

STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

IN RE:)
)
Proposed Project 24-014,)
St. Elizabeth Medical)
Center-Peru.)
)

REPORT OF PROCEEDINGS

had at the Public Hearing on the proposed project known
as Project 24-014, St. Elizabeth Medical Center-Peru,
held at City of Peru Municipal Building, 1901 4th Street,
Peru, Illinois, on Wednesday, June 26, 2024, at 1:30 p.m.

PRESENT:

MR. GEORGE ROATE - Program Reviewer
MS. BLANCA DOMINGUEZ - Legal Counsel
MR. JOHN KNIERY - Board Administrator
MR. KENTON TILFORD - Data Administrator

Magna Legal Services

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1 MR. ROATE: Good afternoon. My name is George
2 Roate. I am accompanied by Mr. John Kniery,
3 Administrator; Ms. Blanca Dominguez, legal counsel;
4 Mr. Kenton Tilford, Data Administrator. We are from the
5 Illinois Department of Public Health and represent the
6 Illinois Health Facilities and Services Review Board. We
7 are here to conduct a public hearing on the proposed
8 project known as Project 24-014, St. Elizabeth Medical
9 Center-Peru.

10 As per the rules of the Illinois Health
11 Facilities and Services Review Board, I would like to
12 read the following legal notice into record.

13 In accordance with the requirements of
14 the Illinois Health Facilities Planning Act, notice is
15 given, a receipt, for -- to request a public hearing for
16 OSF HealthCare System and their proposal to modernize OSF
17 St. Elizabeth Medical Center-Peru, 925 West Street, Peru,
18 Illinois, for once again Project No. 24-014. The cost of
19 the modernization is approximately \$5.6 million.

20 A public hearing will be conducted by
21 state -- by staff of the Illinois Health Facilities and
22 Services Review Board on Wednesday, June 26, 2024,
23 beginning at 1:30 p.m. at Peru City Hall, 1901 4th
24 Street, Peru, Illinois.

1 The public hearing is to be held by the
2 Illinois Department of Public Health pursuant to the
3 Illinois Health Facilities Planning Act. The hearing is
4 open to the public and will afford an opportunity for
5 parties with interest to present written and/or verbal
6 comment relevant to the project.

7 All allegations or assertions should be
8 relevant to the need for the proposed project and be
9 supported with two copies of documentation or materials
10 that are printed or typed on paper size 8 1/2 by 11
11 inches. Consideration by the State Board has been
12 tentatively scheduled for the August 2024 meeting of the
13 Illinois Health Facilities and Services Review Board.

14 If you have not done so, please sign in
15 using the appropriate registration forms in the hallway.
16 One form is for individuals who want to provide testimony
17 for the project. The other form is for individuals who
18 just wish to register their attendance and do not wish to
19 testify.

20 To ensure that the Illinois Health
21 Facilities and Services Review Board's public hearings
22 protect the privacy and maintain the confidentiality of
23 an individual's health information, covered entities as
24 defined by the Health Insurance Portability Act of 1996,

1 such as facilities, hospital providers, health plans, and
2 healthcare clearing-houses submitting oral or written
3 testimony that discloses protected health information of
4 individuals shall have a valid written authorization from
5 that individual. The authorization shall allow the
6 covered entity to share the individual's protected health
7 information at this hearing.

8 Those of you who came with prepared text
9 for your presentation may choose to submit that text
10 without giving testimony. However, if you're giving oral
11 testimony, please be as brief as possible. We ask at
12 this time -- we ask that you limit your testimony to two
13 minutes.

14 As per the legal notice, I would
15 appreciate two copies of your testimony. When you make
16 your presentation, please give the court reporter the
17 spelling of your complete name. If there's a chief
18 spokesperson for the applicant, we would like that
19 individual to make the first presentation. The remaining
20 testimony will be taken in the order of the names on the
21 register. Please hold your questions until all testimony
22 is presented. And I will go ahead and we'll call our
23 first speaker.

24 At this time, the Board would like to

1 call A.J. Querciagrossa.

2 MR. QUERCIAGROSSA: A.J.

3 Q-u-e-r-c-i-a-g-r-o-s-s-a. Thank you.

4 Good afternoon, everyone. I see many
5 familiar faces, but I would like to introduce myself.
6 I'm A.J. Querciagrossa. I'm the region's CEO for the
7 Western region of OSF HealthCare. Today we are here
8 about our Certificate of Need application with the State
9 regarding our plans for OSF St. Elizabeth Medical Center
10 here on the Peru campus.

11 As you know, OSF acquired the former
12 St. Margaret's Health-Peru Hospital in November of 2023
13 following its closure earlier last year. The investment
14 OSF has made and will continue making in Peru is about
15 \$60 million. A big step toward maintaining a healthy and
16 vibrant community. Just as you have trusted OSF to care
17 for you and your families, we hope you will trust us in
18 this endeavor.

19 In terms of our Certificate of Need,
20 specifically here is what we are planning on the Peru
21 campus, some of which is already operational. We plan to
22 increase the medical-surgical beds from 38 beds to 45.
23 Increase our ICU beds from 4 to 8. Maintaining the 11 OB
24 beds at 11, and we'll have one C-section room as well.

1 There are 5 ORs and one procedure room on campus. We
2 will maintain the 10 ER bays adding 4 EED stations to
3 accommodate surges in volumes when we need them.
4 Diagnostic imaging, including x-ray, fluoroscopy,
5 mammography, MRI, CT, ultrasound and nuclear medicine
6 will also be available, including outpatient services,
7 laboratory services and pharmacy.

8 As I mentioned, some of these services
9 are already operational. I'll let Dawn Trompeter go more
10 into that. Dawn is currently our President of both OSF
11 St. Elizabeth Medical Center here in Peru and Ottawa,
12 which includes the Center for Health in Streator as well
13 as OSF Saint Paul Medical Center in Mendota.

14 All along, our goal has been to preserve
15 and sustain access to high quality local healthcare not
16 only for the residents of the Illinois Valley but really
17 for the entire region. The State's CO2 planning area
18 includes not only LaSalle County but all of Putnam and
19 Bureau Counties plus two zip codes in Stark. The Peru
20 campus is centrally located within the planning area and
21 is best suited for all residents as we consider the new
22 regional model for healthcare in this area. OSF has a
23 strong commitment throughout this region and will
24 continue to support healthcare needs of our residents for

1 years to come.

