POLSINELLI

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June 27, 2018

Anne M. Cooper
(312) 873-3606
(312) 276-4317 Direct Fax
acooper@polsinelli.com

Via Federal Express

Mr. George Roate
Illinois Health Facilities and Services Review
Board
525 West Jefferson Street, 2nd Floor
Springfield, Illinois 62761

Re: Marshall Square Dialysis (Proj. No. 18-017)

Dear Mr. Roate:

Attached for your records, please find a copy of the Marshall Square Dialysis patient transfer letter agreement.

Please let me know if you have any questions or need anything further for your review of the Marshall Square Dialysis application.

Sincerely,

Anne M. Cooper

Anne M. Cooper

Attachment

Skyline Region 2 Office
5623 W. Touhy Avenue
Niles, IL 60714
(847) 647-3140

June 22, 2018

Presence Saints Mary and Elizabeth Medical Center
2233 West Division Street
Chicago, Illinois 60622

Dear Administrator:

This letter confirms our understanding that upon recommendation of any attending physician who treats patients at Marshall Square Dialysis, Presence Saints Mary and Elizabeth Medical Center (the "Hospital") agrees to accept the transfer of Marshall Square Dialysis patients requiring hospitalization and other services provided by Hospital (which shall include inpatient care; routine and emergency dialysis; emergency medical care available 24 hours a day, 7 days a week; and other hospital services) from Marshall Square Dialysis *provided that* customary admission requirements, applicable State and Federal laws and regulations are met, and Hospital has the capacity and ability to treat the patient, as determined in its sole discretion. A request for a patient transfer shall be made by Marshall Square Dialysis as soon as possible once the need for a transfer has been identified. After receiving a transfer request, Hospital shall exercise its reasonable best efforts to promptly communicate whether it has the capacity to accept the transfer. Hospital will also exercise its reasonable best efforts to provide for the prompt admission of transferred patients. Both Total Renal Care, Inc. and Hospital agree to execute such further documentation as may be required to comply with applicable law relating to patient transfers from dialysis facilities to acute care hospitals.

Subject to applicable privacy and security requirements, Marshall Square Dialysis and Hospital shall exchange all information which may be necessary or useful in the care and treatment of a transferred patient, or which may be relevant in determining whether such patient can be adequately cared for by the Hospital. All such information shall be provided by Marshall Square Dialysis in advance, where possible, and in any event, no later than at the time of the transfer.

Either party may terminate this Agreement, without cause, upon thirty (30) days prior written notice to the other party or immediately for cause (endangerment of patient care, exclusion from government payor programs, conviction of a felony or loss of accreditation, or licensure).

Very truly yours,

TOTAL RENAL CARE, INC.
On behalf of the transferring providers.

By: _____
Name: Brent Habitz
Its: Regional operations Director
Date: 6/25/18

PRESENCE SAINTS MARY AND ELIZABETH MEDICAL CENTER

By: _____
Name: Martin Tubbs
Its: Exec President/CEO
Date: 6-25-18