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# Transcript of Public Hearing

**Date:** August 9, 2021

**Case:** E-011-21 Woodlake Specialty Hospital, Melrose Park

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ILLINOIS DEPARTMENT OF PUBLIC HEALTH  
HEALTH FACILITIES AND SERVICES REVIEW BOARD  
BEFORE HEARING OFFICER COURTNEY AVERY

-----x  
IN RE: x  
Public Comments Regarding x  
Application for the x Project No.:  
Re-Establishment and Change x E-011-21  
Of Ownership Exemption for x  
Woodlake Specialty Hospital x  
-----x

HEARING  
in accordance with the requirements of the  
Illinois Health Facilities Planning Act  
Conducted Virtually  
Monday, August 9, 2021  
11:04 a.m. CST

Job No.: 391492  
Pages 1 - 29  
Transcribed by: Jo Ann Pawela

Transcript of Public Hearing  
Conducted on August 9, 2021

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1           PRESENT:  
2           ILLINOIS HEALTH FACILITIES AND SERVICES  
3           REVIEW BOARD, by:  
4           COURTNEY AVERY, PUBLIC HEARING OFFICER  
5           GEORGE ROATE  
6           MICHAEL CONSTANTINO  
7           APRIL SIMMONS  
8           MIKE MITCHELL  
9           525 West Jefferson Street  
10          Second Floor  
11          Springfield, IL 62761  
12          (217) 782-3516

13  
14          ALSO PRESENT:  
15          Ed Green, Esq. (Foley & Lardner),  
16          Shannon Jones (CEO, Woodlake Hospital), Dr.  
17          Glenn Kushner, Dr. Martha Kushner, Jim Prister  
18          (President and CEO, RML Specialty Hospitals),  
19          Dr. Rupak Parikh (CEO, Advanced Rehabilitation  
20          Care), Antonio Sanchez (elected official), Dr.  
21          Krushen Pillay, Yolanda Wilson-Stubbs (President  
22          and CEO, Holy Family Medical Center), and Dr.  
23          Fyda.

24

1 P R O C E E D I N G S

2 MS. AVERY: I'll call the meeting to order.

3 Good morning. Thank you all for  
4 participating in today's hearing for Woodlake  
5 Specialty Hospital, LLC.

6 I am Courtney Avery, the Administrator for  
7 the Board. With me today are Mike Constantino,  
8 April Simmons, George Roate, and Mike Mitchell.

9 As per the rules of the Illinois Health  
10 Planning Act, the previously published Notice,  
11 Notice of Review and Opportunity for Public  
12 Hearing and Written Comment, and Public Hearing  
13 and Opportunity for Comments have been submitted  
14 to the court reporter and will be included in  
15 today's event if you sent it through the e-mail  
16 system.

17 Woodlake Specialty Hospital, LLC, located  
18 at 1225 West Lake Street, Melrose Park, formerly  
19 known as Westlake Hospital. The applicants are  
20 Woodlake Pacific Holdings, LLC and Woodlake  
21 Specialty Hospital, LLC.

22 The revision to this application will add  
23 three medical-surgical beds and reduce the  
24 intensive care beds to three.

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1           The acute hospital will have 80 acute  
2     mental illness beds, 60 long-term care beds, 44  
3     long-term, acute care beds, three intensive care  
4     beds, three medical-surgical beds, and 40  
5     comprehensive physical rehabilitation beds for a  
6     total of 230 authorized beds.

7           Woodlake Specialty Hospital would treat all  
8     patients regardless of their ability to pay.

9           The cost of the project is \$43,392,895.

10          The anticipated completion date is December  
11     31st, 2022.

12          A copy of the application may be viewed at  
13     the Illinois Health Facilities and Services  
14     Review office at the address listed on the  
15     public notice at 525 West Jefferson Street,  
16     Springfield, Illinois, 62701.

17          A copy of the application may also be  
18     reviewed at [www.hfsrb.illinois.gov](http://www.hfsrb.illinois.gov).