2 In addition to Peru, we serve residents
3 in Mendota, Princeton, Ottawa, and Streator with 24/7
4 emergency services, primary and specialty care, prompt
5 cares, urgent cares, 24/7 digital urgent care, nurse
6 triage and other types of healthcare services.

7 So how did we get here? You all know.
8 In 2023, two hospitals closed in this area in the cities
9 of Spring Valley and in Peru. That left a void. But OSF
10 has been working very hard over this past year to
11 reestablish and reinvigorate healthcare here and in the
12 surrounding communities. And because of the efforts of
13 the State of Illinois and our own mission partners, those
14 are our employers, on April 7th of this year we reopened
15 the former St. Margaret's Hospital here in Peru. That
16 was a significant milestone for our ministry and this
17 community.

18 As I mentioned, last year was
19 challenging. But following the closures of the
20 St. Margaret's Hospitals and those other healthcare
21 offerings, OSF hired more than 450 former St. Margaret's
22 employees, including physicians, advanced medical
23 providers, and staff not only to serve the Peru hospital
24 but other locations across the region. Providing local

1 jobs kept many of our people, our community, from leaving
2 the area and helped maintain needed resources here at
3 home.

4 If I may, I would like to share a quote
5 from Sister Judith Ann Duvall, our chairperson of the OSF
6 HealthCare Boards that I think is somewhat inspiring and
7 sums up all the things we've been doing. As we walk
8 forward together hand in hand, united in our commitment
9 to serve our community and to do it with nothing less
10 than the greatest care and love. Thank you.

11 MR. ROATE: Thank you. Next, the Board would
12 like to call the Ms. Dawn Trompeter.

13 MS. TROMPETER: Dawn, D-a-w-n. Trompeter,
14 T-r-o-m-p-e-t-e-r.

15 Thank you, A.J., and welcome to everyone,
16 good afternoon. As A.J. mentioned, some of the plans
17 here in Peru are already operational. In April, we
18 reopened the emergency department as well as two
19 inpatient -- general inpatient beds here in Peru, and as
20 well as those ancillary services that support those two
21 departments.

22 We considered that Phase I of really
23 getting healthcare back into the Peru, Spring Valley,
24 Illinois Valley communities. And in less than two weeks

1 ago, we moved into what we call Phase II of our opening,
2 and we opened outpatient services and expanded to 12
3 inpatient beds. Residents are now able to access a
4 broader range of outpatient diagnostic services at the
5 West Street campus in Peru, including x-ray, mammography,
6 CT scans, MRI scans and ultrasounds, lab tests,
7 outpatient infusions and EKGs.

8 What we're doing in Peru, however,
9 extends beyond the hospital and beyond one city. Last
10 July after acquiring real estate assets from
11 St. Margaret's Health, OSF brought additional primary
12 care, urgent care, occupational health and rehabilitation
13 services to Peru. Soon after, an OSF Medical Group
14 location opened focused on OB and gynecology.

15 Now as part of our Phase II, on
16 July 22nd, OSF HealthCare Cardiovascular Institute will
17 make more care accessible by opening an office in our MOB
18 building right across from the Peru hospital. This new
19 location will offer convenience for patients ensuring
20 they could easily access the services they need.

21 In addition to our cardiovascular
22 services, OSF Medical Group Orthopedics is expanding its
23 services. Starting on July 29th, they will see patients
24 in the newly renovated office space in our medical office

1 building across from the hospital in Peru as well.

2 In addition, we also have hospital x-ray
3 services adjacent to the orthopedic suite to really bring
4 healthcare closer to those where they need it. So those
5 will be easily accessible to the orthopedic patients. We
6 are excited to expand our reach for all of the patients
7 and their families within this community and beyond that
8 we are privileged and honored to serve. Healthcare is
9 forever changing. The OSF HealthCare -- and OSF
10 HealthCare is committed to creating a sustainable
11 long-term regional healthcare model our patients can
12 count on. Thank you.

13 MR. ROATE: Thank you.

14 Next, the Board would like to call
15 Mr. Jerry Neumann.

16 MR. NEUMANN: That's J-e-r-r-y. N-e-u-m-a-n-n.

17 Good afternoon. My name is Jerry
18 Neumann. I've been a member of the Princeton City
19 Council for nine years. I served with former Mayor Joel
20 Quiram during the negotiations to transition our
21 city-owned hospital to OSF HealthCare. Joel was not able
22 to attend today, so I would like to share his thoughts
23 about our experiences with the OSF team.

24 A few years ago, Princeton faced a dire

1 situation. The survival of our city-owned 100-year-old
2 hospital, Perry Memorial. Perry was caught up in the
3 nationwide crisis confronting the world of healthcare
4 that had resulted in a multitude of rural hospitals
5 closing nationwide, a trend that continues today.
6 Through the foresight of Perry's Board of Directors, we
7 were able to avoid a similar fate. The Board made a
8 difficult recommendation to the City that we began a
9 search for a partner to take over the operations at
10 Perry. Their recommendations were painfully accepted.
11 We soon found ourselves in a multi-year of yearning, the
12 end of which brought OSF HealthCare to our town and Perry
13 Memorial became OSF Saint Clare Medical Center. Had the
14 City not made what I believed to be its single most
15 important decision in its history, Perry would have been
16 closed having met the same fate as many other rural
17 hospitals nationwide.

18 The result is that OSF HealthCare has
19 brought stability and a bright future in quality
20 healthcare to Princeton and it's surrounding communities.
21 That stability and future for all of us is enhanced
22 greatly by OSF establishing a hub at the center of
23 everyone who they serve in this region from Princeton to
24 Marseilles, from Mendota to Streator with its center

1 located among the communities of LaSalle, Peru, Spring
2 Valley, and Oglesby. This region's largest populated
3 area. It means for all of us better and easier access to
4 primary and specialty care and centering births in the
5 intensive care unit -- and the intensive care unit at
6 St. Elizabeth Peru enhances that all of us will benefit
7 equally when consideration is given to consistency, time,
8 distance traveled, and most importantly, the overall
9 quality of medical care. This is needed. This is fair.
10 This is our future.

