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CHO Members

John Armstrong
Armstrong Wealth Mgmt.

Jeanne Armstrong
Community Advocate

Dr. Christine Benson, EdD
Community Advocate

Brian Bressner
City of Ottawa Fire Chief

Colleen Burns, MHSA
Licensed Real Estate Broker

Mike Cheatham
Ottawa Chief of Police

Wayne Eichelkraut
Ottawa Commissioner

Robert M. Eschbach, JD
Mayor of Ottawa, 1999-2019

Tom Ganiere, JD
Ottawa Commissioner

Robert Hasty
Mayor of Ottawa

Ron Henson
Business Owner

Maribeth Manigold
Community Advocate

Drew McConville
Community Advocate

Jay McCracken
Executive Director, Ottawa
Area Chamber of Commerce

Dave Noble, PE CFM
Economic & Community
Development Director

Geri Perry
Community Advocate

Margaret "Peg" Reagan
Community Advocate

Dr. Brian Rosborough, MD
Former OSF VP Chief Medical
Officer at SEMC-Ottawa

Maeanne Stevens, RN, MSN
Former OSF VP Chief Nursing
Officer at SEMC-Ottawa

Nikki Thrush
Community Advocate

October 28, 2025

OCT 29 2025

HEALTH FACILITIES &
SERVICES REVIEW BOARD

IL Health Facilities & Services Review Board ("IHFSRB")
Attn: Debra Savage, Chairwoman
525 West Jefferson, 2nd Floor
Springfield, IL 62761

RE: Community Opposition Letters for OSF St. Elizabeth Medical Center, Ottawa –
Discontinuation of 5-bed Intensive Care Unit & 14-bed Obstetrics Unit (Labor &
Delivery)

Dear Chairwoman & State Planning Board Members:

Citizens for Healthcare in Ottawa ("CHO") has collected the enclosed opposition letters
from members of our community in regards to OSF's plans to eliminate OB and ICU
services from St. Elizabeth Medical Center in Ottawa, IL.

As we've shared previously, CHO is a grass roots organization of civic leaders and
engaged citizens from Ottawa, IL. In July 2025, CHO requested the Office of the Illinois
Attorney General ("OAG") to open a civil investigation into certain health care
operations and practices within the OSF HealthCare System ("OSF"), as we have
profound concerns about the propriety of OSF's actions and plans to consolidate access
to health care in the more affluent portions of Hospital Planning Area C0-2 (as
established by the Illinois Health Facilities and Services Review Board ("HFSRB")), which
will have the net effect of depriving residents in the eastern part of this planning area
timely and effective access to critical health care services.

OSF is a Catholic-sponsored health system benefitting from federal and state tax-
exemption as a charitable organization; it adheres to the Religious and Ethical Directives
for Catholic Health Care Services published by the U.S. Conference of Catholic Bishops
("ERDs"). OSF operates 17 hospitals in Illinois, along with many other health care
services.

As described below (and with more detail in previously submitted materials), we believe
OSF now has monopoly power through a series of acquisitions that seemingly have not
undergone antitrust scrutiny. In 2024, OSF filed two Certificate of Need ("CON") permit
applications with HFSRB designed to further consolidate health care services in the
more affluent part of Planning Area C0-2, thereby depriving residents of Ottawa and the
eastern portions of this planning area access to essential health care services.

Continued on following page

[Project 24-11](#) proposed the replacement of OSF Saint Elizabeth Medical Center-Ottawa (“Ottawa Hospital”) with a downsized hospital that would eliminate ICU and OB services and dramatically downsize medical-surgical beds. [Project 24-13](#) proposed the discontinuation of the Ottawa Hospital upon opening of the downsized replacement facility. As a general proposition, OSF proposed that ICU and OB services be relocated to its recently acquired Peru, Illinois hospital, which is 17 miles distant from Ottawa and even more distant from eastern portions of Planning Region. Both projects received intense opposition from the Ottawa community (and surrounding communities), and at the request of OSF, consideration of both applications has been repeatedly deferred.

Most recently OSF sought (and received in March 2025) from HFSRB a 12-month deferral on these two projects. At the insistence of HFSRB, however, OSF has conducted and reported to HFSRB on monthly community meetings about the plans for the Ottawa Hospital. However, no meaningful changes to the original plans have been made by OSF in response to community input, and the community remains staunchly opposed. **OSF has also cancelled scheduled meetings with the City of Ottawa officials and community members that had been planned for October and November.**

In 2025, OSF filed [Project 25-13](#), which proposes to discontinue all ICU and OB services at the Ottawa hospital. This Project 25-13 which is now scheduled to be heard at the November 18, 2025 HFSRB meeting. Projects 24-13 and 24-11 remain pending, subject to the deferral described above.