19          I'm sorry. The zip code is 62761.

20          In accordance with the requirements -- I'm  
21     sorry. One second. That duplicated. Okay.

22          Please note that in order to ensure that  
23     the Health Facilities and Services Review Board  
24     public hearings protect the privacy and maintain

1 confidentiality of an individual's health  
2 information, covered entities, as defined by the  
3 Health Insurance Portability and Accountability  
4 Act of 1996, such as hospital providers, health  
5 plans, and healthcare clearinghouses, submitted  
6 oral or written testimony that discloses  
7 protected health information of an individual  
8 shall have a valid, written authorization from  
9 that individual. The authorization shall allow  
10 the covered entity to share the individual's  
11 protected health information at this hearing.

12 If you have prepared text, you may submit  
13 the written text in today's record and will be  
14 made available to all HFSRB members prior to the  
15 meeting in which this application will be heard,  
16 which will be determined and purchased --  
17 published on the Health Facilities Service  
18 Review Board's webpage.

19 I ask that you please provide the court  
20 reporter with the full spelling of your name,  
21 and we will start off with two minutes for each  
22 applicant -- I'm sorry, for each speaker on this  
23 application.

24 Okay. Hearing none, are there any

1 questions?

2 Oh, if you're on the phone, please just  
3 push star three, and that will alert me that  
4 you're wanting to provide testimony, and unmute  
5 your mike.

6 So, we'll start off today with Mr. Ed  
7 Green.

8 MR. GREEN: Thank you, Ms. Avery.

9 As Ms. Avery said, this is sort of our --  
10 this is our second public hearing on this  
11 project.

12 We filed the original application on June  
13 1. There was a first public hearing on June 15.

14 I think two weeks ago, we filed a new page  
15 16 and that reallocated some beds. In the  
16 original application, there were six ICU beds,  
17 and we amended page 16 of the COE application,  
18 shifting those six ICU beds to three med-surg  
19 beds and three ICU beds. There are literally no  
20 other changes in the application, other than  
21 page 16 in those two lines.

22 Today, we -- oh, and as a result of that,  
23 we would incorporate by reference all of our  
24 previous testimony at the first public hearing,

1       which I think it is technically, but I just  
2       wanted to make sure I said that.

3               We do have one new speaker today. She was  
4       unavailable the first time, and she's the CEO of  
5       the hospital, and I was going to turn it over to  
6       her first, Shannon Jones.

7               MS. AVERY: Okay. I will unmute Ms. Jones'  
8       mike. But, please be aware that we're not  
9       treating this as a continuation of the first  
10      application. This is a new application that  
11      added those beds.

12              Okay. Ms. Jones, you may begin.

13              MS. JONES: Hi. Good morning. I do  
14      apologize that I was having difficulty sharing  
15      my screen so you could see me, but good morning  
16      to everyone.

17              My name is Shannon Jones, and I'm the Chief  
18      Executive Officer of Woodlake Hospital. I'm  
19      going to discuss the future of the hospital and  
20      community engagement.

21              Woodlake Hospital will occupy approximately  
22      270,024 gross square feet and will have 80 acute  
23      mental illness beds, also referred to as AMI  
24      beds; 60 long-term care beds, also referred to



1 as skilled nursing; 44 long-term acute care  
2 beds; three intensive care beds; as already  
3 stated, three medical-surgical beds; and 40  
4 comprehensive physical rehabilitation beds for  
5 the total 230 authorized beds.

6 Woodlake will treat all patients, as stated  
7 before, regardless of their ability to pay. It  
8 will do so by accepting Medicaid and through its  
9 Charity Care program. Similar to the Charity  
10 Care program provided by Westlake, uninsured  
11 patients at Woodlake can apply for financial  
12 assistance with certain individuals being deemed  
13 presumptively eligible due to their financial  
14 status. We are committed to retaining these  
15 policies for at least two years after the  
16 hospital reopens.