11 Change on this level is never easy and
12 rarely welcomed. Uncertainty is always present with
13 change this significant. To help ease the situation,
14 stay informed. The information is out there. And it's
15 up to each of us to search it out. I would also point
16 out everyone at OSF's mission statement. OSF mission's
17 partners live to serve all of us. Their mission is
18 helping all of us live our best lives by providing
19 transformational care, shall embrace the journey. In the
20 end, you'll be better for it. That's the conclusion of
21 Joel's statement.

22 On a personal note, I was impressed with
23 the OSF team during the transition of ownership. They
24 were prepared and professional every step of the way.

1 They also displayed extraordinary compassion and concern
 2 for each of the Perry Memorial employees as they
 3 transitioned to OSF. As an elected official, I hear from
 4 many of our citizens. And with few exceptions, they are
 5 very happy and grateful to have OSF Saint Clare
 6 Healthcare in our community.

7 MR. ROATE: Thank you. Next, the Board would
 8 like to Ms. Michelle Conger.

9 MS. BRODBECK: Karen Brodbeck reading on behalf
 10 of Michelle Conger.

11 THE COURT REPORTER: Can you spell your name,
 12 please?

13 MS. BRODBECK: K-a-r-e-n. B-r-o-d-b-e-c-k.

14 THE COURT REPORTER: And you're reading for
 15 whom?

16 MS. BRODBECK: Michelle Conger.
 17 M-i-c-h-e-l-l-e. C-o-n-g-e-r.

18 THE COURT REPORTER: Thank you.

19 MS. BRODBECK: Good afternoon. As the chief
 20 strategy officer for our healthcare system with more than
 21 30 years of experience, I have seen firsthand the
 22 evolution and challenges of our healthcare landscape.
 23 Today, I want to speak about the critical role of OB
 24 services in the region and why it's more important than

1 ever.

2 Across the country, 217 hospital OB units
3 closed between 2011 and early 2023 according to
4 healthcare consulting firm Chartis. What this did is
5 created maternity care dessert. Two-thirds of the
6 closures are in rural areas. The closures are abrupt and
7 devastating, especially for expectant mothers who find
8 themselves without the necessary care and support during
9 one of the most critical times in their lives. But we're
10 not standing idly by while this happens. We are stepping
11 up. We are going above and beyond to pick up the pieces
12 and ensure that no one is left behind.

13 Our commitment to OB services is about
14 more than just maintaining a standard of care. It's
15 about innovation and resilience. We're creating a hub of
16 excellence where our dedicated teams can focus resources,
17 expertise and cutting-edge technology to deliver the best
18 possible outcomes for moms and their babies.

19 One of the key elements driving this
20 initiative is our embrace of digital care. Telehealth
21 and digital monitoring have revolutionized how we provide
22 prenatal and postnatal care. Expectant mothers can now
23 have consults, receive critical health information, and
24 even have routine checkups from the comfort of their

1 homes. This not only increases accessibility, but also
2 provides piece of mind knowing that expert advice and
3 support are just a click away.

4 Digital care allows us to extend our
5 reach far beyond the walls of the hospital. We're able
6 to support patients in remote and underserved areas
7 ensuring that they, too, have access to top tier OB
8 services. This is particularly vital in regions hit
9 hardest by the hospital closures where our centralized
10 and digital approach fills a critical gap ensuring
11 continuity of care. Our services are available 24/7, 365
12 days a year. We're able to provide support and escalate
13 needs as they arise to ensure moms and babies get the
14 care that they need.

15 We understand healthcare is not a
16 one-size-fits-all approach. Our OB services are designed
17 to be flexible and responsive to the needs of the
18 communities that we serve. We're developing creative
19 solutions in partnerships such as the Medicaid Innovation
20 Collaborative to provide comprehensive and compassionate
21 care no matter where our patients are located.

22 In conclusion, our OB services are really
23 a testament to our unwavering commitment for the entire
24 region. By combining our resources with innovative, new

1 digital care solutions, we're addressing immediate
2 challenges but also paving the way for a more resilient
3 and accessible healthcare future. Together we could
4 ensure every mom and child receives the care that they
5 deserve no matter their circumstances. Thank you.

6 MR. ROATE: Thank you. For those who have
7 already spoken, if you haven't given me a copy of your
8 testimony, I would appreciate a copy, please.

9 Next, the Board would like to call
10 Mr. Gary Bruce.

11 MR. BRUCE: That's Gary, G-a-r-y. Bruce,
12 B-r-u-c-e.

13 I'm a resident of Princeton. I served on
14 the Perry Memorial Hospital Board for 13 years and now
15 serve as chairperson for the Saint Clare Community
16 Council. I would like to share some thoughts regarding
17 the OSF plans for healthcare in this region.

18 The investment and expansion of specialty
19 care in Peru will be centralized geographically into the
20 population of the region. It is an advantage in driving
21 time and access to primary and specialty care for the
22 Princeton and the Bureau County residents. The future of
23 healthcare depends on the long-term plan and consensus
24 which is sustainable, staffable, and accessible.

1 Discussions and sharing of concerns by all the
2 stakeholders should resolve in a healthcare plan with
3 support by the population served through a planned
4 investment serving the region for decades to come.

5 I support the investment and the
6 development of specialty services with Peru as a hub for
7 the region, and I thank you for the opportunity to share
8 my thoughts.

9 MR. ROATE: Thank you, sir.

10 Next, the Board would like to call
11 Dr. Mike Cruz.

12 DR. CRUZ: M-i-k-e. C-r-u-z.

13 Good afternoon, everyone. I appreciate
14 the time to speak to you. I'm Dr. Mike Cruz. I'm the
15 Chief Operating Officer for OSF HealthCare. While my
16 title may give some of you pause that I'm an executive
17 sitting behind a desk, that's certainly not how I see
18 myself or conduct myself.

