

RECEIVED

MAR 07 2019

HEALTH FACILITIES & SERVICES REVIEW BOARD

Breese, IL HSHS St. Joseph's Hospital

Decatur, IL. HSHS St. Mary's Hospital

Effingham, IL HSHS St. Anthony's Memorial Hospital

Greenville, IL HSHS Holy Family Hospital

Highland, IL HSHS St. Joseph's Hospital

Litchfield, IL HSHS St. Francis Hospital

O'Fallon, IL HSHS St. Elizabeth's Hospital

Shelbyville, IL HSHS Good Shepherd Hospital

Springfield, IL HSHS St. John's Hospital

Chippewa Falls, WI HSHS St. Joseph's Hospital

Eau Claire, WI HSHS Sacred Heart Hospital

Green Bay, WI HSHS St. Mary's Hospital Medical Center HSHS St. Vincent Hospital

Oconto Falls, WI HSHS St. Clare Memorial Hospital

Sheboygan, WI HSHS St. Nicholas Hospital

HSHS Medical Group

Prairie Cardiovascular

P.O. Box 19456 Springfield, Illinois 62794-9456 P: 217-523-4747 F: 217-523-0542 www.hshs.org

Sponsored by Hospital Sisters Ministries March 7, 2019

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

Re: Annual Progress Report (Section 1130.760)

CON Permit Project # 16-053

HSHS St. John's Hospital, Springfield,
Women's and Children's Health Care Building

Dear Ms. Avery,

This Second Annual Progress Report is being submitted consistent with Section 1130.760. The project has been committed and is, in fact, finished and occupied.

On February 7, 2019 Hospital Sisters Health System requested a four (4) month Permit Renewal (attached) to complete the documentation required to file the final realized cost report. The Renewal Permit was approved by the Review Board on March 5, 2019. The project completion date is now July 12, 2019.

The project scope, as altered and approved (Board Chair letter dated May 3, 2017), remains unchanged. As of February 1, 2019, 84.5% of the approved capitalized project costs have been legally committed or expended. Attachment A delineates these costs. The final capitalized project costs are expected to be below those approved and sufficient resources are available to complete the project.

If you have any questions I can be reached at <u>Amy.Bulpitt@hshs.org</u> or at (217) 492-5851.

Sincerely,

Amy K. Bulpitt

Vice President and General Counsel Hospital Sisters Health System

Enclosures: Attachment A, Project Expenditures / Commitments through February

1, 2019

Permit Renewal Request, February 7, 2019

CC: Mike Constantino, Supervisor, Project Review Section Ed Parkhurst, PRISM Healthcare Consulting

Attachment A Capitalized Project Cost Expenditures CON Permit #16-053

HSHS St. John's Hospital, Springfield Women's and Children's Health Care Building

USE OF FUNDS		Approved Project		Project Expenditures through 2/1/19		To Be Expended (Variance)	
Preplanning Costs	\$	236,000	\$	139,163	\$	96,837	
Site Survey and Soil Investigation	\$	106,000	\$	70,008	\$	35,992	
Site Preparation	\$	4,366,000	\$	3,220,643	\$	1,145,357	
Off Site Work	\$	-	\$	-	\$		
New Construction Contracts	\$	27,326,534	\$	27,469,063	\$	(142,529)	
Modernization Contracts	\$	-	\$	<u> </u>	\$	-	
Contingencies	\$	2,142,535	\$	325,824	\$	1,816,711	
Architectural/Engineering Fees	\$	2,683,400	\$	1,718,784	\$	964,616	
Consulting and Other Fees	\$	1,159,911	\$	870,137	\$	289,774	
Movable or Other Equipment (not in construction contracts)	\$	7,985,452	\$	5,698,502	\$	2,286,950	
Bond Issuance Expense (project related)	\$		\$		\$		
Net Interest Expense During Construction (project related)	\$	1,517,994	\$	517,830	\$	1,000,164	
Fair Market Value of Leased Space or Equipment	\$	-	\$	-	\$	-	
Other Costs To Be Capitalized	\$	854,000	\$	825,362	\$	28,638	
Acquisition of Building or Other Property (excluding land)	\$	-	\$	-	\$	-	
TOTAL USES OF FUNDS	\$	48,377,826	\$	40,855,316	\$	7,522,510	

SOURCE OF FUNDS	Approved Project		Project Expenditures through 2/1/19		To Be Expended (Variance)	
Cash and Securities	\$ 21,989,452	\$	17,685,823	\$	4,303,629	
Pledges						
Gifts and Bequests						
Bond Issues (project related)						
Mortgages	\$ 26,388,374	\$	23,169,493	\$	3,218,881	
Leases (fair market value)						
Government Appropriations						
Grants						
Other Funds and Sources						
TOTAL SOURCES OF FUNDS	\$ 48,377,826	\$	40,855,316	\$	7,522,510	



received

Breese, IL

HSHS St. Joseph's Hospital

HSHS St. Mary's Hospital

Decatur, IL

Effingham, IL HSHS St. Anthony's Memorial Hospital

Greenville, IL HSHS Holy Family Hospital

Highland, IL HSHS St. Joseph's Hospital

Litchfield, IL HSHS St. Francis Hospital

O'Fallon, IL HSHS St. Elizabeth's Hospital

Shelbyville, IL HSHS Good Shepherd Hospital

Springfield, IL HSHS St. John's Hospital

Chippewa Falls, WI HSHS St. Joseph's Haspital

Eau Claire, WI HSHS Sacred Heart Hospital

Green Bay, WI HSHS St. Mary's Hospital Medical Center HSHS St. Vincent Hospital

Ocento Falls, WI HSHS St. Clare Memorial Hospital

Sheboygan, WI HSHS St. Nicholas Hospital

HSHS Medical Group

Prairie Cardiovascular

P.O. Box 19456 Springfield, Illinois 62794-9456 P: 217-523-4747 F: 217-523-0542 www.bihs.org Sponsored by Hospital Sisters Ministrie February 7, 2019

FEB \$ 2019

HEALTH FACILITIES & SERVICES REVIEW BOLGER

Ms. Courtney R. Avery
Administrator
Illinois Health Facilities and Services Review Board
525 West Jefferson Street, 2nd Floor

Springfield, Illinois 62761

Re: Con Permit # 16-053

HSHS St. John's Hospital Women's and Children's Health Center Building Permit Renewal Request (Section 1130.740)

Dear Ms. Avery,

Please accept this permit renewal request for approved project # 16-053.

On March 14, 2017 the IHFSRB approved the permit application for this project with a \$48,377,826 capitalized project cost. Subsequently, the project was financially obligated / committed (Section 1130.720) in 2017 as outlined in our notification letter dated January 30, 2019.

The subject building was completed and occupied in January 2019, earlier than contemplated. The estimated capitalized cost expenditures are currently estimated to be \$45,653,231.00.

The approved project completion date is March 31, 2019. However, due to the fact an independent third-party CPA audit is required (Section 1130.770 (d) (5)), we do not expect it to be completed until July. Hence, we respectfully request a four (4) month permit renewal until July 12, 2019 to complete the required audit and subsequently file the final realized cost report (Section 1130.770), as required.

Our application processing fee in the amount of \$500.00 (Section 1130,230) is enclosed: Check number 00157520.

If you have any questions, I can be reached by email at amy.bulpitt@hshs.org or by phone at (217) 814-8336.

Sincerely.

Amy Bulpitt

Vice President and General Counsel

CC: Mike Constantino, Supervisor, Project Review Section Ed Parkhurst, PRISM Healthcare Consulting