



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

525 WEST JEFFERSON ST. • SPRINGFIELD, ILLINOIS 62761 • (217)782-3516 FAX: (217) 785-4111

November 18, 2015

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Bridget Orth
Northwestern Memorial Hospital
211 East Ontario Street
Chicago, Illinois 60611

RE: Change of Ownership Exemption
Exemption #: E-008-15, Valley West Community Hospital - Sandwich, Illinois
Exemption Holder: Northwestern Memorial HealthCare - KishHealth System - Valley West
Community Hospital
Owner of Physical Plant: Valley West Community Hospital
Entity to be licensed: Valley West Community Hospital

Dear Ms Orth:

On November 17, 2015, the Illinois Health Facilities and Services Review Board (State Board) approved your request for a Change of Ownership Exemption (Exemption). This approval was based upon the application's compliance with applicable provisions of 77 Ill. Adm. Code 1130.520.

The exemption is for Valley West Community Hospital - Sandwich, Illinois.

The entity to be licensed is Valley West Community Hospital.

The exemption involves change of 50% or more of the voting members of a not-for-profit corporation's board of directors that controls a health care facility's operations, license, certification or physical plant and assets. The acquisition price value is \$ 0.

If applicable, within 90 days of the closing date of the transaction, the exemption holder must certify that it did or did not complete the transaction according to the key terms detailed in the application. If any of the key terms of the transaction changed, a new application will be required. Exemption holders who submitted the final transaction document along with their application merely need to notify the State Board of the date the ownership changed.

Please be advised that the Exemption is not transferable or assignable and that the State Board's approval does not exempt the transaction from any other regulatory, certification or licensure requirements that may be applicable prior to this acquisition. Should the facility for which the Exemption was granted cease to be an existing health care facility as defined in 77 Ill. Adm. Code 1130.140, this exemption will be invalid.

Please contact State Board staff at 217-782-3516 with any questions.

Sincerely,

A handwritten signature in black ink that reads "Kathy Olson".

Kathy Olson, Board Chair
Illinois Health Facilities and Services Review Board