19 As a physician, I've spent more than 25
20 years working in emergency departments in community
21 hospitals in the surrounding area, a majority of which
22 have been in OSF ministry. I know firsthand not only the
23 expertise of caregivers at community hospitals, but I
24 understand the passion they have and for the work they do

1 day in and day out 24/7. The reality today is that to
2 survive and thrive, healthcare organizations must
3 innovate, transform, re-invent, even restructure how care
4 is provided. Creating a regional healthcare model with
5 Peru at the center will ensure residents have access to
6 the care they need, whether that's a regular checkup with
7 their primary care physician or provider, emergency care
8 due to a stroke, heart attack or serious accident, or
9 cancer care for a loved one.

10 It's also an opportunity to ensure
11 residents in the region have access to innovative,
12 digital care options OSF has to offer. While today, I no
13 longer am in the emergency department as a physician, I
14 had the privilege to work with hundreds of our mission
15 partners' employees across the ministry who are boots on
16 the ground. Many of them in community hospitals just
17 like Peru. They provide care, often life-saving care to
18 patients in the communities we serve.

19 I'll close with a story recently shared
20 by a patient. A local patient expecting twins began
21 experiencing swelling and a spike in her blood pressure.
22 Concerned, she promptly reached out to the OSF on-call
23 connect pregnancy and postpartum support program. Our
24 nurse provided her with much needed reassurance and

1 education. Despite these efforts, she was eventually
2 admitted to St. Francis in Peoria with severe
3 pre-eclampsia, that's accelerated high blood pressure.
4 Without the timely intervention and support of our care
5 team, her condition would have worsened significantly and
6 affected the children. Thanks to the comprehensive care
7 and services provided by OSF, lives will be saved,
8 improved, and Peru and its surrounding communities will
9 flourish. Thank you.

10 MR. ROATE: Thank you, sir.

11 Next, the Board would like to call
12 Mr. Tom Payton.

13 MR. PAYTON: Tom, T-o-m. Payton, P-a-y-t-o-n.

14 Good afternoon. I'm here to offer
15 support in the OSF HealthCare network for the Illinois
16 Valley. It is such an important piece to have in our
17 area. We have a company that's willing to invest
18 millions of dollars into the communities they serve to
19 provide great healthcare.

20 As a businessowner who works with seniors
21 and pre-retirees, my clients look at healthcare as part
22 of the retirement solution. Just like managing your
23 investments, people look for where's my healthcare going
24 to be provided. OSF answers that question. Having a

1 regional health network helps everyone in our region.
2 Knowing that we have this, they will be able to meet
3 healthcare needs as they age and provides a sense of
4 security. Thank you very much.

5 MR. ROATE: Thank you, sir.

6 Next, the Board would like to call
7 Mr. Paul Arco reading for Ms. Carolyn Clayton.

8 MR. ARCO: P-a-u-l. A-r-c-o. C-a-r-o-l-y-n.
9 C-l-a-y-t-o-n.

10 Good afternoon. My name is Carolyn
11 Clayton. I'm writing this letter in appreciation for OSF
12 in believing in me and taking a whole community of
13 medical professionals in need of a job under their wing
14 and giving them work, a family working environment, and a
15 place to flourish in their skills.

16 I was an employee at IVCH for 20 years
17 before it was taken over before St. Margaret's Health.
18 This was a huge transition for me being at IVCH for so
19 long and following my mother's footsteps where she was an
20 employee and a nurse there for 46 years. I had planned
21 on working my entire career there as my mother did and
22 retiring there. I loved the close-knit community of the
23 staff and the community it served. Transitioning to
24 St. Margaret's Health was a big change. I lost the

1 security and comfort that I had at IVCH. Transitioning
2 to a new job, new place, fear of having the job you want
3 was devastating and worrisome. St. Margaret's Health
4 gave me close to the position I held at IVCH yet it
5 wasn't my home I felt at IVCH. It was a job, and I was
6 dedicated to it.

7 Fast forward a few years when
8 St. Margaret's gave the news of its closure was again
9 another nightmare I thought I would never have to endure
10 again. This time I felt helpless. What would I do for
11 work now? Would I have a job I wanted? Where I wanted?
12 I needed to support my family and children. I never
13 thought I would do this for a second time.

14 When the news came, I did what every
15 employee there was doing and looked for a job at other
16 facilities. I was able to get in contact with the
17 Director of Emergency Services at OSF St. Elizabeth
18 Medical Center, Amanda Los. We discussed volumes we had
19 that may impact her ER in Ottawa and Streator. She was
20 kind, compassionate, considerate and empathetic to my
21 loss again.

22 I was hired by OSF and started on
23 July 10th, 2023. I will never forget how valued I felt
24 through the entire process. My experience, my seniority,

1 my place I'd held for so many years, it mattered to them
2 and they valued me as an individual. I was able to keep
3 my seniority and years of service. I was offered a
4 sign-on bonus. I truly felt they cared. I was hired to
5 be the supervisor of the Peru emergency department. I
6 couldn't believe it. I was going back to my roots where
7 I started, and I couldn't be happier. I was home again.

8 Since opening Peru, I am so excited to
9 come to work again. I love my work family, and I love
10 being a mission partner. Again, I cannot thank OSF
11 HealthCare enough for believing and helping this
12 community and the medical professionals that provide care
13 here. They have brought life back to this area and
14 resources we never thought we would see again. Thank you
15 for your time.

16 MR. ROATE: Thank you, sir.

17 Next, the Board calls Thomas Tester.

18 MR. TESTER: Thomas, T-h-o-m-a-s. Tester,
19 T-e-s-t-e-r.

20 My name is Tom Tester. I'm a plant
21 manager at MTM Recognition in Princeton, Illinois, and
22 I've been involved with local hospital governance for 27
23 years. And I'm currently a member of the OSF Saint Clare
24 Community Council. Over 27 years, I have witnessed the

1 evolution of healthcare, of the healthcare system and the
2 challenges it has dealt with. These challenges lead to
3 solution, which of course lead to change.

4 In 2018, the Perry Memorial Hospital
5 Board of Directors sought outside education to apprise
6 the Board a forecast of healthcare challenges and trends.
7 As a Board, our revelation was a deeper interpretation of
8 our mission, which was to provide quality, compassionate
9 healthcare to the communities we served. The epiphany
10 was that our mission was not to maintain a hospital with
11 all the services the community required. Instead, it was
12 to provide access to these services.

