



February 26, 2014

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FEB 27 2014

**HEALTH FACILITIES &
SERVICES REVIEW BOARD**

Mr. Dale Galassie
Illinois Department of Public Health
Illinois Health Facilities and Services Review Board
525 West Jefferson Street, Second Floor
Springfield, IL 62761

RE: Delnor Hospital Comprehensive Cancer Center
CON Project #11-108
Final Cost Report

Dear Mr. Galassie:

As required by 77 Illinois Administrative Code 1130, Section 1130.770 Project Completion, Final Realized Costs and Cost Overruns, the attached information for Delnor Hospital Comprehensive Cancer Center (Project #11-108) is submitted

1. Itemization of all project costs.

See Attachment A.

2. An itemization of those project costs which have been or will be submitted for reimbursement under Titles VIII and XIX.

See Attachment A.

3. Certification that the realized costs are the total costs required to complete the project and that there are no additional or associated costs or capital expenditures related to the project that will be submitted for reimbursement under Title XVIII or XIX

See Attachment B.

4. Certification of compliance with all terms of the permit, including project cost, square footage, services, etc. Certification attesting to compliance with the requirements of this Section must be in the form of a notarized statement signed by an authorized representative of the permit holder.

See Attachments C and C-1.

300 Randall Road
Geneva, Illinois 60134
T. 630.208.3000
TTY for the hearing
impaired 630.208.4399
delnor.com

5. The final Application and Certification for payment for the construction contract, as per the American Institute of Architects form G702 or equivalent

See Attachments D and D-1

6. For permits with a project cost equal to or greater than three times the capital expenditure minimum in place at the time of permit approval, an audited financial report of all projects costs and source of funds.

Not Applicable.

Should you or your staff have questions or require further information, please contact Larry Bell, Vice-President of Construction. He can be reached at 630-933-5508 (office), 630-776-6569 (cell), or larry.bell@cadencehealth.org (Email).

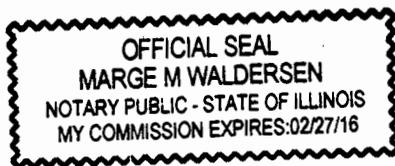
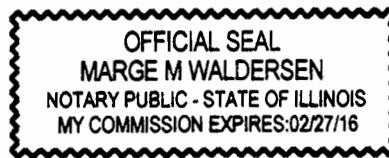
Sincerely,



Michael Vivoda
President and CEO, Cadence Health



Lawrence D. Bell
Vice President - Construction


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Attachment A

**Cadence Health
Delnor Hospital Comprehensive Cancer Center
CON Project # 11-108**

Project Cost and Sources of Funds

Project Costs	Clinical/Reviewable		Non-Clinical/Non-Reviewable		Totals	
	CON Permit 2/28/2012	Final Cost	CON Permit 2/28/2012	Final Cost	CON Permit 2/28/2012	Final Cost
Preplanning Costs	\$116,000	\$7,985	\$101,900	\$7,015	\$217,900	\$15,000
Site Survey & Soil Investigation	\$12,000	\$29,840	\$8,000	\$19,894	\$20,000	\$49,734
Site Preparation	\$270,000	\$16,230	\$240,000	\$14,426	\$510,000	\$30,656
Off-Site Work	\$126,000	\$0	\$84,000	\$0	\$210,000	\$0
New Construction Contracts	\$5,581,969	\$6,829,109	\$4,624,887	\$6,995,486	\$10,206,856	\$13,824,595
Modernization Contracts	\$1,000,241	\$323,061	\$1,100,292	\$0	\$2,100,533	\$323,061
Contingencies	\$281,820	\$0	\$231,270	\$0	\$513,090	\$0
A/E Fees	\$569,300	\$767,601	\$441,700	\$595,554	\$1,011,000	\$1,363,155
Consulting & Other Fees	\$784,000	\$91,294	\$196,000	\$22,823	\$980,000	\$114,117
Movable & Other Equipment	\$3,720,000	\$2,314,021	\$506,000	\$314,757	\$4,226,000	\$2,628,778
Other Costs to be Capitalized	\$0	\$0	\$0	\$0	\$0	\$0
Subtotal	\$12,461,330	\$10,379,141	\$7,534,049	\$7,969,955	\$19,995,379	\$18,349,096
Bond issuance Expense	\$0	\$0	\$0	\$0	\$0	\$0
Net Interest Expense During Construction	\$0	\$0	\$0	\$0	\$0	\$0
Fair Market Value of Leased Space/Equipment	\$0	\$0	\$0	\$0	\$0	\$0
Acquisition of Building or other Property	\$0	\$0	\$0	\$0	\$0	\$0
Estimated Total Project Cost	\$12,461,330	\$10,379,141	\$7,534,049	\$7,969,955	\$19,995,379	\$18,349,096