17 We are excited about our investment in the  
18 community. And based on our talks with other  
19 community leaders, they look forward to a period  
20 of positive growth and change in the area.

21 As you all know, the healthcare industry  
22 faced many challenges over the past 18 months.  
23 The COVID-19 pandemic created an environment  
24 where hospitals, nursing homes, LTACHs, and a

1 host of other care providers had to work  
2 together to meet the needs of the patients,  
3 staff, and communities.

4 I know some have said that the COVID  
5 pandemic was over, but as we can see from the  
6 Delta variant, COVID is not over. I suspect  
7 that COVID will be here with us for some years  
8 as this continues to mutate.

9 At Woodlake, we do think we can fill the  
10 role in the COVID pandemic like we have been  
11 doing down in Louisiana, which at this very  
12 moment in time is literally the worst state in  
13 the country for COVID infections.

14 And we also understand the perpetual need  
15 for behavioral health services in the area,  
16 including but not limiting the clinical and  
17 rehab services.

18 REPORTER: We have two minutes.

19 MS. JONES: The future of Woodlake Hospital  
20 is all-inclusive. Therefore, Woodlake Hospital  
21 will collaborate with our healthcare partners,  
22 staff, patients, and communities to provide the  
23 care and services each one deserves.

24 REPORTER: Two minutes.

1           MS. JONES: We ask the Illinois Health  
2 Facility and Service Review Board to approve our  
3 change of ownership application and allow us to  
4 be a catalyst of this growth.

5           Thank you.

6           (Brief silence.)

7           REPORTER: Sorry. You're muted, Ms.  
8 Avery.

9           MS. AVERY: Thank you. So, Doctors Glenn  
10 and Martha Kushner, I have made you panelists,  
11 so you may unmute your mikes and begin speaking.

12          DR. GLENN KUSHNER: Yes. Hi. I'm Dr.  
13 Glenn Kushner. I was the last president of  
14 Westlake. I was -- had been an officer many  
15 times. I speak to you not only as a member of  
16 the medical staff since the early '80s, but I'm  
17 also a community member as I live down the block  
18 from the hospital.

19          I can tell you after meeting with these  
20 people that own it, I was very impressed.  
21 Meeting with the people who are running it, I  
22 was very impressed.

23          And this community sorely needs this type  
24 of facility once again. It is very sad to drive

1 by and see an empty building like that. It's  
2 terrible. And we have patients that the nearest  
3 psychiatric facility really is Riveredge, and  
4 they've had to turn patients away because they  
5 don't have enough staff there.

6 I really feel that the community and the --  
7 needs this very much, and that the patients who  
8 used to come to Westlake are not getting medical  
9 care. And in this day and age, to have to not  
10 get care is just terrible. I really think that  
11 access is so important. People used to walk to  
12 Westlake. They'll be able to walk to Woodlake.

13 And I've met these people. They're honest  
14 people. They're putting a lot of money. I've  
15 looked at that building the way it is now, and  
16 believe me, it needs a lot of money to get back  
17 up in shape.

18 It will be great for the community, great  
19 for the doctors who used to work there, great  
20 for the patients, and I'm looking forward to  
21 working with everybody once again as the new  
22 President of Woodlake medical staff.

23 MS. AVERY: Thank you for your comments.

24 Dr. Martha Kushner, please begin your

1 comments. And if anyone else would like to  
2 speak, please raise your hands so that I will  
3 recognize you.

4 DR. MARTHA KUSHNER: Good morning,  
5 everyone. I'm Dr. Martha Kushner.

6 I just want to second what my husband has  
7 said. This is a wonderful facility in a great  
8 neighborhood. And the people who live here  
9 really need this hospital, and you will be doing  
10 a wonderful thing to reopen this facility. And  
11 the focus that the new hospital will have will  
12 be of great benefit to the community.

13 So, I second what my husband said, and  
14 thank you very much.

15 MS. AVERY: Thank you. I'm going to go to  
16 a call-in user before I proceed with the list  
17 that was submitted by Woodlake.

