

JUL 01 2020

HEALTH FACILITIES & SERVICES REVIEW BOARD

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**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 June 30, 2020

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

Re: Final Realized Cost Report (Section 1130.770) CON Permit Project # 18-021 HSHS St. Elizabeth's Hospital, O'Fallon Radiation Oncology Clinic

Dear Ms. Avery,

Please accept this final realized cost report for CON permit #18-021 HSHS St. Elizabeth's Hospital – Radiation Oncology Clinic. The project was completed on April 1, 2020, notification was sent to the Illinois Health Facilities and Services Review Board on April 20, 2020.

This final realized cost report documentation certified that:

- 1. The itemized project capital cost is the amount of \$16,043,223.00 (see attachment A) which is below the approved cost of \$17,172,227.00 by \$1,129,004.00 or 6.5%.
- 2. The final realized costs, as itemized in Attachment A to this attestation, are the total project cost.
- 3. The project sources of funds remain accurate.
- The enclosed AIA form G702 documents the final construction payout (Attachment B).

To the best of my knowledge we have complied with all Illinois Health Facilities and Services Review Board Requests in developing and completing this project.

If you have any questions, I can be reached at <u>Amy.Bulpitt@hshs.org</u> or at (217) 492-9167.

Sincerely,

Amy Bullpitt () VP & General Counsel Hospital Sisters Health System 4936 LaVerna Road Springfield, IL 62707

Attachment A, Final Realized Cost Report Enclosures: Attachment B, AIA Form G-702

CC: Mike Constantino Michelle Clatfelter Julie Goebel **Daniel Lawler** Tim Ferguson

Notarization:

Subscribed and sworn to before me

this 30 day of June 2020

Melinda M. Manci Printed Name

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Signature of Notary

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Project Completion, Final Realized Cost Report CON Permit Project # 18-021 HSHS St. Elizabeth's Hospital, O'Fallon June 30, 2020 Page 3 of 4

## Attachment A Final Realized Cost Report CON Permit #18-021 HSHS St. Elizabeth's Hospital, O'Fallon Radiation Oncology Clinic

Project Costs a	and So	ources of Funds						
USE OF FUNDS	Ар	proved Project Costs	Project Expenditure and Committed through 6/20/20			To Be Expended (Variance)		
Preplanning Costs	\$		\$	(c. <del>s.</del> )	\$			
Site Survey and Soil Investigation	\$	-	\$	2.5	\$	-		
Site Preparation	\$	-	\$	207.5	\$	-		
Off Site Work	\$	•	\$	523	\$	622		
New Construction Contracts	\$	1,443,135	\$	1,083,490	\$	359,645		
Modernization Contracts	\$		\$	-	\$	-		
Contingencies	\$	117,792	\$	(*)	\$	117,792		
Architectural/Engineering Fees	\$	92,115	\$	30,392	\$	61,723		
Consulting and Other Fees	\$	102,000	\$	16,853	\$	85,148		
Movable or Other Equipment (not in construction contracts)	\$	5,379,012	\$	4,874,315	\$	504,697		
Bond Issuance Expense (project related)	\$		\$		\$	-		
Net Interest Expense During Construction (project related)	\$		\$	•	\$	-		
Fair Market Value of Leased Space or Equipment	\$	10,038,173	\$	10,038,173	\$	0.40		
Other Costs To Be Capitalized	\$		\$		\$	(m)		
Acquisition of Building or Other Property (excluding land)	\$		\$	120	\$	545		
TOTAL USES OF FUNDS	\$	17,172,227	\$	16,043,223	\$	1,129,004		
SOURCE OF FUNDS	Ap	proved Project Costs		Project penditure and omitted through 06/20/20	т	'o Be Expended (Variance)		
Cash and Securities	\$	7,134,054	\$	6,005,050	\$	1,129,004		
Pledges					\$	-		
Gifts and Bequests					\$			
Bond issues (project related)					\$	-		
Mortgages					\$	(* ) (* )		
Leases (fair market value)	\$	10,038,173	\$	10,038,173	\$	(m.)		
Government Appropriations					\$			
Grants					\$	14		
Other Funds and Sources					\$	-		
TOTAL SOURCES OF FUNDS	\$	17,172,227	\$	16,043,223	\$	1,129,004		

