



STATE OF ILLINOIS  
HEALTH FACILITIES AND SERVICES REVIEW BOARD

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

**MEMORANDUM**

TO: Mike Constantino, Chief – Program Review Section  
Office of Policy, Planning

FROM: Debra Savage, Chairman  
Illinois Health Facilities and Services Review Board

RE: Approval of Application for Exemption – Change of Ownership

Facility: #E-033–21 – NorthShore Swedish Hospital

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This is to advise you that I have reviewed the above-captioned exemption and have determined the following:

- ☒ The request is in compliance with the requirements in Part 1130 is approved.
- ☐ This request is to be reviewed by the Illinois Health Facilities and Services Review Board
- ☐ This request is DENIED effective \_\_\_\_\_ because it does **NOT** comply with the requirements specified in Part 1130.
- ☐ Other actions as follows:

Debra Savage, Chairman  
Illinois Health Facilities and Services  
Review Board

October 15, 2021

Date

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ILLINOIS HEALTH FACILITIES AND SERVICES REVIEW BOARD