Sources of Funds						
Cash and Securities	\$12,461,330	\$10,797,061	\$7,534,049	\$7,552,035	\$19,995,379	\$18,349,096
Pledges	\$0	\$0	\$0	\$0	\$0	\$0
Gifts and Bequests	\$0	\$0	\$0	\$0	\$0	\$0
Bond Issues	\$0	\$0	\$0	\$0	\$0	\$0
Mortgages	\$0	\$0	\$0	\$0	\$0	\$0
Leases (Fair Market Value)	\$0	\$0	\$0	\$0	\$0	\$0
Governmental Appropriation	\$0	\$0	\$0	\$0	\$0	\$0
Grants	\$0	\$0	\$0	\$0	\$0	\$0
Other Funds and Sources	\$0	\$0	\$0	\$0	\$0	\$0
Total Funds	\$12,461,330	\$10,797,061	\$7,534,049	\$7,552,035	\$19,995,379	\$18,349,096

The final cost for Modernization is less than the CON cost since a major portion of the existing building was demolished and rebuilt anew because the cost, timeline and disruption to patient care were less than modernizing the existing building in-place. Accordingly, the final cost for new construction is greater than the CON cost.

**Delnor Hospital Comprehensive Cancer Center
CON Project #11-108
Attachment B**

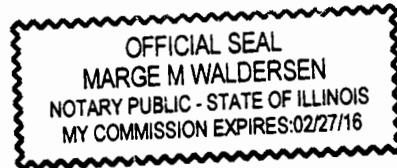
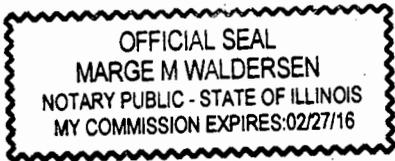
This is to certify that the realized costs of \$18,349,096 for the Delnor Comprehensive Cancer Center project (CON Project #11-108) are the total costs required to complete the project and that there are no additional or associated costs or capital expenditures related to the project that will be submitted for reimbursement under Title XVIII or XIX.



Michael Vivoda
President and CEO, Cadence Health



Lawrence D. Bell
Vice President - Construction

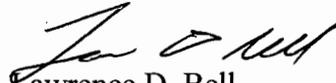

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**Delnor Hospital Comprehensive Cancer Center
CON Project #11-108
Attachment C**

This is to certify that at the completion of the Delnor Comprehensive Cancer Center project (CON Project #11-108) all terms of the permit, including project cost, square footage, services, etc., are in compliance.



Michael Vivoda
President and CEO, Cadence Health



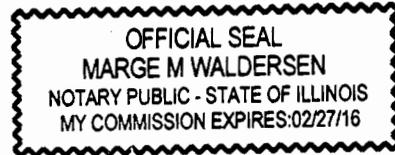
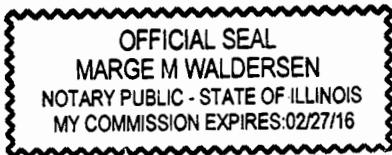
Lawrence D. Bell
Vice President - Construction



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Attachment C-1

Cadence Health
Delnor Comprehensive Cancer Center
CON Project # 11-108

Facility Square Footage Analysis

	CON PERMIT SQUARE FOOTAGE			FINAL SQUARE FOOTAGE		
	NEW	RENOVATION	TOTAL	NEW	RENOVATION	TOTAL
<i>Reviewable</i>						
Radiation Therapy	1,590	2,580	4,170	3,698	800	4,498
RT 2 Foundation	1,400	0	1,400	0	0	0
Infusion Therapy	8,066	647	8,713	8,386	0	8,386
Brachytherapy	2,005	0	2,005	1,835	0	1,835
Lab	1,733	0	1,733	2,193	0	2,193
Pharmacy	767	0	767	799	0	799
Total Reviewable	15,561	3,227	18,788	16,911	800	17,711
<i>Non-Reviewable</i>						
Physicians Offices	8,210	0	8,210	7,785	0	7,785
Time Share Suite	1,412	0	1,412	0	0	0
Public & Family	0	1,799	1,799	2,102	0	2,102
Administrative	134	0	134	394	0	394
Medical Staff	268	0	268	327	0	327
Staff Areas	1,011	1,196	2,207	1,761		1,761
Building Services	300	1,088	1,388	1,398	0	1,398
DGSF>>>>BGSF	2,690	731	3,421	3,556	0	3,556
Total Non-Reviewable	14,025	4,814	18,839	17,323	0	17,323
Total Square Footage	29,586	8,041	37,627	34,234	800	35,034

The final square footage for Moderization is less that the CON approved square footage since a major portion of the existing building was demolished and rebuilt anew because the cost, timeline and disruption to patient care were less than modernizing the existing building in-place. Accordingly, the final square footage for new construction is greater than the CON square footage.

