

State of Illinois
Health Facilities and Services Review Board

525 West Jefferson Street, 2nd Floor, Springfield, Illinois 62761 (217) 782-3516, (217) 785-4111 (fax)
www.hfsrb.illinois.gov

A G E N D A

(M-316) – **FINAL** (per 2 IAC 1925.240)

Final Agenda will be posted no later than
9:00 A.M. October 26, 2021

And at the

Health Facilities and Services Review Board's office

MEETING WILL BE CONDUCTED VIA WEBEX

<https://illinois.webex.com/illinois/onstage/g.php?MTID=eb17c4e34fd9980efa0e62aae36e15109>

Event Code: 2462 267 8771

1. **CALL TO ORDER: Tuesday, October 26, 2021 - 9:00 A.M.**
2. **APPROVAL OF AGENDA**
3. **APPROVAL OF TRANSCRIPTS: September 14, 2021**
4. **EXECUTIVE SESSION**
 - A. **IMPENDING AND PENDING ADMINISTRATIVE AND JUDICIAL ACTIONS**
5. **COMPLIANCE ISSUES / SETTLEMENT AGREEMENTS / FINAL ORDERS**
 - A. Referrals to Legal Counsel
 - i. Community First Medical Center, Chicago
 - B. Final Orders
 - i. HFSRB 19-01 Provident Hospital of Cook County-Amendment to Consent Agreement
 - ii. HFSRB 21-04 Ophthalmology Surgery Center of Illinois, LLC
 - iii. HFSRB 21-05 Cook County Health and Hospital Systems
 - iv. HFSRB 21-03 Applewood Rehabilitation Center
6. **ITEMS APPROVED BY THE CHAIRWOMAN**
 - i. #E-028-21 – Ravine Way Surgery Center Change of Ownership
 - ii. #E-029-21 – NorthShore Evanston Hospital Change of Ownership
 - iii. #E-030-21 – NorthShore Glenbrook Hospital Change of Ownership
 - iv. #E-031-21 – NorthShore Highland Park Hospital Change of Ownership
 - v. #E-032-21 – NorthShore Skokie Hospital Change of Ownership
 - vi. #E-033-21 – Swedish Hospital Change of Ownership
 - vii. #E-034-21 – Elmhurst Memorial Hospital Change of Ownership
 - viii. #E-035-21 – Edward Hospital Change of Ownership
 - ix. #E-036-21 – Edward Plainfield Emergency Center Change of Ownership
 - x. #E-037-21 – Elmhurst Outpatient Surgery Center
 - xi. #E-038-21- Linden Oaks Behavioral Hospital Change of Ownership
 - xii. #E-039-21 – Northwest Community Foot and Ankle Center Change of Ownership
 - xiii. #E-039-21 – Northwest Community Hospital Change of Ownership
 - xiv. #E-041-21 – Midwest Endo Center Change of Ownership
 - xv. #E-042-21 – Northwest Community Endoscopy Center Change of Ownership
 - xvi. #E-043-21 – Northwest Community Day Surgery Center II Change of Ownership

NOTICE: THIS MEETING WILL BE ACCESSIBLE TO PERSONS WITH SPECIAL NEEDS IN COMPLIANCE WITH PERTINENT STATE AND FEDERAL LAWS UPON NOTIFICATION OF ANTICIPATED ATTENDANCE. PERSONS WITH SPECIAL NEEDS SHOULD CONTACT **COURTNEY AVERY** AT THE HEALTH FACILITIES AND SERVICES REVIEW BOARD OFFICE BY TELEPHONE AT (217) 782-3516 (TTY # 800-547-0466 FOR HEARING IMPAIRED ONLY) OR BY LETTER NO LATER THAN October 22, 2021.

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- xvii. #21-020 – AMITA Alexian Brothers Medical Center – Modernization of Hospital
- xviii. #21-022 – Northwestern Medicine Surgery Center – Add Surgical Specialties
- xix. #21-023 – AMITA Health Romeoville Infusion Therapy Center Establishment
- xx. #21-024 - Decatur Memorial Hospital – Discontinuation of Open-Heart and AMI Categories of Service
- xxi. #21-027 – Sarah Bush Lincoln Hospital – Modernization add 5 ICU beds and 15 observation beds.

