

**ILLINOIS HEALTH FACILITIES AND SERVICES REVIEW BOARD
DISCONTINUATION APPLICATION FOR EXEMPTION**

SECTION I. IDENTIFICATION, GENERAL INFORMATION, AND CERTIFICATION

Facility/Project Identification

Facility Name:	AdventHealth La Grange f/k/a AMITA Health Adventist Medical Center La Grange		
Street Address:	5101 South Willow Springs Road		
City and Zip Code:	La Grange, IL 60525		
County:	Cook	Health Service Area	VII Health Planning Area: A-04

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

Exact Legal Name:	Adventist Midwest Health d/b/a AdventHealth La Grange
Street Address:	5101 South Willow Springs Road
City and Zip Code:	La Grange, IL 60525
Name of Registered Agent:	CT Corporation
Registered Agent Street Address:	208 South LaSalle Street
Registered Agent City and Zip Code:	Chicago, IL 60604
Name of Chief Executive Officer:	Adam Maycock
CEO Street Address:	5101 South Willow Springs Road
CEO City and Zip Code:	La Grange, IL 60525
CEO Telephone Number:	708/245-9000

Type of Ownership of Applicants

☒ Non-profit Corporation	☐ Partnership
☐ For-profit Corporation	☐ Governmental
☐ Limited Liability Company	☐ Sole Proprietorship ☐
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.	
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:	Jacob M. Axel
Title:	President
Company Name:	Axel & Associates, Inc.
Address:	348 Chicory Lane Buffalo Grove, IL 60089
Telephone Number:	847/776-7101
E-mail Address:	jacobmaxel@msn.com
Fax Number:	

#E-075-22

**ILLINOIS HEALTH FACILITIES AND SERVICES REVIEW BOARD
DISCONTINUATION APPLICATION FOR EXEMPTION**

SECTION I. IDENTIFICATION, GENERAL INFORMATION, AND CERTIFICATION

Facility/Project Identification

Facility Name:	AdventHealth La Grange f/k/a AMITA Health Adventist Medical Center La Grange		
Street Address:	5101 South Willow Springs Road		
City and Zip Code:	La Grange, IL 60525		
County:	Cook	Health Service Area	VII Health Planning Area: A-04

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

Exact Legal Name:	Adventist Health System Sunbelt Healthcare Corporation d/b/a AdventHealth		
Street Address:	900 Hope Way		
City and Zip Code:	Altamonte, FL 32714		
Name of Registered Agent:	CT Corporation System		
Registered Agent Street Address:	280 South La Salle Street Suite 814		
Registered Agent City and Zip Code:	Chicago, IL 60604		
Name of Chief Executive Officer:	Terry Shaw		
CEO Street Address:	900 Hope Way		
CEO City and Zip Code:	Altamonte, FL 32714		
CEO Telephone Number:	407/357-1000		

Type of Ownership of Applicants

- ☒ Non-profit Corporation
☐ For-profit Corporation
☐ Limited Liability Company
Other

- ☐ Partnership
☐ Governmental
☐ Sole Proprietorship

- 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:	Jacob M. Axel
Title:	President
Company Name:	Axel & Associates, Inc.
Address:	348 Chicory Lane Buffalo Grove, IL 60089
Telephone Number:	847/776-7101
E-mail Address:	jacobmaxel@msn.com
Fax Number:	

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

Name:	none
Title:	
Company Name:	
Address:	
Telephone Number:	
E-mail Address:	
Fax Number:	

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:	Adam Maycock
Title:	President & CEO
Company Name:	AdventHealth La Grange
Address:	5101 South Willow Springs Road La Grange, IL 60625
Telephone Number:	708/245-9000
E-mail Address:	adam.maycock@AdventHealth.com
Fax Number:	

Site Ownership

[Provide this information for each applicable site]

Exact Legal Name of Site Owner:	Adventist Health System/Sunbelt, Inc.
Address of Site Owner:	900 Hope Way Altamonte Springs, FL 32714
Street Address or Legal Description of the Site: 5101 South Willow Springs Road La Grange, IL 60625	
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.	
APPEND DOCUMENTATION AS ATTACHMENT 2, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.	

