



Northwestern Memorial HealthCare  
251 East Huron Street  
Chicago, Illinois 60611-2908  
312.926.2033  
nm.org

December 14, 2020

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

**RE:    Application Submittals**  
**Proposed Discontinuation of Long-Term Care Category of Service**  
**Marianjoy Rehabilitation Hospital, part of Northwestern Medicine**

Dear Ms. Avery:

Enclosed are the following materials supporting Marianjoy Rehabilitation Hospital's Certificate of Exemption application for the discontinuation of its 14-bed long-term care category of service.

- COE Permit Application (2 unbound copies, including original)
- COE Permit Application Fee - in the amount \$2,500

If you have any questions/comments, please feel to contact me at [borth@nm.org](mailto:borth@nm.org).

Sincerely,

A handwritten signature in blue ink, appearing to read 'B. Orth', with a long horizontal flourish extending to the right.

Bridget S. Orth  
Director, Regulatory Planning  
Northwestern Memorial HealthCare

enclosures

ILLINOIS HEALTH FACILITIES AND SERVICES REVIEW BOARD  
DISCONTINUATION APPLICATION FOR EXEMPTION- 08/2019 Edition

ILLINOIS HEALTH FACILITIES AND SERVICES REVIEW BOARD  
DISCONTINUATION APPLICATION FOR EXEMPTION

SECTION I. IDENTIFICATION, GENERAL INFORMATION, AND CERTIFICATION

Facility/Project Identification

Facility Name:	Marianjoy Rehabilitation Hospital		
Street Address:	26 West 171 Roosevelt Road		
City and Zip Code:	Wheaton, IL 60187		
County:	DuPage	Health Service Area:	7-C
		Health Planning Area:	A-05

Applicant(s) [Provide for each applicant (refer to Part 1130.220)]

Exact Legal Name:	Marianjoy Rehabilitation Hospital & Clinics, Inc.		
Street Address:	26 West 171 Roosevelt Road		
City and Zip Code:	Wheaton, IL 60187		
Name of Registered Agent:	Danae Prousis		
Registered Agent Street Address:	211 East Ontario Street Suite 1800		
Registered Agent City and Zip Code:	Chicago, IL 60611		
Name of Chief Executive Officer:	Dean M. Harrison		
CEO Street Address:	251 East Huron Street		
CEO City and Zip Code:	Chicago, IL 60611		
CEO Telephone Number:	312-926-3007		

Type of Ownership of Applicants

<input checked="" type="checkbox"/>	Non-profit Corporation	<input type="checkbox"/>	Partnership
<input type="checkbox"/>	For-profit Corporation	<input type="checkbox"/>	Governmental
<input type="checkbox"/>	Limited Liability Company	<input type="checkbox"/>	Sole Proprietorship
<input type="checkbox"/>	Other		<input type="checkbox"/>

- Corporations and limited liability companies must provide an **Illinois certificate of good standing**.
- Partnerships must provide the name of the state in which they are organized and the name and address of each partner specifying whether each is a general or limited partner.

APPEND DOCUMENTATION AS ATTACHMENT 1 IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

Primary Contact [Person to receive ALL correspondence or inquiries]

Name:	Bridget Orth
Title:	Director, Regulatory Planning
Company Name:	Northwestern Memorial HealthCare
Address:	211 East Ontario Street Suite 1750, Chicago, IL 60611
Telephone Number:	312-926-8650
E-mail Address:	borth@nm.org
Fax Number:	312-926-0373

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<input checked="" type="checkbox"/>	Non-profit Corporation	<input type="checkbox"/>	Partnership	
<input type="checkbox"/>	For-profit Corporation	<input type="checkbox"/>	Governmental	
<input type="checkbox"/>	Limited Liability Company	<input type="checkbox"/>	Sole Proprietorship	<input type="checkbox"/>
	Other			

- Corporations and limited liability companies must provide an **Illinois certificate of good standing**.
- Partnerships must provide the name of the state in which they are organized and the name and address of each partner specifying whether each is a general or limited partner.

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Title:	Director, Regulatory Planning
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Fax Number:	312-926-0373

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**Additional Contact** [Person who is also authorized to discuss the application for exemption]

Name:	Rob Christie
Title:	Senior Vice President
Company Name:	Northwestern Memorial HealthCare
Address:	211 East Ontario Street, Chicago, IL 60611
Telephone Number:	312-926-7527
E-mail Address:	<a href="mailto:robert.christie@nm.org">robert.christie@nm.org</a>
Fax Number:	312-926-0373

**Post Exemption Contact**

[Person to receive all correspondence subsequent to exemption issuance-THIS PERSON MUST BE EMPLOYED BY THE LICENSED HEALTH CARE FACILITY AS DEFINED AT 20 ILCS 3960]

Name:	Bridget Orth
Title:	Director, Regulatory Planning
Company Name:	Northwestern Memorial HealthCare
Address:	251 East Ontario Street Suite 1750, Chicago, IL 60611
Telephone Number:	312-926-8650
E-mail Address:	<a href="mailto:borth@nm.org">borth@nm.org</a>
Fax Number:	312-926-0373

**Site Ownership**

[Provide this information for each applicable site]

Exact Legal Name of Site Owner:	Marianjoy Rehabilitation Hospital & Clinics, Inc.
Address of Site Owner:	26 West 171 Roosevelt Road, Wheaton, IL 60187
Street Address or Legal Description of the Site:	<b>Proof of ownership or control of the site is to be provided as Attachment 2. Examples of proof of ownership are property tax statements, tax assessor's documentation, deed, notarized statement of the corporation attesting to ownership, an option to lease, a letter of intent to lease, or a lease.</b>
<b>APPEND DOCUMENTATION AS ATTACHMENT 2, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.</b>	

**Operating Identity/Licensee**

[Provide this information for each applicable facility and insert after this page.]

Exact Legal Name:	Marianjoy Rehabilitation Hospital & Clinics, Inc.
Address:	26 West 171 Roosevelt Road, Wheaton, IL 60187
<input checked="" type="checkbox"/> Non-profit Corporation <input type="checkbox"/> For-profit Corporation <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Other	<input type="checkbox"/> Partnership <input type="checkbox"/> Governmental <input type="checkbox"/> Sole Proprietorship
<ul style="list-style-type: none"> <li>○ Corporations and limited liability companies must provide an Illinois Certificate of Good Standing.</li> <li>○ Partnerships must provide the name of the state in which organized and the name and address of each partner specifying whether each is a general or limited partner.</li> <li>○ <b>Persons with 5 percent or greater interest in the licensee must be identified with the % of ownership.</b></li> </ul>	
<b>APPEND DOCUMENTATION AS ATTACHMENT 3, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.</b>	

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**Organizational Relationships**

Provide (for each applicant) an organizational chart containing the name and relationship of any person or entity who is related (as defined in Part 1130.140). If the related person or entity is participating in the development or funding of the project, describe the interest and the amount and type of any financial contribution.

**APPEND DOCUMENTATION AS ATTACHMENT 4, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.**

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**Narrative Description**

In the space below, provide a brief narrative description of the project. Explain **WHAT** is to be done in **State Board defined terms**, **NOT WHY** it is being done. If the project site does **NOT** have a street address, include a legal description of the site. Include the rationale regarding the project's classification as substantive or non-substantive.

Marianjoy Rehabilitation Hospital (Marianjoy), part of Northwestern Medicine, seeks to discontinue its 14-bed long-term care category of service. The 14-bed SNF unit has been suspended since April 8, 2020 as a result of the COVID-19 pandemic.

Marianjoy is located at 26 West 171 Roosevelt Road in Wheaton, Illinois.

The project is classified as substantive because it proposes the discontinuation of a category of service.

There is no project cost.

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**Project Status and Completion Schedules**

**Outstanding Permits:** Does the facility have any projects for which the State Board issued a permit that is not complete? Yes \_\_\_ No X. If yes, indicate the projects by project number and whether the project will be complete when the exemption that is the subject of this application is complete.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Anticipated exemption completion date** (refer to Part 1130.570): March 16, 2021

**State Agency Submittals [Section 1130.620(c)]**

Are the following submittals up to date as applicable:

- Cancer Registry
- APORS
- All formal document requests such as IDPH Questionnaires and Annual Bed Reports been submitted
- All reports regarding outstanding permits

**Failure to be up to date with these requirements will result in the Application being deemed incomplete.**

ILLINOIS HEALTH FACILITIES AND SERVICES REVIEW BOARD  
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**CERTIFICATION**

The Application must be signed by the authorized representatives of the applicant entity. Authorized representatives are:

- o in the case of a corporation, any two of its officers or members of its Board of Directors;
- o in the case of a limited liability company, any two of its managers or members (or the sole manager or member when two or more managers or members do not exist);
- o in the case of a partnership, two of its general partners (or the sole general partner, when two or more general partners do not exist);
- o in the case of estates and trusts, two of its beneficiaries (or the sole beneficiary when two or more beneficiaries do not exist); and
- o in the case of a sole proprietor, the individual that is the proprietor.

This Application is filed on the behalf of     Marianjoy Rehabilitation Hospital & Clinics, Inc.    \*

in accordance with the requirements and procedures of the Illinois Health Facilities Planning Act. The undersigned certifies that he or she has the authority to execute and file this Application on behalf of the applicant entity. The undersigned further certifies that the data and information provided herein, and appended hereto, are complete and correct to the best of his or her knowledge and belief. The undersigned also certifies that the fee required for this application is sent herewith or will be paid upon request.

Julie L Creamer  
SIGNATURE

Julie L. Creamer Julie L. Creamer  
PRINTED NAME

SVP, NMHC & President, NM Marianjoy \_\_\_\_\_  
PRINTED TITLE

\_\_\_\_\_  
SIGNATURE

Anne Hubling \_\_\_\_\_  
PRINTED NAME

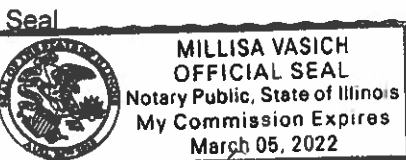
VP and Chief Nurse Executive, NM Marianjoy \_\_\_\_\_  
PRINTED TITLE

Notarization:  
Subscribed and sworn to before me  
this 9<sup>th</sup> day of DECEMBER 2020

Notarization:  
Subscribed and sworn to before me  
this \_\_\_\_\_ day of \_\_\_\_\_

Millisa Vasich  
Signature of Notary

\_\_\_\_\_  
Signature of Notary



Seal

Millisa Vasich  
12-09-2020  
\*Insert the EXACT legal name of the applicant



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- o in the case of a sole proprietor, the individual that is the proprietor.

This Application is filed on the behalf of Marianjoy Rehabilitation Hospital & Clinics, Inc.\*

In accordance with the requirements and procedures of the Illinois Health Facilities Planning Act. The undersigned certifies that he or she has the authority to execute and file this Application on behalf of the applicant entity. The undersigned further certifies that the data and information provided herein, and appended hereto, are complete and correct to the best of his or her knowledge and belief. The undersigned also certifies that the fee required for this application is sent herewith or will be paid upon request.

Julie L. Creamer  
SIGNATURE

Julie L. Creamer Julie L. Creamer  
PRINTED NAME

SVP, NMHC & President, NM Marianjoy \_\_\_\_\_  
PRINTED TITLE

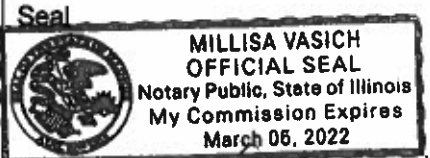
Anne Hubling  
SIGNATURE

Anne Hubling Anne Hubling  
PRINTED NAME

VP and Chief Nurse Executive, NM Marianjoy \_\_\_\_\_  
PRINTED TITLE

Notarization:  
Subscribed and sworn to before me  
this 9<sup>th</sup> day of DECEMBER 2020  
Milisa Vasich  
Signature of Notary

Notarization:  
Subscribed and sworn to before me  
this 17<sup>th</sup> day of December  
Heather Reinecke  
Signature of Notary



Milisa Vasich  
12-09-2020  
\*Insert the EXACT legal name of the applicant

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- o in the case of estates and trusts, two of its beneficiaries (or the sole beneficiary when two or more beneficiaries do not exist); and
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This Application is filed on the behalf of Northwestern Memorial HealthCare \*

in accordance with the requirements and procedures of the Illinois Health Facilities Planning Act. The undersigned certifies that he or she has the authority to execute and file this Application on behalf of the applicant entity. The undersigned further certifies that the data and information provided herein, and appended hereto, are complete and correct to the best of his or her knowledge and belief. The undersigned also certifies that the fee required for this application is sent herewith or will be paid upon request.