7. ITEMS FOR STATE BOARD ACTION:

PERMIT RENEWAL REQUESTS - PUBLIC PARTICIPATION SCHEDULED FOR A MAXIMUM OF 30 MINUTES

Item	Facility	City	Number	
A-01	DeKalb County Nursing and Rehab Center (12-Month Renewal)	DeKalb HSA I	18-005	_____
A-02	Advocate Sherman Ambulatory Surgery Center (4-Month Renewal)	Elgin HSA VII	16-038	_____

8. APPLICATIONS SUBSEQUENT TO INTENT TO DENY - PUBLIC PARTICIPATION SCHEDULED FOR A MAXIMUM OF 30 MINUTES

Item	Facility	City	Number	
I-01	OrthoIllinois (Establish an ASTC)	Elgin HSA VIII	20-040	_____
I-02	Physicians Surgery Center (Add Specialties)	O’Fallon HSA XI	21-011	_____

- A. EXTENSION REQUESTS (NONE)
- B. EXEMPTION REQUESTS (NONE)
- C. ALTERATION REQUESTS (NONE)

9. DECLARATORY RULINGS/OTHER BUSINESS - PUBLIC PARTICIPATIONSCHEDULED FOR A MAXIMUM OF 30 MINUTES

Item	Facility	City	Number	
E-01	Comprehensive Cancer Center (Alteration to Permit #19-057)	Peoria HSA II	19-057	_____

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F. HEALTH CARE WORKER SELF-REFERRAL ACT (NONE)

G. STATUS REPORTS ON CONDITIONAL/CONTINGENT PERMITS (NONE)

H. APPLICATIONS SUBSEQUENT TO INITIAL REVIEW – PUBLIC PARTICIPATION SCHEDULED FOR A MAXIMUM OF 30 MINUTES

Item	Facility	City	Number	
H-01	NANI Sycamore Dialysis Establish 10-Station ESRD Facility	Sycamore HSA I	21-019	_____
H-02	NorthPointe Birth Center Establish Birthing Center	Roscoe HSA I	21-021	_____
H-03	Dialysis Care Center Rockford Add 4 ESRD Stations	Rockford HSA I	21-028	_____

10. RULES DEVELOPMENT (NONE)

11. UNFINISHED BUSINESS (NONE)

12. OTHER BUSINESS - PUBLIC PARTICIPATION SCHEDULED FOR A MAXIMUM OF 30 MINUTES

- A. Inventory of Health Care Facilities and Services and Need Determinations (2021)
- B. 2022 Meeting Dates

13. PUBLIC PARTICIPATION CONTINUED

14. ADJOURNMENT

FOR TRANSCRIPTS OF THIS MEETING CONTACT:
Illinois Health Facilities and Services Review Board
525 West Jefferson Street, 2nd Floor
Springfield, Illinois 62761
(217)782-3516

15. 2022 MEETING DATES WILL BE POSTED AT: www.hfsrb.illinois.gov

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GLOSSARY OF ABBREVIATIONS	
AMI	Acute Mental Illness
ADRD	Alzheimer's Disease and Related Disorders
ASTC	Ambulatory Surgical Treatment Center
Bldg.	building
Cath.	Catheterization (as in Cardiac Catheterization)
CCRC	Continuing Care Retirement Community
Comm.	Community
Const.	Construct
Ctr.	Center
CON	Certificate of Need
Dis.	Discontinue
ED	Emergency Department
ESRD	End Stage Renal Disease
Est.	Establish
Hlth.	Health
Hosp.	Hospital
ICF/DD	Intermediate Care Facility for the Developmentally Disabled
ICU	Intensive Care Unit
LDR	Labor-Delivery-Recovery
LTACH	Long-term Acute Care Hospital
LTC	Long Term Care
MOB	Medical Office Building
Med/Surg	Medical-Surgical
NIC	Neonatal Intensive Care
OB	Obstetric
OR	Operating Room
Peds	Pediatrics
Rehab	Rehabilitation
SNF	Skilled Nursing Facility
Swing beds	Acute care beds certified for extended care category of service
TBA	To Be Announced

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