Operating Identity/Licensee

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

Exact Legal Name:	Adventist Midwest Health		
Address:	120 North Oak Street Hinsdale, IL 60521		
☒ Non-profit Corporation	☐ Partnership		
☐ For-profit Corporation	☐ Governmental		
☐ Limited Liability Company	☐ Sole Proprietorship	☐	
☐ Other			
- Corporations and limited liability companies must provide an Illinois Certificate of Good Standing. - 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. Persons with 5 percent or greater interest in the licensee must be identified with the % of ownership.			
APPEND DOCUMENTATION AS ATTACHMENT 3, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.			

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.

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.

This Certificate of Exemption application is limited to the discontinuation of AdventHealth La Grange's open heart surgery category of service. The performance of open heart surgery at the hospital has been suspended, and the HFSRB and IDPH have been informed of the suspension.

On October 24, 2022 that HFSRB's Chairwoman approved a Certificate of Exemption application (E-061-22) addressing the change of control of the AdventHealth La Grange, through an anticipated transaction between The University of Chicago Medical Center ("UCMC"), Adventist Health System Sunbelt Healthcare Corporation, Adventist Health System/Sunbelt, Inc., and Adventist Midwest Health, addressing an affiliation agreement under which UCMC would, consistent with the HFSRB definition of "control", control AdventHealth La Grange. The proposed discontinuation, however, will occur prior to the close of that transaction, and is not the result of the proposed transaction.

The proposed discontinuation is "non-substantive" in that it does not meet the HFSRB's definition of a "substantive" project.

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): __within 30 days of the receipt of the requested COE__

State Agency Submittals [Section 1130.620(c)]

Are the following submittals up to date as applicable:

X Cancer Registry

X APORS

X All formal document requests such as IDPH Questionnaires and Annual Bed Reports been submitted

X All reports regarding outstanding permits

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

CERTIFICATION	
The Application must be signed by the authorized representatives of the applicant entity. Authorized representatives are: - in the case of a corporation, any two of its officers or members of its Board of Directors; - 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); - 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); - in the case of estates and trusts, two of its beneficiaries (or the sole beneficiary when two or more beneficiaries do not exist); and - in the case of a sole proprietor, the individual that is the proprietor.	
This Application is filed on the behalf of <u>Advent Midwest Health d/b/a AdventHealth La Grange</u> 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.	
SIGNATURE <u>[Signature]</u> PRINTED NAME <u>Michael E. Saunders</u> PRINTED TITLE <u>Assistant Secretary</u>	SIGNATURE <u>[Signature]</u> PRINTED NAME <u>Lyndy A. Scott</u> PRINTED TITLE <u>Assistant Secretary</u>
Notarization: Subscribed and sworn to before me this <u>11</u> day of <u>November</u> Signature of Notary <u>[Signature]</u> Seal 	Notarization: Subscribed and sworn to before me this <u>11</u> day of <u>November</u> Signature of Notary <u>[Signature]</u> Seal

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 *including the impact on racial and health care disparities 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)	FY 2019	FY 2020	FY 2021
Inpatient	314	85	64
Outpatient	1767	1926	2340
Total	2081	2011	2404
Charity (cost in dollars)			
Inpatient	\$901,745	\$754,407	\$1,348,213
Outpatient	\$1,202,847	\$1,088,321	\$1,778,890
Total	\$2,104,592	\$1,842,728	\$3,127,103
MEDICAID			
Medicaid (# of patients)	FY 2019	FY 2020	FY 2021
Inpatient	623	581	736
Outpatient	10528	8369	11541
Total	11151	8950	12,277
Medicaid (revenue)			
Inpatient	\$7,830,615	\$6,266,527	\$7,386,074
Outpatient	\$7,520,652	\$8,546,695	\$8,724,520
Total	\$15,351,267	\$14,813,222	\$16,110,594

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

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			
	FY 2019	FY 2020	FY 2021
Net Patient Revenue	\$161,085,097	\$151,075,906	\$176,877,526
Amount of Charity Care (charges)	\$9,331,140	\$5,645,678	\$11,338,141
Cost of Charity Care	\$2,104,592	\$1,390,779	\$2,593,509

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

File Number

0940-715-4



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

ADVENTIST MIDWEST HEALTH, A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON NOVEMBER 01, 1904, 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 15TH day of DECEMBER A.D. 2021 .

