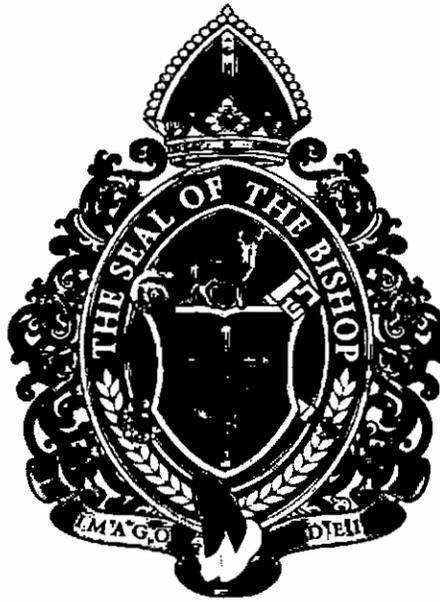


RECEIVED

OCT 17 2016

HEALTH FACILITIES &
SERVICES REVIEW BOARD



From The Episcopal Desk Of Bishop James E. Dukes

October 16, 2016

Via Hand Delivery by 9:00am

Ms. Courtney R. Avery
Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson St., Second Floor
Springfield, IL 62761

**Re: Rockford Memorial Hospital / Project # E-021-16:
Comment on Staff Report and Request for Deferral**

Dear Administrator Avery:

I serve as Senior Pastor of the Liberation Christian Church in Chicago, and am the Bishop of Social Justice for the United Covenant Churches of Christ (UCCC). There are multiple UCCC-affiliated churches located in Rockford and I write on behalf of hundreds of Rockford residents who have expressed not only interest but grave concern about this project.

Pursuant to the attached email to me from the Review Board's General Counsel, Mr. Juan Morado, please accept this written comment on the staff report for Project # E-021-16

MercyRockford Memorial Hospital. Also, because the staff report was not made available to the public within the statutory timeframe, the project is not properly before the Review Board; accordingly, I respectfully request that this project be deferred to the next meeting of the Review Board.

A. BECAUSE THE STAFF REPORT WAS NOT TIMELY POSTED, THE PROJECT IS NOT PROPERLY BEFORE THE BOARD, AND SHOULD BE DEFERRED TO THE NEXT REVIEW BOARD MEETING

1. By law the Staff Report had to be posted by October 11, but it was not posted until October 14, resulting in prejudice to the public's right to comment.

The Illinois Health Facilities Planning Act requires staff reports to be made available to the public at least 14 days before the meeting at which the project and report are to be considered. That was not done here. The law was not followed, to the detriment of the public's right to comment.

For the October 25 meeting, staff reports had to be made available by Tuesday, October 11. Indeed, at the public hearing on the project, Board Counsel Morado twice announced that the staff report "will be made available on the Internet on October 11th, 2016." But the MercyRockford staff report was not posted until Friday, October 14, 2016. Consequently, late posting of the staff report makes it nearly impossible for the public to meaningfully exercise their statutory right to public comment. Since the Review Board staff only accepts public comments that are delivered to the Springfield office in paper form (they do not accept faxes and emails consistent with other agencies and the courts), and because of the 9:00am Monday deadline set for comment receipt, the late posting of the staff report required me to prepare this comment over the weekend, and arrange personal delivery in Springfield during the 30-minute window on Monday between opening of the Planning Board office and the 9:00am deadline (obviously FedEx was not an option). This unreasonable time frame directly results from the late posting of the staff report.

2. The untimely posting of the Staff Report resulted in actual prejudice to me.

As you may recall, I telephoned you on Wednesday, October 12th to inquire about whether or not a staff report was available for the MercyRockford Project and whether the project would be considered at the October 25th Board meeting. At the time, no staff report was posted on the Board's website and the website indicated that no exemption requests were being considered.

When you did not return my call of October 12th, or subsequent calls, I sent you the attached email concerning the scheduling and processing of the MercyRockford application. Somewhat to my dismay, I received in response Mr. Morado's email which begins by insinuating that I may have violated *ex parte* rules and that my emailed process inquiry to you "may constitute *ex parte* communication and may have to be reported and posted on the website."

Why did my entirely appropriate and understandable inquiry about process result in a suggestion of possible improper communication, and why was I threatened in this way?

My email to you solely related to procedures and process. It was limited to questions about: (1) whether the project was on the October 25 agenda; (2) why the transcript of the public hearing on September 16 was still not posted as of October 14; and (3) why MercyRockford's related alteration requests, that were received by the Board on September 2, were not made available to the public until October 11th, well after the public hearing on this project.

