



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

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

November 2, 2015

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Mr. Joe Ourth
Arnstein & Lehr, LLP
120 S. Riverside Plaza, Suite 1200
Chicago, Illinois 60606

RE: Change of Ownership Exemption
Exemption # E-033-15 St. James Recovery Center, Mokena, Illinois
Exemption Holder: Exemption Holder: SC Affiliates, LLC - Surgical Care Affiliates, LLC - Surgical Care Affiliates, Inc. - SCA Mokena Properties, LLC - Franciscan Alliance, Inc.
Owner of Physical Plant: SCA-Mokena Properties, LLC
Entity to be Licensed: Franciscan Alliance, Inc. d/b/a St. James Hospital and Health Center

Dear Mr. Joe Ourth:

On October 28, 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 James Recovery Center, Mokena, Illinois.

The entity to be licensed is : Franciscan Alliance, Inc. d/b/a St. James Hospital and Health Center.

The exemption involves the assignment or transfer of assets resulting in the issuance of a license to an entity different from the current licensee. The acquisition price or fair market 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, appearing to read "Kathy Olson".

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