Jesse White

14

SECRETARY OF STATE ATTACHMENT 1

File Number

5938-890-8



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

ADVENTIST HEALTH SYSTEM SUNBELT HEALTHCARE CORPORATION, INCORPORATED IN FLORIDA AND LICENSED TO CONDUCT AFFAIRS IN THIS STATE ON APRIL 28, 1997, 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 A FOREIGN CORPORATION IN GOOD STANDING AND AUTHORIZED TO CONDUCT AFFAIRS 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 15TH day of DECEMBER A.D. 2021 .

Jesse White

15

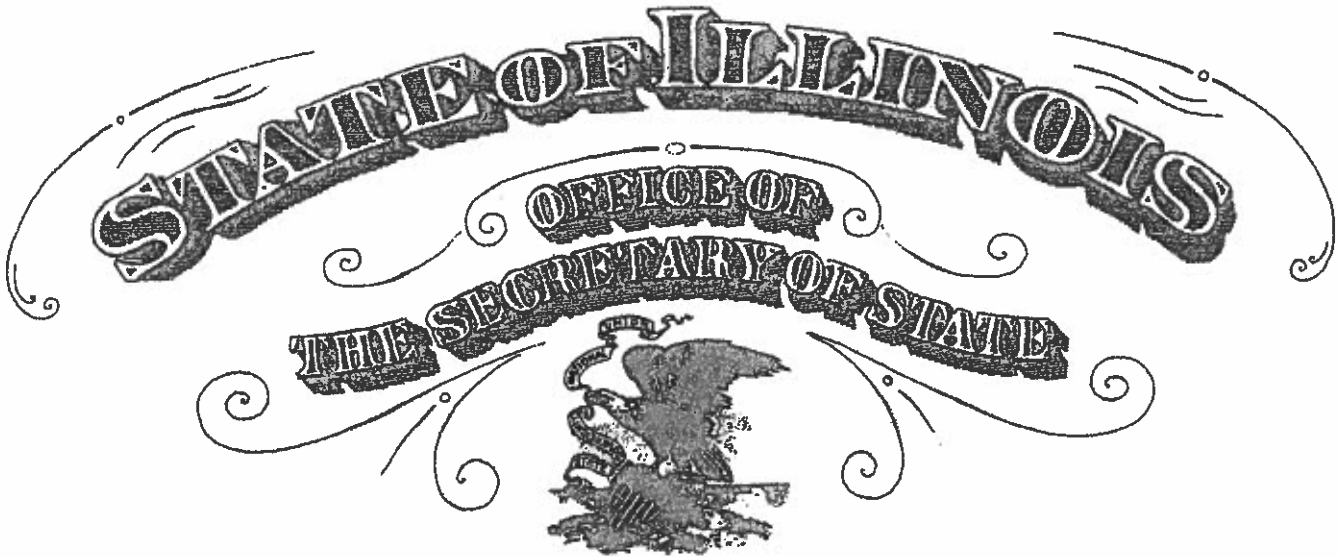
SECRETARY OF STATE ATTACHMENT 1

SITE OWNERSHIP

With the signatures provided on the Certification pages of this Certificate of Exemption (“COE”) application, the applicants attest that the AdventHealth La Grange site, that being 5101 South Willow Springs Road in La Grange, Illinois, is owned by Adventist Midwest Health.

