



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
Division of Health Systems Development

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

RE: #E-023-23

FACILITY: Quad City Ambulatory Surgery Center

This is to advise you that I have reviewed the above-captioned relinquishment of exemption within the requirements in 77 ILAC 1130 (Part 1130) and have determined the following:

 X The request is in compliance with the requirements in 77 ILAC 1130. (Part 1130) and the request is approved.

 This request is to be reviewed by the Health Facilities Planning Board.

 This request is DENIED effective _____ because it does **NOT** comply with the requirements specified in 77 IAC 1130 (Part 1130).

 Other actions as follows:



10/24/2023

Debra Savage, Chairman
Illinois Health Facilities and Services
Review Board