Our concerns with OSF can be summarized into the following key topics:

1. **Monopolistic Behavior:** OSF operates as a health care monopoly in the region, and under the restrictions in the ERD pertaining, among other things, to reproductive health care services. Using this monopoly power, they have taken recent actions to reduce access to OB and ICU services, which will have a drastic adverse impact on patient safety, quality of care, and health care worker welfare in the rural communities located in eastern Planning Area C0-2.
2. **Profits Over Patients:** As a tax-exempt, charitable organization, OSF appears to be abandoning the health care needs of the Ottawa community (and eastern Planning Area C0-2, which includes Eastern LaSalle County) in favor of continued robust profit growth. Years of sustained OSF asset growth supports our concern that OSF is accumulating excessive assets and reserves, without clear plans to utilize them in furtherance of its tax-exempt mission through expenditures in support of the region’s most pressing community health needs.
3. **Reducing Access to Health Services:** OSF intends to eliminate the OB and ICU services in Ottawa, as well as severely reduce medical/surgical capacity in favor of moving those inpatient services to a more affluent area in Peru, IL – which is 17 miles away from Ottawa. This distance is even greater for those living beyond Ottawa’s borders in Eastern LaSalle County. Additionally, OSF has taken steps to relocate outpatient clinics and services from Ottawa to Peru. It plans to do so despite concerns from police, fire and EMS leadership.
4. **Future of Donated Assets:** OSF acquired the assets of Ottawa Hospital in 2012. OSF paid no purchase price for the hospital’s assets (including the land), but the valuation at the time was \$58 million. OSF’s plans are to demolish the hospital that was given to them, but without providing a clear intended use of the site following demolition. There is no way to know if the land will be repurposed to meet the community’s needs (health care related or otherwise). Prior to demolition, CHO believes the community has a right to know if another willing and able operator would be interested in maintaining hospital services in Ottawa.



**Citizens for
Healthcare in
Ottawa**

5. Operating Without Regulatory Approvals: Despite the HFSRB's clear direction for OSF to work with community members to develop an updated plan for the delivery of health care services in Ottawa that meets community needs and garners support from key stakeholders (such as emergency medical services and police), OSF has done little to reconsider any element of their chosen approach. Frankly, OSF leaders have had a sustained arrogance that they will not be challenged by valid concerns, stating they only seek to "educate" the public that what they have planned for the region is sufficient – despite data-driven concerns to the contrary.

Lastly, our community is not opposed to OSF's plans simply because of a blind allegiance to our lovely town. Our opposition lies in the fact that we have had a high-quality hospital that has served our rural community well for over a century become unilaterally dismantled by a financially robust organization that benefits both from monopoly power and tax-exempt charitable status. Ottawa's Hospital has garnered several industry awards that attest to the quality of care provided here, in addition to being a financially profitable facility for many years. OSF often speaks about the plight of rural health care – but here it has a gem, an anomaly if you will – that OSF appears poised to sacrifice in favor of continued consolidation. For these reasons, we are so grateful that the HFSRB has challenged OSF to work with our city and key stakeholders to develop a plan that will best serve our regional health care needs.

In line with the community letters included herein, we urge the state board to deny OSF's permit applications that would close the ICU and OB units in Ottawa.

Sincerely,

Colleen Burns, MHSA
Co-Founder, Citizens for Healthcare in Ottawa

Enc: *Community Opposition Letters for OSF St. Elizabeth Medical Center, Ottawa – Discontinuation of 5-bed Intensive Care Unit & 14-bed Obstetrics Unit (Labor & Delivery)*

RECEIVED

OCT 29 2025

HEALTH FACILITIES
REGIONAL OFFICE

Oct 27, 2025

RE: OSF Hospital
Ottawa, Ill 61350

From: Patricia Curl
26 Bona Terra Dr
Ottawa, Ill 61350

My family moved to Ottawa in 1968 and always proud and happy with staff and medical treatment from hospitals thru the years. I had my daughter in 1976, used ER, ICU also thru the years. I do not know what we would have done with out our "Community" hospital, we did not have transportation to City of Town facilities.

Not only the best care at "Community" hospital, they were top employer in area.

Which was wonderful for Ottawa growth.

