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William C. Bauer Consulting Service
Proposal to Establish and Operate
First-of-its-Kind Hemodialysis Unit(s):
Transient Care with Benchmark Quality
at Resort location(s)

WILLIAM C. BAUER CONSULTING SERVICE LLC & DONALD J. TRUMP

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1. Introduction

Establish and Operate
Benchmark Quality
Hemodialysis Care

Create First-of-its-Kind
Unit for Transient Care.

Achieve an Exclusive.

Enable patients to travel
(e.g., to Atlantic City).

Potentially expand to other
Resort locations.

In the continental US, there are over 300,000 patients with renal disease who require routine hemodialysis care, usually 3 times per week. Each machine setup and treatment can be performed by any licensed facility. However, unlike other medical professionals, the hemodialysis industry is not accommodating to short-term, transient¹ patients, especially those patients requesting care in a resort location.

Hemodialysis patients are restricted from taking short vacations, especially to resort locations that require travel away from home.

While there is an industry list of hemodialysis facilities (Units) that offer transient care, these Units favor "regular" patients, or long-stay visitors. Units typically decline to give appointments for just a couple treatments since they may have just a couple of open slots (if any). Therefore, since the overhead to screen a visitor's records is same for 2 visits or 20 visits, Units maximize revenue with this approach.

Even if a Unit offers short-term care, most patients avoid a strange Unit, as they would car repair from an unknown mechanic. Most Units lack gentle care and preventive measures.

On the other hand, while land-based, tourist areas rarely (if ever) offer convenience of treatment, Cruise Lines routinely do. With fine cuisine, entertainment and gaming on board, ocean travelers on hemodialysis have an outlet, wherein cruise lines gain tourism and medical revenue. However, cruise patients also have reservations about the quality of care.

What fun-loving patients desire/deserve are get-away options on land, where concerns about care are secondary to their ability to enjoy life. In kind, we propose to establish/operate the first Transient-Care-Only Hemodialysis Unit at a resort location(s) with quality second to none.

The Prime Directive of our proposed Unit is Benchmark Quality. Transient care is the intent.

¹ The term "transient" or "transient care" applies when routine hemodialysis for a given patient takes place at a location other than the patient's regular or base Unit, when a patient is out of town.

In teamwork with prospective investor(s) or a philanthropic enterprise, William C. Bauer Consulting Service proposes to create Unit(s) wherein Visitors-on-D² receive care in accordance with the Quality Standards defined by William C. Bauer, standards unmatched in the industry today.

Each Visitor-on-D to our Transient-Care-Only Unit will receive the kind of preventive care that a loving person would want for a family member. Further, unlike conventional Units, care will be given in a setting/ environment fitting the Visitor-on-D's needs, offering tranquility or otherwise, e.g., video games, family-by-their-side, video-on-demand, internet access, exercise stations and satisfaction of reasonable requests.

Appointment availability, high quality care and improved environment will be provided to all of our Transient-Care-Only Visitor-on-D with "Benchmark Level" service, unmatched in the industry today.

As an option, Visitors-on-D may (at added cost) elect treatments at the highest level of service, equivalent to "Home Hemodialysis". Herein, patients will receive one-on-one care by a Nurse or Technician who will operate a self-contained system (i.e., a hemodialysis machine with its own water purification system, individually regenerated, cleaned/tested) to be scheduled at the visitor's convenience, any time of day or night.

Freedom to enjoy vacation on their own schedule will be available to those who elect a dedicated, one-on-one professional.

Our Unit accommodates Visitors-on-D as the norm, not the exception. Short-term visitors in high numbers will lead to greater rewards for all.

Profitability will be accomplished in every domain: Medical revenue, increased tourism (e.g., best location for a family reunion or for any organization with a dialysis patient member) and increased good will.

² Herein, transient patients are referred to as "Visitors-on-D" to emphasize they are looking to enjoy themselves on vacation just like anyone else, e.g., Visitors-on-Diets, on-Drugs(Rx), on-Dialysis, etc.

2. Location

Successful and cost effective establishment of the first-of-its-kind, Transient-Care-Only Unit requires a location near resort hotels and near self-contained, local attractions such as headliner shows, convenient shopping, spas and gourmet meals. Further, the preferred location is local to our team of experts who are experienced with NJ or NY State regulatory requirements, with a proven record of success.

Based on our New Jersey based network of subject matter experts, the Atlantic City area is recommended for the initial Unit.

Atlantic City also offers outlet stores, an IMAX theatre, the Boardwalk, indoor pools and gaming. Business-savvy casinos may even wish to "comp" our service, as an attractive option to high roller Visitors-on-D. In every case, our Hemodialysis care is designed to "set the benchmark" and increase the quality of life for Visitors-on-D.

We expect to win Awards and motivate non-transient Units to improve, while generating significant Revenue for investor(s) or sponsor(s) and participating experts with William C. Bauer Consulting Service team.

