STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

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

MEMORANDUM

TO: Mike Constantino, Chief – Program Review Section
Division of Health Systems Development

FROM: Kathy Olson, Chairman
Illinois Health Facilities and Services Review Board

RE: Exemption #017-14

Facility: Crystal Spring Dialysis, Crystal Spring, Illinois

This is to advise you that I have reviewed the above-captioned exemption application with the requirements in 77 Ill. Adm. Code 1130. 520 and have determined the following:

✓ This application is in compliance with the requirements in 1130.520

_____ This application is to be reviewed by the Health Facilities Planning Board.

_____ This application is DENIED effective _____ because it does NOT comply with the requirements specified in Ill. Adm. Code 1130.520.

_____ Other actions as follows:

Kathy J. Olson 11/12/14

Kathy Olson, Chairman
Illinois Health Facilities
and Services Review Board

Date