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Clare Connor Ranalli
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March 6, 2013

Via U.S. Mail and eMail

Ms. Courtney Avery
Administrator
Health Facilities and Services Review Board
525 W. Jefferson Street, 2nd Floor
Springfield, IL 62761

Re: Project Number 10-077 (Heartland Regional Medical Center)


Dear Ms. Avery:

Enclosed is the final realized cost report and related information for the above-referenced project. The completion date was January 3, 2013 (see enclosed email to Mr. Constantino). Should you have any questions, do not hesitate to contact me.

Thank you.

Very truly yours,

MCDERMOTT WILL & EMERY LLP


Clare Connor Ranalli

CCR/am
Enclosures

cc: Mike Constantino
John Lowe
Jim Rayome

DM_US 41433818-1.T13706.0010

RECEIVED

MAR 11 2013

**HEALTH FACILITIES &
SERVICES REVIEW BOARD**

Ranalli, Clare Connor (CHI - X66567)

From: Ranalli, Clare Connor (CHI - X66567)
Sent: Monday, January 07, 2013 1:59 PM
To: 'Constantino, Mike'
Cc: Avery, Courtney
Subject: Project 10-077/Heartland Regional Medical Center

Dear Mike:

This project is complete. It was approved for occupancy on 12/21/2012, and admitted its first patient to the ICU on 01/03/2013. We will be filing the final realized cost report within the allocated time frame. Thank you.

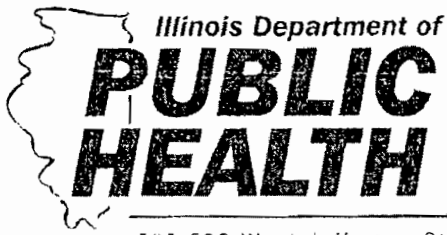
Clare Connor Ranalli | Holland & Knight

Partner

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Phone 312.578.6567 | Fax 312.578.6666

clare.ranalli@hklaw.com | www.hklaw.com



Pat Quinn, Governor

525-535 West Jefferson Street • Springfield, Illinois 62761-0001 • www.idph.state.il.us

December 21, 2012

Mr. Stephen Lunn, Administrator
Heartland Regional Medical Center
3333 West De Young Street
Marion, IL 62959-

1/2/13
J DeVan

Permanent Occupancy

11035.00

Re. Heartland Regional Medical Center
Marion
ICU addition & renovation
IDPH No. 9312

Dear Mr. Lunn:

Based on the evaluation of the physical plant and life safety standards, the above project has been approved for occupancy on 12/21/2012.

If this project changes the bed count for which the facility is licensed for by adding or reducing beds, it will be necessary to contact the Illinois Health Facilities Services and Review Board. As required for the entire facility, this unit must be operated and maintained in accordance with the requirements of the Hospital Licensing Act (210 ILCS 8/1 et. seq.) and the Department's rules entitled Hospital Licensing Requirements (77 Ill. Adm. Code 250). For eligibility for Medicare reimbursement, the unit must be operated and maintained in accordance with the federal Conditions of Participation for hospitals (42 CFR 482.1 et. seq.).

If you have any questions about this approval, please do not hesitate to call us at 217/785-4264. The Department's TTY number is 800/547-0466, for use by the hearing impaired.

Sincerely,

Henry Kowalenko, Division Chief
Division of Life Safety and Construction

Cc: Mr. Richard Miller
Earl Swensson Associates, Inc
2100 West End Ave., Ste 1200
Nashville, TN 37203-

10-077

Improving public health, one community at a time

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HEARTLAND COMMUNITY HOSPITAL
Project No. 10-077

	<u>CON Approved</u>	<u>Final Costs</u>
Planning Costs -	\$ 75,000	\$ 47,447
Site Survey -	\$ 10,000	\$ 9,150
Site Prep -	\$ 205,000	\$ 285,785
Off-Site Work	\$ 0	\$ 0
Construction Contracts	\$3,993,255	\$4,078,757
CM Fee/Gen Cond.	\$ 0	\$ 0
Contingency (5% of Const.)	\$ 249,075	\$ 0
Arch/Eng Fees	\$ 394,300	\$ 433,042
Consultant Fees	\$ 125,000	\$ 124,605
Moveable Equipment	\$1,948,370	\$1,354,966
Bond Issuance	\$ 0	\$
Net Interest	\$ 0	\$ 109,650
Other Capitalized Costs	<u>\$ 0</u>	<u>\$</u>
Total Costs	\$7,000,000	\$6,443,402