*Dean M. Harrison*

SIGNATURE

Dean M. Harrison  
PRINTED NAME

President and CEO  
PRINTED TITLE

*John A. Orsini*

SIGNATURE

John A. Orsini  
PRINTED NAME

Senior Vice President and CFO  
PRINTED TITLE

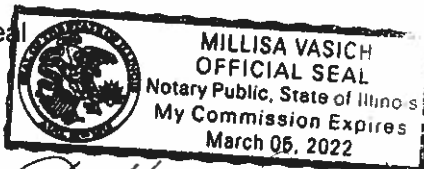
Notarization:

Subscribed and sworn to before me  
this 09 day of DECEMBER 2020

*Millisa Vasich*

Signature of Notary

Seal



*Millisa Vasich*  
12-09-2020

\*Insert the EXACT legal name of the applicant

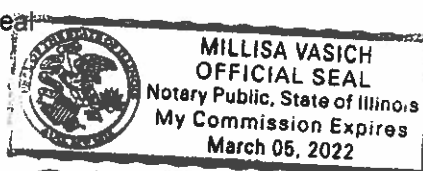
Notarization:

Subscribed and sworn to before me  
this 9<sup>th</sup> day of DECEMBER 2020

*Millisa Vasich*

Signature of Notary

Seal



*Millisa Vasich*  
12-09-2020

ILLINOIS HEALTH FACILITIES AND SERVICES REVIEW BOARD  
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**SECTION II. DISCONTINUATION**

**Type of Discontinuation**

<input checked="" type="checkbox"/> Discontinuation of a single category of service
---

**Criterion 1130.525 and 1110.290 - Discontinuation**

READ THE REVIEW CRITERION and provide the following information:

<p><b>GENERAL INFORMATION REQUIREMENTS</b></p> <ol style="list-style-type: none"><li>1. Identify the category of service and the number of beds, if any, that are to be discontinued.</li><li>2. Identify all of the other clinical services that are to be discontinued.</li><li>3. Provide the anticipated date of discontinuation for each identified service.</li><li>4. Provide the anticipated use of the physical plant and equipment after the discontinuation occurs.</li><li>5. Provide attestation that the facility provided the required notice of the category of service closure to local media that the health care facility would routinely notify about facility events. The supporting documentation shall include a copy of the notice, the name of the local media outlet, the date the notice was given, and the result of the notice, e.g., number of times broadcasted, written, or published. Only notice that is given to a local television station, local radio station, or local newspaper will be accepted.</li></ol>
<p><b>APPEND DOCUMENTATION AS <u>ATTACHMENT 5</u>, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.</b></p>

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**REASONS FOR DISCONTINUATION**

The applicant shall state the reasons for the discontinuation and provide data that verifies the need for the proposed action. See criterion 1110.130(b) for examples.

**APPEND DOCUMENTATION AS ATTACHMENT 6, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.**

**IMPACT ON ACCESS**

1. Document whether or not the discontinuation will have an adverse effect upon access to care for residents of the facility's market area.
2. Provide copies of notification letters sent to other resources or health care facilities that provide the same services as those proposed for discontinuation. The notification letter must include at least the anticipated date of discontinuation and the total number of patients that received care or the number of treatments provided during the latest 24 months.

**APPEND DOCUMENTATION AS ATTACHMENT 7, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.**

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**SECTION III. BACKGROUND**

READ THE REVIEW CRITERION and provide the following required information:

**BACKGROUND OF APPLICANT**

1. A listing of all health care facilities owned or operated by the applicant, including licensing, and certification if applicable.
2. A certified listing of any adverse action taken against any facility owned and/or operated by the applicant during the three years prior to the filing of the application.
3. Authorization permitting HFSRB and DPH access to any documents necessary to verify the information submitted, including, but not limited to: official records of DPH or other State agencies; the licensing or certification records of other states, when applicable; and the records of nationally recognized accreditation organizations. **Failure to provide such authorization shall constitute an abandonment or withdrawal of the application without any further action by HFSRB.**
4. If, during a given calendar year, an applicant submits more than one application for permit or exemption, the documentation provided with the prior applications may be utilized to fulfill the information requirements of this criterion. In such instances, the applicant shall attest that the information was previously provided, cite the project number of the prior application, and certify that no changes have occurred regarding the information that has been previously provided. The applicant is able to submit amendments to previously submitted information, as needed, to update and/or clarify data.

**APPEND DOCUMENTATION AS ATTACHMENT 8, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM. EACH ITEM (1-4) MUST BE IDENTIFIED IN ATTACHMENT 8.**

**SECTION IV. SAFETY NET IMPACT STATEMENT**

**SAFETY NET IMPACT STATEMENT that describes all of the following must be submitted for ALL PROJECTS TO DISCONTINUE A CATEGORY OF SERVICE [20 ILCS 3960/5.4]:**

1. The project's material impact, if any, on essential safety net services in the community, to the extent that it is feasible for an applicant to have such knowledge.
2. The project's impact on the ability of another provider or health care system to cross-subsidize safety net services, if reasonably known to the applicant.
3. How the discontinuation of a service might impact the remaining safety net providers in a given community, if reasonably known by the applicant.

**Safety Net Impact Statements shall also include all of the following:**

1. For the 3 fiscal years prior to the application, a certification describing the amount of charity care provided by the applicant. The amount calculated by hospital applicants shall be in accordance with the reporting requirements for charity care reporting in the Illinois Community Benefits Act. Non-hospital applicants shall report charity care, at cost, in accordance with an appropriate methodology specified by the Board.
2. For the 3 fiscal years prior to the application, a certification of the amount of care provided to Medicaid patients. Hospital and non-hospital applicants shall provide Medicaid information in a manner consistent with the information reported each year to the Illinois Department of Public Health regarding "Inpatients and Outpatients Served by Payor Source" and "Inpatient and Outpatient Net Revenue by Payor Source" as required by the Board under Section 13 of this Act and published in the Annual Hospital Profile.
3. Any information the applicant believes is directly relevant to safety net services, including information regarding teaching, research, and any other service.

**A table in the following format must be provided as part of Attachment 9.**

Safety Net Information per PA 96-0031			
CHARITY CARE			
Charity (# of patients)	Year	Year	Year
Inpatient			
Outpatient			
<b>Total</b>			
Charity (cost in dollars)	Year	Year	Year
Inpatient			
Outpatient			
<b>Total</b>			
MEDICAID			
Medicaid (# of patients)	Year	Year	Year
Inpatient			
Outpatient			
<b>Total</b>			
Medicaid (revenue)	Year	Year	Year

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	Inpatient			
	Outpatient			
	<b>Total</b>			

APPEND DOCUMENTATION AS ATTACHMENT 9, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

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**SECTION V. CHARITY CARE INFORMATION**

1. All applicants and co-applicants shall indicate the amount of charity care for the latest three **audited** fiscal years, the cost of charity care and the ratio of that charity care cost to net patient revenue.
2. If the applicant owns or operates one or more facilities, the reporting shall be for each individual facility located in Illinois. If charity care costs are reported on a consolidated basis, the applicant shall provide documentation as to the cost of charity care; the ratio of that charity care to the net patient revenue for the consolidated financial statement; the allocation of charity care costs; and the ratio of charity care cost to net patient revenue for the facility under review.
3. If the applicant is not an existing facility, it shall submit the facility's projected patient mix by payer source, anticipated charity care expense and projected ratio of charity care to net patient revenue by the end of its second year of operation.

**Charity care" means care provided by a health care facility for which the provider does not expect to receive payment from the patient or a third-party payer (20 ILCS 3960/3). Charity Care must be provided at cost.**

**A table in the following format must be provided for all facilities as part of Attachment 10.**

CHARITY CARE			
	Year	Year	Year
<b>Net Patient Revenue</b>			
Amount of Charity Care (charges)			
Cost of Charity Care			

**APPEND DOCUMENTATION AS ATTACHMENT 10, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.**



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After paginating the entire completed application indicate, in the chart below, the page numbers for the included attachments:

<b>INDEX OF ATTACHMENTS</b>		
<b>ATTACHMENT NO.</b>		<b>PAGES</b>
1	Applicant Identification including Certificate of Good Standing	16 – 17
2	Site Ownership	18 – 30
3	Persons with 5 percent or greater interest in the licensee must be identified with the % of ownership.	n/a
4	Organizational Relationships (Organizational Chart) Certificate of Good Standing Etc.	31
5	Discontinuation General Information Requirements	32 – 33
6	Reasons for Discontinuation	34
7	Impact on Access	35 – 70
8	Background of the Applicant	71 – 72
9	Safety Net Impact Statement	73 – 76
10	Charity Care Information	77

File Number

4955-571-7



**To all to whom these Presents Shall Come, Greeting:**

*I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that*

MARIANJOY REHABILITATION HOSPITAL & CLINICS, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON SEPTEMBER 15, 1969, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE GENERAL NOT FOR PROFIT CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



***In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 3RD day of DECEMBER A.D. 2020 .***

*Jesse White*

SECRETARY OF STATE

Authentication #: 2033802266 verifiable until 12/03/2021  
Authenticate at: <http://www.cyberdriveillinois.com>

File Number

5257-740-3



**To all to whom these Presents Shall Come, Greeting:**

*I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that*

NORTHWESTERN MEMORIAL HEALTHCARE, A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON NOVEMBER 30, 1981, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE GENERAL NOT FOR PROFIT CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



***In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 17TH day of SEPTEMBER A.D. 2020 .***

*Jesse White*

SECRETARY OF STATE

Authentication #: 2026102502 verifiable until 09/17/2021

Authenticate at: <http://www.cyberdriveillinois.com>

ATTACHMENT-1



## OWNER'S POLICY OF TITLE INSURANCE

Issued by

### CHICAGO TITLE INSURANCE COMPANY

Any notice of claim and any other notice or statement in writing required to be given to the Company under this Policy must be given to the Company at the address shown in Section 18 of the Conditions.

#### COVERED RISKS

SUBJECT TO THE EXCLUSIONS FROM COVERAGE, THE EXCEPTIONS FROM COVERAGE CONTAINED IN SCHEDULE B, AND THE CONDITIONS, CHICAGO TITLE INSURANCE COMPANY, a Nebraska corporation (the "Company") insures, as of Date of Policy and, to the extent stated in Covered Risks 9 and 10, after Date of Policy, against loss or damage, not exceeding the Amount of Insurance, sustained or incurred by the Insured by reason by:

1. Title being vested other than as stated in Schedule A.
2. Any defect in or lien or encumbrance on the Title. This Covered Risk includes but is not limited to insurance against loss from
  - (a) A defect in the Title caused by
    - (i) forgery, fraud, undue influence, duress, incompetency, incapacity, or impersonation;
    - (ii) failure of any person or Entity to have authorized a transfer or conveyance;
    - (iii) a document affecting Title not properly created, executed, witnessed, sealed, acknowledged, notarized, or delivered;
    - (iv) failure to perform those acts necessary to create a document by electronic means authorized by law;
    - (v) a document executed under a falsified, expired, or otherwise invalid power of attorney;
    - (vi) a document not properly filed, recorded, or indexed in the Public Records including failure to perform those acts by electronic means authorized by law; or
    - (vii) a defective judicial or administrative proceeding.
  - (b) The lien of real estate taxes or assessments imposed on the Title by a governmental authority due or payable, but unpaid.
  - (c) Any encroachment, encumbrance, violation, variation, or adverse circumstance affecting the Title that would be disclosed by an accurate and complete land survey of the Land. The term "encroachment" includes encroachments of existing improvements located on the Land onto adjoining land, and encroachments onto the Land of existing improvements located on adjoining land.
3. Unmarketable Title.
4. No right of access to and from the Land.
5. The violation or enforcement of any law, ordinance, permit, or governmental regulation (including those relating to building and zoning) restricting, regulating, prohibiting, or relating to
  - (a) the occupancy, use, or enjoyment of the Land;
  - (b) the character, dimensions, or location of any improvement erected on the Land;
  - (c) the subdivision of land; or
  - (d) environmental protection

if a notice, describing any part of the Land, is recorded in the Public Records setting forth the violation or intention to enforce, but only to the extent of the violation or enforcement referred to in that notice.

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OWNER'S POLICY (2006)

POLICY NUMBER: 1401 - 880014184 - D2

- 6. An enforcement action based on the exercise of a governmental police power not covered by Covered Risk 5 if a notice of the enforcement action, describing any part of the Land, is recorded in the Public Records, but only to the extent of the enforcement referred to in that notice.
- 7. The exercise of the rights of eminent domain if a notice of the exercise, describing any part of the Land, is recorded in the Public Records.
- 8. Any taking by a governmental body that has occurred and is binding on the rights of a purchaser for value without Knowledge.
- 9. Title being vested other than as stated Schedule A or being defective
  - (a) as a result of the avoidance in whole or in part, or from a court order providing an alternative remedy, of a transfer of all or any part of the title to or any interest in the Land occurring prior to the transaction vesting Title as shown in Schedule A because that prior transfer constituted a fraudulent or preferential transfer under federal bankruptcy, state insolvency, or similar creditors' rights laws; or
  - (b) because the instrument of transfer vesting Title as shown in Schedule A constitutes a preferential transfer under federal bankruptcy, state insolvency, or similar creditors' rights laws by reason of the failure of its recording in the Public Records
    - (i) to be timely, or
    - (ii) to impart notice of its existence to a purchaser for value or to a judgment or lien creditor.
- 10. Any defect in or lien or encumbrance on the Title or other matter included in Covered Risks 1 through 9 that has been created or attached or has been filed or recorded in the Public Records subsequent to Date of Policy and prior to the recording of the deed or other instrument of transfer in the Public Records that vests Title as shown in Schedule A.

The Company will also pay the costs, attorneys' fees, and expenses incurred in defense of any matter insured against by this Policy, but only to the extent provided in the Conditions.

IN WITNESS WHEREOF, CHICAGO TITLE INSURANCE COMPANY has caused this policy to be signed and sealed by its duly authorized officers.

