



People You Know.
Extraordinary Care.

POLICY:	FINANCIAL ASSISTANCE POLICY		
OWNER:	DIRECTOR OF REVENUE CYCLE		
EFFECTIVE DATE: 3/29/2024			ORIGINAL EFFECTIVE DATE: 4/92
REGULATORY REFERENCE: INTERNAL REVENUE SERVICE SECTION 501r REPORTING AND THE ILLINOIS HOSPITAL UNINSURED PATIENT DISCOUNT ACT			HAM

I. Purpose:

Morris Hospital & Healthcare Centers (MHHC) is a not-for-profit, tax-exempt entity with a charitable mission of providing emergency and medically necessary health care services to residents of the City of Morris and the Hospital’s defined primary and secondary service area, regardless of their financial status and ability to pay. The purpose of this policy, Provision of Financial Assistance, is to ensure that processes and procedures exist for identifying and assisting patients whose care may be provided without charge or at a discount commensurate with their financial resources and ability to pay.

II. Overview:

In furtherance of its charitable mission, MHHC will provide both (i) emergency treatment to any person requiring such care; and (ii) medically necessary health care services to patients who are permanent residents of the State of Illinois (and others on a case-by-case basis) who meet the conditions and criteria set forth in this policy; in each case, without regard to the patients’ ability to pay for such care at all facilities (**Exhibit 7**).

It is the policy of MHHC to provide financial assistance (either free care or at discounted rates) to persons or families where: (i) there is limited or no health insurance available; (ii) the patient fails to qualify for governmental assistance (for example, Medicare or Medicaid); (iii) the patient cooperates with MHHC in providing the requested information demonstrating financial need, or other facts and circumstances readily demonstrate financial need; and (iv) MHHC makes an administrative determination that financial assistance is appropriate based on the patient’s ability to pay (as established by family income or based on criteria demonstrating presumptive eligibility) and the size of the patient’s medical bills.

MHHC will regularly review this policy to ensure that at all times it: (i) reflects the mission of MHHC; (ii) explains the decision processes of who may be eligible for financial assistance and in what amounts; and (iii) complies with all applicable state and federal laws, rules, and regulations concerning the provision of financial assistance to patients who are uninsured or otherwise eligible.

III. Nondiscrimination:

A. MHHC will render health care services, inpatient and outpatient, to all Illinois residents who are in need of emergency or medically necessary care, regardless of the ability of the patient to pay for such services and regardless of whether and to what extent such patients may qualify for financial assistance pursuant to this policy.

B. MHHC will not engage in any actions that discourage individuals from seeking emergency medical care, such as demanding that emergency department patients pay before receiving treatment or by permitting debt collection activities in the emergency

department or other areas where such activities could interfere with the provision of emergency care on a non-discriminatory basis.

IV. Definitions:

- A. Assets:** Any item of economic value owned by an individual, especially one that could be converted to cash. Examples are cash, securities, accounts receivable, inventory, equipment, a house (other than primary residence), a car, and other property. For these purposes, assets do not include a primary residence or other property exempt from judgment under Illinois law, or any amounts held in pension or retirement plans (although distributions and payments from such plans may be included as family income for purposes of this policy).
- B. Bad Debt Expense:** Uncollectible accounts receivable (where reasonable attempts to collect have been made), excluding contractual adjustments, arising from the failure to pay by patients: (i) whose health care has not been classified as financial assistance care; or (ii) who have qualified for financial assistance in the form of discounted care but have failed to pay the remaining balances due after application of discounts pursuant to this policy.
- C. Family:** The patient, his or her spouse, and his or her legal dependents according to Internal Revenue Service rules.
- D. Family Income:** The sum of a family's annual earnings and cash benefits from all sources before taxes, less payments made for child support. Family income includes gross wages, salaries, dividends, interest, Social Security benefits, workers' compensation, veterans' benefits, training stipends, military allotments, regular support from family members not living in the household (other than child support), government pensions, private pensions, insurance, annuity payments, income from rents, royalties, estates, trusts, and other forms of income.
- E. Financial Assistance:** Either full or partial reduction in charges to patients for emergency or medically necessary care, in the case of patients who are financially eligible, presumptively eligible, or medically indigent, as those terms are defined in this policy. Financial assistance does not include bad debt or contractual shortfalls from government programs, but may include insurance co-payments, deductibles, or both.
- F. Financially Eligible:** A patient whose family income is at or below 600% of the Federal Poverty Guidelines, as set forth in **Exhibit 1** hereto, as demonstrated based on factual information provided by the patient on the Financial Assistance Application.
- G. Good Faith Payment:** is a sum of money provided by the patient prior to services rendered or after receiving a statement. Any earnest money paid prior to receiving approval from MHHC will be non refundable and deem a good faith payment. Refunds will only occur for payments made after approval of financial assistance.
- H. Medically Indigent:** A patient whose medical or hospital bills after payment by a third-party payer exceed 20% of the patient's annual family income, and who is financially unable to pay the remaining bill. A patient who incurs catastrophic medical expenses is classified as medically indigent when payment would require

liquidation of assets critical to living or would cause undue financial hardship to the family support system.