13 As a result, our decision manifested
14 itself when we chose to join the OSF HealthCare system in
15 2021, and we have never had cause to look back. For the
16 past three years, OSF Health -- OSF Saint Clare Medical
17 Center has added services and grown -- and we've grown
18 the facility through the OSF HealthCare system network.
19 Our performance indicators at the hospital have never
20 been better. The hub and spokes model for world
21 healthcare with its hub being in Peru will allow
22 communities and citizens in the Princeton market greater
23 convenience in accessing the healthcare services we don't
24 provide locally. As a representative of the Princeton

1 community, I fully support OSF's plan. Thank you.

2 MR. ROATE: Thank you, sir.

3 Next, the Board would like to call Ashley
4 Freitag.

5 MS. FREITAG: A-s-h-l-e-y. F-r-e-i-t-a-g.

6 Good afternoon. My name is Ashley
7 Freitag, and I am the Clinical Educator for the Emergency
8 Department and Hospital Outpatient Departments of the OSF
9 I80 region. Today, I'm here to express my support for
10 OSF's plan of care in the Illinois Valley.

11 My nursing career began 11 years ago at
12 IVCH where I experienced the merger with St. Margaret's.
13 Then in January of 2023, just two years after the merger,
14 the Peru Hospital closed ceasing all services including
15 the OB department. Less than five minutes later, then
16 the Spring Valley Hospital also closed. These closures
17 caused immense devastation and uncertainty for hospital
18 employees and the communities they served.

19 As a nurse, I never imagined that the day
20 would come where I would be jobless due to the lack of
21 available positions in the area. The fear for myself, my
22 family and the communities that were left without
23 immediate healthcare was overwhelming. As an EMS
24 provider, I also worried about the extended transport

1 times to emergency departments and the strain on
2 surrounding emergency departments that in -- sorry, that
3 experienced increased volumes.

4 The initial phase saw those seeking
5 emergency care and primary care traveling nearly 25
6 minutes away. OSF responded swiftly to the closure of
7 both St. Margaret's Hospital onboarding over 400 mission
8 partners into the I80 region. The closures had strained
9 the area hospitals increasing emergency departments and
10 admissions censuses.

11 While the additional staff helped, they
12 needed more space for extra patients remained an issue.
13 The announcement of the reopening of the Peru Hospital as
14 an ER with 12 inpatient beds and selective services was
15 met with elation restoring emergency care to the Illinois
16 Valley and bringing hope amid the challenges.

17 Healthcare is ever changing. And to
18 remain sustainable, it must evolve. We are no longer in
19 an era where providers make house calls. And multiple
20 hospitals with all specialty services within miles of
21 each other, it is not sustainable. OSF's plan for the
22 I80 region aims to provide the best care for all patients
23 in the communities they serve while ensuring future
24 sustainability. Thank you.

1 MR. ROATE: Thank you.

2 Next, the Board would like to call
3 Ms. Roeann Webb.

4 MS. WEBB: Hi. I didn't prepare anything. I
5 just wanted --

6 THE COURT REPORTER: Excuse me, ma'am. Can you
7 spell your name, please?

8 MS. WEBB: Roseann Webb. R-o-s-e-a-n-n,
9 W-e-b-b.

10 I just wanted to come to say that I'm
11 grateful for all the services that OSF is offering to us
12 here in Peru. I also encouraged friends and
13 acquaintances to come to this meeting -- to this hearing
14 to hear what's happening and show that we do support what
15 OSF wants to do here in Peru.

16 And as a patient within the past year, I
17 was very impressed with the care and services that I
18 received. And that's all I wanted to say.

19 MR. ROATE: Thank you.

20 Next, the Board would like to call Curt
21 Bedei.

22 MR. BEDEI: Bedei.

23 MR. ROATE: Bedei. My apologies.

24 MR. BEDEI: C-u-r-t. B-e-d-e-i.

1 My name is Curt Bedei. I'm the Economic
2 Development Director for the City of LaSalle, and I will
3 be speaking on behalf of the City of LaSalle. The
4 following statement is the City of LaSalle stands in the
5 current OSF HealthCare system, and this is a portion of a
6 letter that was shared back in May.

7 The City of LaSalle sends its support,
8 appreciation, and enthusiasm formally regarding the OSF
9 HealthCare System's recent commitment to substantial
10 additional investment in healthcare in the Illinois
11 Valley area. The proposed investment in inpatient and
12 outpatient services, include the regional birthing
13 center, are high demand services that will be well
14 utilized by all residents within the LaSalle County
15 region. This will assist in making more healthcare needs
16 of the region available locally in our communities
17 without the need to travel for -- far for much needed and
18 very important resources.

19 The LaSalle City Council suggests that
20 the commitment and the investment that the OSF HealthCare
21 team is planning as a positive step forward for the
22 healthcare needs of the entire region, and we look
23 forward to cooperating in that endeavor in every
24 reasonable way feasible within our community. Thank you.

1 MR. GROVE: Sir, if I could add on as Mayor of
2 LaSalle?

3 MR. ROATE: Oh, by all means, sir.

4 MR. GROVE: I'm not on the agenda.

5 MR. ROATE: If you'd introduce yourself.

6 MR. GROVE: I'm Jeff Grove. J-e-f-f. G-r-o-v,
7 as in Victor-e.

8 I appreciate Curt for doing that. I
9 didn't know for sure if I was able to make it. But
10 seeing how this has become a real big issue in the
11 Illinois Valley and surrounding areas, I really wanted to
12 make sure I weighed in on this as well. I was very proud
13 to see LaSalle as one of the first cities to make a
14 formal resolution at our city council meeting a couple
15 months ago to make sure that they had our support, OSF
16 did.

17 Being born and raised in LaSalle,
18 St. Mary's Hospital in LaSalle, some of you folks might
19 remember that hospital. I remember my father as I was a
20 young man talking to a neighbor who was on the St. Mary's
21 Board at the time, and that's when St. Mary's came over
22 to IVCH. It might have been People's Hospital at the
23 time. Mr. Musa (phonetic), is that what it was? My dad
24 was very mild mannered. Never got excited. Never got

1 fired up. But he was pretty fired up this day because he
2 felt, hey, you know, the City of LaSalle, we're going to
3 lose our identification, right, when you lose a hospital.
4 I think as time had gone on, my dad and everybody
5 realized this was probably the best thing for
6 LaSalle-Peru to have one hospital. We share a high
7 school. We share a hospital. We share a lot of things.
8 Right now, as Mayor, our public works work together. Our
9 fire departments, our police departments. So it made
10 sense, right, have to medical together as well.