File Number

0940-715-4



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

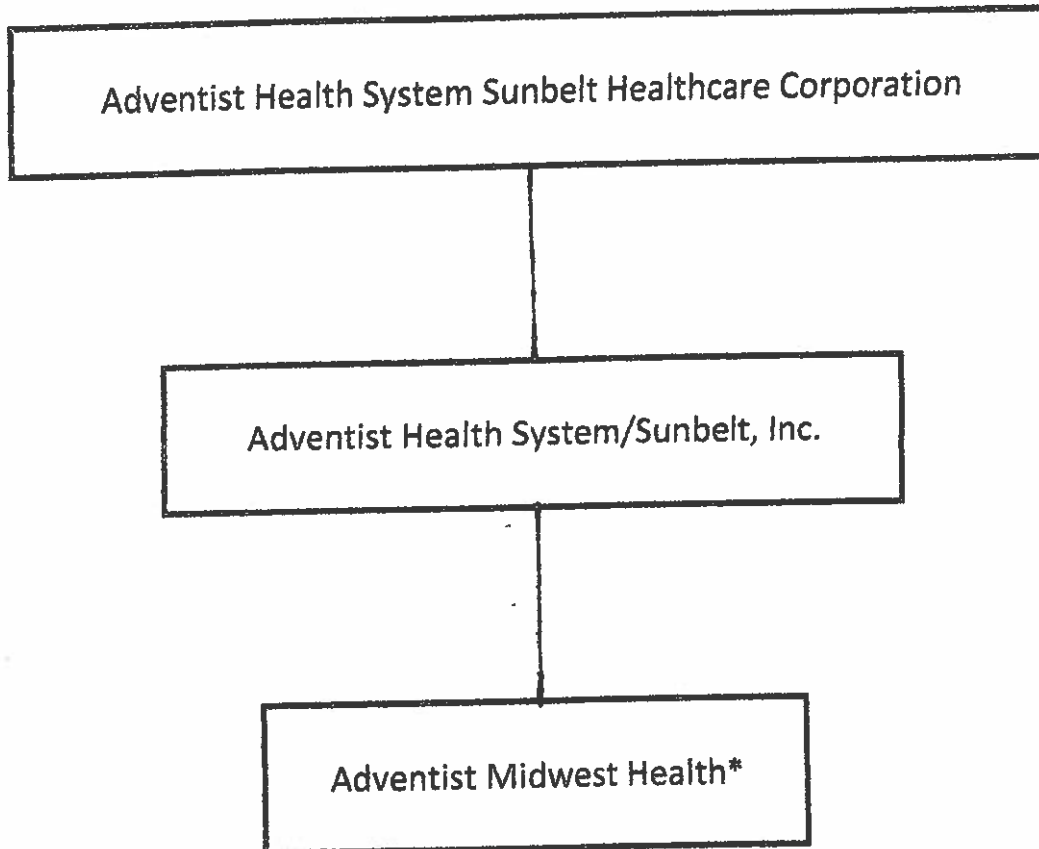
ADVENTIST MIDWEST HEALTH, A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON NOVEMBER 01, 1904, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE GENERAL NOT FOR PROFIT CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 15TH day of DECEMBER A.D. 2021 .

Jesse White
7
ATTACHMENT 3
SECRETARY OF STATE

ORGANIZATIONAL CHART



*conducts business as both *AdventHealth Hinsdale* and *AdventHealth La Grange*

DISCONTINUATION-GENERAL INFORMATION REQUIREMENTS

1. This Certificate of Exemption application is limited to the discontinuation of the open heart surgery category of service at AdventHealth La Grange.
2. No other clinical services will be discontinued as a result of the discontinuation of the hospital's open heart surgery category of service.
3. Formal discontinuation will occur within thirty days of the receipt of the requested Certificate of Exemption, by way of the filing of a final report.
4. The hospital has one operating room ("OR") dedicated to open heart surgery services. That OR will be used for orthopedic surgery, general surgery and other types of surgery that benefit from a larger OR. The service's equipment, not used exclusively for open heart surgery, will continue to be used at the hospital. The open heart surgery-specific equipment, depending on its condition, will be relocated to the hospital's sister facility AdventHealth Hinsdale, which operates an open heart surgery program.
5. With the signatures of the Certification pages of this COE application, the applicants attest that a notice of the category of service discontinuation, consistent with Section 1110.290, was published in the Chicago Sun Times on November 11, 2022. A copy of that notice is attached.

Bid Notice

Bid Notice

ADVERTISEMENT FOR BID

Westchester Public Schools, District 92 1/2 8981 Canterbury Street, Westchester, Illinois 60154 is accepting sealed bids for the lease of one (1) type "A" school buses. Bids will be publicly opened at the District 92 1/2 Administration Building, 9991 Canterbury Street, Westchester, Illinois 60154, on Friday, December 2, 2022 at 10:00 a.m. Bids received after designated time and date of bid opening shall not be considered. Each proposal must be submitted on the bid form provided with all specifications and must be contained in a sealed envelope. Bidders insurance company information must also be submitted with the bid. Westchester School District 92 1/2 reserves the right to reject any and all bids or parts thereof, to waive any irregularities or informality in bidding procedures, and to award the lease in a manner best serving the interest of the District. Copies of the Bidding Documents will be available on Monday, November 14, 2022 at the Administration Building, 9991 Canterbury Street, Westchester, Illinois 60154. For additional information contact Dennis Gress at (708) 450-2700.

