk Area Hospital.

and medical supplies. A new provider type, Rural Emergency Hospitals (REH), gives rural hospitals another lifeline, with more federal aid, including 105% Medicaid and Medicare reimbursement and an annual facility payment (AFP) of up to \$3.2 million.

But now the problem remains the location of

the new REH. Part of a letter written by Senator Chuck Grassley's office discussing REH read, "The policy creates a new, voluntary Medicare payment designation that allows either a Critical Access Hospital (CAH) or a small, rural hospital with less than 50 beds to convert to an REH."

The word "convert" is critical for the future of a hospital in Keokuk. Whether converting means REHs must use hospitals already established in the area or if they can create a new one is unclear.

A third-party review estimated up to \$20

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# REH: Trying to make it work in Keokuk

FROM PAGE 1

million of work to renovate the deteriorating building. In addition to the needed maintenance, many parts of the hospital are not up to code and will need to be updated.

"It depends if the hospital is under state or city code," Pam Broomhall, Keokuk Community Director, said. "There are probably different types of codes, but the city would go along with the existing building

code, especially since the use of the building is not changing." "We have been informed by Sen. Grassley's office that KAH would qualify for an REH provided that Blessing maintains their license for the

facility, even if they are not operating," City Administrator Cole O'Donnell said. "A new provider would assume the license and operate the REH. It is unclear if the REH must be at the same facility as the hospital, but the provider would not have to use a vast majority of the facility if they chose not to."

Blessing, who still owns the former hospital building, has not indicated any desire to sell the building.

Even though the hospital is closed, Kathy Hull, Chief of Small Rural Hospitals for Blessing Health, said that with the license, the former hospital can still convert to an REH.

"Within one year after legislation is put in place, Blessing can reapply to convert their hospital into an REH," Hull said.

In October, Hull thought things wouldn't be ready to consider the REH opening until summer or fall. She estimated building an REH in a new location (in lieu of reopening KAH) would be around \$30 million, including equipment and space for five to ten observation beds, a lab, and an x-ray machine.

If the state can pass legislation so no one would have to take over the Keokuk Hospital, House Representative Martin Graber has an idea for a solution, "What makes perfect sense to me is that Great River, in conjunction with

Fort Madison, would be the ones who do it," Graber said.

Great River Health CEO Dr. Michael McCoy disagrees. The idea of transferring the license from one entity to another, as well as the \$3.2 AFP, seems enticing, but without a contract promising the aid, it's too risky of a proposition to take over.

To McCoy, building an addition to the already existing Great River Health Urgent Care would be just as costly as building an REH from scratch. "We have no beds and not enough equipment. We would need a fully outfitted onsite lab. 70% of hospitals are losing money right now based on a variety of factors. Financially, it wouldn't make sense for Great River," McCoy said.

"We are looking at different opportunities of what we can do to help with health care in the community there," McCoy said. When asked about increasing the Urgent Care hours to 24 hours, McCoy responded, "I'm not sure if extending the hours of urgent care would address the need. For most urgent care stuff, if you can get past 7 p.m., you can wait until the next day. It's just for acute, urgent care. If you have a heart attack, for example, a 24-hour Urgent Care would not help you. You need a hospital. That's the gap."

Driving 18 miles to Fort Madison feels like

a literal lifetime away in an emergency. However, "In some places," McCoy said, "it's like driving across town. That doesn't make anyone in the community feel better, but for care, that's a pretty standard distance."

McCoy thinks that in most emergencies, people wouldn't (and didn't historically) go to the Keokuk Hospital. Instead, they went to Quincy, Carthage, Fort Madison, or West Burlington. The situation would remain the same with or without the REH in Keokuk.

Some residents have already invested in life flight insurance, which is around \$90 a year, in case of an emergency, on top of health insurance.

If Keokuk can get a provider to commit to building an REH in town, getting other businesses involved would be paramount to its success. The purpose of the AFP is not for building maintenance but to incentivize other outpatient health businesses to come to the REH campus and stabilize the economy.

Studies show that team-based care improves patient outcomes.

"Rural healthcare is in a tough position. It's going to take some innovation," said Hull.

With an REH in Keokuk, revenue streams would shift towards models focused on overall health versus emergency care, exactly what Keokukians need.

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