- I. Indigent Patient:** A patient of MHHC who does not comply with one or more of the patient responsibilities set forth below to apply for financial assistance but who MHCC determines through other reliable means to be in need of financial assistance.
- J. Uninsured Patient:** A patient of MHCC who is not covered under a policy of health insurance and is not a beneficiary under a public or private health insurance, health benefit, or other health coverage program, including but not limited to high deductible health insurance plans, workers' compensation, accident liability insurance, or other third part liability insurance. A discount of 72.05% off of gross charges, is provided to all uninsured patients without requiring evidence of inability to pay. This discount is provided in accordance with the Illinois Uninsured Act and is calculated annually. If a patient is subsequently approved for financial assistance, the automatic discount will be reversed so that the full amount can be recognized as a charity allowance.
- K. Medically Necessary:** Any inpatient or outpatient hospital service, including pharmaceuticals or supplies provided by a hospital to a patient, covered under Medicare and determined by an active member of Morris Hospital's active medical staff to be medically necessary. Medically necessary services do not include: (i) non-medical services such as social and vocational services; or (ii) elective cosmetic surgeries (for these purposes, plastic surgery procedures designed to correct disfigurement caused by injury, illness, or congenital defect or deformity are not considered "elective").
- L. Presumptively Eligible:** A patient who has not submitted a completed Financial Assistance Application, but who nonetheless is subject to one or more of the following criteria:
- Homeless
 - Deceased with no estate
 - Mentally incapacitated with no one to act on his or her behalf
 - Medicaid eligible, but not on the date of service or for non-covered services
 - Enrolled in the following programs for low-income individuals having eligibility criteria at or below 200% of the Federal Poverty Guidelines:
 - Women, Infants and Children Nutrition Program (WIC)
 - Supplemental Nutrition Assistance Program (SNAP)
 - Illinois Free Lunch and Breakfast Program
 - Low Income Home Energy Assistance Program (LIHEAP)
 - Enrollment in an organized community-based program providing access to medical care that assesses and documents limited low-income financial status as a criterion for membership
 - Receipt of grant assistance for medical services
 - Personal bankruptcy within the last 12 months
 - Incarceration in a penal institution
 - Affiliation with a religious order and vow of poverty
 - Enrollment in the following programs for low-income individuals:
 - Temporary Assistance for Needy Families (TANF)
 - IHDA's Rental Housing Support Program

MHHC trained Financial Service Representatives will routinely review the foregoing criteria with patients, before asking patients to complete the Financial Assistance Application. MHHC may also utilize other systems to determine presumptive eligibility, such as the Avadyne FAsTAG System. Patients who meet any of the foregoing criteria for presumptive eligibility will be deemed to be eligible for a 75% to 100% discount, and will not be asked or required to submit a Financial Assistance Application.

V. Eligibility for Financial Assistance:

- A.** There are three ways a patient may be deemed to have financial need to be eligible for financial assistance. (i) be a determination that the patient's Family income is below certain federal poverty guidelines ("income based discount"); (ii) by a determination that the patient's emergency or other medically necessary care expenses exceed a certain percentage of the patient's annual Family Income ("Medically Indigent"); (iii) if MHHC learns of certain patient circumstances that by their nature indicate the patient is indigent ("Presumptive Eligibility") including but not limited to passive eligibility (no active participation) using 3rd party technology data reporting to determine eligibility .
- B.** A determination of qualification for financial assistance will cover services provided by MHHC on an inpatient or outpatient basis. For these purposes, the policy also covers the rendering of professional services by physicians and other providers employed directly by MHHC, as listed on **Exhibit 3**. A determination of qualification for financial assistance will also cover professional services rendered by the other physicians and providers set forth on **Exhibit 4**, all of whom participate in the provision of emergency and/or medically necessary care at MHHC and have agreed to be covered by this policy. Any other physicians or providers of care at Morris Hospital are not subject to this policy listed in Exhibit 5 and, accordingly, each patient will be responsible for satisfaction or resolution of any bills issued by such physicians or providers for their professional services.
- C.** At the time of the initial patient interview, the Financial Service Representative will gather routine demographic information and information regarding all existing third-party coverage. In cases where a patient has limited or no third-party coverage, the Financial Service Representative will determine if the patient qualifies for medical assistance from other existing financial resources such as Medicare, Medicaid, KidCare, FamilyCare, Will-Grundy Medical Clinic, or other state and federal programs. The Financial Service Representative or outside vendor (Elevate) will be available to assist the patient with enrolling in any of the foregoing governmental payment programs that may be available. If the patient refuses to apply for or provide information necessary to the application process, he or she will be ineligible for financial assistance pursuant to this policy. If the application(s) to the above-mentioned medical financial assistance resource(s) is/(are) denied, not adequate, or was/(were) previously denied, consideration for financial assistance will then be given.
- D.** In cases where third-party coverage (including private insurance or payment by governmental program) is nonexistent or likely to be inadequate, the Financial Service Representative will inform the patient of the availability of Financial Assistance. Patients seeking financial assistance will be asked to complete the Financial Assistance Application attached as **Exhibit 2** to this policy. Copies of the application form are available from any Financial Service Representative and at

