



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

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

MEMORANDUM

TO: Mike Constantino, Chief – Program Review Section
Division of Health Systems Development

FROM: Kathy J. Olson, Chairwoman
Illinois Health Facilities and Services Review Board

RE: Permit Renewal Request for Project #16-004 DaVita O'Fallon Dialysis,
O'Fallon

This is to advise you that I have reviewed the above-captioned permit renewal request within the requirements in 77 IAC 1130.740 and have determined the following:

 X The request is in compliance with the requirements in 77 IAC 1130.740 and the renewal request is approved.

 This request is to be reviewed by the Health Facilities Planning Board.

 This request is DENIED effective _____ because it does **NOT** comply with the requirements specified in 77 IAC 1130.740.

 Other actions as follows:

Kathy J. Olson, Chairwoman
Illinois Health Facilities and
Services Review Board

August 25, 2017

Date