18 Call-in user two, with the number of --

19 MR. PRISTER: (Inaudible) Ms. Avery.

20 MS. AVERY: Oh, good. Please proceed.

21 MR. PRISTER: And I apologize for not being  
22 on the video.

23 My name is Jim Prister, and I'm the  
24 President, CEO of RML Specialty Hospitals, which

1 is identified by Medicare as a long-term, acute  
2 care hospital for LTACH.

3 As was indicated in the staff report, RML  
4 has two locations -- one is in Hinsdale and  
5 operates 115 LTACH beds, and the other is on the  
6 near west side of Chicago at Homan and the  
7 Eisenhower, and is licensed for 86 beds.

8 RML does not oppose the efforts of Woodlake  
9 Pacific Holdings, LLC to reestablish the  
10 provision of healthcare services to the  
11 community of Melrose Park and was very glad to  
12 learn that the applicant recently modified their  
13 application to now include three short-term,  
14 acute hospital beds, along with an emergency  
15 service.

16 RML's concern with the COE is solely  
17 related to the request to add 44 long-term,  
18 acute care beds at the Melrose Park location.  
19 As was identified in the staff report on the  
20 COE, there is already an existing excess of 131  
21 LTACH beds in health services areas six, seven,  
22 eight, and nine. This proposed addition of  
23 LTACH beds will only exacerbate an already over-  
24 bedded sector of healthcare in the Chicago area.

1           Ten years ago when the bed-need methodology  
2           for LTACHs was established in Illinois,  
3           approximately 4.5 of every 100 patients admitted  
4           to a short-stay hospital had the potential of  
5           later needing to be admitted to an LTACH. After  
6           significant changes in the Medicare rules and  
7           payment methodology since then, that number is  
8           now between 1.5 to 2 of every 100 patients.

9           Nationally, the number of LTACHs has  
10          decreased from approximately 475 in 2015 to 361  
11          today.

12          In Illinois, LTACHs recently closed in both  
13          Springfield and Chicago, but even with these  
14          closures, it is likely there will be further  
15          stress on the remaining already-established  
16          LTACHs.

17          Please also note that RML is identified by  
18          the state as a high Medicaid volume provider,  
19          and we are very concerned that any redirection  
20          of Medicaid patients from RML to Woodlake could  
21          jeopardize the continued economic liability of  
22          RML.

23          Thank you for the opportunity to provide  
24          input on this very important matter.

1 MS. AVERY: Thank you. Okay. I do not see  
2 Dr. Fyda (indiscernible). If you are present,  
3 please raise your hand.

4 (Brief silence.)

5 MS. AVERY: Okay. Rupak Parikh, please  
6 begin your comments and spell your name for the  
7 court reporter.

8 DR. PARIKH: Yes. Hi. This is Dr. Rupak,  
9 R-U-P-A-K, last name is Parikh, P-A-R-I-K-H. I  
10 am the CEO of Advanced Rehabilitation Care. We  
11 excel in transitions of care, and specifically  
12 on the physiatry side, or PM&R side.

13 I definitely want to support this  
14 initiative, just like we did last time on the  
15 last call -- this is a new application, I  
16 understand -- specifically because there is a  
17 great need for this community, where Westlake  
18 used to be, for rehabilitation and transitions  
19 of care.

20 Specifically, this hospital is very unique  
21 in the sense that it -- for two very important  
22 reasons. Number one, you have behavioral health  
23 and physiatry that are going to be working hand  
24 in hand together with the internal medicine



1 team, all on one campus. And that is the key  
2 point: all on one campus.

3 You have transitions of care in terms of  
4 the various levels of care: acute, LTACH,  
5 subacute, and inpatient rehab and outpatient  
6 rehab, all on one campus. That is very unique.  
7 There's no other establishment in the entire  
8 state of Illinois that has this, where all of  
9 these facets of rehabilitation care will be on  
10 one campus. That is a very unique model system.