My email communication was strictly limited to "matters of procedure and practice" and in no way "reflects on the substance" of the project and, therefore, under the Planning Act, is not an *ex parte* communication. Any suggestion to the contrary would effectively block (and even punish) citizen efforts to inquire about process irregularities and violations of statutory procedures.

The "revised ethics and communications procedures" adopted by legislature to ensure the integrity of the Certificate of Need process – in reaction to the scandal surrounding this very applicant's project in 2004 – were never intended to squelch public input and participation. Nonetheless, my personal experience as an interested member of the public wishing to comment has been one of hurdle after hurdle being erected.

Mr. Morado's invitation to me on Friday, October 14th, to submit comment on the staff report fails to identify the deadline for written comment. I cannot find anywhere on your website notice of what that deadline is. Though Mr. Morado announced at the project's public hearing on September 16th that the deadline for written comment was 9:00 a.m. on October 17th, that deadline was based on the staff report being posted on October 11th – which, of course, did not occur. Will Mr. Morado now claim that my process inquiry related to the untimely posted staff report is itself untimely, and will he deem it to be "ex parte"? Worse, was Mr. Morado setting me up for a late comment (and an *ex parte* communication charge) by omitting mention of the incredibly fast-approaching deadline? I certainly hope not. I dare not ask for confirmation of the deadline, given the rebuke my first process inquiry generated. In that process inquiry, I merely exercised citizen rights, in the interests of the west side community in Rockford, in compliance with common sense and law. I will defend my good name and actions as necessary.

While I have made extraordinary efforts to file this public comment within the 30-minute window allowed by the Review Board staff, certainly other potential commenters may have been altogether dissuaded and precluded from exercising their rights. With an eye toward receiving a public comment in Springfield by Monday, Oct. 17, at 9:00am (not by email or fax, and with FedEx or other mail options being effectively foreclosed), there is a material difference between timely posting the staff report on Oct. 11 (a Tuesday) and late-posting on Oct. 14 (a Friday).

Because the staff report was not posted on October 11th, as required by statute and by Mr. Morado's public hearing announcements, and because the concerned public has not been granted the full statutory time period to comment on the staff report, I respectfully request that the Board comply with the statutory process and defer this project to the next Board meeting.

B. COMMENTS ON STAFF REPORT

1. The Staff Report fails to specifically mention any public objections or concerns relating to the project, effectively silencing the message of citizens who made the effort to appear and give testimony.

While the staff report notes that there was a public hearing that included opposition testimony, the report makes no mention of who was there or what they had to say.

In fact, close to 50 persons associated with the West side community, including myself, appeared with questions, concerns and objections to the project. I was only allowed three minutes to speak at the public hearing. Despite my efforts, none of my concerns (or anyone else's) are reflected in the staff report. So that the Planning Board members may understand the community's concerns, I have attached to this letter my written comment submitted at the public hearing for the Board's consideration. I respectfully suggest that the staff report be revised to summarize the nature of the community's concerns over this project.

The staff report also fails to mention my timely written comment to the Board dated August 23, 2016, which still has not been posted on the Board's website.

So that the letter may be properly included in the project file for this project (as it should have been in August), I also include it with this written response. My August 23rd letter documents that the procedural irregularities surrounding this project began shortly after I submitted a request for public hearing. In other words, once the public attempted to exercise its right to participate in this CON process, the Board's "practice and process" suddenly began to work against public input and participation. This is part of the "hurdle after hurdle" to which I referred above.

2. Other substantive problems with the staff report.

Regarding MercyRockford's exemption request, the staff report contradicts itself in several ways:

- First, the staff report recites the statutory requirement that an exemption may be issued when the application meets the Review Board's information requests for an exemption, but then fails to note that the Review Board repealed its information request for Neonatal Intensive Care Unit exemptions in 2015. In fact, the Review Board no longer has information requests for a Neonatal Intensive Care Unit exemption and, therefore, this project cannot meet the statutory requirement.
- Second, the staff report states that expansion of a neonatal intensive care service is "not subject to the requirement to obtain a permit," but then applies the requirements of a permit for expansion of a neonatal intensive care service. Page 3 of the report references Criterion 1110.930, which is a permit requirement, not an exemption information request.
- Third, while apparently applying the permit criteria in lieu of the repealed exemption information requests, the staff fails to apply all of the criteria. The staff only applies the Staffing requirement from Criterion 1110.930 and does not apply the other requirements under Criterion 1110.930 relating to the expansion of a neonatal intensive care service.