APPLICATION AND CERTIFICATE FOR PAYMENT

AIA DOCUMENT G702

TO: Marion Hospital Corporation (IL) d/b/a Heartland Regional Medical Center
 OWNER: 3333 W. Deyoung St
 Marion, IL 62959

FROM: Walsh Construction Company II, LLC
 GENERAL: 929 W. Adams St
 CONTRACTOR: Chicago, Illinois 60607

VIA ARCHITECT: Earl Swensson, Assoc

Application #: 16
 Period From: 1/1/2013
 Period To: 1/31/2013
 WCCI Project #: 211112
 Application Date: 2/4/2013

CONTRACTOR'S APPLICATION FOR PAYMENT

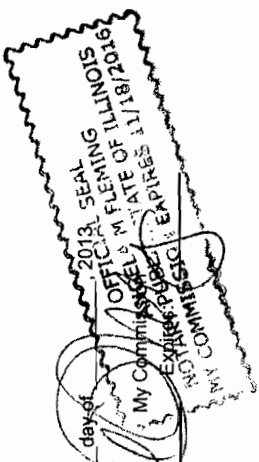
Application is made for payment, as shown below, in connection with the Contract. Continuation Sheet, AIA Document G703, is attached.

1. Original Contract Sum	\$ 4,232,138
2. Net Change by Change Orders	\$ 132,404
3. Contract Sum To Date (Line 1+2)	\$ 4,364,542
4. Total Completed & Stored To Date (Column G on G703)	\$ 4,364,542
5. Retainage	
a. 10% of Completed Work (Columns D+E on G703)	\$ -
b. 10% of Stored Materials (Column F on G703)	\$ -
Total Retainage	
6. Total Earned Less Retainage (Line 4 less Line 5 Total)	\$ 4,364,542
7. Less Previous Certificates For Payment (Line 6 from prior Certificate)	\$ 4,327,401
8. Current Payment Due	\$ 37,141
9. Balance To Finish, Including Retainage (Line 3 less Line 6)	\$ -

CONTRACTOR: WALSH CONSTRUCTION COMPANY II, LLC

By: Wendy Johnson Date: 2/16/13
 Senior Business Group Accountant

State of Illinois
 County of Cook
 Subscribed and sworn to before me this 16 day of February, 2013.



Notary Public: [Signature]

ARCHITECT'S CERTIFICATE FOR PAYMENT

In accordance with the Contract Documents, based on on-site observations and the data comprising this application, the Architect certifies to the Owner that to the best of the Architect's knowledge, information and belief the Work has progressed as indicated, the quality of the Work is in accordance with the Contract Documents, and the Contractor is entitled to payment of the AMOUNT CERTIFIED.

AMOUNT CERTIFIED: \$ 37,141

(Attach explanation if amount certified differs from the amount applied for. Initial all figures on this Application and on the Continuation Sheet that are changed to conform to the amount certified.)

CHANGE ORDER SUMMARY	ADDITIONS	DEDUCTIONS
Total changes approved this Month		
Change Order #		
Date Approved		
see G703		
NET CHANGES BY CHANGE ORDERS	\$ 132,404	

ARCHITECT: Earl Swensson Associates, Inc. Richard I. Miller, architect
 By: [Signature] Date: 2/22/13


This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the Contractor named herein. Issuance, payment and acceptance of payment are without prejudice to any rights of the Owner or Contractor under this Contract.

Project Number: 10-077

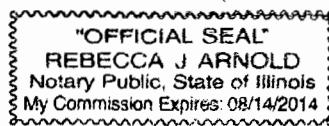
Permit Holder: Heartland Regional Medical Center

Final Realized Cost Report/Certification

I, Stephen Lunn, Administrator of Heartland Regional Medical Center, do hereby attest to the fact that project referenced above is completed and the first patient was admitted to the expanded ICU on January 3, 2013. There has been no change to the size or scope of the project. Attached hereto is a final realized cost report and form G702, or equivalent. There are no additional or associated costs or capital expenditures related to the project that will be submitted for reimbursement under Titles XVIII or XIX and none of the project costs have or will be submitted for reimbursement under Titles XIII and/or XIX.



Administrator, Heartland Regional Medical Center



Signed and Sworn to
Before me this 5th day of
March, 2013.