<https://www.morrishospital.org/patients-visitors/patients/billing-insurance/financial-assistance/application/>. Applications may be completed directly by the patient, by the patient's guarantor and/or other legal representative, or by a Financial Service Representative based on information derived from any of the foregoing through an interview either in person or by telephone, or reliable information provided in writing. If assistance is needed with gathering necessary information or materials requested as part of the Financial Assistance qualifying process, patients are encouraged to contact one of the Hospital's trained Financial Service Representatives at (815)942-2932. Financial Service Representatives may also assist patients with assessing their financial situations, gathering information requested by the Hospital, and assisting with similar tasks.

E. Patients completing the Financial Assistance Application must return the signed form to through any of the following measures:

- Hand-deliver the form to a Patient Service Representative; to the cashier or Financial Assistance Office at Morris Hospital, 150 W. High St., Morris, IL (First Floor); or to the Patient Registration Desk at any of the Healthcare Centers
- Mail to Morris Hospital & Healthcare Centers, Attn: Patient Financial Assistance Office, 150 W. High St., Morris, IL 60450
- E-mail the form to financialassistance@morrishospital.org
- Fax: 815-941-2476 or 815-705-1738

Financial Assistance Applications will be considered if received at any time during the 240-day period following the first post-discharge billing statement issued by MHHC to the patient for such care.

F. Eligibility for financial assistance is conditioned upon the patient's provision of complete and accurate information on the Financial Assistance Application set forth as **Exhibit 2**, and the patient's timely cooperation throughout the financial assistance application process. In connection with determining a patient's eligibility for financial assistance, MHHC will not request information other than as described on **Exhibit 2**, although patients may voluntarily provide additional information that they believe to be pertinent to eligibility. If MHHC contacts the patient to request missing information, the patient will have a period of 30 days to respond. Failure to respond within that 30-day period will result in the Application being suspended from further processing; the patient may re-activate the Application by providing the requested information at any time during the 240-day period following the first post-discharge statement issued by MHHC to the patient for such care. If a patient provides information that is inaccurate or misleading, he or she may be deemed ineligible for financial assistance and, accordingly, may be expected to pay his or her bill in full.

G. Once a completed Financial Assistance Application is received, the Financial Service Representative will review the application and calculate the appropriate discount to be applied using Exhibit 1 (Financial Assistance Guidelines). Patients who are determined to be presumptively eligible will be processed for financial assistance without need for completion of the Financial Assistance Application or other additional information from the patient.

H. Patients who are uninsured and who do not qualify for financial assistance may contact the Hospital to discuss payment options, including the availability of a

payment plan. Financial Service Representatives will inform such patients of any other discounts that may be available under other Hospital policies (including the [MHHC Billing and Collections Practices Policy](#)).