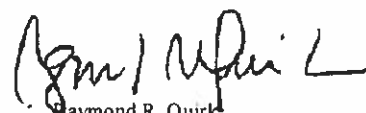
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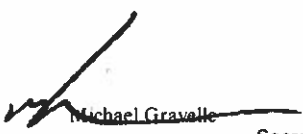
CHICAGO TITLE INSURANCE COMPANY  
10 S. LASALLE ST. 3100  
CHICAGO, IL 60603

CHICAGO TITLE INSURANCE COMPANY

Refer Inquiries To:  
(312) 223-3005



By:   
Raymond R. Quirk  
President

By:   
Michael Gravelle  
Secretary

Countersigned

  
Authorized Signatory

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**CHICAGO TITLE INSURANCE COMPANY****OWNER'S POLICY (2006)****SCHEDULE A**

POLICY NUMBER: 1401-880014184-D2

DATE OF POLICY: MARCH 3, 2016

AMOUNT OF INSURANCE: \$7,000,000.00

**1. NAME OF INSURED:**

MARIANJOY REHABILITATION HOSPITAL &amp; CLINICS, INC., AN ILLINOIS NOT-FOR-PROFIT CORPORATION

**2. THE ESTATE OR INTEREST IN THE LAND THAT IS INSURED BY THIS POLICY IS:  
FEE SIMPLE, UNLESS OTHERWISE NOTED.****3. TITLE IS VESTED IN:**

THE INSURED

**4. THE LAND HEREIN DESCRIBED IS ENCUMBERED BY THE FOLLOWING MORTGAGE OR TRUST DEED AND ASSIGNMENTS:**

NONE

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**CHICAGO TITLE INSURANCE COMPANY  
OWNER'S POLICY (2006)  
SCHEDULE A (CONTINUED)**

POLICY NUMBER: 1401 - 880014184 - D2

**5. THE LAND REFERRED TO IN THIS POLICY IS DESCRIBED AS FOLLOWS:****PARCEL 1**

ALL THAT PART OF THE NORTHEAST QUARTER OF SECTION 19, TOWNSHIP 39 NORTH, RANGE 10 EAST OF THE THIRD PRINCIPAL MERIDIAN, DESCRIBED AS FOLLOWS: COMMENCING AT THE SOUTHWEST CORNER OF A CERTAIN TRACT OF LAND KNOWN AS TRACT "D" OF THE PARTITION PLAT OF THE ESTATE OF EDWARD N. HURLEY WHICH PLAT WAS RECORDED FEBRUARY 21, 1935 AS DOCUMENT NO. 355699; RUNNING THENCE NORTH 86 DEGREES 57 MINUTES EAST ALONG THE SOUTH LINE OF SAID TRACT "D" A DISTANCE OF 570.11 FEET TO A POINT IN LINE WITH THE WESTERLY LINE EXTENDED SOUTH OF TRACT "C" OF SAID PARTITION PLAT, THIS BEING THE POINT OF BEGINNING; THENCE NORTH 00 DEGREES 07 MINUTES WEST IN LINE WITH SAID WEST LINE EXTENDED SOUTH, A DISTANCE OF 1028.07 FEET TO THE SOUTHWEST CORNER OF SAID TRACT "C"; THENCE NORTH 86 DEGREES 08 MINUTES EAST, ALONG THE SOUTH LINE OF SAID TRACT "C", A DISTANCE OF 1450.65 FEET TO A CORNER OF SAID TRACT "C" WHICH CORNER IS ALSO A COMMON CORNER WITH TRACT "D" AFORESAID; THENCE SOUTH 00 DEGREES 07 MINUTES EAST, ALONG THE EASTERLY LINE OF SAID TRACT "D", A DISTANCE OF 1048.90 FEET TO THE SOUTHEAST CORNER OF SAID TRACT "D"; THENCE SOUTH 86 DEGREES 57 MINUTES WEST, ALONG THE SOUTHERLY LINE OF SAID TRACT "D", A DISTANCE OF 1449.39 FEET TO THE PLACE OF BEGINNING;

EXCEPTING THEREFROM THAT PART OF SAID TRACT "D" MORE PARTICULARLY DESCRIBED AS FOLLOWS: COMMENCING AT THE NORTHEAST CORNER OF SAID SECTION 19; THENCE RUNNING WESTERLY ALONG THE NORTH LINE OF SAID SECTION 19, A DISTANCE OF 830.25 FEET TO THE WEST LINE OF TRACT "B" IN AFORESAID PARTITION PLAT OF THE ESTATE OF EDWARD N. HURLEY; THENCE SOUTHERLY ALONG SAID WEST LINE A DISTANCE OF 1460.16 FEET TO AN ANGLE IN SAID WEST LINE; THENCE SOUTH 34 DEGREES 39 MINUTES WEST ALONG THE WESTERLY LINE OF SAID TRACT "B" A DISTANCE OF 182.54 FEET TO AN ANGLE POINT; THENCE SOUTH 00 DEGREES 07 MINUTES EAST, ALONG THE SOUTHERNMOST WEST LINE OF SAID TRACT "B" A DISTANCE OF 122.47 FEET TO AN IRON STAKE FOR THE POINT OF BEGINNING; THENCE CONTINUING SOUTH 00 DEGREES 07 MINUTES WEST, ALONG SAID SOUTHERNMOST WEST LINE A DISTANCE OF 919.73 FEET TO THE LINE MARKING THE BOUNDARY BETWEEN THE DURFEE FARM AND THE FORMER HURLEY FARM; THENCE SOUTH 86 DEGREES 57 MINUTES WEST ALONG SAID LINE, A DISTANCE OF 92.60 FEET TO AN IRON STAKE; THENCE NORTH 00 DEGREES 58 MINUTES WEST A DISTANCE OF 778.35 FEET TO AN IRON STAKE; THENCE NORTH 35 DEGREES 25 MINUTES EAST A DISTANCE OF 179.70 FEET TO AN IRON STAKE ON THE EAST LINE OF SAID TRACT "D" AND THE POINT OF BEGINNING;

ALSO EXCEPTING THEREFROM THAT PART OF SECTION 19 AFORESAID DESCRIBED BY COMMENCING AT THE SOUTHEAST CORNER OF R. A. FAGANEL'S ST. FRANCIS OAKS PLAT RECORDED JULY 26, 1977 AS DOCUMENT NO. R77-62568, SAID POINT ALSO BEING THE SOUTHWEST CORNER OF THAT PART OF AFORESAID TRACT "D" OF THE PARTITION PLAT OF THE ESTATE OF EDWARD N. HURLEY AFORESAID, WHICH LIES EASTERLY OF THE WEST LINE EXTENDED SOUTH OF TRACT "C" OF SAID PARTITION PLAT AND RUNNING THENCE NORTH 00 DEGREES 05 MINUTES 06 SECONDS EAST, ALONG THE EAST LINE OF SAID R. A. FAGANEL'S ST. FRANCIS OAKS AND THE WEST LINE EXTENDED SOUTH OF TRACT "C" OF SAID PARTITION PLAT, A DISTANCE OF 696.36 FEET; THENCE NORTH 45 DEGREES 05 MINUTES 06 SECONDS EAST A DISTANCE OF 135.90 FEET;

(CONTINUED)

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**CHICAGO TITLE INSURANCE COMPANY  
OWNER'S POLICY (2006)  
SCHEDULE A (CONTINUED)**

POLICY NUMBER: 1401-880014184-D2

**5. THE LAND REFERRED TO IN THIS POLICY IS DESCRIBED AS FOLLOWS (CONTINUED):**

THENCE SOUTH 89 DEGREES 54 MINUTES 54 SECONDS EAST A DISTANCE OF 140.00 FEET;  
THENCE SOUTH 30 DEGREES 10 MINUTES 17 SECONDS EAST, A DISTANCE OF 138.93 FEET;  
THENCE SOUTH 00 DEGREES 05 MINUTES 06 SECONDS WEST A DISTANCE OF 350.00 FEET;  
THENCE NORTH 87 DEGREES 08 MINUTES 22 SECONDS EAST A DISTANCE OF 241.00 FEET;  
THENCE SOUTH 47 DEGREES 51 MINUTES 38 SECONDS EAST A DISTANCE OF 127.28 FEET;  
THENCE SOUTH 02 DEGREES 51 MINUTES 38 SECONDS WEST A DISTANCE OF 130.00 FEET;  
THENCE SOUTH 42 DEGREES 08 MINUTES 22 SECONDS WEST A DISTANCE OF 127.28 FEET TO A  
POINT ON THE SOUTH LINE OF TRACT "D" OF SAID PARTITION PLAT AND THE NORTH LINE OF  
THE STREAMS UNIT ONE PLAT RECORDED OCTOBER 28, 1969 AS DOCUMENT NO. R69-47226;  
THENCE SOUTH 87 DEGREES 08 MINUTES 22 SECONDS WEST, ALONG SAID SOUTH LINE OF SAID  
TRACT "D" AND THE NORTH LINE OF THE STREAMS UNIT ONE AFORESAID AND THE NORTH LINE  
OF STONEBRIDGE TRAIL AS DEDICATED ON MAY 12, 1971 BY DOCUMENT NO. R71-19898 A  
DISTANCE OF 567.36 FEET TO THE POINT OF BEGINNING;

ALSO EXCEPTING THEREFROM ANY PORTION LYING WITHIN LOT 1 OF MARION PARK RECORDED AS  
DOCUMENT NO. R73-60791;

ALSO EXCEPTING THAT PART DESCRIBED AS FOLLOWS: COMMENCING AT THE SOUTHWEST CORNER  
OF TRACT "C" OF THE PARTITION PLAT OF THE ESTATE OF EDWARD N. HURLEY ACCORDING TO  
THE PLAT THEREOF RECORDED FEBRUARY 21, 1935 AS DOCUMENT NO. 355699; THENCE NORTH 86  
DEGREES 15 MINUTES 03 SECONDS EAST ALONG THE SOUTH LINE OF SAID TRACT "C", 952.96  
FEET TO THE POINT OF BEGINNING; THENCE CONTINUING NORTH 86 DEGREES 15 MINUTES 03  
SECONDS EAST ALONG SAID SOUTH LINE, 496.35 FEET TO THE SOUTHERNMOST SOUTHEAST  
CORNER OF SAID TRACT "C", SAID CORNER BEING AN ANGLE POINT IN THE WESTERLY LINE OF  
ADARE FARM UNIT 2, RECORDED AS DOCUMENT R82-09727; THENCE SOUTH 00 DEGREES 05  
MINUTES 46 SECONDS EAST ALONG SAID WESTERLY LINE AND ALSO ALONG THE WESTERLY LINE  
OF ADARE FARM UNIT 1, RECORDED AS DOCUMENT R78-103691, A DISTANCE OF 122.33 FEET TO  
AN ANGLE POINT IN SAID WESTERLY LINE OF ADARE FARM UNIT 1; THENCE SOUTH 35 DEGREES  
18 MINUTES 52 SECONDS WEST ALONG SAID WESTERLY LINE, 179.57 FEET TO AN ANGLE POINT  
IN SAID WESTERLY LINE; THENCE NORTH 58 DEGREES 53 MINUTES 15 SECONDS WEST, 457.50  
FEET TO THE POINT OF BEGINNING;

ALSO EXCEPTING THAT PART DESCRIBED AS FOLLOWS: COMMENCING AT THE SOUTHWEST CORNER  
OF TRACT "C" OF THE PARTITION PLAT OF THE ESTATE OF EDWARD N. HURLEY ACCORDING TO  
THE PLAT THEREOF RECORDED FEBRUARY 21, 1935 AS DOCUMENT NO. 355699; THENCE NORTH 86  
DEGREES 15 MINUTES 03 SECONDS EAST ALONG THE SOUTH LINE OF SAID TRACT "C", 690.22  
FEET TO THE POINT OF BEGINNING; THENCE CONTINUING NORTH 86 DEGREES 15 MINUTES 03  
SECONDS EAST ALONG SAID SOUTH LINE, 68.95 FEET; THENCE SOUTH 59 DEGREES 30 MINUTES  
54 SECONDS EAST, 51.05 FEET; THENCE SOUTH 30 DEGREES 33 MINUTES 11 SECONDS WEST,  
38.92 FEET; THENCE NORTH 59 DEGREES 26 MINUTES 52 SECONDS WEST, 108.00 FEET TO THE  
POINT OF BEGINNING; ALL IN DU PAGE COUNTY, ILLINOIS.

**PARCEL 2**

THAT PART OF THE NORTHEAST QUARTER OF SECTION 19, TOWNSHIP 39 NORTH, RANGE 10 EAST  
OF THE THIRD PRINCIPAL MERIDIAN, DESCRIBED AS FOLLOWS:

COMMENCING AT THE SOUTHWEST CORNER OF TRACT "C" OF THE PARTITION PLAT OF THE ESTATE

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**CHICAGO TITLE INSURANCE COMPANY  
OWNER'S POLICY (2006)  
SCHEDULE A (CONTINUED)**

POLICY NUMBER: 1401-880014184-D2

**5. THE LAND REFERRED TO IN THIS POLICY IS DESCRIBED AS FOLLOWS (CONTINUED):**

OF EDWARD N. HURLEY ACCORDING TO THE PLAT THEREOF RECORDED FEBRUARY 21, 1935 AS DOCUMENT NO. 355699; THENCE NORTH 86 DEGREES 15 MINUTES 03 SECONDS EAST ALONG THE SOUTH LINE OF SAID TRACT "C", 58.79 FEET TO THE EASTERLY LINE OF LOT 1 IN MARION PARK ASSESSMENT PLAT, RECORDED AS DOCUMENT R73-60791, FOR THE POINT OF BEGINNING; THENCE NORTH 30 DEGREES 32 MINUTES 29 SECONDS EAST ALONG SAID EASTERLY LINE, 129.94 FEET TO AN ANGLE POINT IN SAID EASTERLY LINE; THENCE SOUTH 68 DEGREES 25 MINUTES 11 SECONDS EAST, 174.36 FEET; THENCE SOUTH 59 DEGREES 33 MINUTES 15 SECONDS EAST, 32.43 FEET; THENCE NORTH 30 DEGREES 26 MINUTES 45 SECONDS EAST, 32.64 FEET; THENCE SOUTH 59 DEGREES 33 MINUTES 15 SECONDS EAST, 1.30 FEET; THENCE NORTH 30 DEGREES 19 MINUTES 51 SECONDS EAST, 37.87 FEET; THENCE NORTH 59 DEGREES 40 MINUTES 09 SECONDS WEST, 13.22 FEET; THENCE NORTH 30 DEGREES 19 MINUTES 51 SECONDS EAST, 72.60 FEET; THENCE SOUTH 59 DEGREES 22 MINUTES 07 SECONDS EAST, 123.86 FEET; THENCE NORTH 30 DEGREES 33 MINUTES 08 SECONDS EAST, 55.76 FEET; THENCE SOUTH 59 DEGREES 26 MINUTES 52 SECONDS EAST, 205.53 FEET TO THE SOUTH LINE OF TRACT "C" IN SAID PARTITION PLAT OF THE ESTATE OF EDWARD N. HURLEY; THENCE SOUTH 86 DEGREES 15 MINUTES 03 SECONDS WEST ALONG SAID SOUTH LINE, 631.43 FEET TO THE POINT OF BEGINNING; IN DUPAGE COUNTY, ILLINOIS.