11 But, again, losing that first thing is
12 hard, right? So I was able to speak at IVAC last month.
13 We had the State and the cities, and my first words was,
14 Thank you, OSF, for taking the risk on the Illinois
15 Valley area, an investment, as Curt said, in the Illinois
16 Valley. But also thank you, Mendota. Thank you,
17 Princeton. Thank you, Ottawa, for giving us and
18 LaSalle-Peru OSF Spring Valley Healthcare. You know, we
19 made the trips in the wintertimes. We made the
20 excursions there, but we were happy to have some place to
21 go.

22 My understanding is we still, you know,
23 the communities, there used to be a footprint, right, for
24 immediate care which is huge because, you know, when we

1 got the call for the ambulance, our services were taken
2 either to Mendota, Ottawa or Princeton, which we were
3 very -- and even Pontiac. So we were very grateful for
4 that. So, again, thank you for your investment.

5 Obviously we had two hospitals that
6 didn't make it financially. I think OSF has a plan, and
7 I think we need to trust the plan and hope that these
8 are -- folks are successful as possible to make it
9 happen. And that's back for all of us, not just LaSalle,
10 but everybody in North Central Illinois. So thank you
11 again, and you have our support. You and -- as Curt
12 said, we are here for you, so thank you.

13 MR. ROATE: Thank you.

14 The Board would like to now call Mr. Bill
15 Zens.

16 MR. ZENS: Bill, B-i-l-l. Zens, Zebra, Edward,
17 Nancy, Sam. Z-e-n-s.

18 Good afternoon. My name is Bill Zens.
19 I'm the Executive Director of the Illinois Valley Area
20 Chamber of Commerce, and we are the regional chamber that
21 covers almost the identical region of the I80 OSF region,
22 LaSalle, Bureau and Putnam Counties.

23 I wanted to share our support for the
24 work that OSF is doing here in Peru. From day one, the

1 communication with this organization has been phenomenal.
2 They reached directly out to us to set up meetings with
3 the community and the leaders throughout the community to
4 share their plan. They've been very forthcoming with
5 that information and have not shied behind any curtains
6 or anything else. So thank you for that.

7 I think that that communication is just a
8 testament to the work that you will do and continue to do
9 in this region. A.J. mentioned that 450 St. Margaret's
10 employees were brought on as mission partners. And I
11 will tell you that they are the largest private employer
12 in this region. For us as a chamber, we support our
13 members and we look for support for our members and
14 healthcare is a major need for our employers and for the
15 community members in which we serve, and OSF has stepped
16 in to fill the hole that was left when we had two
17 hospitals close. Not only does the impact that they have
18 as the largest employer in the region impact our ability
19 to grow, the support and the services that they provide
20 are extremely important as we look as a region to grow.

21 When you look at employers or employees,
22 one of the biggest things that they look for in addition
23 to education and extracurricular activities is healthcare
24 and access to quality healthcare. And, again, OSF is

1 providing that to our region, not just Peru, but the
2 entire region that we cover.

3 I just wanted to again come up and
4 support the plans that OSF has and request approval for
5 the work that they do here in Peru. Thank you.

6 MR. ROATE: Next, the Board would like to call
7 Ms. Andrea Brandon speaking for Dr. Robert Morrow.

8 MS. BRANDON: Andrea, A-n-d-r-e-a. Brandon,
9 B-r-a-n-d-o-n, for Dr. Robert W. Morrow, M-o-r-r-o-w.

10 Good afternoon. Again, I'm speaking on
11 behalf of Robert W. Morrow, MD. Over the past several
12 years, healthcare systems across the country have been
13 under pressure to optimize workflow due to professional
14 staff shortages and accelerated costs. Those pressures
15 have led to loss of regional healthcare across the United
16 States. In fact, Becker's Hospital Review lists 13
17 hospital closures in 2024 alone.

18 For years, the citizens of Illinois
19 Valley were blessed with multiple options for healthcare.
20 However, in June 2023, St. Margaret's Hospital and Spring
21 Valley were forced to close due to a monetary crisis
22 fueled by the COVID-19 pandemic, staff shortages, and a
23 2021 ransomware attack that rendered them unable to
24 submit claims to insurers, Medicaid and Medicare.

1 At the time of St. Margaret's closure, I
2 was an attending physician and member of the medical
3 executive committee. I was acutely aware of the struggle
4 at the admin -- that the administrative staff endured to
5 try to save the hospital and continue the healthcare
6 ministry of the Sisters of Mary of the Presentation. In
7 the days and weeks following closure of St. Margaret's
8 Peru and Spring Valley, there was great angst among
9 community leaders, patients, and healthcare workers.
10 Emotions ran high.

11 As I began to see patients in temporary
12 clinics throughout the Illinois Valley, patients would
13 initially criticize OSF for causing the St. Margaret's
14 Health failure. However, in a short few weeks, the
15 emotions changed. The patients now are appreciative of
16 the effort OSF brought forth to save our community from
17 the healthcare vacuum created by a perfect storm of
18 financial hardship. They recognized that most patients
19 were able to keep their providers and staff in the
20 Illinois Valley.

21 The absence of emergency care in Spring
22 Valley and Peru led to difficulties getting urgent
23 lifesaving care with tragic results, however. The
24 absence of local OB hospital care and ED services lead to

1 newborn deliveries in vehicles and on roadsides.

2 Thankfully, OSF was able to absorb the previous

3 St. Margaret's OB staff and providers to supplement the

4 OB services in the Ottawa region.

5 Ottawa is more than 30 minutes from many

6 of the larger towns in Illinois Valley and even farther

7 from the smaller outlying communities. The needs of the

8 residents spread over a large geographic region range

9 from west of Princeton, south of Streator, north of

10 Mendota, and southwest of Spring Valley. These will be

11 best served by a centralized healthcare hub.