VI. Determination and Notification Regarding Financial Assistance:

- A.** In the case of patients who are determined to be financially eligible for financial assistance, patients with family income of at or below 200% of the current Federal Poverty Guidelines will receive for a 100% reduction in the patient portion of billed charges (*i.e.*, full write-off), as set forth on **Exhibit 1**. Patients with family income of between 201% and 600% of the current Federal Poverty Guidelines will receive a 75% discount on the patient portion of the billed charges, as indicated on **Exhibit 1**. In the case of patients who are determined to be medically indigent, the appropriate discount will be determined by the Director of Revenue Cycle and the Chief Financial Officer after review on a case-by-case basis. Patients who are determined to be presumptively eligible for financial assistance will receive a 75% or 100% reduction in charges. MHHC will refund to the individual any amount he or she has paid for care after the application was approved and discount applied that exceeds the amount due after applying the discount, unless such excess amount is less than \$9.99.
- B.** The applicable discount percentage from **Exhibit 1** will be applied to the gross charges otherwise billable to the patient. Such discounts have been established in a manner intended to comply with both: (i) Illinois law, which limits amounts that may be billed to the patient to 135% of the Hospital's costs, and (ii) applicable Federal law, which prohibits the Hospital from billing a patient eligible for financial assistance more than the amounts generally billed ("AGB") by the Hospital to patients with third-party coverage, calculated in this case using the look-back method set forth in applicable Treasury Regulations, considering amounts allowed by Medicare and commercial payors during a prior 12-month measurement period. The discount percentages set forth on **Exhibit 1** may be adjusted periodically (and at least annually) to ensure that such percentages comply with the foregoing standards under Illinois and Federal law; any such adjustments will be effectuated through the attachment of an updated **Exhibit 1** to this Policy, which will be signed and dated by the Chief Financial Officer. The Hospital will begin applying the adjusted discount percentages not later than 120 days after the end of the 12-month measurement period with respect to which the Hospital's adjusted AGB has been calculated.
- C.** The provision of financial assistance (*i.e.*, the amount of the discount or write-off) of above \$2,500 and less than \$15,000 will require approval from the Billing Manager. Above \$15,000 and less than \$100,000 will require approval from the Director of Revenue Cycle. The provision of financial assistance of greater than \$100,000 will require the approval of the Chief Financial Officer.
- D.** Within 60 days after submission of a completed Financial Assistance Application, MHHC will determine whether the patient qualifies for financial assistance based on financial eligibility or medical indigence and will notify the patient in writing of such determination and the amount of the discount to be provided. No patient may qualify for both the Income Based Discount and Medical Indigency Discount. Rather, MHCC will provide to the qualifying patient the better of the two discounts applied to the patient's emergency and other medically necessary care. Unless otherwise determined by the Chief Financial Officer, the Hospital need not notify patients determined to qualify for financial assistance based on presumptive eligibility. In the event that the Hospital determines a patient *not* to qualify for financial assistance, the Hospital will

notify the patient in writing of such determination, including the basis for the denial, and will inform the patient of an opportunity to request reconsideration. Any such request must be submitted to the Hospital in writing within 30 days of the Hospital's notification letter, and may set forth the patient's position regarding the denial and any extenuating circumstances not fully documented in the original Financial Assistance Application. Each request for reconsideration will be evaluated by the Director of Revenue Cycle and the Chief Financial Officer, with a written response provided to the patient within 30 days of the request.

- E. Except as provided below, all determinations of qualification for financial assistance will continue in effect for 12 months from the first date of services subject to the determination. At the end of the qualification period, if a patient has new balances not covered under the previous determination, the patient will have to re-apply for Financial Assistance. Accordingly, if a patient has qualified for financial assistance within the last 12 months and the patient's financial circumstances, family size, and insurance coverage have not changed, the patient will be deemed to have qualified for financial assistance with respect to additional emergency or medically necessary care, without having to submit a new Financial Assistance Application. However, if a patient has qualified for financial assistance but then experiences a material change in his or her financial circumstances and/or insurance status that may impact his or her continued qualification for financial assistance, the patient will be expected to communicate that change to MHHC within 30 days or, in any event, prior to obtaining further healthcare services. Alternatively, MHHC may request an update of the information provided on the Financial Assistance Application and, based on such updated information, may re-evaluate the patient's continued qualification.

VII. Impact on Billing and Collection Process:

- A. Patients qualifying for discounted, but not free, care will be notified in writing regarding any remaining balance due. The patient will be asked to contact Meduit to arrange a payment plan if the patient is unable to pay the balance in full after the discount has been applied. Any such remaining balances will be treated in accordance with Patient Accounts policies regarding self-pay balances. Payment terms will be established on the basis of disposable family income. If notified by a patient that such patient has qualified for financial assistance within the past year, MHHC will not seek to collect more than 25% of a patient's family income during a 12-month period, unless the patient has substantial assets *other than* his or her primary residence or retirement assets. If the patient has been sent to a collection agency, then MHHC will notify the collection agency of the discount, require the collection agency to lower the patient balance due, and if no patient balance due remains, will remove the patient from the collection agency. It is the patients responsibility to contact the Financial Assistance Coordinator on any new balances received to have the approved financial assistance discount applied.
- B. In the event that a patient qualifies for financial assistance but fails to timely pay the remaining balance due (including, if applicable, per the terms of the agreed-upon payment plan), MHHC may take any of the actions set forth in the MHHC Billing and Collection Policy, a copy of which is available at <http://www.morrishospital.org/patients-visitors/billing-insurance/>. Consistent with the Billing and Collection Policy, MHHC will not undertake any extraordinary collection actions (as defined in that Policy) without first making reasonable efforts to determine a patient's eligibility for financial assistance pursuant to this policy.

