



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

525 WEST JEFFERSON ST. • SPRINGFIELD, ILLINOIS 62761 • (217) 782-3516 FAX: (217) 785-4111

VIA EMAIL
USPO

November 14, 2016

Sonja Reece MBA, FACHE
Director
Advocate Health Care
P.O. Box 2850,
Bloomington, IL 61702

Re: Project #16-038 – Advocate Sherman Hospital Ambulatory Surgery Center

Dear Ms. Reece:

We are reviewing the application for permit identified above and have some follow-up questions/requests.

1. Please provide the projected financial statements for the ratios provided on pages 166-167 of the application for permit.
2. Please provide the assumptions used for the projected financial information provided at page 166-167 of the application for permit.
3. What is included in “all other clinical space” identified on page 170 of the application for permit?
4. Please provide the expected payor mix for the proposed ASTC? If it has been provided please point me in the right direction.
5. Please provide an explanation of what is a pre-operative station? My belief is these six (6) stations should be either PACU I or PACU II.

Should you have any questions or concerns please contact Mike Constantino or George Roate of my staff at Mike.Constantino@illinois.gov or George.Roate@illinois.gov or 217.782.3516.

Sincerely,

A handwritten signature in cursive script that reads "Mike Constantino".

Mike Constantino, Project Reviewer
Illinois Health Facilities and Services Review Board