



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: Relinquishment of Exemption

FACILITY: #E-008-24 - The Featherstone Partnership, L.P. d/b/a Rockford Ambulatory Surgery Center

This is to advise you that I have reviewed the above-captioned RELINQUISHMENT OF EXEMPTION within the requirements in Part 77 ILAC 1130 and have determined the following:

- X The request is in compliance with the requirements in 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 Part 1130.
- Other actions as follows:



Debra Savage, Chairwoman
Illinois Health Facilities and Services
Review Board

July 30, 2024

Date