12 OSF's proposed hub and spoke model for

13 Peru centralizes several services, including OB which

14 directly supports half the geographic area that is

15 currently isolated from such care. The finances of

16 healthcare require systems to use limited resources in

17 the most efficient way. Systems need to be able to react

18 to changing population and financial pressures.

19 Centralizing care leaves the most vulnerable patients at

20 substantial risk of complication and is a use -- is a

21 poor use of resources.

22 For these reasons, I ask that you support

23 the proposal as put forth by OSF that would centralize

24 care for my patients and my family. Sincerely, Robert W.

1 Morrow, M.D.

2 MR. ROATE: Thank you.

3 Next, the Board would like to call
4 Ms. Vanessa Hoffeditz.

5 MS. HOFFEDITZ: Pretty good. V-a-n-e-s-s-a.
6 H-o-f-f-e-d-i-t-z.

7 My name is Vanessa Hoffeditz, and I'm
8 here today to support the OSF regional plan providing
9 expanded services including obstetrics. Personally, I
10 know firsthand the impact of changes in medical services
11 as I was impacted by the closure of St. Margaret's in
12 Spring Valley. I had -- had my medical care with them
13 for over 25 years. It's still really emotional for me to
14 talk about. I had -- both of my children were born at
15 St. Margaret's Hospital, and I had to have C-sections for
16 both of my children.

17 So I am -- knowing that pregnant mothers,
18 especially those who are high risk, would have to travel
19 further and face increased risks when the hospitals
20 closed and provided those services had a very profound
21 impact on me because of what I went through.

22 So OSF's regional plan to regionalize
23 services and provide those obstetric services here in
24 Peru is very critical to all mothers in the Illinois

1 Valley region. We have equal traveling time for those
2 mothers and those mothers at risk can get to the services
3 that they need so that they can be less impacted and have
4 increased risks.

5 I live near the Princeton area, and I've
6 seen firsthand the work that OSF has done to bring
7 specialized medical services into our community, and I am
8 very glad to say that we have had a lot of feedback from
9 community members indicating how important being able to
10 have those specialized services come into the community
11 are to them. So that is why I'm here today.

12 MR. ROATE: Thank you.

13 Next, the Board would like to call
14 Ms. Alexandria Braboy.

15 MS. BRABOY: Braboy.

16 MS. ROATE: Braboy.

17 MS. BRABOY: A-l-e-x-a-n-d-r-i-a. B-r-a-b-o-y.

18 My name is Alexandria Braboy, and I am
19 here today to give my support for OSF's plan to modernize
20 St. Elizabeth Medical Center in Peru. For over a year,
21 the Illinois Valley region went without quality and
22 accessible healthcare after we lost two hospitals within
23 six months of each other.

24 OSF's plan includes 45 medical/surgical

1 beds, 8 ICU room, 11 obstetric rooms, surgery and
2 procedure rooms, diagnostic imaging and emergency
3 services. These services are desperately needed for our
4 entire region which includes residents in LaSalle,
5 Bureau, and Putnam Counties.

6 Health infrastructure is considered
7 critical infrastructure and understood as facilities and
8 services vital to the basic operations of society. We
9 need these services to protect our residents, especially
10 mothers, children, the elderly, and sick. We need these
11 services if you want to attract families to live here.
12 We appreciate OSF for the \$5.6 million investment in Peru
13 and the Illinois Valley. Thank you.

14 MR. ROATE: Thank you.

15 Next, the Board would like to call Jackie
16 Kernin speaking on behalf of Lisa Clinton.

17 MS. KERNIN: J-a-c-k-i-e. K-e-r-n-i-n.
18 L-i-s-a. C-l-i-n-t-o-n.

19 This is a statement by Lisa Clinton. As
20 a former manager of St. Margaret's Health and a community
21 member, I have a grave concern for the potential
22 healthcare dessert in the western Illinois Valley. In
23 order to fulfill a balanced centrally located healthcare
24 facility, I believe the Peru area is ideal to support the

1 communities' needs. I know each city would want to have
2 their own hospital as in the past. But the current
3 healthcare climate can no longer support that structure.
4 Ideally, if you use simple geography, the center of the
5 population previously served by the local hospital is now
6 located in LaSalle-Peru area.

7 After serving on the Regional
8 Transportation Board for a number of years, I am aware of
9 the difficulties Illinois Valley residents have with
10 traveling to medical appointments and services. A
11 centrally located facility would lessen the overall
12 travel and supply a central travel hub.

13 Over the years in my position as
14 emergency preparedness coordinator, I have worked with
15 leaders from all of the local hospitals in our area and
16 regionally to help prepare our staff and first responders
17 to meet the medical challenges that may present in a
18 natural and manmade disaster.

19 A central medical facility would aid in
20 prompt access to medical care and ease the coordination
21 and transportation efforts of the response teams. I was
22 a former EMT for 1033 and a current board member, and I
23 know the importance of centrally located advanced medical
24 support. We would be happy to provide medical

1 transportation between hospitals and tertiary facilities.

2 I am sorry I cannot due to a personal
3 commitment be present for the public forum, but I believe
4 that if our community set aside their prior preferences,
5 we could support an ideal, centrally located healthcare
6 facility that could provide our communities with
7 excellent healthcare. It would be my hope that expanded
8 services and community members currently drive a distance
9 to receive to be provided by just such a location.

10 Sincerely, Lisa Clinton.

11 MR. ROATE: Thank you.

12 Next, the Board would like to call Jason
13 Curran.

14 MR. CURRAN: J-a-s-o-n. C-u-r-r-a-n.

15 Hi. How are you? Jason Curran, Mayor of
16 the City of Oglesby. Just in general, I didn't write
17 anything down, but, you know, I wanted to say that we
18 support the idea of OSF's plan for expanding regional
19 healthcare throughout the region.

20 A little less than two years ago, we lost
21 our local healthcare facility in Oglesby. And then
22 shortly after that, we lost both the hospitals, IVCH and
23 St. Margaret's. So what that did is that took our
24 average time for probably under seven minutes to over 25

1 minutes. And I know there's other communities near us
2 that had a much, much bigger impact to them.