Please reconsider, and keep

OB + ICU. It is so important!

Sincerely Patricia Curl

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OCT 29 2025

HEALTH FACILITIES &
SERVICES REVIEW BOARD

October 27, 2025

IL Health Facilities & Services Review Board (HFSRB)

Attn: Debra Savage, Chairwoman

525 West Jefferson, 2nd Floor

Springfield, IL 62761

RE: Opposition Letter for CON Project #25-013: OSF St. Elizabeth Medical Center, Ottawa—Discontinuation of 5-bed Intensive Care Unit & 14-bed Obstetrics Unit (Labor & Delivery)

Dear Chairwoman:

As the Ottawa Area Chamber of Commerce Executive Director, I am writing in opposition of OSF HealthCare's plans to discontinue Intensive Care (ICU) and Labor/Delivery Obstetrical (OB) services at OSF St. Elizabeth Medical Center (SEMC) in Ottawa.

Our Ottawa Area Chamber of Commerce has met with area businesses and industries in the Ottawa Area. We have industries that need a fully functioning Intensive Care Unit within 10 minutes of their industrial location. This is a major concern for our Ottawa Area Chamber and our area businesses/industries. The safety and well-being of our employees depend on ICUs that can handle emergency situations in close proximity to the industries, not 25 minutes away.

With that compelling reason, I respectfully urge you to deny OSF this permit application.

Sincerely,



Jay K. McCracken, Executive Director

Ottawa Area Chamber of Commerce & Industry

October 27, 2025

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Attn: Debra Savage, Chairwoman
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Springfield, IL 62761

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In March 2024, OSF submitted 3 Certificate of Need ("CON") projects to the HFSRB, to be heard at the August 2024 board meeting. At the time, OSF requested all projects be reviewed at the same meeting, given their clear connectedness:

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After facing opposition regarding their plans for Ottawa's hospital, OSF decided to seek approval for Peru's expansion as a **stand-alone project** and defer the two Ottawa projects to a future meeting. OSF was granted approval to expand Peru's hospital, as well as the request to defer the two Ottawa projects (currently deferred to the March 2026 HFSRB meeting).

When OSF requested that HFSRB split up the review/approval of the Peru and Ottawa projects, they were effectively telling the board that their system has the ability to move forward with the plans to expand Peru's facility INDEPENDENT of the board's future decision regarding the two Ottawa projects.

And yet, OSF later submitted a fourth CON application to the HFSRB (CON #25-013) in an attempt to piecemeal their plans and seek approval to close Ottawa's OB and ICU units prior to the scheduled review of these (deferred) plans in March 2026.

The data that OSF has shared in regards to these projects, when analyzed, does not show a compelling argument to discontinue ICU and OB services in Ottawa. In fact, the data supports both the OB and ICU units remaining in Ottawa – either as the "hub" facility, or in addition to the units planned for Peru. Some key data points include:

- **ICU:** In 2024, there were 1,170 patients from the CO-2 region who were admitted from the ED into the ICU:
 - This was an **11% increase** in the number of ICU patients from the prior year (1,053 in 2023).
 - The zip codes with the **highest volume of ICU patients are from Eastern LaSalle County:** Ottawa (224); Streator (158); and Marseilles (105); LaSalle and Peru combined had 158 ICU patients (66 fewer than Ottawa alone)
 - OSF as a system treated **70% of ICU patients across 10 facilities**; indicating a lack of ICU beds in the region
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- **OB:** In 2024, there were 1,451 patients from the CO-2 region admitted for OB services:
 - Despite industry-wide declining birth rates, **cases increased more than 10% in the region** (1,313 in 2022)
 - **Ottawa's hospital has been the market leader** for the CO-2 region, even before Peru & Spring Valley closures. In 2022 when Peru and Spring Valley were still open, the following OB market share was observed: 390 patients at Ottawa (30% share); 255 patients at Peru (19% share); 45 patients at Spring Valley (3% share)
 - Historically, **Ottawa has had a higher average daily census** on the OB unit than both Peru and Spring Valley
 - Patients not seeking care in Ottawa are **historically traveling East and South, not West** (toward Peru)

There are simply too many data-driven concerns for the HFSRB to approve of OSF's plans to discontinue OB and ICU services at Ottawa's hospital. I sincerely hope the board denies OSF this permit application.