**PARCEL 3**

THAT PART OF THE NORTHEAST QUARTER OF SECTION 19, TOWNSHIP 39 NORTH, RANGE 10 EAST OF THE THIRD PRINCIPAL MERIDIAN, DESCRIBED AS FOLLOWS:

COMMENCING AT THE SOUTHWEST CORNER OF TRACT "C" OF THE PARTITION PLAT OF THE ESTATE OF EDWARD N. HURLEY ACCORDING TO THE PLAT THEREOF RECORDED FEBRUARY 21, 1935 AS DOCUMENT NO. 355699; THENCE NORTH 86 DEGREES 15 MINUTES 03 SECONDS EAST ALONG THE SOUTH LINE OF SAID TRACT "C", 759.17 FEET TO THE POINT OF BEGINNING; THENCE NORTH 59 DEGREES 30 MINUTES 54 SECONDS WEST, 127.22 FEET; THENCE NORTH 30 DEGREES 43 MINUTES 31 SECONDS EAST, 97.22 FEET; THENCE SOUTH 59 DEGREES 16 MINUTES 29 SECONDS EAST, 4.26 FEET; THENCE NORTH 30 DEGREES 29 MINUTES 06 SECONDS EAST, 13.68 FEET; THENCE SOUTH 59 DEGREES 30 MINUTES 54 SECONDS EAST, 113.12 FEET; THENCE SOUTH 58 DEGREES 53 MINUTES 15 SECONDS EAST, 169.65 FEET TO THE SOUTH LINE OF SAID TRACT "C"; THENCE SOUTH 86 DEGREES 15 MINUTES 03 SECONDS WEST ALONG SAID SOUTH LINE, 193.79 FEET TO THE POINT OF BEGINNING; IN DUPAGE COUNTY, ILLINOIS.

"SAME AS" DESCRIPTION OF PARCELS 1-3

THE FOLLOWING IS A NARRATIVE DESCRIPTION WHICH DESCRIBES PARCELS 1 THROUGH 3, INCLUSIVE, AND WAS PREPARED BY THE SURVEYOR BASED ON MEASURED VALUES:

THAT PART OF THE NORTHEAST QUARTER OF SECTION 19, TOWNSHIP 39 NORTH, RANGE 10 EAST OF THE THIRD PRINCIPAL MERIDIAN, BEING PART OF TRACTS "C" AND "D" OF THE PARTITION PLAT OF THE ESTATE OF EDWARD N. HURLEY ACCORDING TO THE PLAT THEREOF RECORDED FEBRUARY 21, 1935 AS DOCUMENT NO. 355699, MORE PARTICULARLY DESCRIBED AS FOLLOWS:

BEGINNING AT THE NORTHWEST CORNER OF OUTLOT "A" IN HARRISON AND RUSSELL'S YORKSHIRE WOODS, RECORDED AS DOCUMENT R79-01882 AND CERTIFICATE OF CORRECTION RECORDED AS DOCUMENT R80-75106, SAID NORTHWEST CORNER BEING ON THE SOUTHERLY EXTENSION OF THE

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**CHICAGO TITLE INSURANCE COMPANY**  
**OWNER'S POLICY (2006)**  
**SCHEDULE A (CONTINUED)**

POLICY NUMBER: 1401 - 880014184 - D2

**5. THE LAND REFERRED TO IN THIS POLICY IS DESCRIBED AS FOLLOWS (CONTINUED):**

WEST LINE OF LOT 1 IN MARION PARK ASSESSMENT PLAT, RECORDED AS DOCUMENT R73-60791; THENCE NORTH 00 DEGREES 07 MINUTES 00 SECONDS WEST ALONG SAID SOUTHERLY EXTENSION, 240.96 FEET TO THE SOUTHERNMOST CORNER OF SAID LOT 1 IN MARION PARK ASSESSMENT PLAT; THENCE NORTH 30 DEGREES 32 MINUTES 29 SECONDS EAST ALONG THE EASTERLY LINE OF SAID LOT 1, A DISTANCE OF 245.00 FEET TO AN ANGLE POINT IN SAID EASTERLY LINE; THENCE SOUTH 68 DEGREES 25 MINUTES 11 SECONDS EAST, 174.36 FEET; THENCE SOUTH 59 DEGREES 33 MINUTES 15 SECONDS EAST, 32.43 FEET; THENCE NORTH 30 DEGREES 26 MINUTES 45 SECONDS EAST, 32.64 FEET; THENCE SOUTH 59 DEGREES 33 MINUTES 15 SECONDS EAST, 1.30 FEET; THENCE NORTH 30 DEGREES 19 MINUTES 51 SECONDS EAST, 37.87 FEET; THENCE NORTH 59 DEGREES 40 MINUTES 09 SECONDS WEST, 13.22 FEET; THENCE NORTH 30 DEGREES 19 MINUTES 51 SECONDS EAST, 72.60 FEET; THENCE SOUTH 59 DEGREES 22 MINUTES 07 SECONDS EAST, 123.86 FEET; THENCE NORTH 30 DEGREES 33 MINUTES 08 SECONDS EAST, 55.76 FEET; THENCE SOUTH 59 DEGREES 26 MINUTES 52 SECONDS EAST, 313.53 FEET; THENCE NORTH 30 DEGREES 33 MINUTES 11 SECONDS EAST, 38.92 FEET; THENCE NORTH 59 DEGREES 30 MINUTES 54 SECONDS WEST, 178.27 FEET; THENCE NORTH 30 DEGREES 43 MINUTES 31 SECONDS EAST, 97.22 FEET; THENCE SOUTH 59 DEGREES 16 MINUTES 29 SECONDS EAST, 4.26 FEET; THENCE NORTH 30 DEGREES 29 MINUTES 06 SECONDS EAST, 13.68 FEET; THENCE SOUTH 59 DEGREES 30 MINUTES 54 SECONDS EAST, 113.12 FEET; THENCE SOUTH 58 DEGREES 53 MINUTES 15 SECONDS EAST, 627.15 FEET TO AN ANGLE POINT IN THE WESTERLY LINE OF ADARE FARM UNIT 1, RECORDED AS DOCUMENT R78-103691, SAID ANGLE POINT BEING 95.00 FEET NORTH OF THE NORTHERNMOST CORNER OF LOT 42 IN SAID ADARE FARM UNIT 1; THENCE SOUTH 00 DEGREES 56 MINUTES 30 SECONDS EAST ALONG SAID WESTERLY LINE, 784.65 FEET TO THE NORTH LINE OF THE STREAMS UNIT 1, RECORDED AS DOCUMENT R69-47226; THENCE SOUTH 86 DEGREES 51 MINUTES 30 SECONDS WEST ALONG SAID NORTH LINE, 787.60 FEET TO THE SOUTHEAST CORNER OF LOT 5 IN HARRISON AND RUSSELL'S YORKSHIRE WOODS, RECORDED AS DOCUMENT R79-01882 AND CERTIFICATE OF CORRECTION RECORDED AS DOCUMENT R80-75106; THENCE NORTH 41 DEGREES 54 MINUTES 57 SECONDS EAST ALONG THE SOUTHEASTERLY LINE OF SAID LOT 5, A DISTANCE OF 127.29 FEET TO THE SOUTHERNMOST CORNER OF LOT 6 IN SAID HARRISON AND RUSSELL'S YORKSHIRE WOODS; THENCE NORTH 03 DEGREES 10 MINUTES 56 SECONDS WEST ALONG THE EAST LINE OF SAID LOT 6, A DISTANCE OF 130.00 FEET TO THE EASTERNMOST CORNER OF LOT 7 IN SAID HARRISON AND RUSSELL'S YORKSHIRE WOODS; THENCE NORTH 48 DEGREES 06 MINUTES 43 SECONDS WEST ALONG THE NORTHEASTERLY LINE OF SAID LOT 7, A DISTANCE OF 127.09 FEET TO THE NORTHEAST CORNER OF SAID LOT 7; THENCE SOUTH 86 DEGREES 53 MINUTES 47 SECONDS WEST ALONG THE NORTH LINE OF SAID LOT 7, AND ALONG THE NORTH LINE OF LOTS 8, 9 AND 10 IN SAID HARRISON AND RUSSELL'S YORKSHIRE WOODS, 241.00 FEET TO THE SOUTHEAST CORNER OF LOT 12 IN SAID HARRISON AND RUSSELL'S YORKSHIRE WOODS; THENCE NORTH 00 DEGREES 08 MINUTES 17 SECONDS WEST ALONG THE EAST LINE OF SAID LOT 12, AND ALONG THE EAST LINE OF LOTS 13, 14 AND 15 IN SAID HARRISON AND RUSSELL'S YORKSHIRE WOODS, 350.00 FEET TO THE EASTERNMOST CORNER OF LOT 16 IN SAID HARRISON AND RUSSELL'S YORKSHIRE WOODS; THENCE NORTH 30 DEGREES 26 MINUTES 19 SECONDS WEST ALONG THE EASTERLY LINE OF SAID LOT 16, A DISTANCE OF 138.95 FEET TO THE NORTHEAST CORNER OF LOT 17 IN SAID HARRISON AND RUSSELL'S YORKSHIRE WOODS; THENCE SOUTH 89 DEGREES 48 MINUTES 30 SECONDS WEST ALONG THE NORTH LINE OF SAID LOT 17, AND ALONG THE NORTH LINE OF LOT 18 IN SAID HARRISON AND RUSSELL'S YORKSHIRE WOODS, 139.87 FEET TO THE EASTERNMOST NORTHWEST CORNER OF SAID LOT 18; THENCE SOUTH 44 DEGREES 56 MINUTES 08 SECONDS WEST ALONG THE NORTHWESTERLY LINE OF SAID LOT 18, AND ALONG THE NORTHWESTERLY LINE OF OUTLOT A IN SAID HARRISON AND RUSSELL'S YORKSHIRE WOODS, 141.37 FEET TO THE POINT OF BEGINNING; IN DUPAGE COUNTY, ILLINOIS.

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CHICAGO TITLE INSURANCE COMPANY  
OWNER'S POLICY (2006)  
SCHEDULE A (CONTINUED)

POLICY NUMBER: 1401 - 880014184 - D2

5. THE LAND REFERRED TO IN THIS POLICY IS DESCRIBED AS FOLLOWS (CONTINUED):

PARCEL 4

OUTLOT "A" IN HARRISON AND RUSSELL'S YORKSHIRE WOODS, A SUBDIVISION OF PART OF SECTION 19, TOWNSHIP 39 NORTH, RANGE 10, EAST OF THE THIRD PRINCIPAL MERIDIAN, ACCORDING TO THE PLAT THEREOF RECORDED JANUARY 8, 1979 AS DOCUMENT R79-01882 AND CERTIFICATE OF CORRECTION RECORDED DECEMBER 3, 1980 AS DOCUMENT R80-75106, IN DUPAGE COUNTY, ILLINOIS.

PARCEL 5:

PERPETUAL, NON-EXCLUSIVE EASEMENT FOR THE BENEFIT OF PARCELS 1, 2 AND 3 AS CREATED BY COVENANTS, CONDITIONS, RESTRICTIONS AND RECIPROCAL EASEMENT AGREEMENT RECORDED MARCH 3, 2016 AS DOCUMENT NUMBER R2016-020233 RELATING TO INGRESS AND EGRESS OVER COMMUNITY DRIVE AND ACCESS DRIVES; ACCESS WITHIN SHARED BUILDING; UTILITIES, USE OF KITCHEN FACILITIES, KITCHEN STORAGE AREAS AND DISH ROOM; MONUMENT SIGNAGE; DIRECTIONAL SIGNAGE; AND USE OF SHARED SERVICE AREAS, OVER AND UPON AREAS FALLING ON LAND DESCRIBED ON EXHIBIT 'B' ATTACHED THERETO.

