

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, 2018 at the

Health Facilities and Services Review Board's office
and at the meeting location.

Bolingbrook Golf Club

2001 Rodeo Drive

Bolingbrook, Illinois

1. PUBLIC PARTICIPATION REGISTRATION/CHECK-IN: 8:30 A.M. – 9:00A.M.

2. CALL TO ORDER: Tuesday, October 30, 2018 - 9:00 A.M.

3. EXECUTIVE SESSION

A. IMPENDING AND PENDING ADMINISTRATIVE AND JUDICIAL ACTIONS

4. COMPLIANCE ISSUES / SETTLEMENT AGREEMENTS / FINAL ORDERS

A. Referrals to Legal Counsel

B. Final Orders

i. Scottish Home, HFSRB #18-06

ii. Bridgeview Health Care Center, HFSRB #18-07

C. Settlement Arrangements

i. St. Paul's Home, HFSRB #15-10 (Project #10-003)

ii. Foxpoint Dialysis, HFSRB #18-01 (Project #16-037)

5. APPROVAL OF AGENDA

6. APPROVAL OF MEETING TRANSCRIPTS: July 24, 2018

7. PUBLIC PARTICIPATION

8. ITEMS APPROVED BY THE CHAIRWOMAN (NONE)

9. ITEMS FOR STATE BOARD ACTION

A. PERMIT RENEWAL REQUEST

Item	Opposition	Facility	City	Number	
A-01	No	DaVita Jerseyville Dialysis Six-Month Renewal	Jerseyville HSA-III	16-040	_____

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A-02	No	Franciscan St. James Health Six-Month Renewal	Olympia Fields HSA-VII	16-005	_____
A-03	No	Vascular Access Centers of Illinois Eight-Month Renewal (2 nd Renewal)	Chicago HSA- VI	17-047	_____
A-04	No	FMC Ross Dialysis Eighteen-Month Renewal	Chicago HSA VI	16-029	_____
A-05	No	FKC Paris Community Eighteen Month Renewal	Paris HSA IV	16-042	_____
A-06	No	Advocate Christ Medical Center Eleven-Month Renewal	Oak Lawn HSA-VII	12-066	_____
A-07	No	DaVita Brighton Park Dialysis Six-Month Renewal	Chicago HSA-VI	16-033	_____
A-08	No	Silver Oaks Hospital Six-Month Renewal	New Lenox HSA-IX	17-009	_____
A-09	No	Rush-Copley Medical Center Twelve-Month Renewal	Aurora HSA-VIII	14-028	_____
A-10	No	SHS St Anthony's Hospital Three-Month Renewal	Effingham HSA-V	14-056	_____

B. EXTENSION REQUESTS

Item	Opposition	Facility	City	Number	
B-01	No	FKC Paris Community Extension of Financial Commitment Twelve Months	Paris HSA-IV	16-042	_____

C. EXEMPTION REQUESTS

Item	Opposition	Facility	City	Number	
C-01	No	Community Hospital of Staunton Discontinue 4-Bed ICU Unit	Staunton HSA III	E-043-18	_____
C-02	No	OSF St. Anthony's Medical Center Discontinue 13-Bed Pediatric Category of Service	Rockford HSA I	E-044-18	_____
C-03	No	Little Company of Mary Hospital Discontinue 20-Bed Pediatric Category of Service	Chicago HSA VI	E-045-18	_____

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Item	Opposition	Facility	City	Number	
C-04	No	Six Corners Same Day Surgery Center Change of Ownership (Real Estate)	Chicago HSA VI	E-046-18	_____
C-05	No	OSF Saint Anthony Health Center Discontinue 20-Bed Obstetric Unit	Alton HSAV	E-047-18	_____
C-06	No	Quad City Endoscopy Surgery Ctr. Change of Ownership	Moline HSA X	E-048-18	_____
C-07	No	Louis A Weiss Memorial Hospital Change of Ownership	Chicago HSA VI	E-050-18	_____
C-08	No	VHS West Suburban Medical Center Change of Ownership	Oak Park HSA VII	E-051-18	_____
C-09	No	VHS Westlake Hospital Change of Ownership	Melrose Park VII	E-052-18	_____
C-10	No	Vascular Access Centers of Illinois Change of Ownership	Chicago VI	E-053-18	_____
C-11	No	Northgrove Dialysis Relinquishment of Exemption	Highland	E-038-18	_____
C-12	No	Shelbyville Community Dialysis Change of Ownership	Shelbyville	E-054-18	_____
C-13	No	Manteno Dialysis Centre Change of Ownership	Manteno	E-055-18	_____
C-14	No	Presence Resurrection Medical Center ESRD Change of Ownership	Chicago	E-056-18	_____
C-15	No	Presence St. Mary's Dialysis Center Change of Ownership	Kankakee	E-057-18	_____