11/11/2022

#1150862

NOTICE OF PUBLIC SALE

To satisfy the owner's storage lien, PG Retail Sales, LLC will sell at public lien sale on November 23, 2022, the personal property in the below-listed units, which may include but are not limited to: household and personal items, office and other equipment. The public sale of these items will begin at 08:00 AM and continue until all units are sold. The lien sale is to be held at the online auction website, www.storagepressures.com, where indicated. For online lien sales, bids will be accepted until 2 hours after the time of the sale specified.

PUBLIC STORAGE # 80225, 10094 S Harlem Ave, Bridgeview, IL 60455, (708) 247-5254

Time: 09:00 AM

Sale to be held at www.storagepressures.com.

1016 - Livemore, Eric; 1080 - Megana III, Jose; 1120 - Wills, Darrin; 5003 - dery, Alexandria; 5034 - asameh, moaz; 7008 - Moreno, Gabriel; 7035 - Delso, Denise; 8010 - Concho, Jose; 8017 - Marks, LAWRENCE; 8022 - Hobbs, Lenaleha; 8045 - Mosko, Krzysztof; 8049 - Toomey, Kendall

PUBLIC STORAGE # 20635, 3327 W 47th Street, Chicago, IL 60632, (773) 255-4179

Time: 09:15 AM

Sale to be held at www.storagepressures.com.

A0034 - Davis, Margaret; C2054 - LEMUS, Matthew; D0032 - Gomez, Luis; D3034 - Ramos, Alejandro; E4010 - Taylor, Dominic; E4015 - Cammon, Anayiri; E4025 - Dear, Delino

PUBLIC STORAGE # 22007, 5484 S South Chicago Ave, Chicago, IL 60617, (773) 678-0271

Time: 09:30 AM

Sale to be held at www.storagepressures.com.

A005 - McGee, Debra; A018 - Esipeton, Danna; A049 - Smith, Tamika; A071 - Walton, Robert; A072 - Allen, Katrina; A083 - Killins, Frances; A084 - Harris, Dominique; A118 - Posey, Christa; A148 - Williams, Marlene; A182 - Israel, Rachel; A251 - Foster, Jeffery; A253 - Gettwood, Maurice; A271 - Booker, Renee; A291 - guajala, Luis; A299 - McIntosh, Kevin; A310 - White, Shadrin; A319 - Johnson, Tanya; A337 - Singleton, Brooke; A394 - Smith, Charles; A431 - Williams, Akana; A435 - Tillman, Christine; A470 - Puntioy, Latanya; C015 - Mcneir, Jeanette; D027 - Muhammed, Fatimah; D042 - Smith, Vincent

PUBLIC STORAGE # 22314, 8990 W 70th Street, Burbank, IL 60455, (708) 257-0255

Time: 09:45 AM

Sale to be held at www.storagepressures.com.

A052 - Thompson, Aaron; A065 - Montgomery, Mark; A274 - Gomez, Emmanuel; B323 - Flaherty, Steven; B394 - Orsby, Michael; B398 - Tyrals, Piotr; B435 - Angulo, Erick; B465 - Moore Jr, John

PUBLIC STORAGE # 22334, 5529 W Ogden Ave, Chicago, IL 60604, (708) 215-4817

Time: 10:00 AM

Sale to be held at www.storagepressures.com.

A058 - Galloway, Corey; A090 - Romero, Christina; C027 - Marrero, Manuel; C054 - Reyes, Luis; E299 - Taylor, Russell; C185 - Medina, Luis; C355 - Zhen, Amy; C404 - Harris, William; H002 - Baskette Jr, Fawaz

PUBLIC STORAGE # 22305, 7000 S Cicero Ave, Bedford Park, IL 60635, (708) 497-0078

Time: 10:15 AM

Sale to be held at www.storagepressures.com.

A012 - Williams, Sherry; B067 - Williams, Julie; C151 - Lapey, Crystal; C163 - Chwotol, Yvette; D208 - Lox, Edward; D244 - Bangbose, Kehinde; E262 - Roberts, Kimberly; E274 - Johnson, Kama; J581 - Andrade, Luis; J824 - Mathis, Joys; N871 - Baker, Ronald; N902 - Perez, Humberto; N908 - Montgomery, Iris; P1009 - Rangel, Eladio; P1039 - Jenkins, Trina; P1080 - Clark, Corie

PUBLIC STORAGE # 23403, 2840 W 70th Street, Chicago, IL 60632, (773) 831-6031

Time: 10:30 AM

Sale to be held at www.storagepressures.com.