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**CHICAGO TITLE INSURANCE COMPANY**  
**OWNER'S POLICY (2006)**  
**SCHEDULE B**

POLICY NUMBER: 1401 - 880014184 - D2

**EXCEPTIONS FROM COVERAGE**

THIS POLICY DOES NOT INSURE AGAINST LOSS OR DAMAGE, THE COMPANY WILL NOT PAY COSTS, ATTORNEY'S FEES OR EXPENSES THAT ARISE BY REASON OF:

**GENERAL EXCEPTIONS:**

- (1) RIGHTS OR CLAIMS OF PARTIES IN POSSESSION NOT SHOWN BY PUBLIC RECORDS.
  - (2) ANY ENCROACHMENT, ENCUMBRANCE, VIOLATION, VARIATION, OR ADVERSE CIRCUMSTANCE AFFECTING THE TITLE THAT WOULD BE DISCLOSED BY AN ACCURATE AND COMPLETE LAND SURVEY OF THE LAND.
  - (3) EASEMENTS, OR CLAIMS OF EASEMENTS, NOT SHOWN BY PUBLIC RECORDS.
  - (4) ANY LIEN, OR RIGHT TO A LIEN, FOR SERVICES, LABOR OR MATERIAL HERETOFORE OR HEREAFTER FURNISHED, IMPOSED BY LAW AND NOT SHOWN BY THE PUBLIC RECORDS.
  - (5) TAXES OR SPECIAL ASSESSMENTS WHICH ARE NOT SHOWN AS EXISTING LIENS BY THE PUBLIC RECORDS.
- BI** 6. TAXES FOR THE YEAR 2015 AND 2016, NOT YET DUE OR PAYABLE.
- 2014 TAXES ARE MARKED 'TAX EXEMPT' ON THE TREASURER'S RECORDS.
- PERMANENT INDEX NUMBER(S): 05-19-201-004-0000
- (AFFECTS PARCELS 1, 2, AND 3 AND OTHER PROPERTY)
- BB** 7. TAXES FOR THE YEARS 2015 AND 2016, NOT YET DUE OR PAYABLE.
- 2014 TAXES ARE MARKED 'TAX EXEMPT' ON THE TREASURER'S RECORDS.
- PERMANENT INDEX NUMBER(S): 05-19-203-037-0000
- AFFECTS OUTLOT A.
- E** 8. THE LAND LIES WITHIN THE WHEATON SANITARY DISTRICT, WHICH HAS ACCEPTED FEDERAL GRANTS FOR SEWAGE TREATMENT WORKS PURSUANT TO PUBLIC LAW 92-500. FEDERAL LAW REQUIRES A USER CHARGE SYSTEM SEPARATE FROM GENERAL AD VALOREM PROPERTY TAXES.
- AFFECTS ALL.
- I** 9. EXISTING UNRECORDED GROUND LEASE IN FAVOR OF MARIANJOY, INC., ALTA STATEMENT DATED MARCH 1, 2016 AND ALL RIGHTS THEREUNDER OF THE LESSEES AND OF ANY PERSON OR PARTY CLAIMING BY, THROUGH OR UNDER THE LESSEES.
- M** 10. TERMS, PROVISIONS AND CONDITIONS CONTAINED IN RESOLUTION R-49-95 A COPY OF WHICH

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**CHICAGO TITLE INSURANCE COMPANY  
OWNER'S POLICY (2006)  
SCHEDULE B**

POLICY NUMBER: 1401-880014184-D2

**EXCEPTIONS FROM COVERAGE (CONTINUED)**

WAS RECORDED AUG 21, 1995 AS DOCUMENT R95-110712 MADE BY AND BETWEEN THE CITY OF WHEATON AND THE WHEATON FRANCISCAN SISTERS, WHICH PROVIDES FOR COST AND CONSTRUCTION OF WATER/SEWER SERVICE TO THE PREMISES IN QUESTION, TOGETHER WITH PERMIT, LICENSE, TAP-ON AND CONNECTION FEES; TERMS AND CONDITIONS CONTAINED IN CITY OF WHEATON, ILLINOIS RESOLUTION NO. R-31-04, A RESOLUTION APPROVING AN AMENDMENT TO THE AGREEMENT BETWEEN THE CITY OF WHEATON AND WHEATON FRANCISCAN SISTERS CORPORATION FOR WATER SERVICE TO THE FRANCISCAN CAMPUS (26W171 ROOSEVELT ROAD), RECORDED SEPTEMBER 1, 2004 AS DOCUMENT NO. R2004-232168; MODIFIED BY RESOLUTION NO. R-30-05, A RESOLUTION AUTHORIZING THE EXECUTION OF AMENDMENT NO. 2 TO THE AGREEMENT BETWEEN THE CITY OF WHEATON AND WHEATON FRANCISCAN SISTERS CORPORATION FOR WATER SERVICE TO THE FRANCISCAN CAMPUS (26W171 ROOSEVELT ROAD), RECORDED JUNE 17, 2005 AS DOCUMENT NO. R2005-126961.

NOTE: AS OF FEBRUARY 24, 2016 THERE ARE NO FEES CURRENTLY DUE OR OWING.

(AFFECTS ALL PARCELS)

- P 11. TERMS, PROVISIONS AND CONDITIONS CONTAINED IN EASEMENT AND RIGHT-OF-WAY RECORDED JANUARY 16, 1997 AS DOCUMENT R97-007606 MADE BY AND BETWEEN WHEATON FRANCISCAN SISTERS CORP. AND JONES INTERCABLE, INC., AND/OR ONE OR MORE OF ITS RESPECTIVE CONTROLLED AFFILIATES, FOR THE PURPOSE OF INSTALLING, MAINTAINING AND REMOVING CABLE TELEVISION AND RELATED EQUIPMENT IN SAID PROPERTY AS MORE SPECIFICALLY SET FORTH ON "EXHIBIT A" ATTACHED AND MADE A PART THERETO.

(AFFECTS ALL PARCELS)

- Q 12. EASEMENT FOR THE MARIANJOY WATER MAIN EXTENSION, IN FAVOR OF THE CITY OF WHEATON, AND ITS/THEIR RESPECTIVE SUCCESSORS AND ASSIGNS, TO INSTALL, OPERATE AND MAINTAIN ALL EQUIPMENT NECESSARY FOR THE PURPOSE OF SERVING THE LAND AND OTHER PROPERTY, TOGETHER WITH THE RIGHT OF ACCESS TO SAID EQUIPMENT, AND THE PROVISIONS RELATING THERETO CONTAINED IN THE GRANT RECORDED AS DOCUMENT NO. R97-038446.

(AFFECTS ALL PARCELS)

- S 13. PLAT OF EASEMENT RECORDED JANUARY 8, 1979 AS DOCUMENT R79-01883 MADE BY AND BETWEEN OUR LADY OF THE ANGELS MOTHERHOUSE OF FRANCISCAN SISTERS, AN ILLINOIS NOT-FOR-PROFIT CORPORATION AND GARY WHEATON BANK, AS TRUSTEE UNDER TRUST NUMBER 3930, ITS SUCCESSORS AND ASSIGNS, GRANTING AN EASEMENT FOR MAINTENANCE OF A WATER DETENTION FACILITY, TOGETHER WITH THE TERMS AND PROVISIONS CONTAINED THEREIN.

(AFFECTS PARCEL 1)

- W 14. EASEMENT AS CREATED BY A GRANT TO THE COMMONWEALTH EDISON COMPANY AND THE

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AMERICAN  
LAND TITLE  
ASSOCIATION



**CHICAGO TITLE INSURANCE COMPANY  
OWNER'S POLICY (2006)  
SCHEDULE B**

POLICY NUMBER: 1401-880014184-D2

**EXCEPTIONS FROM COVERAGE (CONTINUED)**

ILLINOIS BELL TELEPHONE COMPANY RECORDED FEBRUARY 4, 1974 AS DOCUMENT R74-05270 MADE BY OUR LADY OF ANGELS MOTHERHOUSE OF FRANCISCAN SISTERS OF THE RIGHT TO CONSTRUCT, OPERATE, MAINTAIN AND REMOVE COMMUNICATIONS AND ELECTRIC SYSTEMS CONSISTING OF POLES, ANCHORS, MARKERS, TEST-TERMINALS, CONDUITS, MANHOLES, WIRES, CABLES AND ASSOCIATED EQUIPMENT FOR TRANSMISSION OF SOUNDS AND SIGNALS, AND HEAT, LIGHT AND POWER BY ELECTRICITY, TOGETHER WITH THE RIGHT OF ACCESS TO THE SAME, INCLUDING THE RIGHT TO CLEAR AND KEEP CLEARED SUCH TREES, ROOTS, BUSHES AND OTHER OBSTRUCTIONS FROM THE SURFACE AND SUB-SURFACE AS MAY BE REQUIRED UPON, OVER, UNDER, ALONG AND ACROSS THE LAND.

(AFFECTS PARCELS 1 AND 4)

- X 15. EASEMENT MADE BY OUR LADY OF ANGELS MOTHERHOUSE OF FRANCISCAN SISTERS TO THE CITY OF WHEATON, AN ILLINOIS MUNICIPAL CORPORATION, RECORDED APRIL 2, 1976 AS DOCUMENT R76-19241, TO CONSTRUCT OR ERECT A WATER MAIN AND NECESSARY APPURTENANCES FOR PUBLIC IMPROVEMENT THROUGH AND ACROSS THE LAND, TOGETHER WITH THE TERMS AND CONDITIONS CONTAINED THEREIN.

(AFFECTS PARCELS 1 AND 4)

- AD 16. LEAKING UNDERGROUND STORAGE TANK ENVIRONMENTAL NOTICE RECORDED JUNE 16, 2000 AS DOCUMENT NO. R2000-091232.

(AFFECTS ALL PARCELS)

- AE 17. EASEMENT IN FAVOR OF NICOR GAS, AND ITS/THEIR RESPECTIVE SUCCESSORS AND ASSIGNS, TO INSTALL, OPERATE AND MAINTAIN ALL EQUIPMENT NECESSARY FOR THE PURPOSE OF SERVING THE LAND AND OTHER PROPERTY, TOGETHER WITH THE RIGHT OF ACCESS TO SAID EQUIPMENT, AND THE PROVISIONS RELATING THERETO CONTAINED IN THE GRANT RECORDED NOVEMBER 10, 2004 AS DOCUMENT NO. R2004-287334.

(AFFECTS ALL PARCELS)  
SEE DOCUMENT FOR EXACT LOCATION.

- AG 18. EASEMENT GRANT FOR WATERMAIN OVER AND ACROSS A PORTION OF THE LAND RECORDED JULY 7, 2004 AS DOCUMENT NO. R2004-181770.

(AFFECTS ALL PARCELS)

- AJ 19. PARTITION PLAT OF THE ESTATE OF EDWARD N. HURLEY RECORDED FEBRUARY 21, 1935 AS DOCUMENT NO. 355699.

(AFFECTS ALL PARCELS)

- BG 20. LEAKING UNDERGROUND STORAGE TANK ENVIRONMENTAL NOTICE RECORDED OCTOBER 30, 2014 AS DOCUMENT NUMBER R2014-102220.

(AFFECTS ALL PARCELS)

- BK 21. IT APPEARS THAT THE BUILDING LOCATED ON THE LAND AND ON THE ADJOINING PROPERTY

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- 22. BN COVENANTS, CONDITIONS, RESTRICTIONS AND RECIPROCAL EASEMENT AGREEMENT RECORDED MARCH 3, 2016 AS DOCUMENT NUMBER R2016-020233 MADE BY AND BETWEEN MARIANJOY REHABILITATION HOSPITAL & CLINICS, INC. AND WHEATON FRANCISCAN SISTERS CORPORATION, RELATING TO EASEMENTS FOR PEDESTRIAN INGRESS AND EGRESS ON SIDEWALKS AND WALKING PATHS; UTILITIES OUTSIDE OF THE SHARED BUILDINGS; UTILITIES WITHIN THE SHARED BUILDINGS; STRUCTURAL SUPPORT, COMMON WALLS, FACADE AND ROOF; EMERGENCY EGRESS; MAINTENANCE ACCESS; ENCROACHMENTS; ACCESS; USE OF MECHANICAL ROOMS; DRAINAGE AND PARKING AND RELATING TO FUTURE DEVELOPMENT AND CONSTRUCTION OBLIGATIONS; MAINTENANCE; DEMOLISHING OF A PORTION OF SHARED BUILDINGS; SIGNAGE; DAMAGE TO SHARED BUILDINGS, EMINENT DOMAIN, AND THE TERMS, PROVISIONS AND CONDITIONS SET FORTH THEREIN.
  - 23. BX WE HAVE EXAMINED THE SURVEY BY COMPASS SURVEYING LTD, DATED JANUARY 29, 2016 AND LAST REVISED FEBRUARY 26, 2016 NUMBER 15.0010-05A AND NOTE THE FOLLOWING: ENCROACHMENT OF THE FENCE ALONG THE SOUTH LINE OF PARCEL 1, ONTO PROPERTY WEST AND ADJOINING BY AN UNDISCLOSED AMOUNT. (AFFECTS ALL PARCELS)
  - 24. CA CONSEQUENCES OF NOT HAVING THE ADJOINING OWNER TO THE WEST GRANTING AN EASEMENT OVER THE PORTION OF THE PRIVATE ROAD THAT THEY OWN, FOR INGRESS AND EGRESS. (AFFECTS PARCEL 1)
  - 25. CD STATEMENT OF INTENTIONS AND RESTRICTIONS RECORDED MARCH 3, 2016 AS DOCUMENT NUMBER R2016-020232 MADE BY AND BETWEEN WHEATON FRANCISCAN SISTERS CORPORATION AND MARIANJOY REHABILITATION HOSPITAL & CLINICS, INC., AND THE TERMS, PROVISIONS AND CONDITIONS SET FORTH THEREIN.
- EXCEPTIONS FROM COVERAGE (CONTINUED)  
MAY BE CONSTRUCTED IN A MANNER THAT IS NOT SUSCEPTIBLE OF SEPARATE USE OR DIVISION ALONG THE BOUNDARY LINE OF THE LAND AND OF SAID ADJOINING PROPERTY.

