



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

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

February 17, 2016

CERTIFIED MAIL

Keith Page, President & CEO
Anderson Hospital
6800 State Road 162
Maryville, Illinois 62062

RE: Change of Ownership Exemption
Exemption: E-009-16, Community Memorial Hospital Stauton, Illinois
Exemption Holder: Southwestern Illinois Health Facilities, Inc. dba Anderson Hospital
- Community Memorial Hospital Association
Owner of Physical Plant: Community Memorial Hospital Association
Entity to be Licensed: Community Memorial Hospital Association

Dear Mr. Page:

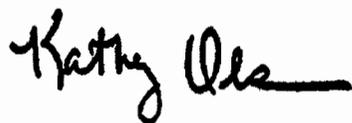
On February 16, 2016, the Chairwoman of the Illinois Health Facilities and Services Review Board (State Board) approved your request for a Change of Ownership. This approval was based upon the application's compliance with applicable provisions of 77 Ill. Adm. Code 1130.140 1130.520 and P.A. 99-0154. The change of ownership is for Community Memorial Hospital, 400 Caldwell, Stauton, Illinois. The entity to be licensed is Community Memorial Hospital Association. The exemption is a change in membership or sponsorship of a not-for-profit corporation that is the licensed entity. The fair market value of the transaction is \$24,000,000.

If applicable, within 90 days of the closing date of the transaction, the exemption holder must certify that it did or did not complete the transaction according to the key terms detailed in the application. If any of the key terms of the transaction changed, a new application will be required. Exemption holders who submitted the final transaction document along with their application merely need to notify the State Board of the date the ownership changed.

Please be advised that the Exemption is not transferable or assignable and that the State Board's approval does not exempt the transaction from any other regulatory, certification or licensure requirements that may be applicable prior to this acquisition. Should the facility for which the Exemption was granted cease to be an existing health care facility as defined in 77 Ill. Adm. Code 1130.140, this exemption will be invalid.

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 black ink that reads "Kathy Olson". The signature is written in a cursive style with a long horizontal stroke at the end.

Kathy Olson, Board Chair
Illinois Health Facilities and Services Review Board