Accordingly, in addition to omitting information about the nature of the community's concerns as expressed in the public hearing, the staff report has substantive deficiencies that should be corrected. A corrected staff report could and should precede consideration of this application at the November meeting of the Planning Board, so that statutory procedural requirements are followed.

C. CONCLUSION

As I originally mentioned in my letter to you of August 23, 2016, it appears that at every turn the CON process has been applied in a manner that accommodates this applicant at the expense of public input and participation – indeed, that discourages or makes unreasonably difficult any public input and participation. As one who has devoted himself to social justice causes, I am especially interested in assuring that citizens be allowed to advocate for their community interests without unreasonable barriers (and especially without threatening and unfounded suggestion of possible wrongdoing). I respectfully ask that, in acting on this application, the Review Board adhere to the process requirements that benefit the public, as specified in Planning Act and the Board's own regulations.

I again respectfully request that this project be deferred so that the Review Board can ensure that this project is processed in a manner fully compliant with the Health Facilities Planning Act and the Board's own regulations. In addition to following non-discretionary, statutory timeframes, the deferral could also allow for a full public comment period as envisioned and safeguarded in the Planning Act, and maybe also a revised staff report.

Respectfully,

A handwritten signature in cursive script that reads "Bishop James E. Dukes". The signature is written in black ink and is positioned below the typed name.

Bishop James E. Dukes

From: "Morado2, Juan (DPH)" <Juan.Morado2@illinois.gov>
Date: October 14, 2016 at 11:22:49 AM CDT
To: "bishopjeduks@aol.com" <bishopjeduks@aol.com>
Subject: FW: [External] Re: Mercy Rockford Public Hearing Notice

Dear Mr. Dukes,

The deadline for providing written comment on the exemption application was October 5, 2016. Written comments received after that time may constitute ex parte communication and may have to be reported and posted on the website.

The state board staff report and transcripts are available online and can be accessed with the following link: <https://www.illinois.gov/sites/hfsrb/Projects/Pages/Rockford-Memorial-Hospital,-Rockford-E-021-16.aspx>.

You are now able to provide written comment specifically on the state board staff report. All written comments should be addressed and sent to:

Courtney Avery, Board Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson St., 2nd Floor
Springfield IL 62761

The Board cannot accept written comments that are submitted electronically.

The exemption application you are asking about will be on the October 25 agenda. The final agenda will be posted on October 21 in accordance with the Open Meetings Act.

You can provide oral public comment at the meeting. You can sign up to provide oral public comment before the meeting or the morning of the meeting. However, the Board respectfully requests that you submit a public participation registration form located at <https://www.illinois.gov/sites/hfsrb/events/Documents/HFSRB%20Public%20Participation%20Sign-in%20Form.doc> before the meeting so that we know how many individuals will be providing oral comments. All public participants are allotted 2 minutes to provide comments to the board regarding items on the day's agenda.

Best,

Juan

Juan Morado Jr.
General Counsel and Ethics Officer
Health Facilities and Services Review Board
69 West Washington Street Suite 3500
Chicago, IL 60602
Office- 312.814.2678
Email- juan.morado2@illinois.gov

ATTACHMENT ONE



CONFIDENTIALITY NOTICE: This e-mail (and attachments) contains information that belongs to the sender and may be confidential or protected by attorney-client or attorney work product privilege. The information is only for the intended recipient. If you are not the named or intended recipient, please do not disclose, copy, distribute, or use this information. If you have received this transmission in error, please promptly notify the sender of receipt of the e-mail and then destroy all copies of it. Receipt by unintended recipient does not waive attorney-client privilege or attorney work product privilege or any other exemption from disclosure. Thank you.