CHICAGO TITLE INSURANCE COMPANY  
OWNERS' POLICY (2006)  
SCHEDULE B



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AUTHORIZED SIGNATORY

BY

*[Handwritten signature]*

CHICAGO TITLE INSURANCE COMPANY

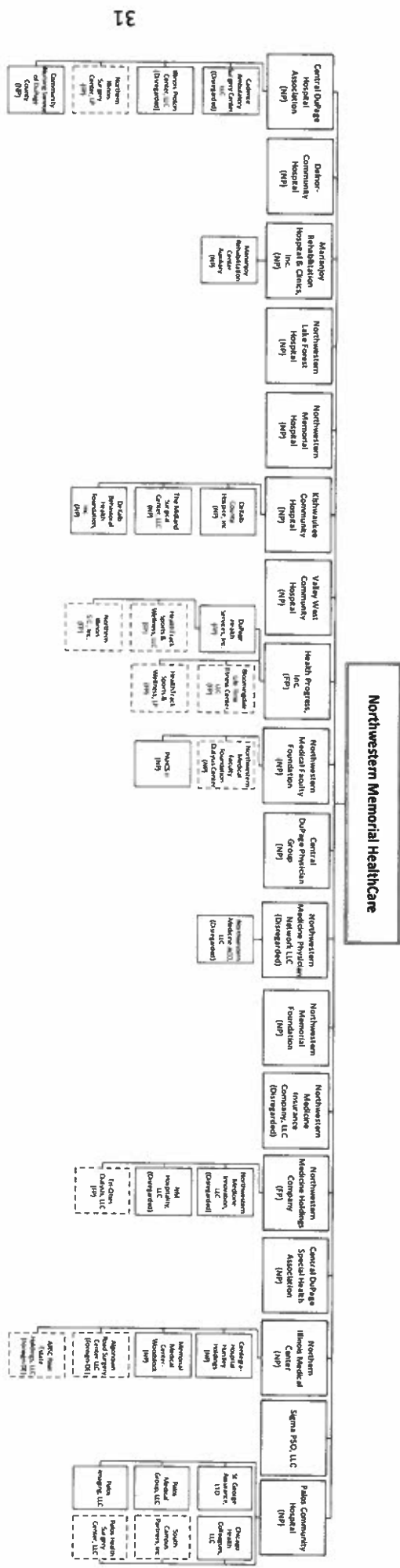
THIS POLICY SHALL NOT BE VALID OR BINDING UNTIL SIGNED BY AN AUTHORIZED SIGNATORY.

POLICY NUMBER: 1401-880014184-D2

POLICY SIGNATURE PAGE

CHICAGO TITLE INSURANCE COMPANY





Effective January 1, 2021

**SECTION II. DISCONTINUATION**

**1130.525 AND 1110.290 – Discontinuation**

**GENERAL INFORMATION REQUIREMENTS**

1. **Category of Service and Number of Beds that are to be discontinued**  
 Long-Term Care (LTC) category of service – 14 Skilled Nursing Facility (SNF) beds
2. **All other Clinical Services that are to be discontinued**  
 There are no other clinical services that will be discontinued.

**3. Anticipated Date of Discontinuation**

The discontinuation will be effective upon approval by the HFSRB. It is anticipated that will happen by March 16, 2021.

**4. Anticipated use of the Physical Plant and Equipment after discontinuation**

It is anticipated that the SNF unit will be converted to inpatient rehabilitation (IRF) beds.

**5. Attestation of Local Media Notification**

The required legal notice was published in the Daily Herald on December 4, 2020. Proof of publication is attached.

Control # 4555346

Authorized Agent

By *Anna Ratz*

PADDOCK PUBLICATIONS, INC.  
DAILY HERALD NEWSPAPERS

IN WITNESS WHEREOF, the undersigned, the said PADDOCK PUBLICATIONS, Inc., has caused this certificate to be signed by, this authorized agent, at Arlington Heights, Illinois.

I further certify that the DAILY HERALD is a newspaper as defined in "an Act to revise the law in relation to notices" as amended in 1992 Illinois Compiled Statutes, Chapter 715, Act 5, Section 1 and 5. That a notice of which the annexed printed slip is a true copy, was published 12/4/20 in said DAILY HERALD.

County(ies) of Cook, DuPage, Kane, Lake, McHenry and State of Illinois, continuously for more than one year prior to the date of the first publication of the notice hereinafter referred to and is of general circulation throughout said Village(s), County(ies) and State.

- Sugar Grove
- Wildwood, Winfield, Wood Dale, Round Lake Park, Pingree Grove,
- Wauconda, Wayne, West Chicago, West Dundee, Wheaton, Wheeling,
- Streamwood, Tower Lakes, Vernon Hills, Villa Park, Volo, Warrenville,
- Sleepy Hollow, South Barrington, South Elgin, St. Charles, Woodridge,
- Palatine, Prospect Heights, Rolling Meadows, Rosele, Schaumburg,
- North Aurora, North Barrington, Oakbrook, Oakbrook Terrace,
- Lombard, Long Grove, Medinah, Mt. Prospect, Mundelein, Naperville,
- Lake Zurich, Libertyville, Lincolnshire, Lindenhurst, Lisle,
- Keeneyville, Kildeer, Lake Barrington, Lake Villa, Lake in the Hills,
- Hoffman Estates, Huntley, Inverness, Island Lake, Itasca,
- Gurnee, Hainesville, Hampshire, Hanover Park, Hawthorn Woods,
- Gilberts, Glen Ellyn, Glendale Heights, Graylake, Green Oaks,
- Elgin, Elk Grove Village, Elmhurst, Fox Lake, Fox River Grove, Geneva,
- Carpentersville, Cary, Deer Park, Des Plaines, East Dundee, Elburn,
- Buffalo Grove, Burlington, Campion Hills, Carol Stream,
- Barrington Hills, Bartlett, Batavia, Bensenville, Bloomingdale,
- Addison, Algonquin, Arlington Heights, Aurora, Barrington,

newspaper and has been circulated daily in the Village(s) of of the DAILY HERALD. That said DAILY HERALD is a secular the State of Illinois, DOES HEREBY CERTIFY that it is the publisher Corporation organized and existing under and by virtue of the laws of

# Daily Herald

Paddock Publications, Inc.  
CERTIFICATE OF PUBLICATION

Martiny Rehabilitation Hospital & Clinics, located at 26W171 Roosevelt Road in Wheaton, intends to cease the operations of its inpatient skilled nursing program following receipt of approval to do so from the Illinois Health Facilities and Services Review Board ("HFSRB"). It is anticipated that the discontinuation will occur by March 16, 2021. The hospital intends to file the required Certificate of Exemption application with the HFSRB by December 23, 2020 after which time additional information relating to the proposed discontinuation can be found on the HFSRB website at [hfsrb.illinois.gov](http://hfsrb.illinois.gov). Published in Daily Herald December 4, 2020 (4555346)

**REASONS FOR DISCONTINUATION**

In response to the COVID-19 pandemic, some local hospitals and nursing homes in the Marianjoy service area closed their inpatient rehabilitation units to better accommodate patients with COVID-19. Many of those facilities requested the transfer of their patients needing inpatient rehabilitation to Marianjoy. To meet the increased need for inpatient rehabilitation and make up for the loss of inpatient rehabilitation facility (IRF) beds in the region, Marianjoy converted its LTC (SNF) beds to IRF beds on April 8, 2020. Since that time, Marianjoy has experienced a higher IRF census. Because the current IRF demand trends are expected to continue for the foreseeable future and LTC options are readily available in the community, Marianjoy has decided to request the formal discontinuation of the 14-bed LTC unit.

**IMPACT OF ACCESS**

1. In CY18, 775 patients were admitted to the LTC (SNF) unit and in CY19, 421 patients were admitted. The unit was open during the first three months of CY20; however, existing patients were appropriately discharged to the community by April 8, 2020.  
 The State's calculation of LTC bed need for Planning Area 7-C shows an excess of 44 beds. As such, Marianjoy does not anticipate this discontinuation having a negative impact on any facility. This project will allow Marianjoy to address the ongoing need for additional acute rehabilitation beds.
2. Copies of the notification letters sent to long-term care providers within 10 miles of Marianjoy can be found on the following pages.

Northwestern Memorial HealthCare  
Director, Regulatory Planning  
Bridget S. Orth



Sincerely,

Consistent with the requirements of 77 IAC §1110.290, Marianjoy Rehabilitation Hospital, part of Northwestern Medicine, is notifying you of the preparation of its Certificate of Exemption application to request approval for the discontinuation of its 14-bed long-term care (LTC) category of service. The discontinuation is scheduled to occur by March 16, 2021, pending HFSRB approval.

In response to the COVID-19 pandemic, some local hospitals and nursing homes in the Marianjoy service area closed their inpatient rehabilitation units to better accommodate patients with COVID-19. Many of those facilities requested the transfer of their patients needing inpatient rehabilitation to Marianjoy. To meet the increased need for inpatient rehabilitation and to make up for the loss of inpatient rehabilitation facility (IRF) beds in the region, Marianjoy converted its LTC beds to IRF beds on March 30, 2020.

Since that time, we have experienced a higher IRF census. Because we expect the current IRF demand trends to continue for the foreseeable future and LTC options are readily available in our community, Marianjoy has decided to request the formal discontinuation of the 14-bed LTC unit.

In calendar year 2018, 775 patients were admitted to the LTC unit and in calendar year 2019, 421 patients were admitted. The unit was open during the first three months of calendar year 2020; however, existing patients were appropriately discharged to the community by April 7, 2020.

The state's calculation of LTC bed need for Health Service Area 7-C shows an excess of 44 beds. As such, Marianjoy does not anticipate this discontinuation will negatively impact your facility. This project will allow Marianjoy to address the ongoing need for additional acute rehabilitation beds. We plan to continue to serve our community by providing world-class acute rehabilitation services.

Dear Administrator:

**RE: Marianjoy Rehabilitation Hospital, part of Northwestern Medicine  
Proposed Discontinuation of Long-Term Care Category of Service**

Alden Courts of Waterford  
1991 Randi Drive  
Aurora, Illinois 60504

December 8, 2020

Northwestern Memorial HealthCare  
251 East Huron Street  
Chicago, Illinois 60611-2908  
312.926.2033  
nm.org



Northwestern Memorial HealthCare  
Director, Regulatory Planning  
Bridget S. Orth



Sincerely,

The state's calculation of LTC bed need for Health Service Area 7-C shows an excess of 44 beds. As such, Marianjoy does not anticipate this discontinuation will negatively impact your facility. This project will allow Marianjoy to address the ongoing need for additional acute rehabilitation beds. We plan to continue to serve our community by providing world-class acute rehabilitation services.

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Consistent with the requirements of 77 IAC §110.290, Marianjoy Rehabilitation Hospital, part of Northwestern Medicine, is notifying you of the preparation of its Certificate of Exemption application to request approval for the discontinuation of its 14-bed long-term care (LTC) category of service. The discontinuation is scheduled to occur by March 16, 2021, pending HFSRB approval.

Dear Administrator:

**RE: Marianjoy Rehabilitation Hospital, part of Northwestern Medicine  
Proposed Discontinuation of Long-Term Care Category of Service**

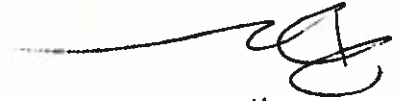
Alden Estates of Naperville  
1525 South Oxford Lane  
Naperville, Illinois 60565

December 8, 2020

Northwestern Memorial HealthCare  
251 East Huron Street  
Chicago, Illinois 60611-2908  
312.926.2033  
nm.org



Bridget S. Orth  
Director, Regulatory Planning  
Northwestern Memorial HealthCare



Sincerely,

The state's calculation of LTC bed need for Health Service Area 7-C shows an excess of 44 beds. As such, Marianjoy does not anticipate this discontinuation will negatively impact your facility. This project will allow Marianjoy to address the ongoing need for additional acute rehabilitation beds. We plan to continue to serve our community by providing world-class acute rehabilitation services.

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Marianjoy has decided to request the formal discontinuation of the 14-bed LTC unit. Since that time, we have experienced a higher IRF census. Because we expect the current IRF demand trends to continue for the foreseeable future and LTC options are readily available in our community, Marianjoy has decided to request the formal discontinuation of the 14-bed LTC unit.

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Consistent with the requirements of 77 IAC §1110.290, Marianjoy Rehabilitation Hospital, part of Northwestern Medicine, is notifying you of the preparation of its Certificate of Exemption application to request approval for the discontinuation of its 14-bed long-term care (LTC) category of service. The discontinuation is scheduled to occur by March 16, 2021, pending HFSRB approval.

Dear Administrator:

**RE: Marianjoy Rehabilitation Hospital, part of Northwestern Medicine  
Proposed Discontinuation of Long-Term Care Category of Service**

Alden Valley Ridge  
275 East Army Trail Road  
Bloomington, Illinois 60108

December 8, 2020

Northwestern Memorial HealthCare  
251 East Huron Street  
Chicago, Illinois 60611-2908  
312.926.2033  
nm.org





Bridget S. Orth  
Director, Regulatory Planning  
Northwestern Memorial Healthcare



Sincerely,

The state's calculation of LTC bed need for Health Service Area 7-C shows an excess of 44 beds. As such, Marianjoy does not anticipate this discontinuation will negatively impact your facility. This project will allow Marianjoy to address the ongoing need for additional acute rehabilitation beds. We plan to continue to serve our community by providing world-class acute rehabilitation services.

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Consistent with the requirements of 77 IAC §1110.290, Marianjoy Rehabilitation Hospital, part of Northwestern Medicine, is notifying you of the preparation of its Certificate of Exemption application to request approval for the discontinuation of its 14-bed long-term care (LTC) category of service. The discontinuation is scheduled to occur by March 16, 2021, pending HFSRB approval.

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Dear Administrator:

RE:

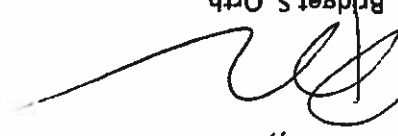
*Marianjoy Rehabilitation Hospital, part of Northwestern Medicine  
Proposed Discontinuation of Long-Term Care Category of Service*

Aperion Care West Chicago  
201 North Avenue  
West Chicago, Illinois 60185

December 8, 2020

Northwestern Memorial Healthcare  
251 East Huron Street  
Chicago, Illinois 60611-2908  
312.926.2033  
nm.org



Sincerely,  
  
 Bridget S. Orth  
 Director, Regulatory Planning  
 Northwestern Memorial HealthCare

Consistent with the requirements of 77 IAC §1110.290, Marianjoy Rehabilitation Hospital, part of Northwestern Medicine, is notifying you of the preparation of its Certificate of Exemption application to request approval for the discontinuation of its 14-bed long-term care (LTC) category of service. The discontinuation is scheduled to occur by March 16, 2021, pending HFSRB approval.