D. ALTERATION REQUESTS

Item	Opposition	Facility	City	Number	
D-01	No	Champaign SurgiCenter, Inc. Increase Project Cost by 7% & GSF by 5%	Champaign HSA IV	16-045	_____
D-02	No	Advocate Christ Medical Center Add 14 ICU/Decrease 3 Neonatal Beds	Oak Lawn HSA-VII	12-066	_____

E. DECLARATORY RULINGS/OTHER BUSINESS (NONE)

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

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

H. APPLICATIONS SUBSEQUENT TO INITIAL REVIEW

Item	Opposition	Facility	City	Number	
H-01	No	Retina Surgery Center Establish Limited-Specialty ASTC	Niles HSA-VII	18-002	_____
H-02	No	Beacon Hill Remove CCRC Variance	Lombard HSA VII	18-012	_____
H-03	Yes	Transformative Health of McHenry Establish 84-Bed LTC Facility	McHenry HSA-VIII	18-016	_____
H-04	No	DaVita Marshall Square Establish 12-Station ESRD Facility	Chicago HSA-VI	18-017	_____
H-05	No	Advocate South Suburban Hospital Major Modernization Project	Hazel Crest HSA-VII	18-022	_____
H-06	No	Rush University Medical Center Establish Medical Office Building	Chicago HSA-VI	18-023	_____
H-07	No	Advocate Northshore Pediatric Partners Establish Medical Clinics Building	Wilmette HSA-VII	18-024	_____
H-08	No	University of Chicago Downtown Medical Office Building	Chicago HSA-VI	18-025	_____
H-09	Yes	University Rehabilitation Center (Champaign County Nursing Home) Change of Ownership	Urbana HSA-IV	18-026	_____
H-10	No	Fairfield Memorial Hospital Modernization/Expansion	Fairfield HSA-V	18-029	_____

I. APPLICATIONS SUBSEQUENT TO INTENT TO DENY

Item	Opposition	Facility	City	Number	
I-01	Yes	DaVita Melrose Village Dialysis Establish 12- Station ESRD Facility	Melrose Park HSA VII	17-029	_____

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I-02	No	Fresenius Kidney Care Waukegan Park Establish 12-Station ESRD Facility	Waukegan HSA-VIII	17-060	_____
I-03	No	DaVita North Dunes Dialysis Establish 12-Station ESRD Facility	Waukegan HSA-VIII	17-066	_____
I-04	Yes	Dialysis Care Center Rockford Establish 12-Station ESRD Facility	Rockford HSA I	17-070	_____
I-05	Yes	Dialysis Care Center Hazel Crest Establish 12-Station ESRD Facility	Hazel Crest HSA VII	17-071	_____
I-06	Yes	Fresenius Kidney Care Madison County Establish 9-Station ESRD Facility	Granite City HSA XI	18-006	_____

10. RULES DEVELOPMENT

- a. Part 1130 Hospital Transformation Rules

11. UNFINISHED BUSINESS (NONE)

12. OTHER BUSINESS

- a. Financial Report
- b. 2015 Capital Expenditure Reports
2016 Capital Expenditure Reports
- c. Bed Changes
- d. Sexual Harassment Training

- e. Changes to Profile Information
 - a. Mt. Sinai Hospital 2016 and 2017
 - b. 2017 Hospital Profiles
 - c. 2017 ASTC Profiles
 - d. 2017 LTC Profiles
 - e. 2017 ESRD Profiles

13. ADJOURNMENT

**FOR TRANSCRIPTS OF THIS MEETING CONTACT:
Illinois Health Facilities and Services Review Board**

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Springfield, Illinois 62761
(217)782-3516**

14. NEXT MEETING

December 4, 2018 Location: Bolingbrook
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15. FUTURE MEETINGS

Health Facilities and Services Review Board 2018 Meeting		
December 4, 2018	Bolingbrook	Bolingbrook Golf Club

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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