A221 - Andrews, Dawn; A24 - Orump, Shalyla; A253 - Edwards, Bismaya; A263 - Perkins, Kenneth; A265 - McFarland, Michael; A279 - Johnson, Steve; A287 - Hudson Garcia, Diantha; A102 - Jackson, Kamisha; A125 - rocker, angela; A134 - Bell, Janella; A135 - Beard, Amara; A156 - Brown, Thadde; A148 - Criner, Stephanie; A169 - Riley, Julius; A173 - Hopkins, Adam; A201 - Mc Cafferty Rodney; A221 - Triplett, Violet; A228 - Kizer, Leslie; A236 - Brassey, Isaac; A241 - Robinson, Jerlene; A242 - nendon, Ramsey; A245 - Edwards, Angel; A277 - woods-groes, barbara; A297 - Stwell, LLO Townsend, Ebonie; A318 - Sherrod, LaVie; A345 - Inez, Carolyn; A377 - Walker, Alfred; A380 - Rutina, Latasha; A390 - Watson, Darvina; A403 - Longstreet, Melchior; A468 - burch, Brianna; A438 - Bell, Olivia; A465 - Allison, Robert; B019 - Johnson, chammone m; C008 - TATE, SINGLETON; C018 - Smith, Tamela; C021 - Johnson, Cheyenne; D016 - Owens, Vernon; D026 - Hall, Carlos; D027 - Posey, Karen; D053 - Morgan, Tiffani; D054 - Lanora, darrin; E009 - Brown, Thadde; E015 - woods, Roderick; F005 - Scalla, Ayashela; F014 - Baltimore, Brandon; F025 - Holton, Leon

PUBLIC STORAGE # 27817, 639 E 95th Street, Chicago, IL 60619, (773) 631-5251

Time: 10:45 AM

Sale to be held at www.storagepressures.com.

A008 - Johnson, chammone m; D047 - Franklin, Tim; E020 - hamberry, calvin; E086 - hill, Brandy; E105 - Murphy, Jacob; E139 - Pirkney, Crystal A; E153 - TUCKER, MAE; E158 - Martin, Torrence; E167 - Hendrix, Tiffany; E182 - King, Jennifer; E197 - Gayman, Jerald; E200 - Pickard, Sherril; F009 - BURKHARD, CUNCELLA; F065 - CRAWLEY, DOROTHY C; F075 - Jones, Darrell; G027 - Olson, Malik; G084 - Mercado, Maria; G088 - Miles, Gary; H005 - Garrett, Reginald; H007 - Myers, Shalisha; H013 - Kelly, Bill; H014 - Dunbar, Geraldine; H091 - Howard, Timothy; P009 - Howard-smith, Dandrea; P011 - Memija, Alma

PUBLIC STORAGE # 27818, 5901 S Harlem Ave, Chicago, IL 60635, (773) 657-5579

Time: 11:00 AM

Sale to be held at www.storagepressures.com.

A003 - Hamed, Isad; D017 - Johnson, William; D031 - Thomas, Daryl; E012 - Perez, Miguel; E014 - Danek, Kelly; E108 - Solesio, Jeany; E145 - Moconico, Destiny; E155 - Aulick, Orelio; F053 - Mansur, Sayra; F094 - mator, shaneca; H002 - Stewart, Joshua

PUBLIC STORAGE # 28352, 4820 West Cermak Road, Chicago, IL 60623, (773) 831-6358

Time: 11:15 AM

Sale to be held at www.storagepressures.com.