From: DR J.E. Dukes [mailto:bishopjedukes@aol.com]
Sent: Friday, October 14, 2016 8:44 AM
To: Avery, Courtney
Subject: [External] Re: Mercy Rockford Public Hearing Notice

Once again thanks for your tremendous help.
I just have a few follow up questions about the process

1. Is the project still on the October 25 agenda?
 - a. The CON Board's website still lists the Rockford exemption as a project scheduled for the October 25 meeting.
 - b. But the same web page shows that there are no Exemption Requests before the Board on October 25.
 - c. No staff report has been posted for the Rockford exemption.
 - d. We still don't know what standards the CON Board will apply to the Rockford exemption and were expecting those standards to be addressed in the staff report.
2. Why hasn't the transcript of the public hearing been posted on the Board's website? The hearing was held on September 16, almost four weeks ago.
3. Why didn't the CON Board timely post Mercy-Rockford's alteration requests that it received on September 2?
 - a. We just learned about the alterations yesterday when the staff reports were posted.
 - b. At the public hearing on September 16, and in the media afterwards, Mercy-Rockford representatives ridiculed our speakers for questioning the addition of NICU beds that were said to be needed at the West side facility on Rockton Avenue. But two weeks earlier, Mercy-Rockford had already submitted the alteration request to have those 6 beds added to the new hospital on the East side at I-39 and Riverside. That was not even mentioned by Mercy-Rockford at the public hearing and in the media. Why didn't the Board's staff let us know about the alteration request?

In Him
Dr. James E. Dukes



From The Episcopal Desk Of Bishop James E. Dukes

August 23, 2016

Via Facsimile and E-mail

Ms. Courtney R. Avery
Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson St., Second Floor
Springfield, IL 62761

Re: Rockford Memorial Hospital / Project # E-021-16

Dear Administrator Avery:

As you know, I joined pastors from Rockford in requesting a public hearing on the above matter. I write to object most strongly to the last-minute schedule changes and associated irregularities regarding opportunity for public input. I most strongly urge that the original schedule, as originally published on the website of the Illinois Health Facilities and Services Review Board ("Review Board"), be reinstated and followed.

ATTACHMENT TWO

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As you know, in our telephone conversation right after my public hearing request was filed, I stressed the importance of scheduling the public hearing after Labor Day for the convenience of parents with children returning to school. I was disappointed that the public hearing was set for August 31, but took solace in the fact that written comments could be submitted up to 20 days prior to the Review Board's meeting on October 25, 2016, the published agenda of which included the above project. That original schedule, for both the public hearing and Review Board meeting, appeared on the agency website beginning August 17, 2016.

Then inexplicably, without advance notice to me or my fellow public hearing requestors, the schedule changed. Late yesterday the agency website moved this project to the September 13 Review Board meeting. It seems apparent that your agency has no desire to sincerely allow for public input, and is playing a game that will render written comments *ex parte* communications that may not be considered.

It is rich irony that these irregularities are associated with the very same applicant that was at the center of the biggest scandal in Review Board history. It seems clear that the interest of this applicant in expediting matters is more important than allowing for meaningful public input from the involved community. Your last-minute scheduling change has made efforts by my pastoral colleagues and me futile in regards to written comments from parishioners. Adding to the irony is this passage from the statute, as amended in the wake of the scandal mentioned earlier, that is supposed to govern Review Board procedure: "The integrity of the Certificate of Need process is ensured through revised ethics and communications procedures."

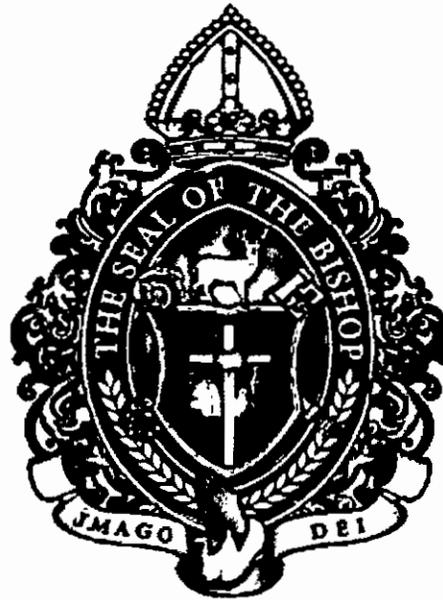
Among the irregularities that trouble my fellow pastors and me are the following:

- The new August 30 deadline for written comment ends before the public hearing on August 31. How can that be?
- The new August 30 deadline violates the Review Board's own rules that require board meetings to be at least 20 days after the close of the written comment period (you have now scheduled this project for just 13 days after the close of the written comment). How can that be?
- Under the Review Board's rules, all written comments received after 20 days prior to a board meeting "shall be considered *ex parte*, and shall not be forwarded to HFSRB..." Accordingly, your last-minute scheduling change to the September 13 board meeting now makes all public comment submitted after tomorrow (August 24) *ex parte*, including comments made at the August 31 public hearing. How can that be?
- The Review Board set a special written comment deadline only for this applicant -- all other projects on the September Review Board agenda have a written comment deadline of August 24 in compliance with the agency's 20-day rule. How can that be?
- There are no standards in the Review Board rules for consideration of this project as an "exemption" rather than a formal Certificate of Need. Those standards were repealed last year. What standards will the agency use in reviewing this project, where are those standards found, and what filings have been required of the applicant to demonstrate that it meets those standards?

