

Testimony of Bertha Holliday

McMillan PUD Hearing #3 – Healthcare facilities, 5/8/14

My name is Dr. Bertha Holliday, I reside at 49 T St., NW in the Bloomingdale neighborhood where I have lived since 1989. I currently serve as the 2nd Vice President of the Bloomingdale Civic Association. I wish to express concerns related the McMillan healthcare building in Parcel XX, as proposed in the McMillan PUD application .

There seems there just might be an are elephant in the room in regards to the 860,000 square foot healthcare building: Who is going to occupy it – and to what specific uses will it be put?

During the past 4 to 5 years, the community has been led to believe that the building will be occupied by Washington Hospital Center. Although the PUD application makes note of adjacent healthcare facilities as part of its rationale for requesting increased height and a square footage for the building, nowhere in the PUD is it stated that Washington Hospital Center will be its primary tenant. Indeed, in perusing the approximately XXX documents submitted to date for the IZIS McMillan case file, I have been unable to locate a single letter of interest, support or partnership from Washington Hospital Center-- or from any other healthcare facility within 100 miles of the District. Furthermore, in the Gorove/Slade transportation report (IZIS Exhibiti 32 D1), the following is noted on page3:

...the Washington Hospital Center's plans for expansion are currently on hold, and they do not plan to move forward with the plan developed over 10 years ago which gained PUD approval. The financial infeasibility of consolidating surface parking into structure to create viable development parcels is limiting the expansion plans.

One cannot help but wonder: If WHC cannot afford to build parking structures, how will they be able to pay rent on 860,000 square feet of spanking new commercial office space?. If WHC does not occupy the building – then who will?

Likewise, the PUD is decidedly vague about the healthcare building's specific uses. If occupied by WHC or some other healthcare corporation, will it be used to house outpatient care, or specialty clinics, or research laboratories, or medical staff personal offices, or major administrative functions requiring complex computer operations such as medical records management, billing, and insurance reimbursement?.

The developers have presented s other possibilities of change in the building's use. For example, in the Office of Planning Hearing Report 3 (Exh, 68) on page 5, it is noted that VMiP iss requesting that part of the 15,000 square feet retail space on the ground floor of the medical building be for "optional" uses. The OP report continues to note that such optional uses have not been specified.

Also, during prior PUD hearings, the developer noted that the grocery store space may also be put to alternative unspecified use.

Although I suspect that these kinds of changes in PUDs are not unusual, in this case, such changes have the aura of a 'bait and switch' strategy. That is because, the medical /healthcare building, the grocery, and retail space, and employment opportunities to the tune of 6000 jobs, have been proffered as major "community benefits". Furthermore, major conclusions of the developer's fiscal impact study, transportation study, and the community benefits and amenities offered to date by the developer are based on assumptions of building use, that now appear to be rapidly changing. Consequently, the findings and recommendations of the fiscal impact and transportation studies are increasingly unreliable and invalid sources for rulemaking.

The Zoning Commission chair has noted that in regard to loading docks : "This time we are going to get it right". I trust that the commitment to "getting it right" will extend to the PUD application, and its Community Benefits Agreement.

Consideration should be given by the Zoning Commission to DEFER any ruling on the McMillan PUD until such time as the applicant can address the 'elephant in the room' --that is, who will be the major tenant of the Healthcare Building, and to what specific uses it will be put?. Addressing

these issues might very well require modification of the fiscal impact and transportation studies, and the developer-proffered CBA, as well as a re-holding of hearings. But let's get it right, and not end up with a McMillan development that bears minimal likeness to its initial PUD application, and does not provide critical amenities requested by neighboring residents for decades.

Thank you for your time and consideration.