D25 - Haynes, Sandra; Q48 - Anderson-Davis, Nicole; Q87 - parson, kenneth; 103 - Orr, Tymika; 127 - Johnson, Janice; 163 - Onumek, DeMarco; 181 - Walker, Westley; 206 - Conley, Dion; 209 - Delmar, Derlele; 214 - marshall, donna; 295 - Davis, Isha; 344 - Lopez, Luis; 350 - Johnson, Michael; 454 - Rogers, Aracadio; 458 - Sheld, Jerry; 481 - Booker, Lashya; 505 - track, thornt; 611 - gibson, donna; 624 - batisko, Brian; 626 - logan, myrere; 642 - noble, debra; 648 - Arnold, Sherese; 656 - Minor, Rutaria; 657 - Riley, Lakita; 690 - Martin, Cerise; 697 - Goldity, Margalit; 6340 - cammon, tashia; 650 - Andrade, Ashley; 652 - Monn, Carlos; 676 - Johnson, Akana; 686 - Helstok, Gerard; 691 - boykin, Iza; 695 - Dickerson, Talisha; 703 - robinson, setrick; 709 - Horn, James; 735 - Campbell, Erica; 7450 - Rayford, Timothy; 748 - Roberts, Tyler

PUBLIC STORAGE # 28401, 4320 West 47th Street, Chicago, IL 60632, (773) 831-6383

Time: 11:30 AM

Sale to be held at www.storagepressures.com.

O112 - Bello, Rukaya; Q213 - Sandals, Hector; Q229 - contreras, misael; Q232 - luna sianis, marth; Q233 - Tomblanos, Justin; Q380 - Evans, Shireen; Q440 - Bradley, Khadijah; Q471 - Ramirez, Genelia; Q472 - valdez, Johanna; Q509 - Aguayo, Jesus

PUBLIC STORAGE # 28451, 7455 South Pulest Road, Chicago, IL 60623, (773) 831-6523

Time: 11:45 AM

Sale to be held at www.storagepressures.com.

0008 - Ibarra, Ramiro; 0009 - cabral, nicole; 0011 - ramos, Jasmir; 0044 - Lopez, Enresida; 0212 - Negrete, maria c; 0235 - Dymowski, Gordon; 0243 - Williams, Ronietha; 0255 - Williams, Tamara; 0256 - Lewis, Schellita; 0311 - Francis, Melvina; 0305 - Ponce, Brenda; 0514 - Armas, Wilma; 0516 - Carter, Alana; 0535 - Jones, Rym; 0553 - Hamilton, Glen; 0583 - Thompson, Joseph; 0830 - martinez, Javier; 0555 - Covington, Tony; 0699 - Dally, Yvette; 0716 - boston, kath

Public sale terms, rules, and regulations will be made available prior to the sale. All sales are subject to cancellation. We reserve the right to refuse any bid. Payment must be in cash or credit card-no checks. Buyers must secure the units with their own personal locks. To obtain late-fee status, original RESALE certificates for each space purchased is required. By PG Retail Sales, LLC, 701 Western Avenue, Glendale, CA 91201, (818) 244-0060.

11/11/2022 #1150749

20

REASONS FOR DISCONTINUATION

The decision to discontinue the hospital's open heart surgery category of service was made following an internal review of the service, done in concert with the hospital's cardiovascular surgeons; and is based on: 1) the low utilization of the service, 2) the need to acquire approximately \$500,000 worth of replacement equipment, and 3) the service currently being provided at the hospital's sister hospital, AdventHealth Hinsdale, only 2.4 miles away. In each of the past three years, fewer than 60 open heart surgery procedures were performed at the applicant hospital.

IMPACT ON ACCESS

The proposed discontinuation of open heart surgery services at AdventHealth La Grange will not have a material impact on the access to services by market area residents. Aside from the other hospitals in the area providing the service, AdventHealth's sister hospital, which also provides open heart surgery services, is located only 2.4 miles from the applicant hospital.

In addition to AdventHealth Hinsdale, there are eight other hospitals providing open heart surgery services located within 10 miles of the applicant hospital. With the signatures on the Certification pages of this COE application, the applicants attest to sending letters, consistent with the requirements of Section 1110.290, to the hospitals noted above; and a template of the letter is attached.