11 I've also worked with Dr. Delos Santos on  
12 the psychiatry side, the behavioral health side,  
13 and there is an opportunity to have behavioral  
14 health and rehabilitation together.

15 Also, the importance of COVID, as Shannon  
16 had mentioned before. COVID is here. We have a  
17 Delta variant. There's other variants that are  
18 to be expected. And there is something called  
19 long COVID in terms of the rehabilitation and  
20 medical needs that are going to be needed, not  
21 only in this community, but throughout.

22 So, again, having all these different  
23 facets of rehabilitation care on one campus is  
24 important. It'll ensure that this -- that these

1 patients and the community will have something  
2 that no one else in the state of Illinois has:  
3 the ability to have their patients rehab in this  
4 community.

5 REPORTER: Two minutes.

6 DR. PARIKH: And they will be at those --  
7 they'll be at the correct level of care for the  
8 correct amount of time.

9 A very unique opportunity and fully  
10 supported by Advanced Rehabilitation Care.

11 REPORTER: Two minutes.

12 DR. PARIKH: Thank you.

13 MS. AVERY: Thank you for your comments.

14 Antonio Sanchez, please begin speaking.

15 MR. SANCHEZ: Good afternoon. Can you guys  
16 hear me?

17 MS. AVERY: Yes.

18 MR. SANCHEZ: Wonderful. My name is  
19 Antonio Sanchez. I am an elected official for  
20 the Village of Maywood. Maywood borders the  
21 Village of Melrose Park, which is obviously  
22 right next to the community. I am not only an  
23 elected official, but I was also born at  
24 Westlake Hospital.

1           The void that this hospital created when it  
2     left, significant. Now, with Woodlake hopefully  
3     being allowed to operate, it would be such a  
4     tremendous help for multiple communities, not  
5     just Melrose Park. Having the ability to  
6     provide multiple facets of medical care for a  
7     lower-, middle-class income community is just a  
8     necessity and need to fill this void.

9           I want to thank you guys for taking --  
10    allowing me to speak. And the -- having the  
11    ability to move this community forward, and  
12    having this ability -- bringing this hospital  
13    back into the (inaudible) allow us (inaudible).

14          MS. AVERY: Thank you for your comments.  
15    And we'll go back to Dr. Fyda, F-Y-D-A. If  
16    you're present, please raise your hand.

17          (Brief silence.)

18          MS. AVERY: Okay. I do not recognize  
19    anyone that has their hands raised.

20          Callers, if you would like to speak, please  
21    press star three. That will raise your hand,  
22    and I will unmute your microphone.

23          (Brief silence.)

24          REPORTER: Sorry, Ms. Avery. I think

1       you're muted again. If you meant to be, I don't

2       --

3               MS. AVERY: Oh, I'm sorry. I'm on another  
4       call. I'm just searching for hands.

5               (Brief silence.)

6               MS. AVERY: Okay. At this point, I do not  
7       see anyone with their hands raised. I will  
8       continue to monitor the chat box and the  
9       attendees' list. This hearing is scheduled  
10      until 12:00 noon. It's now 11:25.

11              Again, I will continue to monitor the chat  
12      box and the hands raised for those who are  
13      requesting to speak.

14              But, at this time, is there anyone else  
15      that would like to give additional comments that  
16      have already spoken? If so, raise your hand.

17              (Brief silence.)

18              MS. AVERY: Okay. Recognizing none, I will  
19      again continue to monitor the chat box and the  
20      hands for those who are wishing to speak. For  
21      now, we will stop the recording and the court  
22      reporter, and we will come back live once I  
23      recognize someone else to speak.

24              Again, the meeting is scheduled -- the

1 hearing is scheduled until 12:00 noon.

2 (There is a pause in the proceedings.)

3 MS. AVERY: Dr. Kushner, please proceed  
4 with your comments.

5 DR. GLENN KUSHNER: Thank you. I just  
6 wanted to add again something that I mentioned.  
7 It's that people walk to Westlake, or will be  
8 walking to Woodlake.