3. From the Visitor-on-D perspective, how is Our Transient Care Hemodialysis Accomplished?

The process of scheduling short-term transient care will be analogous to making an appointment for therapeutic massage.

The Visitor-on-D's regular Unit calls the "health club", or in this case, our **Atlantic City Hemodialysis Unit's (ACDU)** Transient Care Desk to request an appointment. Patient medical records and treatment specs, along with a signed release and fee agreement (with cancellation clause) are submitted. If records are approved, the appointment is confirmed.

Each treatment requires approximately 8 hours including care setup, treatment, post care, machine care, QA, records and above all, TLC.

Accordingly, the ACDU Transient Care Desk will facilitate logistics and in parallel, the ACDU will perform or facilitate all:

- + Visitor-on-D care
- + Equipment and facility maintenance
- + Medical / insurance-related billing
- + Regulatory required activities, and
- + Other related responsibilities

Visitor-on-D hemodialysis services are the services of the ACDU.

ACDU staff will have 24-hour access to treatment and equipment rooms to assure all is in working order, medications/supplies are fully stocked and to meet all ACDU responsibilities of operations.

The ACDU will also be subject to quality checks by William C. Bauer, an RAB-certified Lead Auditor for medical services. An independent Certified Auditor will also be engaged to help assure that the ACDU continues to meet our Standards of Quality.

Quality Standards, procedures, audits and commitment to achieve "benchmark" patient care are Key Differentiators of William C. Bauer Consulting Service.

4 How is Transient-Care-Only Hemodialysis Unit Established and Operated?

Engagement of William C. Bauer Consulting Service is how.

William C. Bauer Consulting Service will lead the way. Our team includes medical, quality, and business experts who share one vision: To establish and operate Benchmark Quality Units for Visitors-on-D.

There will be equipment/facility, management/staff, maintenance, legal/regulatory/insurance and other business needs to be fulfilled, as is required to open any Unit. For example, equipment/facilities include hemodialysis machines, water purification and delivery systems, building [including offices, treatment rooms, rest rooms, storage areas, staff lounge, labs, water rooms], computer and billing/records systems, utility fees, patient TVs/recliners/PCs, lockers, contingency plans, etc.

In effect, beyond the "turnkey process" that applies to a "regular Unit", our vision calls for higher staff-to-patient ratios, customized procedures, improved patient stations (larger square footage and privacy walls), and perks that make the medical experience align with a vacation, e.g., available video games, therapeutic chairs and stationery exercise bikes. For optional one-on-one care, private treatment rooms are also needed.

On behalf of the Investor(s)/Philanthropist(s) and Visitors-on-D, William C. Bauer Consulting Service will define and implement the actions to "get there from here" from the ground up with an exclusive agreement for management and operational services going forward.

ACDU ownership will be independent of "chains" that run other Units. This approach prevents patient concerns that the ACDU treats transient patients better than "regulars". Also, since we offer transient care only, our Units are not in competition with existing or local Units.

5. How much capital is required to establish the ACDU?

ACDU investors or philanthropic enterprise are asked to purchase new hemodialysis machines and systems rather than refurbished systems, where William C. Bauer Consulting Service will identify specifications, and, in turn, facilitate procurement and setup of the equipment.

For example, one new hemodialysis machine with its own RO water system costs about \$25K plus building/facility, management/staff, maintenance, legal/regulatory/insurance and other business costs.

Starting a "turnkey" Unit that is part of a "chain" can run from \$2.5M/up, depending on the location and number of patient stations. (NJ State Regulatory currently requires a 9 station minimum,) However, comparing a chain to the ACDU is like a hot dog stand vs. a "Deli".

Accordingly, the initial investment for the ACDU is estimated at \$5.5M.

Financial details to be provided by our ACDU Administrator, upon identification of parameters (e.g., Unit location, # patient-stationst) and confirmed interest.

The initial investment includes capital expenses and fees to retain William C. Bauer selected, key staff to establish the ACDU.

6. Medical Fees to the Visitor-on-D for Services

Analogous to therapeutic massage, which includes professional fees plus a setup fee to the Health Club, Visitors-on-D will pay ACDU fees plus transient care setup fees (mostly covered by their health insurance):

ACDU-sourced Fees: In advance of treatment, the Visitor-on-D makes agreements with ACDU for hemodialysis services, including fees for their care, nurse/tech, physician services, in-treatment medications, blood tests, etc. Some co-pays are secured/collected in advance. Several providers will bill each patient (or their insurance provider). Some of these fees and associated billing are transparent to the ACDU.

Transient Care Setup Fee: A flat fee will be requested to cover the cost of reviewing medical records for each new (first time), Visitor-on-D. (This fee will be waived if he/she does not qualify for transient care.) Should the patient return, the setup fee will be revised on future visits.