In all candor, it appears that every effort has been made to accommodate this applicant at the expense of public input. This is inconsistent with public policy, the Health Facilities Planning Act, and Review Board regulations. Please let me know without delay if the Review Board will honor the original schedule, as published on the agency website beginning August 17, or if the last-minute switch published late yesterday will be followed irrespective of Review Board protocol and rules.

Respectfully,

+Bishop James E. Dukes



From The Episcopal Desk Of Bishop James E. Dukes

Date: September 16, 2016
Submitted by: James E. Dukes

Public Hearing Comments on Rockford Memorial Hospital / Project # E-021-16

Thank you Hearing Officer and Member of the Board.

My name is Bishop James E. Dukes. I serve as Senior Pastor of the Liberation Christian Church in Chicago, and am the Bishop of Social Justice for the United Covenant Churches of Christ (UCCC). There are multiple UCCC-affiliated churches located in Rockford and I am here to speak on behalf of hundreds of Rockford residents who have expressed not only an interest, but also a grave concern, about this project and MercyRockford. More than 50 of those

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Pg. 2 of 15

folks are here today, but I can tell you that there are hundreds more who would be here if they could be. When you schedule a public hearing in this community at 11 o'clock in the morning on a weekday, on a workday, on a school day, you have guaranteed that a majority of the public who would have attended, will not attend, because this is not an accessible time for the members of this community who are most affected by this project. I am fortunate to have been able to attend, and I speak on behalf of those who could not be here.

I have been told that this hearing is only about six neonatal intensive care beds at MercyRockford. Well there is a lot more going on here than six beds, and the public needs to know about it. But let's start with the six beds.

I have two questions about these six beds. First, where are they going to be located? And, more importantly, how long are they going to be there? We know where the beds are going. The application says that they are for MercyRockford's West Side facility on Rockton Avenue. But the application is not telling us **how long** they are going to be there, and that is a relevant question. Shouldn't the community know how long those beds are going to be there, and how long the neonatal intensive care unit at Rockton Avenue is going to be there? MercyRockford's application doesn't tell us that.

There is a Notice about this project on the CON Board's website, and that notice says, [quote] "On November 17, 2015, Rockford Memorial Hospital was approved by the State Board to discontinue its 46-bed NICU unit service at 2400 North Rockton Avenue.... [T]he State Board agrees to allow Rockford Memorial Hospital to continue to operate its 46-bed NICU unit at the Rockton Avenue campus **until such time as their new Hospital was constructed and ready to be occupied at I-90/39 & East Riverside Blvd....**" (Attachment 1.) So the CON Board is telling us that the 46-bed Neonatal Intensive Care Unit, and these

Duke
Pg. 3 of 15

additional six beds, are only going to be at Rockton Avenue "until such time" as the new hospital on the East Side is ready.

Then what happens? Then the neonatal unit at Rockton Avenue is shut down. And that's not the only thing the CON Board approved last November. The neonatal ICU will be closed, the pediatric ICU will be closed, the adult ICU will be closed, the Obstetrics unit will be closed, the cardiac cath service will be closed, the open heart surgery service will be closed, and the Level I Trauma Center will be closed. The six beds are just the tip of the iceberg of services that will be shut down on the West Side. But they are all connected. They were all part of the same deal last November. And I've been told that's a "done deal."

And now, adding insult to injury, we have this application for six short-lived beds at Rockton Avenue. Why does MercyRockford want six more beds for a unit they will be closing in a few years? Their application says that these beds are needed because Crusader Clinic made a "recent decision to align its women's and children's services, including newborn care, with Rockford Memorial Hospital." What the application doesn't say is that MercyRockford's deal with Crusader Clinic means that Crusader will no longer be referring patients to SwedishAmerican Hospital.

What does that mean to the West Side? It means that when MercyRockford closes its services at Rockton Avenue, Crusader patients won't be able to go to the next nearest hospital, SwedishAmerican. Instead, these patients will all have to go to the new Mercy hospital on the East side. Who benefits from that? Certainly not West side residents. That's a big burden on West side residents. That's going to make access to the critical health care services much more difficult for West side residents.