Thank you,

(Printed Name)

Gene Duffer

October 27, 2025

IL Health Facilities & Services Review Board ("HFSRB")
Attn: Debra Savage, Chairwoman
525 West Jefferson, 2nd Floor
Springfield, IL 62761

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When OSF requested that HFSRB split up the review/approval of the Peru and Ottawa projects, they were effectively telling the board that their system has the ability to move forward with the plans to expand Peru's facility INDEPENDENT of the board's future decision regarding the two Ottawa projects.

And yet, OSF later submitted a fourth CON application to the HFSRB (CON #25-013) in an attempt to piecemeal their plans and seek approval to close Ottawa's OB and ICU units prior to the scheduled review of these (deferred) plans in March 2026.

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Thank you,

Vicki Duffy

(Printed Name)

Vicki Duffy

October 27, 2025

IL Health Facilities & Services Review Board ("HFSRB")

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525 West Jefferson, 2nd Floor

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E/aine Poskin

(Printed Name)

E/aine Poskin

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Thank you,

William A. Bruckas

(Printed Name)



October 27, 2025

IL Health Facilities & Services Review Board ("HFSRB")

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525 West Jefferson, 2nd Floor

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Thank you,

Laureen Boyle Buinickas (Printed Name) *L. Boyle Buinickas*

October 27, 2025

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(Printed Name)



October 27, 2025

IL Health Facilities & Services Review Board ("HFSRB")

Attn: Debra Savage, Chairwoman

525 West Jefferson, 2nd Floor

Springfield, IL 62761

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(Printed Name) Anne M. Enke

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(Printed Name)

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Thank you,

Peter HALL

(Printed Name)

R. K. [Signature]

October 27, 2025

IL Health Facilities & Services Review Board ("HFSRB")

Attn: Debra Savage, Chairwoman

525 West Jefferson, 2nd Floor

Springfield, IL 62761

RE: Opposition Letter for CON Project #25-013: OSF St. Elizabeth Medical Center, Ottawa – Discontinuation of 5-bed Intensive Care Unit & 14-bed Obstetrics Unit (Labor & Delivery)

Dear Chairwoman:

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CHUCK LARSEN

(Printed Name)



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525 West Jefferson, 2nd Floor
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Cheryl Snell

(Printed Name)

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(Printed Name)

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October 27, 2025

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David A. Nash

(Printed Name)



October 27, 2025

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October 27, 2025

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WE Rouns

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11/27/25

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(Printed Name) Debra Savage

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Thank you,

Wayne A. Eitelberger (Printed Name) (Wayne A. Eitelberger)

October 27, 2025

IL Health Facilities & Services Review Board ("HFSRB")

Attn: Debra Savage, Chairwoman

525 West Jefferson, 2nd Floor

Springfield, IL 62761

RE: Opposition Letter for CON Project #25-013: OSF St. Elizabeth Medical Center, Ottawa – Discontinuation of 5-bed Intensive Care Unit & 14-bed Obstetrics Unit (Labor & Delivery)

Dear Chairwoman:

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Gay Ann Kuhn

(Printed Name)

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JEAN L. LESS (Printed Name) 

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525 West Jefferson, 2nd Floor

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Mark L. Varland

(Printed Name)

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Marabeth M. Goldberg

(Printed Name)

October 27, 2025

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There are simply too many data-driven concerns for the HFSRB to approve of OSF's plans to discontinue OB and ICU services at Ottawa's hospital. I sincerely hope the board denies OSF this permit application.

Thank you,

Jeanne Armstrong

(Printed Name)

Jeanne Armstrong

October 27, 2025

IL Health Facilities & Services Review Board ("HFSRB")
Attn: Debra Savage, Chairwoman
525 West Jefferson, 2nd Floor
Springfield, IL 62761

RE: Opposition Letter for CON Project #25-013: OSF St. Elizabeth Medical Center, Ottawa – Discontinuation of 5-bed Intensive Care Unit & 14-bed Obstetrics Unit (Labor & Delivery)

Dear Chairwoman:

I am writing to you in **opposition** of OSF HealthCare's plans to discontinue Intensive Care ("ICU") and Labor/Delivery Obstetrical ("OB") services at OSF St. Elizabeth Medical Center ("SEMC") in Ottawa.