VIII. Publication:

- A.** It is the policy of MHHC that the existence and terms of this policy be made widely available to residents of the Hospital's primary and secondary service areas, consistent with the specific provisions of both Illinois and Federal law. In furtherance of the foregoing, the Hospital will utilize and widely distribute the plain-language summary attached as **Exhibit 5** to this Policy. Copies of such plain-language summary (i) will be included in patient registration materials and inpatient handbooks, (ii) will be offered to each patient as part of the intake or discharge process, and (iii) will be posted on the Hospital's website, along with this Policy and the Financial Assistance Application, in a prominent and easily accessible location. The plain-language summary will be available in English and any other language that is the primary language of the lesser of (i) 1,000 individuals, or (ii) 5% of the population within the Hospital's primary and secondary service areas.
- B.** MHHC will conspicuously post, in the admission and registration areas of the Hospital as well as the Emergency Department, signage providing information regarding the availability of financial assistance and describing the application process. Such signage will include the following statement: *You may be eligible for financial assistance under the terms and conditions the hospital offers to qualified patients. For more information, contact the Patient Accounting Office at (815)942-2932.* Such signs will be in both English and any other language that is the primary language of at least 5% of the patients served by the Hospital annually. Such signage will be posted in the Healthcare Centers and other areas throughout the Hospital offering meaningful visibility.
- C.** MHHC will cause each billing statement sent to a patient to include a conspicuous statement regarding the availability of financial assistance, including (i) a phone number for information about this policy and the application process, and (ii) a website address where this policy, the Financial Assistance Application, and the plain-language summary are available. As provided in the Billing and Collection Policy, if the Hospital intends to undertake any extraordinary collection action (as defined in the Billing and Collection Policy), the Hospital will ensure that at least one billing statement includes a copy of the plain-language summary of this policy, as set forth on **Exhibit 6**, with such copy provided at least 30 days prior to undertaking the anticipated extraordinary collection action.

IX. Budgeting, Recordkeeping, and Reporting:

- A.** The Chief Financial Officer will ensure that reasonable financial assistance, including both free care and discounted charges, is included in the annual operating budget of MHHC. The budgeted amount will not act as a stopping point in providing financial assistance, but will serve as a projection to aid in planning for the allocation of resources.
- B.** MHHC will cause completed Financial Assistance Applications (along with required supporting information) to be maintained in Patient Accounting Office records. Such records will also reflect information as to whether such applications were approved or denied, along with the handling of any requests for reconsideration.
- C.** Financial assistance provided by MHHC pursuant to this Policy will be calculated and reported annually as required under applicable Illinois and Federal law. Except as

otherwise specifically permitted based on context, MHHC will report its financial assistance provided to qualifying patients under this policy using the actual cost of services provided based on the total cost-to-charge ratio derived from the Hospital’s Medicare cost report (and not the actual charges for the services).

X. Confidentiality:

MHHC recognizes that the need for financial assistance may be a sensitive and deeply personal issue for patients. Confidentiality of information and preservation of individual dignity will be maintained for all who seek financial assistance pursuant to this policy. No information obtained in the patient’s financial assistance application may be released except where authorized by the patient or otherwise required by law.

XI. Staff Information/Training:

A. MHHC will cause all employees in the Patient Accounting Office, Patient Registration Office, and Healthcare Centers to be fully versed in this policy, to have access to this policy as well as the plain-language summary and Financial Assistance Application forms, and to be able to direct questions to the appropriate Hospital office or representative.

B. MHHC will cause all staff members with public and patient contact to be adequately trained regarding the basic information related to this policy and procedures. They will also be able to direct questions regarding this policy to the appropriate Hospital office or representative.

XV. Title and Transfer Text

Please also reference the following policies: Billing and Collection Practices Policy, and Community Benefit Reporting Policy.

Forms:

[Financial Assistance Application](#)

APPROVAL:

David J. Bzdill **Date**
Chairman of the Board

Michael Lawrence **Date**
Chief Financial Officer

Thomas J. Dohm **Date**
President and CEO

EXHIBIT 1

Financial Assistance Guidelines

Family or household Size	100% of 2024 FPG	200% of 2024 FPG	300% of 2024 FPG	400% of 2024 FPG	600% of 2024 FPG
	Free Care	Free Care	75% Discount	75% Discount	75%* Discount
1	\$15,060	\$30,120	\$45,180	\$60,240	\$90,360
2	\$20,440	\$40,880	\$61,320	\$81,760	\$122,640
3	\$25,820	\$51,640	\$77,460	\$103,280	\$154,920
4	\$31,200	\$62,400	\$93,600	\$124,800	\$187,200
5	\$36,580	\$73,160	\$109,740	\$146,320	\$219,480
6	\$41,960	\$83,920	\$125,880	\$167,840	\$251,760
7	\$47,340	\$94,680	\$142,020	\$189,360	\$284,040
8*	\$52,720	\$105,440	\$158,160	\$210,880	\$316,320

* Add \$5,380 for each additional person above 8 household occupants

** The foregoing discount percentage has been established in a manner intended to comply with both (i) Illinois Hospital Uninsured Patient Discount Act, which limits amounts that may be billed to the patient to 135% of the Hospital’s costs, and (ii) applicable Federal law, which provides that the Hospital may not bill a patient eligible for financial assistance more than the amounts generally billed (“AGB”) by the Hospital to patients who have insurance covering such care. The Hospital has calculated its AGB using the look-back method set forth in applicable Treasury Regulations, considering amounts paid by Medicare and commercial payors. Such calculation resulted in the following:

AGB% = (SUM of Claims Allowed Amount)/(Sum of Gross Charge for those claims
 The Allowed Amount is the total charges less contractual adjustments. The calculation includes Medicare fee for service and commercial payers. It excludes: Medicaid, Medicaid Pending, workers compensation, and self-pay payment rates.