Dulles
Pg 2/7/15

When MercyRockford got approval to close down all those acute care services on the West side, did they tell everyone that they also planned to cut a deal with Crusader Clinic so that the West-siders wouldn't even have access to SwedishAmerican anymore, and that they'd all be shipped over to MercyRockford's new hospital on the east side? I don't think so. MercyRockford is abandoning the West side by closing acute care services at its Rockton Avenue campus. Now with this Crusader deal, MercyRockford is even blocking West side access to acute care services at SwedishAmerican.

Is anyone concerned about the West side's access to health care? I understand the Winnebago County Health Department sent a letter to the CON Board when MercyRockford proposed to close all those acute care services on the West side and said that it wanted to, [quote] **"Ensure that populations at highest risk for poor health outcomes have access to the entire continuum of care including primary prevention, acute care and restorative/rehabilitative care to achieve high health equity."** (Attachment 2.) Isn't the West side a high risk population for poor health outcomes? Shouldn't the West side have access to the entire continuum of care including neonatal intensive care, pediatric intensive care, adult intensive care, obstetrics, cardiac cath, open heart, obstetrics, and Level I Trauma Center? Where is the equity here?

The Winnebago County Health Department also said that there needs to be a "focus on accessibility to the care including proximity if it is going to be used effectively." Here you have the County Health Department itself saying that when you move critical care services farther away from a high risk population, you reduce the accessibility and the effectiveness of those services. That's exactly what's happening here, but the County and the State let it happen.

Dulles
Pg. 2 of 15

I've heard about some services that MercyRockford promises to keep on the West Side – but I didn't hear anything about a neonatal intensive care unit, or a pediatric intensive care unit, or an adult intensive care unit, or an obstetrics unit, or a cardiac cath service, or an open heart surgery service, or a Level I Trauma Center. Those are the things that are really needed here. But we don't hear anything about those because they are all going to be closed, and from what I see, the affected West side community is not fully aware of what is happening over there at Rockford Memorial.

And now with this Crusader deal, West-side Crusader patients will be denied access to critical acute care services both at Mercy's Rockton Avenue hospital *and* at SwedishAmerican. Has anyone studied the impact on poor health outcomes resulting from Crusader Clinic's decision to no longer send patients to what will be the nearest hospital and instead sending them to the hospital that is furthest away from the West side? MercyRockford's new hospital will be even farther away than OSF Saint Anthony. Who's watching out for the high risk populations on the West side? Anybody?

I've read that MercyRockford wants to turn its new hospital on the east side into a "Destination" hospital. A destination for whom? Not West-side residents, who will face long daily commutes when family members are admitted for long-term stays. I've read that MercyRockford wants to build hotels and restaurants and all kinds of amenities for folks in Wisconsin to come down for extended stays in Rockford while their family members are at the brand new hospital on the East side. I fear that there is more concern about people in Wisconsin, where Mercy came from, than for people living in Rockford's own West side. And who is going to profit from all these restaurants and hotels and amenities? Mercy owns the land, are they going to own the hotels and the restaurants too?

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Pg. 6/15

The East side gets a new hospital, and new hotels and new restaurants and new amenities. What does the West side get? MercyRockford told the CON Board last November that they would commit \$50 million dollars over ten years to the Rockton Avenue campus. That's \$5 million dollars a year. You can't even change the carpeting there for \$5 million dollars. That hospital building on the west side is going to be a dilapidated, decaying, public blight at \$5 million dollars a year. And will MercyRockford even be there for ten more years?

When MercyRockford was in front of the Board last November to close down services at the Rockton Avenue campus, the Chairlady of the CON Board announced that MercyRockford could, [quote] "Completely close down the Rockford Memorial site on Rockton Avenue and there would have been nothing that this Board could do to stop that." (Attachment 3.) If MercyRockford could do it then, they could do it now, and based on what I just read there is nothing that this CON Board would do to stop it. All these promises we've heard about for the West side are only that, promises. All the real money, all the critical services, all the attention and all the focus is on the East side. MercyRockford can pull the plug on that West-side facility any time they want because they've been told by the State that there is nothing anybody can do to stop it.

I object to this project, and I object to the process. I'm not seeing the transparency that was promised after the Mercy scandal in 2004. I still don't know what standards this Board is going to apply to this project, even though I've asked for them in writing a month ago.

The West-side community deserves more transparency and answers. On both the merits and the process, more attention to West-side needs must be given. The current MercyRockford application and its reliance on an unfortunate deal with Crusader is the only pending means to seek transparency and answers.