In response to the COVID-19 pandemic, some local hospitals and nursing homes in the Marianjoy service area closed their inpatient rehabilitation units to better accommodate patients with COVID-19. Many of those facilities requested the transfer of their patients needing inpatient rehabilitation to Marianjoy. To meet the increased need for inpatient rehabilitation and to make up for the loss of inpatient rehabilitation facility (IRF) beds in the region, Marianjoy converted its LTC beds to IRF beds on March 30, 2020.

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The state's calculation of LTC bed need for Health Service Area 7-C shows an excess of 44 beds. As such, Marianjoy does not anticipate this discontinuation will negatively impact your facility. This project will allow Marianjoy to address the ongoing need for additional acute rehabilitation beds. We plan to continue to serve our community by providing world-class acute rehabilitation services.

Dear Administrator:

**RE: Marianjoy Rehabilitation Hospital, part of Northwestern Medicine  
 Proposed Discontinuation of Long-Term Care Category of Service**

Arista Healthcare  
 1136 North Mill Street  
 Naperville, Illinois 60563

December 8, 2020

Northwestern Memorial HealthCare  
 251 East Huron Street  
 Chicago, Illinois 60611-2908  
 312.926.2033  
 nm.org





Northwestern Memorial Healthcare  
251 East Huron Street  
Chicago, Illinois 60611-2908  
312.926.2033  
nm.org

December 8, 2020

Asbury Gardens  
210 Airport Road  
North Aurora, Illinois 60542

**RE: Marianjoy Rehabilitation Hospital, part of Northwestern Medicine  
Proposed Discontinuation of Long-Term Care Category of Service**

Dear Administrator:

Consistent with the requirements of 77 IAC §1110.290, Marianjoy Rehabilitation Hospital, part of Northwestern Medicine, is notifying you of the preparation of its Certificate of Exemption application to request approval for the discontinuation of its 14-bed long-term care (LTC) category of service. The discontinuation is scheduled to occur by March 16, 2021, pending HFSRB approval.

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Sincerely,

Bridget S. Orth  
Director, Regulatory Planning  
Northwestern Memorial Healthcare

Northwestern Memorial HealthCare  
Director, Regulatory Planning  
Bridget S. Orth



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Dear Administrator:

**RE: Marianjoy Rehabilitation Hospital, part of Northwestern Medicine  
Proposed Discontinuation of Long-Term Care Category of Service**

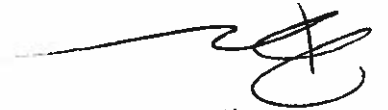
Assisi Healthcare of Clare Oaks  
775 West Bartlett Road  
Bartlett, Illinois 60103

December 8, 2020

Northwestern Memorial HealthCare  
251 East Huron Street  
Chicago, Illinois 60611-2908  
312.926.2033  
nm.org



Northwestern Memorial Healthcare  
Director, Regulatory Planning  
Bridget S. Orth



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Dear Administrator:

**RE: Marianjoy Rehabilitation Hospital, part of Northwestern Medicine  
Proposed Discontinuation of Long-Term Care Category of Service**

Batavia Rehabilitation and Health Care Center  
520 East Fabyan Parkway  
Batavia, Illinois 60510

December 8, 2020

Northwestern Memorial Healthcare  
251 East Huron Street  
Chicago, Illinois 60611-2908  
312.926.2033  
nm.org





Northwestern Memorial Healthcare  
251 East Huron Street  
Chicago, Illinois 60611-2908  
312.926.2033  
nm.org

December 8, 2020

Beacon Hill  
2400 South Finley Road  
Lombard, Illinois 60148

**RE: Marianjoy Rehabilitation Hospital, part of Northwestern Medicine  
Proposed Discontinuation of Long-Term Care Category of Service**

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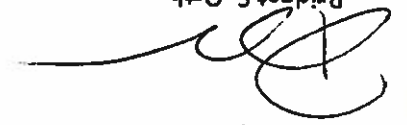
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Director, Regulatory Planning  
Northwestern Memorial Healthcare

Northwestern Memorial Healthcare  
Director, Regulatory Planning  
Bridget S. Orth



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Dear Administrator:

**RE: Marianjoy Rehabilitation Hospital, part of Northwestern Medicine  
Proposed Discontinuation of Long-Term Care Category of Service**

Bella Terra Streamwood  
815 East Irving Park Road  
Streamwood, Illinois 60107

December 8, 2020

Northwestern Memorial Healthcare  
251 East Huron Street  
Chicago, Illinois 60611-2908  
312.926.2033  
nm.org





Northwestern Memorial Healthcare  
251 East Huron Street  
Chicago, Illinois 60611-2908  
312.926.2033  
nm.org

December 8, 2020

Bria of Geneva  
1101 East State Street  
Geneva, Illinois 60134

**RE: *Marianjoy Rehabilitation Hospital, part of Northwestern Medicine  
Proposed Discontinuation of Long-Term Care Category of Service***

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Director, Regulatory Planning  
Northwestern Memorial Healthcare





Northwestern Memorial Healthcare  
251 East Huron Street  
Chicago, Illinois 60611-2908  
312.926.2033  
nm.org

December 8, 2020

Brookdale Plaza Lisle  
1800 Robin Lane  
Lisle, Illinois 60532

Dear Administrator:

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Proposed Discontinuation of Long-Term Care Category of Service***

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Northwestern Memorial Healthcare



Northwestern Memorial Healthcare  
251 East Huron Street  
Chicago, Illinois 60611-2908  
312.926.2033  
nm.org

December 8, 2020

Covenant Living at Windsor Park  
110 Windsor Park Drive  
Carol Stream, Illinois 60188

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Proposed Discontinuation of Long-Term Care Category of Service**

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Director, Regulatory Planning  
Northwestern Memorial Healthcare



Northwestern Memorial Healthcare  
251 East Huron Street  
Chicago, Illinois 60611-2908  
312.926.2033  
nm.org

December 8, 2020

Dunham Rehab & Healthcare  
850 Dunham Road  
St. Charles, Illinois 60174

**RE: *Marianjoy Rehabilitation Hospital, part of Northwestern Medicine  
Proposed Discontinuation of Long-Term Care Category of Service***

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Northwestern Memorial Healthcare

Northwestern Memorial HealthCare  
Director, Regulatory Planning

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Dear Administrator:

**RE: Marianjoy Rehabilitation Hospital, part of Northwestern Medicine  
Proposed Discontinuation of Long-Term Care Category of Service**

DuPage Care Center  
400 North County Farm Road  
Wheaton, Illinois 60187

December 8, 2020

Northwestern Memorial HealthCare  
251 East Huron Street  
Chicago, Illinois 60611-2908  
312.926.2033  
nm.org





Northwestern Memorial Healthcare  
251 East Huron Street  
Chicago, Illinois 60611-2908  
312.926.2033  
nm.org

December 8, 2020

Greenfields of Geneva  
0N801 Friendship Way  
Geneva, Illinois 60134

**RE: *Marianjoy Rehabilitation Hospital, part of Northwestern Medicine  
Proposed Discontinuation of Long-Term Care Category of Service***

Dear Administrator:

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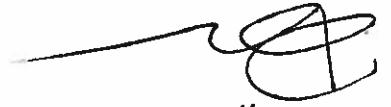
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Director, Regulatory Planning  
Northwestern Memorial Healthcare

Northwestern Memorial HealthCare  
Director, Regulatory Planning  
Bridget S. Orth



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Dear Administrator:

**RE: Marianjoy Rehabilitation Hospital, part of Northwestern Medicine  
Proposed Discontinuation of Long-Term Care Category of Service**

The Grove Fox Valley  
1601 North Farnsworth  
Aurora, Illinois 60505

December 8, 2020

Northwestern Memorial HealthCare  
251 East Huron Street  
Chicago, Illinois 60611-2908  
312.926.2033  
nm.org



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Director, Regulatory Planning  
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Dear Administrator:

**RE: Marianjoy Rehabilitation Hospital, part of Northwestern Medicine  
Proposed Discontinuation of Long-Term Care Category of Service**

The Grove of St. Charles  
611 Allen Lane  
St. Charles, Illinois 60174

December 8, 2020

Northwestern Memorial HealthCare  
251 East Huron Street  
Chicago, Illinois 60611-2908  
312.926.2033  
nm.org



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Director, Regulatory Planning  
Bridget S. Orth

  
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**RE: Marianjoy Rehabilitation Hospital, part of Northwestern Medicine  
Proposed Discontinuation of Long-Term Care Category of Service**

Lexington Health Care Center of Bloomington  
165 South Bloomington Road  
Bloomington, Illinois 60108

December 8, 2020

Northwestern Memorial HealthCare  
251 East Huron Street  
Chicago, Illinois 60611-2908  
312.926.2033  
nm.org







Northwestern Memorial Healthcare  
251 East Huron Street  
Chicago, Illinois 60611-2908  
312.926.2033  
nm.org

December 8, 2020

Lexington Health Care Center of Lombard  
2100 South Finley Road  
Lombard, Illinois 60148

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Northwestern Memorial Healthcare

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Director, Regulatory Planning  
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Dear Administrator:

**RE: Marianjoy Rehabilitation Hospital, part of Northwestern Medicine  
Proposed Discontinuation of Long-Term Care Category of Service**

Northwestern Memorial HealthCare  
720 Raymond Drive  
Naperville, Illinois 60563

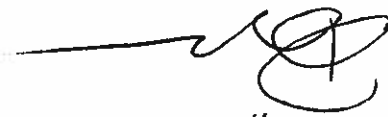
December 8, 2020

Northwestern Memorial HealthCare  
251 East Huron Street  
Chicago, Illinois 60611-2908  
312.926.2033  
nm.org



Northwestern Memorial HealthCare  
Director, Regulatory Planning

Bridget S. Orth



Sincerely,

The state's calculation of LTC bed need for Health Service Area 7-C shows an excess of 44 beds. As such, Marianjoy does not anticipate this discontinuation will negatively impact your facility. This project will allow Marianjoy to address the ongoing need for additional acute rehabilitation beds. We plan to continue to serve our community by providing world-class acute rehabilitation services.

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Dear Administrator:


**RE: *Marianjoy Rehabilitation Hospital, part of Northwestern Medicine  
Proposed Discontinuation of Long-Term Care Category of Service***

Michaelsen Health Center  
831 Batavia Avenue  
Batavia, Illinois 60510

December 8, 2020

Northwestern Memorial HealthCare  
251 East Huron Street  
Chicago, Illinois 60611-2908  
312.926.2033  
nm.org



Sincerely,  
  
 Bridget S. Orth  
 Director, Regulatory Planning  
 Northwestern Memorial HealthCare

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Dear Administrator:

**RE: Marianjoy Rehabilitation Hospital, part of Northwestern Medicine  
 Proposed Discontinuation of Long-Term Care Category of Service**

North Aurora Care Center  
 310 Banbury Road  
 North Aurora, Illinois 60542

December 8, 2020

Northwestern Memorial HealthCare  
 251 East Huron Street  
 Chicago, Illinois 60611-2908  
 312.926.2033  
 nm.org





Northwestern Memorial Healthcare  
251 East Huron Street  
Chicago, Illinois 60611-2908  
312.926.2033  
nm.org

December 8, 2020

The Pearl of Naperville  
200 West Martin Avenue  
Naperville, Illinois 60540

**RE: Marianjoy Rehabilitation Hospital, part of Northwestern Medicine  
Proposed Discontinuation of Long-Term Care Category of Service**

Dear Administrator:

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Sincerely,

Bridget S. Orth  
Director, Regulatory Planning  
Northwestern Memorial Healthcare



Northwestern Memorial Healthcare  
251 East Huron Street  
Chicago, Illinois 60611-2908  
312.926.2033  
nm.org

December 8, 2020

St. Patrick's Residence  
1400 Brookdale Road  
Naperville, Illinois 60563

**RE: Marianjoy Rehabilitation Hospital, part of Northwestern Medicine  
Proposed Discontinuation of Long-Term Care Category of Service**

Dear Administrator:

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Sincerely,

Bridget S. Orth  
Director, Regulatory Planning  
Northwestern Memorial Healthcare

Northwestern Memorial HealthCare  
Director, Regulatory Planning

Bridget S. Orth



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Dear Administrator:

**RE: Marianjoy Rehabilitation Hospital, part of Northwestern Medicine  
Proposed Discontinuation of Long-Term Care Category of Service**

The Springs at Monarch Landing  
2255 Monarch Drive  
Naperville, Illinois 60563

December 8, 2020

Northwestern Memorial HealthCare  
251 East Huron Street  
Chicago, Illinois 60611-2908  
312.926.2033  
nm.org





Northwestern Memorial Healthcare  
251 East Huron Street  
Chicago, Illinois 60611-2908  
312.926.2033  
nm.org

December 8, 2020

Symphony of Hanover Park  
2016 West Lake Street  
Hanover Park, Illinois 60133

**RE: *Marianjoy Rehabilitation Hospital, part of Northwestern Medicine  
Proposed Discontinuation of Long-Term Care Category of Service***

Dear Administrator:

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Sincerely,

Bridget S. Orth

Director, Regulatory Planning  
Northwestern Memorial Healthcare





Northwestern Memorial Healthcare  
251 East Huron Street  
Chicago, Illinois 60611-2908  
312.926.2033  
nm.org

December 8, 2020

Tabors Hills Healthcare  
1347 Crystal Avenue  
Naperville, Illinois 60563

**RE: Marianjoy Rehabilitation Hospital, part of Northwestern Medicine  
Proposed Discontinuation of Long-Term Care Category of Service**

