

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-042-21 - Northwest Community Endo Center

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

- <u>X</u> 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 <u>NOT</u> comply with the requirements specified in Part 1130.

Other actions as follows:

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Debra Savage, Chairman Illinois Health Facilities and Services Review Board

October 15, 2021

Date

ILLINOIS HEALTH FACILITIES AND SERVICES REVIEW BOARD