Delnor Hospital Comprehensive Cancer Center
CON Project #11-108
Attachment D

Final Application and Certificate for Payment

The final Application and Certification for payment from the General Contractor (Walsh Construction Company) as per American Institute of Architects form G702 follows on Attachment D-1.

ATTACHMENT D-1

WALSH CONSTRUCTION COMPANY OF ILLINOIS

AIA DOCUMENT G702

TO OWNER:
 Cadence Health
 Delnor Community Hospital
 Geneva, IL 60134

PROJECT:
 Delnor Hospital Comprehensive Cancer Center
 304 Randall Road
 Geneva, IL 60134

FROM CONTRACTOR:
 Walsh Construction
 929 W. Adams
 Chicago, IL 60607

ARCHITECT:
 RTKL Associates Inc.
 200 S. Michigan Ave
 Chicago, IL 60604

PERIOD TO: 12/31/13
WCC Job No. 212069

DATE 2/3/2014
APPLICATION NO. 19

CONTRACT FOR: General Construction

CONTRACTOR'S APPLICATION FOR PAYMENT

Application is made for payment, as shown below, in connection with the Contract. Continuation Sheet, AIA Document G703, is attached.

The undersigned Contractor certifies that to the best of the Contractor's knowledge, information and belief the Work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by the Contractor for Work for which previous Certificates for Payment were issued and payments received from the Owner, and that current payment shown herein is now due.

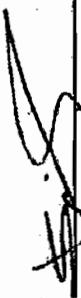
- 1. ORIGINAL CONTRACT SUM \$ 12,452,781
- 2. Net change by Change Orders \$ 1,018,319
- 3. CONTRACT SUM TO DATE (Line 1 + 2) \$ 13,471,100
- 4. TOTAL COMPLETED & STORED TO DATE (Column G on G703) \$ 13,471,100

- 5. RETAINAGE:
 - a. % of Completed Work \$ 0
 - (Column D + E on G703)
 - b. % of Stored Material \$
 - (Column F on G703)
 - Total Retainage (Lines 5a + 5b or Total in Column I of G703) \$ 0

- 6. TOTAL EARNED LESS RETAINAGE (Line 4 Less Line 5 Total) \$ 13,471,100
- 7. LESS PREVIOUS CERTIFICATES FOR PAYMENT \$ 13,233,880
- 8. CURRENT PAYMENT DUE \$ 237,220
- 9. BALANCE TO FINISH, INCLUDING RETAINAGE (Line 3 less Line 6) \$ 0

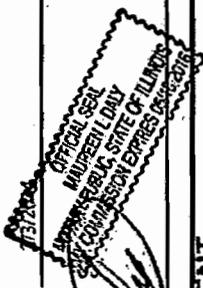
CHANGE ORDER SUMMARY	ADDITIONS	DEDUCTIONS
Total changes approved in previous months by Owner	971,611.00	0.00
Total approved this Month	46,708.00	0.00
TOTALS	1,018,319.00	0.00
NET CHANGES by Change Order	1,018,319.00	

CONTRACTOR:

By: 

Date: 2/3/2014

State of: Illinois County of: Cook
 Subscribed and sworn to before me this 2/3/14
 Notary Public: 
 My Commission expires: 5/10/2016



ARCHITECT'S CERTIFICATE FOR PAYMENT

In accordance with the Contract Documents, based on on-site observations and the data comprising the application, the Architect certifies to the Owner that to the best of the Architect's knowledge, information and belief the Work has progressed as indicated, the quality of the Work is in accordance with the Contract Documents, and the Contractor is entitled to payment of the AMOUNT CERTIFIED.

AMOUNT CERTIFIED \$ 237,220.00

(Attach explanation if amount certified differs from the amount applied. Initial all figures on this Application and omitte Continuation Sheet that are changed to conform with the amount certified.)
 ARCHITECT: RTKL

By:  Date: 2-3-14

This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the Contractor named herein. Issuance, payment and acceptance of payment are without prejudice to any rights of the Owner or Contractor under this Contract.