Final Financial ReportFinal Report

CAUTRON: You should use an original AIA document which has this caution printed in red. An original assures that changes will not be obscured as may occur when documents are reproduced

Project Completion, Final Realized Cost Report CON Permit Project # 18-021 HSHS St. Elizabeth's Hospital, O'Fallon June 30, 2020 Page 4 of 4

## Attachment B AIA Form G-702 CON Permit #18-021 HSHS St. Elizabeth's Hospital, O'Fallon Radiation Oncology Clinic

NET CHANGES by Change Order 85,139,45			4	CHANGE ORDER SUMMARY ADDITIONS I DEDUCTIONS	BALANCE TO FINISH, INCLUDING RETAINAGE 0.00	CURRENT PAYMENT DUE	LESS PREVIOUS CERTIFICATES FOR PAYMENT (Line 6 from prior Certificate) 1,083	TOTAL EARNED LESS RETAINAGE	(Column F on G703) Total Realmage (Line 5a + 5b or Total in Column 1 of G703)	0 of Stored Material \$ 0.00	A SETAIMAGE: A0 of Completed Work 3000. (Columns D + E on G703)	Column G on G703)	CONTRACT SUM TO DATE (Line 1 ± 2)	2. Net change by Change Orders	CONTRACTOR'S APPLICATION FOR PAYMENT Application is made for payment, as shown below, in connection with the Contract Continuation Sheet, AIA Document C703, & attached. ORIGINAL CONTRACT SUM	CONTRACT FOR: HIGHLAND, IL 62249	12052 HISHLAND RD.	FROM CONTRACTOR: KORTE & LUITJOHAN CONTR., INGA ARCHITECT	ST ELIZ HOSP-HS-3KD OKD OF STF PROJECT: 1 ST ELIZABETH'S BLVD O'FALLON, IL 62269
	0.00 inactor named herein. Issuance, payment and acceptance of payment are without	This Certificate is not negotiable. The AMOUNT CERTIFI	0.00 ARCHITECT		AMOUNT CENTIFIED	114,149.86 quality of the Work is in accordance with the Contract Documents, and the Contractor is entitled to payment of the AMOUNT CERTIFIED.	(083,489,59) Comprising this application, in the Archurect certifies to the Owner that to the Desired the Congressed as indicated, the Archurect's knowledge, information and belief the Work has progressed as indicated, the Archurect's knowledge, information and belief the Work has progressed as indicated, the Archurect's knowledge, information and belief the Work has progressed as indicated, the Archurect's knowledge, information and belief the Work has progressed as indicated, the Archurect's knowledge, information and belief the Work has progressed as indicated, the Archurect's knowledge, information and belief the Work has progressed as indicated, the Archurect's knowledge, information and belief the Work has progressed as indicated.	1,197,639.45 ARCHITECT'S CERTIFICATE FOR PAYMENT	0.00 My Commission capires Willey Kulle	Survey and the second	me this 2542 day of 2400 methods to 100 methods and sworm to occure CHARLER	country of Madison	39.45 By Cilling Kont Date	85,139.45 CONTRACTOR: KORTE & LUITJOHAN CONTR., INC.	0.00 ments received from the Owner, and that current payment shown herein is now due.	113 ILLINI DR	ARCHTIECTURAL EXPRESSIONS LLP INVOICE NO: 10076		G3 - OFALLON-MOB TENANT #2 APPLICATION NO., 13 Distribution to 301 REGENCY PARK PERIOD TO: 6/24/20 [] OWNER OFALLON, IL 62269 PROJECT NOS.: 1906 [] ARCHITECT