



**St. John's**  
 HOSPITAL  
 SPRINGFIELD, ILLINOIS  
 AN AFFILIATE OF HOSPITAL SISTERS HEALTH SYSTEM

**RECEIVED**

AUG 11 2014

**HEALTH FACILITIES &  
 SERVICES REVIEW BOARD**

August 6, 2014

Ms. Courtney R. Avery  
 Administrator  
 Illinois Health Facilities and Services Review Board  
 525 West Jefferson Street, 2<sup>nd</sup> Floor  
 Springfield IL 62761

Re: Contact Revisions  
 St. John's Hospital  
 Permit 10-019; Surgery Project  
 Permit 10-042; Patient Tower Modernization

Dear Ms. Avery,

Effective immediately, please change your records and replace the current contacts to reflect the following on each of these projects, including the co-applicants, where appropriate. Mr. Cox and Ms. Rozran are no longer associated with the projects.

**Primary Contact**

[Person to receive all correspondence or inquiries during the review period]

Name:	Mr. David Olejniczak FACHE
Title:	Chief Operating Officer
Company Name:	St. John's Hospital
Address:	800 East Carpenter Street Springfield, Illinois 62769
Telephone Number:	217-544-6464 Extension 44577
E-mail Address:	<a href="mailto:David.Olejniczak@hshs.org">David.Olejniczak@hshs.org</a>
Fax Number:	217-535-3989

**Additional Contact**

[Person who is also authorized to discuss the application for permit]

Name:	Edwin W. Parkhurst, Jr.
Title:	Managing Principal
Company Name:	PRISM Healthcare Consulting
Address:	800 Roosevelt Road, Bldg. E, Suite 110, Glen Ellyn, Illinois 60137
Telephone Number:	630-790-5089
E-mail Address:	<a href="mailto:eparkhurst@consultprism.com">eparkhurst@consultprism.com</a>
Fax Number:	630-790-2696

**Additional Contact**

[Person who is also authorized to discuss the application for permit]

Name:	Nicholas D. Nehman
Title:	Director, Strategic Planning and Business Development
Company Name:	HSHS Central Illinois Division
Address:	800 E. Carpenter Street, Springfield, IL 62769
Telephone Number:	217-814-4394
E-mail Address:	<a href="mailto:nick.nehman@hshs.org">nick.nehman@hshs.org</a>
Fax Number:	217-753-0128

**Post Permit Contact**

[Person to receive all correspondence subsequent to permit issuance-**THIS PERSON MUST BE EMPLOYED BY THE LICENSED HEALTH CARE FACILITY AS DEFINED AT 20 ILCS 3960**

Name:	Mr. David Olejniczak
Title:	Chief Operating Officer
Company Name:	St. John's Hospital
Address:	800 East Carpenter Street Springfield, Illinois 62769
Telephone Number:	217-544-6464 Extension 44577
E-mail Address:	<a href="mailto:David.Olejniczak@hshs.org">David.Olejniczak@hshs.org</a>
Fax Number:	217-535-3989

**Additional Post Permit Contact**

[Person who is also authorized to discuss the application for permit]

Name:	Edwin W. Parkhurst, Jr.
Title:	Managing Principal
Company Name:	PRISM Healthcare Consulting
Address:	800 Roosevelt Road, Bldg. E, Suite 110, Glen Ellyn, Illinois 60137
Telephone Number:	630-790-5089
E-mail Address:	<a href="mailto:eparkhurst@consultprism.com">eparkhurst@consultprism.com</a>
Fax Number:	630-790-2696

**Additional Post Permit Contact**

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E-mail Address:	<a href="mailto:nick.nehman@hshs.org">nick.nehman@hshs.org</a>
Fax Number:	217-753-0128

Please contact me if you have any questions, I can be contacted at 217-544-6464 Extension 44577  
or by e-mail at [David.Olejniczak@hshs.org](mailto:David.Olejniczak@hshs.org).

Sincerely,



Dave Olejniczak, FACHE  
Chief Operating Officer

CC: Tim Ferguson, Director, Facilities Management  
Mike Constantino, Supervisor, Program Review Section  
Ed Parkhurst, PRISM Healthcare Consulting