Since the costs of providing benchmark level quality care is higher than that of a regular Unit (e.g., per staff to patient ratios, quality of supplies, patients not rushed, staff holds sites until bleeding stops, more space), patient co-pays or fees will be accordingly higher.

Fees for medical care are in addition to gaming/entertainment/local revenue. Cost effectiveness applies, so as long as Quality comes First.

7. Future Possibilities

Once the ACDU is successfully in place, our team can establish and operate additional Benchmark Quality Unit(s) in other resort location(s).

Franchises are also possible, subject to our benchmark quality standards.

The expertise of William C. Bauer as Hemodialysis Quality Manager, along side "Nurse A"³, Unit Administrator (Hemodialysis Care Director) will enable the investor(s) or philanthropist to "get there from here".

³ to safeguard the identity of our hand-selected "Nurse A" until she comes on board

8. Community Benefits

Beyond medical revenue, every local entity potentially profits. For example, in Atlantic City, consider the additional revenue available for businesses and casinos, based on 10 hemodialysis treatment stations.

Assumptions:

- One hemodialysis station is scheduled for 700 treatments/year.
- A typical Visitor-on-D stays 5 nights and requires 2 treatments. Here, the ratio # Visitors-on-D to hemodialysis stations is **5:2**.
- T/L costs for Typical Visitor-on-D = \$1000 per trip for hotel, meals and medical co-pays. Since this is the cost excluding fun, the financial profile for such visitors is well above average.
- Additional revenue from an average Visitor-on-D is \$1000/day, including shopping, massage, gaming, shows, room and food. (Figure much higher for "high rollers".)
- One friend or family member will accompany each Visitor-on-D.

Added revenue from each hemodialysis station:

700 (# treatments provided by a single station in one year)
 multiplied by "**\$1,000**" (estimate of added revenue per day)
 multiplied by **5/2** (#Visitors-on-D "ratio" for 5 day visitors, 2 treatments)
 multiplied by **2** (minimum number of guests per Visitor-on-D)
 multiplied by **10** (assumed number of hemodialysis stations) =

That's \$35M/year Community Benefits to AC that is currently missed because Visitors-on-D cannot find AC transient care today, plus AC DU medical revenue (not included in this figure)!

The above figure assumes typical visitor revenue at just \$1000/day. If Visitors-on-D inspire groups or family reunions to choose Atlantic City (the first-of-its-kind, resort option), the figure will be higher.

Most important, Visitors-on-D will regain their independence to take convenient vacations, with confidence they'll receive high quality care.

9. Terms & Conditions

The following are stated to help ensure the success of this proposal:

1. All criteria herein are subject to meeting State, Federal Regulatory and Statutory requirements and obtaining required approvals for implementation of service.
2. No party may forward a similar hemodialysis initiative without express permission of William C. Bauer Consulting Service.
3. This proposal is provided to Donald Trump for informational purposes and does not constitute a contractual agreement nor an offer to contract. **Whoever considers this proposal is expected to sign a nondisclosure.**

10. About William C. Bauer

Bill is an RAB-Certified Quality Management System Lead Auditor and Quality Engineer for Medical Services, Communications, and Software/Electronics-based Industries with M.S. in Computer Science, Phi Beta Kappa.

Like Paul Robeson, Bill graduated **First in his Rutgers College Class.**

He's received commendations from **Howard University** and leaders of Ireland, Saudi Arabia, NJ State Assembly, Casinos and major industries.

He was also awarded SAIC Telcordia Technologies's **President Award**, as an individual recipient, where he started as a **Bell Labs scientist.**

His careers at SAIC, Lloyd's Register Quality Assurance and Comverse span from 1977. He is presently **Quality Manager** at a **\$1B company.** Bill Bauer's efforts to date have prevented defects for Verizon's and other major telecommunications provider networks, **saving > \$40M.**

With a family member on hemodialysis, Bill became a **Certified Hemodialysis Technician** in 1997, on his own time and expense.

His vision to "raise the bar" on his patient's quality-of-care where "vacation with travel" is feasible, evolved to this proposal.

Over several years, Bill led discussions with medical professionals to determine how to "get there from here", as is highlighted herein.

What Bill seeks is **an Angel** to:

- (a) share our goal to improve patients' quality of life, and
- (b) invest in this or a related enterprise for a profitable reality.

Accordingly, this first-of-its-kind proposal is discretely directed to **Donald Trump** in-person.

11. Contacts

William C. Bauer Consulting Service LLC is committed to facilitate benchmark level quality of care, while meeting business needs.

Bill Bauer is heart-warmed to discuss the contents of this proposal. Please contact Bill's office, at DialysisQuality@optimum.net

This proposal is not a contract and shall not be legally binding on either party. It is expressly conditional on a complete contract being prepared and approved by counsel for each party, and signed by an authorized representative of each party.