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Thank you,

CAROLIE FISCHER (Printed Name)



October 27, 2025

IL Health Facilities & Services Review Board ("HFSRB")

Attn: Debra Savage, Chairwoman

525 West Jefferson, 2nd Floor

Springfield, IL 62761

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Thank you,

TERESA F. SCAFF (Printed Name)

Teri Scaff

October 27, 2025

IL Health Facilities & Services Review Board ("HFSRB")

Attn: Debra Savage, Chairwoman

525 West Jefferson, 2nd Floor

Springfield, IL 62761

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Thank you,

Karen Terry

(Printed Name)

Karen Terry

October 27, 2025

IL Health Facilities & Services Review Board ("HFSRB")

Attn: Debra Savage, Chairwoman

525 West Jefferson, 2nd Floor

Springfield, IL 62761

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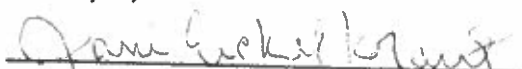
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(Printed Name) Tani Fishel

October 27, 2025

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Attn: Debra Savage, Chairwoman

525 West Jefferson, 2nd Floor

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(Printed Name)



October 27, 2025

IL Health Facilities & Services Review Board ("HFSRB")

Attn: Debra Savage, Chairwoman

525 West Jefferson, 2nd Floor

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Thank you,

Linda S. Scott

(Printed Name) Linda S. Scott

October 27, 2025

IL Health Facilities & Services Review Board ("HFSRB")
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(Printed Name)

R. L. Savage

October 27, 2025

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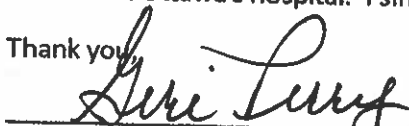
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Thank you,



(Printed Name)

Gerri Perry 10/25/25

October 27, 2025

IL Health Facilities & Services Review Board ("HFSRB")
Attn: Debra Savage, Chairwoman
525 West Jefferson, 2nd Floor
Springfield, IL 62761

RE: Opposition Letter for CON Project #25-013: OSF St. Elizabeth Medical Center, Ottawa – Discontinuation of 5-bed Intensive Care Unit & 14-bed Obstetrics Unit (Labor & Delivery)

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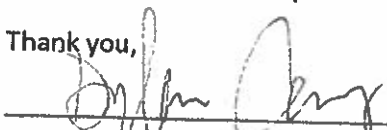
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(Printed Name)

Dylan Cowan

10-27-2025

October 27, 2025

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(Printed Name) Doreen R. Allison

October 27, 2025

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 (Printed Name) Josephine Parrott

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Caroline Daugherty

(Printed Name)

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Eugene P. Daugherty (Printed Name)



October 27, 2025

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Thank you,

BS Parrott (Printed Name)



October 27, 2025

IL Health Facilities & Services Review Board ("HFSRB")
Attn: Debra Savage, Chairwoman
525 West Jefferson, 2nd Floor
Springfield, IL 62761

RE: Opposition Letter for CON Project #25-013: OSF St. Elizabeth Medical Center, Ottawa – Discontinuation of 5-bed Intensive Care Unit & 14-bed Obstetrics Unit (Labor & Delivery)

Dear Chairwoman:

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Thank you,

Kyra Parrott

(Printed Name)

Kyra Parrott

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Attn: Debra Savage, Chairwoman
525 West Jefferson, 2nd Floor
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October 27, 2025

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525 West Jefferson, 2nd Floor

Springfield, IL 62761

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Richard Mangold

(Printed Name)



10/27/2025

October 27, 2025

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Thank you,



(Printed Name)

Jill Kelly

10-27-2025

October 27, 2025

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Thomas Walqumbach (Printed Name) Thomas Walqumbach (Signature)

October 27, 2025

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Attn: Debra Savage, Chairwoman
525 West Jefferson, 2nd Floor
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SHARON TRAGER (Printed Name) *Sharon Trager*

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MARGARET NEVIN (Printed Name) Margaret Nevin

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 - OSF "maintains" ICU inventory in Princeton (3 beds) & Mendota (4 beds), but those units are not staffed as full-functioning ICUs: both have a daily census near zero. Essentially, there will be only 8 staffed ICU beds in the CO-2 region; **leaving the region with a deficit of 6 ICU beds** based on the state-determined need of 14.
- **OB:** In 2024, there were 1,451 patients from the CO-2 region admitted for OB services:
 - Despite industry-wide declining birth rates, **cases increased more than 10% in the region** (1,313 in 2022)
 - **Ottawa's hospital has been the market leader** for the CO-2 region, even before Peru & Spring Valley closures. In 2022 when Peru and Spring Valley were still open, the following OB market share was observed: 390 patients at Ottawa (30% share); 255 patients at Peru (19% share); 45 patients at Spring Valley (3% share)
 - Historically, **Ottawa has had a higher average daily census** on the OB unit than both Peru and Spring Valley
 - Patients not seeking care in Ottawa are **historically traveling East and South, not West** (toward Peru)

There are simply too many data-driven concerns for the HFSRB to approve of OSF's plans to discontinue OB and ICU services at Ottawa's hospital. I sincerely hope the board denies OSF this permit application.