9 This is not a rich community. People don't  
10 get in their cars and drive across town for  
11 care, and these people have not been getting  
12 care. So, for rehab and long-term care, when  
13 the families need to visit, it's very important  
14 that it be in the neighborhood where they live.

15 And that's basic. I just wanted to make  
16 that point very clear. That's why this hospital  
17 is so important, because it's here. People walk  
18 there. It's not a rich community. They're not  
19 getting into their cars and driving across town  
20 to visit family members.

21 All right. Thank you very much for letting  
22 me add that.

23 MS. AVERY: You're welcome. Thank you for  
24 your comments.

1           Again, we will break. The hearing is  
2           scheduled for 12:00 noon. If anyone is wishing  
3           to speak, please raise your hand. And I think  
4           we have someone.

5           Hi. Good morning. Are you wanting to  
6           provide testimony?

7           DR. PILLAY: I am. Good morning. My name  
8           Dr. Krushen Pillay. I'm a psychiatrist, and I  
9           got attached to this project with Woodlake and,  
10          you know, I think this is -- this would be a  
11          great --

12          You know, definitely psychiatric services  
13          everywhere in the state are really, really  
14          needed, but definitely in this area is -- you  
15          know, this area would definitely benefit from  
16          like a strong psychiatric presence.

17          And Dr. Kushner also brought up just the  
18          people that -- in the community that we'd be  
19          serving. These are not people that drive or can  
20          drive to outside areas to receive psychiatric  
21          care. So, just having that within the  
22          neighborhood and in the community would  
23          definitely be a huge benefit for the entire  
24          community.

1 MS. AVERY: Thank you for your comments.

2 DR. PILLAY: Thank you.

3 (Silence.)

4 MS. AVERY: Ms. Wilson, would you like to  
5 proceed with your comments?

6 (No response.)

7 MS. AVERY: Yolanda Wilson, would you like  
8 to proceed with your comments?

9 (No response.)

10 MS. AVERY: Okay. I'm going to respond to  
11 her chat.

12 Ms. Wilson, if you can hear me, please  
13 check your chat box.

14 (Silence.)

15 MS. AVERY: Ms. Wilson, are you wanting to  
16 proceed with your comments? I cannot transfer  
17 what you're saying in the chat box to the court  
18 reporter. So, if you want to go on the record,  
19 I've unmuted you, so please begin your comments.

20 (Brief silence.)

21 MS. AVERY: I'm going to try to make you a  
22 panelist. Are you available, Ms. Wilson?

23 (Silence.)

24 MS. AVERY: I'm having a hard time getting

1 Ms. Wilson.

2 They're saying you can hear -- I have  
3 technical difficulty. Okay. Let me figure you  
4 out, Ms. Wilson.

5 You're unmuted. You're a panelist. I  
6 don't understand why you're not able to provide  
7 comments, oral comments.

8 Mike Mitchell, can you take a look at it?

9 I'm going to pause the recording.

10 (There was a pause in the proceedings.)

11 MS. WILSON-STUBBS: I'm so sorry. Good  
12 afternoon, everyone, and to all of the  
13 panelists.

14 My name is Yolanda Wilson-Stubbs, and I am  
15 the President and CEO here at Holy Family  
16 Medical Center in Des Plaines, Illinois. I  
17 would like to just very briefly just make a very  
18 few comments regarding the Woodlake proposal to  
19 move forward. It is my understanding of all the  
20 intents for this specialty -- again, this unique  
21 specialty hospital in the state.

22 We here at Holy Family Medical Center  
23 operate a 178-bed long-term, acute care hospital  
24 in Des Plaines, Illinois. And although we do



1 not oppose to the plans as stated at public  
2 hearing, I would like to concur with what Jim  
3 Prister said regarding the overpopulation of  
4 long-term, acute care beds in the healthcare  
5 environment.