Disney
7/15/15

I respectfully ask that the current application be denied or deferred until such transparency and answers are provided. Thank you.

pg. 8 of 11

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9 of 15

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HFSRB (/sites/hfsrb/Pages/default.aspx) Rules, Statutes & Notices

E-021-16 Rockford Memorial Hospital, Rockford

Date: 7/26/2016

In accordance with the requirements of the Illinois Health Facilities Planning Act, Notice is given of a receipt of the establishment of a fifty two (52) bed Neonatal Intensive Care Unit (NICU) application #E-021-16 - Rockford Memorial Hospital. The proposed NICU category of service will be located at 2400 North Rockton Avenue, Rockford, Illinois. The applicants are Mercy Health Corporation and Rockford Memorial Hospital. The approximate cost of the project is \$500,000. The operating entity licensee is Rockford Memorial Hospital. The anticipated completion date is October 31, 2016.

On November 17, 2015, Rockford Memorial Hospital was approved by the State Board to discontinue its forty six (46) bed NICU service at 2400 North Rockton Avenue, Rockford, Illinois. At that time the State Board agreed to allow Rockford Memorial Hospital to continue to operate its forty six (46) bed NICU unit at the Rockton Avenue campus until such time as their new Hospital was constructed and ready to be occupied at 1-90/39 & East Riverside Blvd, Rockford, Illinois. Due to increase workload, Rockford Memorial Hospital (Rockton Avenue Campus) is in need of an additional six (6) NICU beds. To accommodate this additional workload Rockford Memorial Hospital has to reestablish the NICU service with a total of fifty two (52) beds.

- E-021-16 Rockford Memorial Hospital, Rockford
(/sites/hfsrb/Projects/ProjectDocuments/Exempt/E-021-16/2016-07-15%20E-021-16%20EXEMPTION%20APPLICATION.pdf)- Application

This exemption application was declared complete on July 26, 2016. Written requests for a public hearing must be received by the Illinois Health Facilities and Services Review Board no later than August 10, 2016. Request for a public hearing must be sent by letter to the administrator at the address below. No emails or faxes will be accepted.

ATTACHMENT 1

9/14/2016

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Pg. 10 of 15

The application is scheduled to be heard at the October 25, 2016 State Board Meeting to be held in Bolingbrook, Illinois. Any persons wanting to submit written comments on this exemption must submit those comments by October 5, 2016 by letter at the address below. No emails or faxes will be accepted. The State Board will post its findings in a State Board Staff Report, and the report will be made available via the internet on October 11, 2016. The public may submit written responses in support of or in opposition to the findings of the Illinois Health Facilities and Services Review Board. The public will have until 9:00 am, October 17, 2016.

Rules and Statutes
(/sites/hfsrb/rules/Pages/default.aspx)

Administrative Rules
(/sites/hfsrb/rules/Pages/Administrative-Rules.aspx)

Amendments to Rules
(/sites/hfsrb/rules/Pages/Amendments-to-Rules.aspx)

Court Rulings
(/sites/hfsrb/rules/Pages/Court-Rulings.aspx)

Proposed Legislation
(/sites/hfsrb/rules/Pages/Proposed-Legislation.aspx)

Public Act 96-0031
(/sites/hfsrb/rules/Documents/096-0031.pdf)

Public Notices
(/sites/hfsrb/rules/Pages/Public-Notices.aspx)

Illinois Health Facilities and Services Review Board
525 W. Jefferson St., Second Floor
Springfield, IL 62761
Phone: 217-782-3516
TTY: 800-547-0466
Fax: 217-785-4111

(/sites/hfsrb/About/Pages/Contact.aspx)

Illinois.gov Home (/)

9/14/2016

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Pg 11 of 15

Winnebago County Health Department

Promoting a Safer and Healthier Community Since 1854

Sandra Martell, RN, DNP
Public Health Administrator

October 22, 2015

RECEIVED

OCT 26 2015

HEALTH FACILITIES &
SERVICES REVIEW BOARD

Ms. Courtney Avery
Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson
Springfield, IL 62761

Re: MercyRockford Health System – Project Numbers: 15-038, 15-039, 15-040

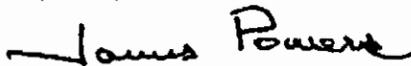
Dear Ms. Avery,

As the state certified local health department for Winnebago County including the City of Rockford, the Winnebago County Health Department is committed to its mission of healthy people in a healthy community without health disparities.