For the initial period, the AGB percentage is 24.9%

MHHC will recalculate its AGB periodically (and at least annually) and, based thereon, will adjust the discount percentages set forth above. Any such adjustments will be effectuated through a revision to this **Exhibit 1**, which will be signed and dated by the Chief Financial Officer.

Signed: _____

Print Name: _____

Date: _____

EXHIBIT 2

Financial Assistance Application

EXHIBIT 3

Physicians and Other Providers Employed/Contracted by Morris Hospital & Healthcare Centers

<u>Last Name</u>	<u>First Name</u>	<u>Degree</u>	<u>Specialty</u>
Amin	Hetal	MD	Allergy & Immunology
Ahmed	Syed	MD	Cardiovascular Disease
Ghanim	Mostafa	MD	Cardiovascular Disease
Menz	Mary	DO	Cardiovascular Disease
Saeed	Athar	MD	Cardiovascular Disease
Wix	Hershel	MD	Cardiovascular Disease
Chalisa	Nuzhat	MD	Endocrinology, Diabetes and Metabolism
Ciechna	Scott	MD	Family Medicine
Connolly	Mary	MD	Family Medicine
Jones	Jennifer	MD	Family Medicine
Kao	Colin	DO	Family Medicine
Lawton	Bradley	MD	Family Medicine
Passerman	Mark	DO	Family Medicine
Syed	Hassnain	MD	Family Medicine
Tanzi	Jeffrey	DO	Family Medicine
Thomas	Jennifer	MD	Family Medicine, Addiction Medicine
Bolden	John	MD	Infectious Disease
Analytis	Spyro	MD	Internal Medicine
Comfort	Charles	MD	Internal Medicine
Fochesatto Filho	Luciano	MD	Internal Medicine
Habib	Ishtiaq	MD	Internal Medicine
Haque	Kashif	MD	Internal Medicine
Khan	Aftab	MD	Internal Medicine
Majid	Mahreen	MD	Internal Medicine
Peplos	Olga	MD	Internal Medicine
Roumeliotis	Peter	MD	Internal Medicine
Saed	Mohammed	MD	Internal Medicine
Schiazza	Sarah	DO	Internal Medicine
Tiwari	Kanchan	MD	Internal Medicine
Howd	Dana	MD	Internal Medicine, Pediatrics
Moy	Lawton	MD	Internal Medicine, Pediatrics
Vermillion	David	MD	Internal Medicine, Pediatrics
Analytis	Peter	MD	Neurology
Mezo	Isaac	MD	Neurology
Blough	Ashley	NP	Nurse Practitioner
Bohland	Amy	NP	Nurse Practitioner
Bojak	Sarah	NP	Nurse Practitioner
Bunton	Barbara	NP	Nurse Practitioner
Cacello	Elizabeth	NP	Nurse Practitioner
Franzetti	Shawn	NP	Nurse Practitioner
Freschi-Lijewski	Breanna	NP	Nurse Practitioner

Frye	Jennifer	NP	Nurse Practitioner
Greggain	Jennifer	NO	Nurse Practitioner
Healy	Laura	NP	Nurse Practitioner
Henline	Stefanie	NP	Nurse Practitioner
Jaegle	Constance	NP	Nurse Practitioner
Johnson	Stacey	NP	Nurse Practitioner
Miller	Christopher	NP	Nurse Practitioner
Miller	Heidi	NP	Nurse Practitioner
Olsen	Diana	NP	Nurse Practitioner
Pettry-Soto	Sarah	NP	Nurse Practitioner
Piper	Anna	NP	Nurse Practitioner
Pruss	Sherese	NP	Nurse Practitioner
Seplak	Nina	NP	Nurse Practitioner
Sieling	Julie	NP	Nurse Practitioner
Spoon	Austin	NP	Nurse Practitioner
Staker	Amy	NP	Nurse Practitioner
Stuedemann	Taelor	NP	Nurse Practitioner
Suste	Kaylynn	NP	Nurse Practitioner
Todd	Angela	NP	Nurse Practitioner
Ulivi	Kathleen	NP	Nurse Practitioner
Verchimak	Linda	NP	Nurse Practitioner
Zuelke	Diane	NP	Nurse Practitioner
Aramburo Paredes	Rosa	MD	Obstetrics & Gynecology
Chen	Andrea	MD	Obstetrics & Gynecology
Fitzgibbon	Mary	MD	Obstetrics & Gynecology
Ochoa	Victoria	DO	Obstetrics & Gynecology
Setrini-Best	Leticia	MD	Obstetrics & Gynecology
Toussaint	Douglas	DO	Obstetrics & Gynecology
Ali	Mir	MD	Orthopaedic Surgery
Eldib	Ahmed	MD	Orthopaedic Surgery
Kuo	Rebecca	MD	Orthopaedic Surgery
Meyer	Raymond	MD	Orthopaedic Surgery
Perona	Paul	MD	Orthopaedic Surgery
Rezin	Keith	MD	Orthopaedic Surgery
Treacy	Stephen	MD	Orthopaedic Surgery
Williams	Robert	MD	Orthopaedic Surgery
Aijaz	Farrukh	MD	Pathology - Clinical
Cataldo	Kimberley	MD	Pathology - Clinical
Lugo	Hector	MD	Pathology - Clinical
Anjum	Darakhshan	MD	Pediatrics
Best	Ian	MD	Pediatrics
Hill	Melissa	MD	Pediatrics
Rahman	Faiz	MD	Pediatrics
Brozovich	Crystal	PA	Physician Assistant
Carls	Lacey	PA	Physician Assistant
Colby	Rachel	PA	Physician Assistant