The attached letter was sent to the following hospitals, and any response received will be forwarded to the HFSRB staff:

- AdventHealth Hinsdale
- Advocate Christ Hospital & Medical Center
- Advocate Good Samaritan Hospital
- Elmhurst Memorial Hospital
- Loyola Health System at Gottlieb
- Loyola University Medical Center
- MacNeal Hospital
- Northwestern Medicine Palos Community Hospital
- West Suburban Medical Center

BACKGROUND OF THE APPLICANT

Applicant Adventist Health System Sunbelt Healthcare Corporation (d/b/a AdventHealth) maintains “ultimate control” of four hospitals in Illinois:

- Adventist Bolingbrook Hospital, d/b/a AdventHealth Bolingbrook
- Adventist GlenOaks Hospital, d/b/a AdventHealth GlenOaks
- Adventist Midwest Health d/b/a AdventHealth Hinsdale
- Adventist Midwest Health d/b/a AdventHealth La Grange

In addition, AdventHealth also maintains “ultimate control” over approximately fifty hospitals in eight other states.

In accordance with Review Criterion 1130.520.b.3, Background of the Applicant, and with the signatures placed on the Certification pages of this Certificate of Exemption application, the applicants assure the Illinois Health Facilities and Services Review Board that neither of the applicants nor any subsidiary entity has had any adverse actions against it during the three (3) year period prior to the filing of this application. In addition, the applicants authorize the State Board and Agency access to information to verify documentation or information submitted in response to the requirements of Review Criterion 1130.520.b.3 or to obtain any documentation or information which the State Board or Agency finds pertinent to this Certificate of Exemption application.

Illinois Department of PUBLIC HEALTH HF 124282

LICENSE, PERMIT, CERTIFICATION, REGISTRATION

The person, firm or corporation whose name appears on this certificate has complied with the provisions of the Illinois statutes and regulations and is hereby authorized to engage in the activity in which he/she is registered.

Ngod O. Ezike, M.D.
Director

1/31/2023 **0005987**

General Hospital

Effective: 02/01/2022

Adventist Midwest Health
dba Adventist LaGrange Memorial Hospital
5101 South Willow Springs Road
LaGrange, IL 60525

Division of Health Care Regulation, Board of Directors of the State of Illinois, 1001 North Dearborn Street, 6th Floor, Chicago, IL 60610

← **DISPLAY THIS PART IN A CONSPICUOUS PLACE**

Exp. Date 1/31/2023
Lic Number 0005987

Date Printed 11/18/2021

Adventist Midwest Health
dba Adventist LaGrange Memorial Hos
5101 South Willow Springs Road
LaGrange, IL 60525

FEE RECEIPT NO.

Adventist Midwest Health

La Grange, IL

has been Accredited by



The Joint Commission

Which has surveyed this organization and found it to meet the requirements for the
Hospital Accreditation Program

March 6, 2021

Accreditation is customarily valid for up to 36 months.


Jane Englebright, PhD, RN, CENP, FAAN
Chair, Board of Commissioners

ID #7370
Print/Reprint Date 06/17/2021


Mark R. Chansin, MD, FACP, MPP, MPH
President

The Joint Commission is an independent, not-for-profit national body that oversees the safety and quality of health care and other services provided in accredited organizations. Information about accredited organizations may be provided directly to The Joint Commission at 1-800-994-6610. Information regarding accreditation and the accreditation performance of individual organizations can be obtained through The Joint Commission's web site at www.jointcommission.org.



SAFETY NET IMPACT STATEMENT

The proposed discontinuation of the open heart surgery (“OHS”) category of service at AdventHealth La Grange will have no material impact on access to safety net services. During the past two years, fewer than 15 OHS cases were performed at the hospital, annually; and this volume can easily be absorbed by nearby hospitals providing OHS services, including AdventHealth Hinsdale, which was the site of 86 OHS procedures in 2020, and is located only 2.4 miles from the applicant hospital. As noted in ATTACHMENT 7, there are nine hospitals approved to/providing OHS services located within ten miles of AdventHealth La Grange.

The proposed discontinuation will not have an impact on other providers’ ability to cross-subsidize safety net services, nor will the proposed discontinuation materially impact other area providers in any other fashion.

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

INDEX OF ATTACHMENTS			
ATTACHMENT NO.			PAGES
1	Applicant Identification including Certificate of Good Standing		14
2	Site Ownership		16
3	Persons with 5 percent or greater interest in the licensee must be identified with the % of ownership.		17
4	Organizational Relationships (Organizational Chart) Certificate of Good Standing Etc.		18
5	Discontinuation General Information Requirements		19
6	Reasons for Discontinuation		21
7	Impact on Access		22
8	Background of the Applicant		24
9	Safety Net Impact Statement		27
10	Charity Care Information		13