Access to care including behavioral and oral health was identified by the community through the iPLAN (Illinois Project for Local Assessment of Needs) assessment process as a priority health issue for the community by the community. Strategies that expand healthcare services are welcome in support of the Community Health Improvement Plan. Populations of highest risk are concentrated in the west region of Winnebago County based on data from the most recent iPLAN and Healthy Community Survey data. Expansion needs to ensure that populations at highest risk for poor health outcomes have access to the entire continuum of care including primary prevention, acute care, and restorative/rehabilitative care to achieve health equity. It also needs to focus on accessibility to the care including proximity if it is going to be used effectively.

The Winnebago County Board of Health believes that any project for our jurisdiction brought before the Illinois Health Facilities and Services Review Board should support this goal. Thank you for considering our thoughts in your review of these projects.

Respectfully,



James Powers, LCSW
President, Winnebago County Board of Health

Susan Fernandez, RN
Angie Goral
Luci Hoover
Ronald Gottschalk

John Halverson, DDS
David Helland, DVM
Patricia Lewis, RN, PhD
Steven Lidvall, MD

Jaymie Nelson
Allen Williams, MD
Robert W. Theis



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ATTACHMENT 2

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Transcript of Full Meeting

Date: November 17, 2015

Case: State of Illinois Health Facilities and Services Review Board

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1 TPA IF I had a stroke?

2 DR. BREDENKAMP: Yes, ma'am.

3 CHAIRWOMAN OLSON: And then, Mike, I just
4 want to clarify -- with you or Juan, either one.

5 Because of the new rule, the new law -- not
6 rule, law - that was passed in July of this year,
7 MercyRockford Memorial could have come in today with
8 an exemption request to close the west-side hospital
9 and, had they submitted all the necessary paperwork,
10 that would have been a done deal?

11 MR. CONSTANTINO: They had that option, yes.

12 CHAIRWOMAN OLSON: Thank you.

13 Other questions from Board members?

14 Doctor.

15 MEMBER GOYAL: My name is Arvind Goyal, and
16 I represent, ex officio, the Medicaid program, also
17 called Health Care and Family Services.

18 So my question is very specific. I need to
19 preface that by saying my business school education
20 taught me that, if you are losing money in operations,
21 you will not be in business too long.

22 MR. BEA: There you go.

23 MEMBER GOYAL: Prefacing that, I want to ask
24 you a very straight question at my level, which is,

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1 previously made and very articulately so, I'm very
2 proud to say I will vote yes.
3 MR. ROATE: Thank you.
4 Mr. Hayes.
5 VICE CHAIRMAN HAYES: I'm going to vote yes.
6 And I understand that there are some
7 criteria that were not met, but we have a situation
8 where we are reducing the bed count and, also, the
9 ability to be able to remain on the west side of
10 Rockford as well as being able to, you know, improve
11 the financial health and the new hospital there and
12 the economic development aspects to it.
13 So I vote yes.
14 MR. ROATE: Thank you.
15 Mr. Johnson.
16 MEMBER JOHNSON: For previously stated
17 reasons but, more specifically, Justice Gelman's
18 comments on making sure that you -- hopefully -- that
19 you'll continue to listen to the voice of the people
20 and incorporate that into your plans, I'll vote yes.
21 MR. BEA: Thank you.
22 MR. ROATE: Thank you.
23 Madam Chair.
24 CHAIRWOMAN OLSON: I vote yes, as well.

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1 I believe that, contrary to some of the opposition,
2 that this project shows a huge commitment to health
3 care on the west side of Rockford.

4 My concern was that the Applicant could have
5 easily come in with an exemption request to completely
6 close down the Rockford Memorial site on Rockton
7 Avenue and there would have been nothing that this
8 Board could do to stop that.

9 For those reasons I vote yes.

10 MR. ROATE: Thank you, Madam Chair.

11 That's 8 votes in the affirmative.

12 CHAIRWOMAN OLSON: The motion passes.

13 Can we have a roll call vote on

14 Project 15-039.

15 MR. ROATE: Motion made by Mr. Galassie;
16 seconded by Mr. Bradley.

17 Mr. Bradley.

18 MEMBER BRADLEY: This is another part of the
19 Rockford -

20 CHAIRWOMAN OLSON: Yes.

21 MR. ROATE: Yes, sir.

22 MEMBER BRADLEY: Yes. For the reasons
23 I stated earlier, I vote yes.

24 MR. ROATE: Thank you.

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