

E-007-11

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APR 21 2011

HEALTH FACILITIES &
SERVICES REVIEW BOARD

Rockford, Il. 61107
April 15, 2011

Dear Illinois Health Facilities and Services Review Board:

We are confident your board will give careful consideration to the possibility of a merger between Rockford Health System and OSF. There are many concerns that a merger of this magnitude presents to the Rockford community and surrounding areas. Each hospital has their own strengths and services that it provides to various specialties. RMH's neonatal unit, trauma services, ER, surgical units and surgery staff and operating rooms are second to none in Rockford. OSF provides the burn unit, cardiology services and various other specialties. My concern is a true monopoly of many services in Rockford eliminating choice of physicians or hospital where care is now provided. It was stated that OSF could close RMH in five years eliminating care on the west side of Rockford for residents there and also from many surrounding areas west of Rockford who prefer RMH. Also how will this monopoly of services affect Swedish American Hospital, who has tried to merge with other hospitals in the past. Excellent health care is already provided in Rockford. How will the physicians be affected—the ob-gyn physicians are concerned because OSF's beliefs and doctrines will govern the care they provide women now. Why does Rockford have to go backwards instead of forward and realize larger is not always better and that health care prices have been kept in check because of the competition and that would be eliminated. People come from all around the area now to our physicians and hospitals so that is not a legitimate argument for the merger. This will be a huge financial gain for OSF but please consider the residents of Rockford and surrounding areas and vote no to this merger. It has been stated that the CEO's of both hospitals would receive the same salaries after the merger but the community will be left with departure of physicians, loss of jobs, confusion of insurance benefits and possible loss of a great hospital. Thank you for considering the magnitude of such a merger in our community.

Sincerely yours

Patricia DeHaven

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Layton L. Hoel
1508 Sandy Point Dr.
Rockford, IL 61103-8833
815-877-2938
krabapple20@aol.com

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HEALTH FACILITIES &
SERVICES REVIEW BOARD

April 16, 2011

Illinois Health Facilities & Services
Review Board
525 W Jefferson St.
Second Floor
Springfield, IL 62761

Subject: Proposed OSF Health Care Acquisition of Rockford Health System

Dear Sirs,

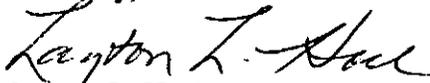
I respectfully request you deny the OSF acquisition for the following reasons;

1. OSF abandoned the poor peoples of Rockford and has limited medical services to such since they built their east side campus leaving such responsibility to Rockford Health System and Swedish American Hospital. This acquisition is an attempt to eliminate the competition and acquire the RHS pre-natal care unit. The cost of care to current RHS users will no doubt be increased.
2. Many jobs will be lost by Rockford citizens, i.e. management, computer services, accounting, billing and personnel services. This area cannot afford more economic disruption.
3. Current RHS users and non-Catholics will be required to accept the dictates of a religion which they do not believe in or find other doctors, service facilities and hospitals. My M.D. has already indicated he will consider early retirement should this acquisition be granted.
4. OSF will not recognize women's rights regarding birth control options or services. Today RHS doctors may prescribe condoms, IUDs and training in their use. The right to abortion will be ended for rape, incest, fetus abnormalities, to save the birth mother's life and economic reasons. All of this forced upon non-Catholics because the Pope and his hierarchy choose to discriminate against a mother's and women rights.
5. End-of -Life rights and legal documents will no longer be recognized as valid. An example of this is my mother's recent pacemaker replacement operation. Her doctor is on staff at an OSF clinic. He wished to perform the operation at OSF

hospital, but when the EOL question arose clinic personnel avoided the discussion of what would transpire if complications occurred during the procedure. Subsequently they suggested a doctor would perform the replacement at Swedish American Hospital so there would be no question regarding EOL. The procedure was successful and my 89 year old mother is set for another six years.

It is for these reasons plus the fact I have had excellent care by my doctor, and the medical staffs of both RHS clinics and hospital that I ask you to deny the OSF acquisition.

Sincerely,


Layton L. Hoel