Davis	Sherri	PA	Physician Assistant
Jakubonis	Lukas	PA	Physician Assistant
Lopez	Carrie	PA	Physician Assistant
Pearson	Kyle	DPM	Podiatry
Cheng	Suzan	MD	Radiation Oncology
Hedayati	Hadi	MD	Rheumatology
Raval	Deena	DO	Rheumatology
Said	Belal	MD	Rheumatology
Alshoubi	Abdhai	MD	Anesthesiology
Haridas	Pankaj	MD	Anesthesiology
Magbegor	Saint	MD	Anesthesiology
Podraza	Adamina	MD	Anesthesiology
Radden	Homer	MD	Anesthesiology
Rogozinski	Thaddeus	MD	Anesthesiology
Singh	Priti	MD	Anesthesiology
Stanziola	Alex	MD	Anesthesiology
Reese	Sterling	MD	Cardiovascular Disease
Alazzam	Hia	CRNA	Certified Registered Nurse Anesthetist
Aleman	Estela	CRNA	Certified Registered Nurse Anesthetist
Anderson	Theresia	CRNA	Certified Registered Nurse Anesthetist
Bermea	Daniel	CRNA	Certified Registered Nurse Anesthetist
Bryant	Karen	CRNA	Certified Registered Nurse Anesthetist
Budhwani	Laila	CRNA	Certified Registered Nurse Anesthetist
Farcus	Matthew	CRNA	Certified Registered Nurse Anesthetist
Giacalone	Deana	CRNA	Certified Registered Nurse Anesthetist
Karim	Karim	CRNA	Certified Registered Nurse Anesthetist
Newman	Kelsey	CRNA	Certified Registered Nurse Anesthetist
Schmidgall	Amanda	CRNA	Certified Registered Nurse Anesthetist
Springer	Patrick	CRNA	Certified Registered Nurse Anesthetist
Whitman	Melissa	CRNA	Certified Registered Nurse Anesthetist
Zenz	Julieanne	CRNA	Certified Registered Nurse Anesthetist
Green	Alexander	MD	Clinical Cardiac Electrophysiology
Ringwala	Sukit	MD	Clinical Cardiac Electrophysiology
Aschkenasi	Carl	MD	Diagnostic Radiology
De Castro	Carlos	MD	Diagnostic Radiology
Atchison	Sean	DO	Emergency Medicine
Bialas	Margaret	MD	Emergency Medicine
Fosses Vuong	Michaelia	DO	Emergency Medicine
Gibson	Mark	MD	Emergency Medicine
Gilles	Maxime	MD	Emergency Medicine
Kryza	Michael	MD	Emergency Medicine
Teague	David	MD	Emergency Medicine
Thompson	John	MD	Emergency Medicine
Williamson	John	DO	Emergency Medicine
Wojdyla	Mark	MD	Emergency Medicine
Cella	Jenna	DO	Family Medicine