Thank you,

Morgan DeBernardi (Printed Name) 

(Signature)

October 27, 2025

IL Health Facilities & Services Review Board ("HFSRB")
Attn: Debra Savage, Chairwoman
525 West Jefferson, 2nd Floor
Springfield, IL 62761

RE: Opposition Letter for CON Project #25-013: OSF St. Elizabeth Medical Center, Ottawa -- Discontinuation of 5-bed Intensive Care Unit & 14-bed Obstetrics Unit (Labor & Delivery)

Dear Chairwoman:

I am writing to you in **opposition** of OSF HealthCare's plans to discontinue Intensive Care ("ICU") and Labor/Delivery Obstetrical ("OB") services at OSF St. Elizabeth Medical Center ("SEMC") in Ottawa.

In March 2024, OSF submitted 3 Certificate of Need ("CON") projects to the HFSRB, to be heard at the August 2024 board meeting. At the time, OSF requested all projects be reviewed at the same meeting, given their clear connectedness:

- CON Application #24-011: **Ottawa's Replacement Hospital** (eliminates ICU and OB; drastically reduces Med/Surg)
- CON Application #24-013: **Discontinuation of Ottawa's Hospital** (demolish current facility)
- CON Application #24-014: **Peru Hospital Expansion** (expand ICU and OB; increase Med/Surg)

After facing opposition regarding their plans for Ottawa's hospital, OSF decided to seek approval for Peru's expansion as a **stand-alone project** and defer the two Ottawa projects to a future meeting. OSF was granted approval to expand Peru's hospital, as well as the request to defer the two Ottawa projects (currently deferred to the March 2026 HFSRB meeting).

When OSF requested that HFSRB split up the review/approval of the Peru and Ottawa projects, they were effectively telling the board that their system has the ability to move forward with the plans to expand Peru's facility INDEPENDENT of the board's future decision regarding the two Ottawa projects.

And yet, OSF later submitted a fourth CON application to the HFSRB (CON #25-013) in an attempt to piecemeal their plans and seek approval to close Ottawa's OB and ICU units prior to the scheduled review of these (deferred) plans in March 2026.

The data that OSF has shared in regards to these projects, when analyzed, does not show a compelling argument to discontinue ICU and OB services in Ottawa. In fact, the data supports both the OB and ICU units remaining in Ottawa – either as the "hub" facility, or in addition to the units planned for Peru. Some key data points include:

- **ICU:** In 2024, there were 1,170 patients from the CO-2 region who were admitted from the ED into the ICU:
 - This was an **11% increase** in the number of ICU patients from the prior year (1,053 in 2023).
 - The zip codes with the **highest volume of ICU patients are from Eastern LaSalle County:** Ottawa (224); Streator (158); and Marseilles (105); LaSalle and Peru combined had 158 ICU patients (66 fewer than Ottawa alone)
 - OSF as a system treated **70% of ICU patients across 10 facilities**; indicating a lack of ICU beds in the region
 - OSF "maintains" ICU inventory in Princeton (3 beds) & Mendota (4 beds), but those units are not staffed as full-functioning ICUs: both have a daily census near zero. Essentially, there will be only 8 staffed ICU beds in the CO-2 region; **leaving the region with a deficit of 6 ICU beds** based on the state-determined need of 14.
- **OB:** In 2024, there were 1,451 patients from the CO-2 region admitted for OB services:
 - Despite industry-wide declining birth rates, **cases increased more than 10% in the region** (1,313 in 2022)
 - **Ottawa's hospital has been the market leader** for the CO-2 region, even before Peru & Spring Valley closures. In 2022 when Peru and Spring Valley were still open, the following OB market share was observed: 390 patients at Ottawa (30% share); 255 patients at Peru (19% share); 45 patients at Spring Valley (3% share)
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 - Patients not seeking care in Ottawa are **historically traveling East and South, not West** (toward Peru)

There are simply too many data-driven concerns for the HFSRB to approve of OSF's plans to discontinue OB and ICU services at Ottawa's hospital. I sincerely hope the board denies OSF this permit application.

Thank you,

Kit DeBernardi (Printed Name) W. I. T.

(Signature)