3 So last fall, A.J. and Dawn came out to
4 some of the leadership meetings we had and they kind of
5 explained the plan, and I really appreciated that they --
6 it made sense to me at the time, everything.

7 I know there's some communities out there
8 that are having some issues with the plan, and I get it.
9 We are a bunch of small communities that make up a much
10 larger population. So any time a community feels like
11 they're -- something is kind of being taken away from
12 them or they're losing on something, everybody wants to
13 fight to try to maintain that or keep that. But I think
14 we need to be focused on the bigger picture and work
15 together for a plan that's going to support healthcare
16 that's not going to allow voids to occur again.

17 I will say that, you know, healthcare is
18 a business. And as a red blooded American, I tend not to
19 trust businesses in general. But there's one thing about
20 businesses I do trust. I do trust that they are out
21 there to try to make a profit, right? They're trying to
22 make money. And if IVCH and St. Margaret's would have
23 been profitable and financially stable, we wouldn't be
24 having these conversations today.

1 So when they put together a plan, I trust
2 in the idea that they are looking for a way that they
3 could make a profitable and financial stable thing for
4 our region. And I think that's what we should all be
5 behind.

6 I know one of the gentlemen before me
7 talked about uncertainty. You know, everything in this
8 world is uncertain. I get that. But I mean, as long as
9 businesses are doing their due diligence, they're doing
10 their research, they're getting smart people like
11 actuaries and market analysis people, I think we need to
12 get behind finding a model that does work for us. And
13 the best I could see is -- and they've been very
14 forthcoming. I really do appreciate that.

15 I know I said I don't trust businesses.
16 But every communication that I've had with them has been
17 great and forthcoming except for a few minor email
18 issues, but I really appreciate that. And so far I don't
19 have any reason to suspect that this plan would not be
20 something good for our region to bring great healthcare
21 for us. That's all I've got. Thanks.

22 MR. ROATE: Thank you.

23 Lastly, the Board would like to call
24 Mr. Ken Kolowski.

1 MR. KOLOWSKI: That's Kolowski, Irish.

2 MR. ROATE: Kolowski, my apologies, sir.

3 MR. KOLOWSKI: Ken Kolowski. K-e-n.

4 K-o-l-o-w-s-k-i.

5 First of all, I would like to thank
6 everybody for being here. It shows the passion that we
7 have here in this region for healthcare. I purposely
8 asked to speak last today because everybody took a lot of
9 my talking points from the mayors to everyone else.

10 So I've got a couple notes here. You
11 know, on January 28, 2023, we found out our hospital
12 collapsed. Nobody seen it coming. Our team immediately
13 jumped into action, and we started making phone calls.
14 We sent a team down to Springfield, started working with
15 Representative Yednock and Sue Rezin. By the way, both
16 of them were amazing in this process. And OSF stepped
17 up, took the call. We started working with them
18 immediately.

19 First and foremost, at least for me, was
20 the health of our citizens, that was a big part of it.
21 But then you start thinking about the economic impact.
22 How are you going to keep young people? How are you
23 going to keep your elderly people here? How are you
24 going to attract businesses? We recently just landed a

1 GAF \$100 million factory that created 75 jobs. Would
2 they have -- the hypothetical question was, would they
3 have come here without healthcare? I'm glad we didn't
4 have to find that out.

5 This amazing team that's sitting in front
6 of me, A.J. and Dawn, I consider them friends of mine
7 now. I mean, I text them on Sunday nights sometimes, and
8 they answered my questions immediately.

9 Bottom line is, folks, we need to listen
10 and we need to trust OSF, and we need to start pulling
11 the rope in the same direction for the entire region.
12 This is a regional thing. This is a national problem,
13 and we're thankful that you're here and we appreciate
14 everything you've done so far and everything that you are
15 going to continue to do.

16 So thank you again everybody. I don't
17 know who closes now or -- but I appreciate everybody
18 coming here today.

19 MR. ROATE: Thank you.

20 Is there anyone who wishes to testify who
21 has not yet had an opportunity?

22 (No response.)

23 MR. ROATE: Seeing none. Is there anyone who
24 has testified who wishes to provide additional testimony?

1 (No response.)

2 MR. ROATE: I would remind everyone to submit
3 your written comments to us so that we have this
4 information for the record.

5 Also, this project is tentatively
6 scheduled for consideration by the Illinois Health
7 Facilities and Services Review Board at its August
8 meeting. This meeting will be held at the Double Tree
9 Hotel, 10 Brickyard Drive in Bloomington, Illinois.
10 Ladies and gentlemen, I ask that you please refer to our
11 website because these are tentative schedules and
12 tentative locations.

13 The public has until July 19th, 2024, to
14 submit written comments about this project. These
15 comments can be sent to my attention. My name once again
16 is George Roate at the Illinois Health Facilities and
17 Services Review Board, care of the Illinois Department of
18 Public Health, 525 West Jefferson Street, 2nd floor,
19 Springfield, Illinois 62761-0001.

20 If you prefer, you may email your
21 comments. Our email address is DPH.HFSRB@Illinois.gov.

22 Are there any questions?

23 (No response.)

24 MR. ROATE: Seeing that there are no additional

1 questions or comments, I deem this public hearing
2 adjourned. Thank you.

3 (Which were all the proceedings had
4 at the above-entitled public
5 hearing on this date.)

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1 STATE OF ILLINOIS)
) SS:

2 COUNTY OF W I L L)

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4 I, Deborah A. Rannells, CSR, a certified
 5 shorthand reporter in the State of Illinois, do hereby
 6 certify that the above matter was recorded
 7 stenographically by me and reduced to writing by me.

8 I FURTHER CERTIFY that the foregoing
 9 transcript of the said matter is a true, correct, and
 10 complete transcript of the proceedings at the time and
 11 place specified herein before.

12 I FURTHER CERTIFY that I am not a relative or
 13 employee of any of the parties, nor a relative or
 14 employee of the attorneys of record, or financially
 15 interested directly or indirectly in the action.

16 IN WITNESS WHEREOF, I have hereunto set my
 17 hand at Chicago, Illinois, this 5th day of July, 2024.

18

19

20

Deborah A. Rannells

Certified Shorthand Reporter

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