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Bridget S. Orth

Director, Regulatory Planning  
Northwestern Memorial Healthcare



Northwestern Memorial Healthcare  
251 East Huron Street  
Chicago, Illinois 60611-2908  
312.926.2033  
nm.org

December 8, 2020

Thrive of Fox Valley  
4020 East New York Street  
Aurora, Illinois 60506

**RE:** *Marianjoy Rehabilitation Hospital, part of Northwestern Medicine  
Proposed Discontinuation of Long-Term Care Category of Service*

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Bridget S. Orth

Director, Regulatory Planning  
Northwestern Memorial Healthcare



Northwestern Memorial HealthCare  
251 East Huron Street  
Chicago, Illinois 60611-2908  
312.926.2033  
nm.org

December 8, 2020

Thrive Lisle  
2850 Ogden Avenue  
Lisle, Illinois 60532

**RE:** *Marianjoy Rehabilitation Hospital, part of Northwestern Medicine  
Proposed Discontinuation of Long-Term Care Category of Service*

Dear Administrator:

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Sincerely,

Bridget S. Orth  
Director, Regulatory Planning  
Northwestern Memorial HealthCare



Northwestern Memorial Healthcare  
251 East Huron Street  
Chicago, Illinois 60611-2908  
312.926.2033  
nm.org

December 8, 2020

West Chicago Terrace  
928 Joliet Road  
West Chicago, Illinois 60185

**RE: Marianjoy Rehabilitation Hospital, part of Northwestern Medicine  
Proposed Discontinuation of Long-Term Care Category of Service**

Dear Administrator:

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Director, Regulatory Planning  
Northwestern Memorial Healthcare

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Director, Regulatory Planning  
Northwestern Memorial Healthcare

  
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Proposed Discontinuation of Long-Term Care Category of Service**

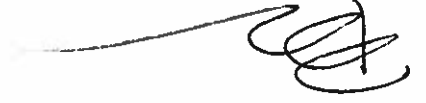
West Suburban Nursing & Rehabilitation Center  
311 Edgewater Drive  
Bloomington, Illinois 60108

December 8, 2020

Northwestern Memorial Healthcare  
251 East Huron Street  
Chicago, Illinois 60611-2908  
312.926.2033  
nm.org



Northwestern Memorial HealthCare  
Director, Regulatory Planning  
Bridget S. Orth



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Dear Administrator:

**RE: Marianjoy Rehabilitation Hospital, part of Northwestern Medicine  
Proposed Discontinuation of Long-Term Care Category of Service**

Wheaton Village Nursing and Rehabilitation Center  
1325 Manchester Road  
Wheaton, Illinois 60187

December 8, 2020

Northwestern Memorial HealthCare  
251 East Huron Street  
Chicago, Illinois 60611-2908  
312.926.2033  
nm.org



Northwestern Memorial HealthCare  
Director, Regulatory Planning

Bridget S. Orth



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Dear Administrator:

**RE: Marianjoy Rehabilitation Hospital, part of Northwestern Medicine  
Proposed Discontinuation of Long-Term Care Category of Service**

Winfield Woods Healthcare Center  
28W141 Liberty Street  
Winfield, Illinois 60190

December 8, 2020

Northwestern Memorial HealthCare  
251 East Huron Street  
Chicago, Illinois 60611-2908  
312.926.2033  
nm.org



Northwestern Memorial HealthCare  
Director, Regulatory Planning  
Bridget S. Orth



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**RE: *Marianjoy Rehabilitation Hospital, part of Northwestern Medicine  
Proposed Discontinuation of Long-Term Care Category of Service***

Wynscape Health & Rehabilitation  
2180 Manchester Road  
Wheaton, Illinois 60187

December 8, 2020

Northwestern Memorial HealthCare  
251 East Huron Street  
Chicago, Illinois 60611-2908  
312.926.2033  
nm.org





**SECTION III. BACKGROUND.**

**BACKGROUND OF APPLICANT**

1. Listing of all health care facilities owned or operated by the applicants, including licensing, and certification if applicable.

Northwestern Memorial HealthCare:

Facility	IDPH License No.	Joint Commission Organization No.
Northwestern Memorial Hospital	0003251	7267
Lake Forest Hospital	0005660	3918
Central DuPage Hospital Association	0005744	7444
Delnor-Community Hospital	0005736	5291
Marianjoy Rehabilitation Hospital	0003228	7445
Kishwaukee Community Hospital	0005470	7325
Valley West Community Hospital	0004690	382957
Northwestern Illinois Medical Center d/b/a	0003889	7375
Northwestern Illinois Medical Center d/b/a	0003889	7375
Northwestern Illinois Medical Center d/b/a	0003889	7375
Northwestern Medicine Woodstock Hospital	22002	3918
Grayslake Freestanding Emergency Center	7003156	3918
Grayslake ASTC	7003149	3918
Grayslake Endoscopy ASTC	7003173	n/a
Cadence Ambulatory Surgical Center d/b/a	7003148	n/a
Northwestern Medicine Surgery Center	n/a	n/a
Midland Surgical Center*	n/a	n/a
Northwestern Medicine Proton Center	n/a	n/a

\*denotes partial ownership > 50%

NMHC has received HFSRB approval for the change of ownership of Palos Community Hospital and Palos Health Surgery Center. The transaction is scheduled to be complete on December 30, 2020.

Palos Community Hospital	003210	7306
Palos Health Surgery Center*	7003224	n/a

\*denotes partial ownership > 50%

2. *A certified listing of any adverse action taken against any facility owned and/or operated by the applicants during the three years prior to the filing of the application.*  
 By their signatures on the Certification pages of this application, each of the Applicants attest that no adverse action has been taken against any facility owned and/or operated by Northwestern Memorial HealthCare during the three years prior to the filing of this application. For the purpose of this letter, the term "adverse action" has the meaning given to it in the Illinois Administrative Code, Title 77, Section 1130.140.
3. *Authorization permitting HFSRB and DPH access to any documents necessary to verify the information submitted, including, by not limited to: official records of DPH or other State agencies; the licensing or certification records of other states, when applicable; and the records of nationally recognized accreditation organizations.*  
 By their signatures on the Certification pages of this application, each of the Applicants authorize HFSRB and DPH access any documentation which it finds necessary to verify any information submitted, including, but not limited to: official records of DPH or other State agencies and the records of nationally recognized accreditation organizations.

Safety Net Information per PA 96-0031					
CHARITY CARE					
Charity (# of patients)		FY17	FY18	FY19	
Inpatient	28	30	44		
Outpatient	50	58	52		
<b>Total</b>	<b>78</b>	<b>88</b>	<b>96</b>		
Charity (cost in dollars)					
Inpatient	\$ 465,717	\$ 631,655	\$ 1,273,248		
Outpatient	\$ 109,990	\$ 141,710	\$ 143,427		
<b>Total</b>	<b>\$ 575,707</b>	<b>\$ 773,365</b>	<b>\$ 1,416,675</b>		

**MARIANJOY REHABILITATION HOSPITAL**

As with all of Northwestern Medicine facilities, Marianjoy is committed to providing care for those unable to pay. Northwestern Medicine is the leading provider of charity care and a leading provider of Medicaid in DuPage County.

Charity Care and Medicaid

Marianjoy believes that this discontinuation will have a positive impact on the providers of long-term care services in Planning Area 7-C by reducing the excess beds and increasing the utilization at other long-term care facilities.

3. How the discontinuation might impact the remaining safety net providers in a giving community, if reasonably known.

For the reasons stated above, Marianjoy does not believe that this project will have a negative impact on any other provider or any safety net services.

2. The project's impact on the ability of another provider or health care system to cross-subsidize safety net services.

Marianjoy's 14-bed long-term care unit has been temporarily closed since April 8, 2020 due to the COVID-19 pandemic in order to provide much needed acute inpatient rehabilitation services. Given the calculated excess of 44 LTC beds in Planning Area 7-C, this project will not have a material impact of any safety net services in the community.

1. The project's material impact, if any, on essential safety net services in the community, to the extent that it is feasible to have such knowledge.

**SECTION IV. SAFETY NET IMPACT STATEMENT**

• “Go Baby Go” program: Therapists and engineers collaborate to retrofit powered toy vehicles to meet the needs of children with disabilities. The purpose of this program is to enhance mobility and socialization for children with a disability. In FY19 120 volunteers (100 community volunteers and 20 Marianjoy volunteers) participated in the April 2019 event. 23 children were served and 4 were upgrades from existing participants. Due to COVID-19, this event did not occur in FY20.

• Adapt-A-Toy program: Physical and occupational therapists collaborate with local businesses to modify toys for pediatric patients with disabilities. Community volunteers harness their engineering expertise to modify or rewire toys so their original electric switches are redirected to larger switches for children with special needs. Such modifications remove barriers to exploring and playing as a child would typically do. Adapted toys help patients play and learn as independently as possible in a way that helps develop other skills, such as writing or handling utensils. In FY19, 25 toys were modified to meet the needs of differently abled children in the community.

• Collaboration with Access DuPage: Members of Marianjoy’s leadership team participate on various task forces and work groups related to access-to-care issues with Access DuPage. Marianjoy provided free inpatient and outpatient care to all Access DuPage clients in accordance with presumptive eligibility and existing Marianjoy financial assistance policies. In FY 19, 641 patients received financial assistance for a total of \$3,430,067 in financial assistance provided to Marianjoy patients.

Through outreach services and health education programs, Marianjoy improves access to rehabilitation services to the residents of DuPage County as well as surrounding counties. Examples include:

Marianjoy Community Benefit Activities

Source: IDPH Annual Hospital Questionnaires

MEDICAID			
Medicaid (# of patients)	FY17	FY18	FY19
Inpatient	77	138	113
Outpatient	294	406	716
<b>Total</b>	<b>371</b>	<b>544</b>	<b>829</b>
<b>Medicaid (revenue)</b>			
Inpatient	\$ 1,583,250	\$ 4,577,433	\$ 4,114,987
Outpatient	\$ 648,122	\$ 1,013,277	\$ 734,101
<b>Total</b>	<b>\$ 2,231,372</b>	<b>\$ 5,590,710</b>	<b>\$ 4,849,088</b>

- Marjanoy offers evidence-based support programs of chronic disease management for the following support groups by providing space and staff to lead the groups (FY19):
  - Amputee – 5 sessions with 54 participants
  - Parkinson’s – 4 sessions with 28 participants
  - Caregiver Support – 10 sessions with 29 participants
  - Stroke – 6 sessions with 48 participants
  - ALS – 7 sessions
  - Aphasia – 7 sessions with 179 participants
  - Connections (Pediatrics) – 7 sessions with 102 participants
  - High Hopes (BI) – 7 sessions with 140 participants
  - Lives in Motion (Spinal Cord Injury) – 7 sessions with 115 participants
  - Multiple Sclerosis – 5 sessions with 76 participants
- Driver’s Rehabilitation Police Interaction Course for Drivers with Special Needs program: This program is focused on enhancing communication between autistic individuals and first responders. This is a partnership between Marjanoy and the DuPage Sheriff’s department. The program occurred in FY18 but not in FY19 due to multiple changes in leadership within the Sheriff’s department; however, Marjanoy did offer the Pre-Driving Boot Camp as a separate and distinct program in FY19.
- Language Assistance programs with professional healthcare interpreters: In FY19, Marjanoy spent \$457,622 on interpreters’ services for Marjanoy patients. Transportation programs: Transportation is an issue for many rehabilitation patients. Marjanoy address this issue by providing low-cost transportation to outpatient appointments. In FY19, Marjanoy provided or funded over 7,893 trips to facilitate access to outpatient medical care.
- Onsite Clinical Education Training: Marjanoy provides on-site clinical educational training and clinical practicum site placement for students in the following fields: medical, nursing, physical therapy, occupations therapy, speech language pathology, and pharmacy.
- Educational Training for Health Care Professionals: Marjanoy provides training for health care professionals by sharing best practices at the following national conferences (internally funded):
  - American Medical Provider Rehabilitation Association
  - Association of Rehabilitation Nursing Conference
  - American Speech Language Hearing Association
  - Illinois Pain Association
- Research Activities: Marjanoy funded research and disseminated best practices to the rehabilitation community for the following public health issues:
  - Reducing Opioid Usage in the Chronic Pain Population

- Supportive Communication Training for Healthcare Professionals working with Individuals with Aphasia following a Stroke
- Improving Swallowing Safety with Verbal Cues
- Characteristics of Young Drivers with Autism Spectrum Disorder
- Establishing Evidence-Based Benchmarks & Guidelines for the Field of Patient Advocacy
- Acute Kidney Injury in Patients Following a Brain Injury Participating with Inpatient Rehabilitation

**SECTION V. CHARITY CARE INFORMATION**

**Marianjoy Rehabilitation Hospital**

	<b>FY17</b>	<b>FY18</b>	<b>FY19</b>
Net Patient Revenue	\$ 67,428,411	\$ 73,443,617	\$ 74,319,925
Amount of Charity Care (charges)	\$ 1,179,863	\$ 1,547,991	\$ 3,686,658
Cost of Charity Care	\$ 575,707	\$ 773,365	\$ 1,416,675

**Northwestern Memorial HealthCare**

	<b>FY17</b>	<b>FY18</b>	<b>FY19</b>
Net Patient Revenue	\$4,547,371,208	\$4,877,615,420	\$5,665,736,442
Amount of Charity Care (charges)	\$ 308,814,605	\$ 321,715,102	\$ 354,450,428
Cost of Charity Care	\$ 65,761,106	\$ 65,929,276	\$ 68,334,946

During FY19, Northwestern Memorial HealthCare contributed nearly \$1.06 billion in community benefits including charity care, other unreimbursed care, research, education, language assistance, donations and other community benefits.