6 We, again, appreciate the opportunity,  
7 especially myself, to be able to participate.  
8 I, too, am very, you know, indeed close, working  
9 with the long-term, acute care community. Jim  
10 was 100 percent correct in reference to the  
11 decrease in long-term, acute care hospitals, as  
12 well as we're continuing to see the different  
13 changes in the regulatory responsibility, as  
14 well as the reimbursement. And, so, being able  
15 to continue to serve that patient population is  
16 going to be very stretched, and the concern here  
17 is just adding additional beds and how they will  
18 be able to accommodate the very overly-saturated  
19 community that we currently serve.

20 I want to thank the panel for allowing me  
21 to add these comments. And again, please,  
22 forgive me for the technical difficulties. I  
23 had IT come in and so we're good now. So, thank  
24 you.

1 MS. AVERY: Thank you. Appreciate your  
2 time.

3 (Silence.)

4 MS. AVERY: Is there anyone from the  
5 Applicant that would like to give closing  
6 comments? Or is there anyone else that would  
7 like to provide any testimony or comments?

8 MR. GREEN: I'm back on.

9 MS. AVERY: (Inaudible.)

10 MR. GREEN: I'm back on, Ms. Avery. I  
11 don't know if anyone -- I can't see who's  
12 raising their hand, though.

13 MS. AVERY: I don't see any hands raised,  
14 but if you would like to give closing comments,  
15 feel free to begin.

16 MR. GREEN: Not much of a closing comment.  
17 I do want to thank the Review Board for  
18 scheduling this public hearing, and we look  
19 forward to the Review Board process playing out.

20 I want to thank all of the speakers today  
21 on both sides, and we look forward to the Review  
22 Board hearing.

23 MS. AVERY: Thank you for your comments.

24 Please note that the revised State Board

1 staff report will be posted on the Board's  
2 website at [hfsrb.illinois.gov](http://hfsrb.illinois.gov).

3 I apologize. Caleb, I assume you're back  
4 with us?

5 REPORTER: I'm here.

6 MS. AVERY: Okay. Great.

7 Again, a revised State Board staff report  
8 will be posted on the State Board website at  
9 [hfsrb.illinois.gov](http://hfsrb.illinois.gov). And please review the  
10 website for a possible meeting scheduled for the  
11 next week or so. I cannot confirm the date at  
12 this time, but I will communicate that to the  
13 opposition and the applicants.

14 So, if there are not any other persons  
15 that's willing to provide testimony --

16 I will go one more time. Please raise your  
17 hand and I will recognize you to speak.

18 (Brief silence.)

19 MS. AVERY: Okay. Seeing none, I would  
20 like to thank those who participated in today's  
21 public hearing for Woodlake Specialty Hospital.  
22 And if you have any questions or need additional  
23 information, please check the website at  
24 [hfsrb.illinois.gov](http://hfsrb.illinois.gov); or, you may send comments or

1 questions to my attention, Courtney Avery, at  
2 525 West Jefferson Street, Second Floor,  
3 Springfield, Illinois, 62761.

4 Seeing no other requests for providing  
5 comment, I will deem this public hearing  
6 adjourned.

7 Thank you, everyone.

8 (The hearing adjourned at 11:57 a.m. CST)

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CERTIFICATE OF COURT REPORTER

I, Caleb Welsh, the officer before whom the foregoing hearing was conducted, do hereby certify that said proceedings were electronically recorded by me; and that I am neither counsel for, related to, nor employed by any of the parties to this case and have no interest, financial or otherwise, in its outcome.

IN WITNESS WHEREOF, I have hereunto set my hand this 10th day of August, 2021.



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Caleb Welsh, Court Reporter

CERTIFICATE OF TRANSCRIBER

I, Jo Ann Pawela, do hereby certify that  
the foregoing transcript is a true and correct  
record of the recorded proceedings; that said  
proceedings were transcribed to the best of my  
ability from the audio recording and supporting  
information; and that I am neither counsel for,  
related to, nor employed by any of the parties  
to this case and have no interest, financial or  
otherwise, in its outcome.



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JO ANN PAWELA