Demask	John	DO	Family Medicine
Wrona	Robert	DO	Family Medicine
Siddiqui	Hadi	DO	Gastroenterology
Bae	Sanggyu	MD	Hematology & Oncology
Kittaneh	Muaiad	MD	Hematology & Oncology
Ali	Basil	MD	Internal Medicine
Mills	Sarah	DO	Internal Medicine
Okafor	Kenosa	MD	Internal Medicine
Patel	Nijal	MD	Internal Medicine
Sharma	Navneesh	MD	Internal Medicine
Moore	Omar	MD	Neurology
Schaublin	Greg	MD	Neurology
Shen	Jason	MD	Neurology
Thomas	George	MD	Neurology
Carney	Joseph	NP	Nurse Practitioner
Eddy	Samantha	NP	Nurse Practitioner
Pertile	Joy	NP	Nurse Practitioner
Rivara	Stacy	NP	Nurse Practitioner
Rivers	Andi	NP	Nurse Practitioner
Knepp	Marc	MD	Pediatric Cardiology
Bruno	Matthew	PA	Physician Assistant
Keener	Brenda	PA	Physician Assistant
Olson-Geier	Kate-Lynn	PA	Physician Assistant
Alter	Mark	MD	Psychiatry
Barclay	James	MD	Psychiatry
Brewer	Jeremiah	DO	Psychiatry
DiVincenzo	Joseph	MD	Psychiatry
Ekeanya	Nora	DO	Psychiatry
Euler	Dillon	MD	Psychiatry
Evans	Jamie	MD	Psychiatry
Fahrmeier	Mary	MD	Psychiatry
Fredrickson	Abby	MD	Psychiatry
Freeman	Thomas	MD	Psychiatry
Hanrahan	David	MD	Psychiatry
Ikelheimer	Douglas	MD	Psychiatry
Lampen	Rhonda	MD	Psychiatry
Niedzwiecki	Matthew	MD	Psychiatry
Norrell	Nelly	MD	Psychiatry
Pairitz	Anita	MD	Psychiatry
Pinchuck	Curt	MD	Psychiatry
Prest	Lauren	DO	Psychiatry
Severson	Karen	MD	Psychiatry
Smith	Elton	MD	Psychiatry
Stridiron	Marissa	MD	Psychiatry
Kiel	Krystyna	MD	Radiation Oncology
Agrawal	Gautam	MD	Radiology, General

Benedetti	Nancy	MD	Radiology, General
Bramlette	James	MD	Radiology, General
Brus-Ramer	Marcel	MD	Radiology, General
Carrodeguas	Emmanuel	MD	Radiology, General
Chang	Wilson	MD	Radiology, General
Cheung	Lawrence	MD	Radiology, General
DeNucci	Christopher	MD	Radiology, General
Desai	Naman	MD	Radiology, General
Farag	Mitchell	MD	Radiology, General
Fong	Nepenthe	MD	Radiology, General
Giannini	Marchelle	MD	Radiology, General
Gosselin	Marc	MD	Radiology, General
Hsu	Raymond	MD	Radiology, General
Hura	Stefan	MD	Radiology, General
Isa	Furquaan	MD	Radiology, General
Jachec	Michael	MD	Radiology, General
Johanek	Andrew	DO	Radiology, General
Johnson	Gregory	MD	Radiology, General
Kaleel	Mohammed	MD	Radiology, General
Kalthia	Rupesh	MD	Radiology, General
Kelley	Russell	MD	Radiology, General
Kim	Brian	MD	Radiology, General
Laguna	Benjamin	MD	Radiology, General
Li	Zhixi	MD	Radiology, General
Lobert	Philip	MD	Radiology, General
McWilliams	Sebastian	MD	Radiology, General
Moreno	Yvonne	MD	Radiology, General
Oshmyansky	Alexander	MD	Radiology, General
Patel	Biren	MD	Radiology, General
Pham	Tu	MD	Radiology, General
Powell	Anthony	MD	Radiology, General
Somvanshi	Rahul	MD	Radiology, General
Symanski	Richard	DO	Radiology, General
Thompson	Zachary	MD	Radiology, General
Tsai	Salina	MD	Radiology, General
Tye	Grace	MD	Radiology, General
Wang	Susan	MD	Radiology, General
Phillips	Nicole	RNFA	Registered Nurse First Assistant
Bailey	Leslie	SA	Surgical First Assistant
Chaplin	Robert	SA	Surgical First Assistant
Daschner	Sarah	RNFA	Surgical First Assistant
Ingram	Dawn	SA	Surgical First Assistant
Riman	Amit	SA	Surgical First Assistant
Tallman	Cynthia	RNFA	Surgical First Assistant
Zarbock	Brian	SA	Surgical First Assistant

EXHIBIT 4

Other Physicians and Providers with privileges at Morris Hospital Covered by this Policy

<u>Last Name</u>	<u>First Name</u>	<u>Degree</u>	<u>Specialty</u>
Abdul-Karim	Ahmad	MD	Cardiovascular Disease
Al Muradi	Hazem	MD	Cardiovascular Disease
Alhawasli	Hazem	MD	Cardiovascular Disease
de la Hera	Aristides	MD	Cardiovascular Disease
DeGirolami	Daniele	MD	Cardiovascular Disease
Dia	Abdulrahman	MD	Cardiovascular Disease
Elgar	Robert	DO	Cardiovascular Disease
Jain	Parag	MD	Cardiovascular Disease
Kolyvas	Chris	MD	Cardiovascular Disease
Lahey	Ryan	MD	Cardiovascular Disease
Lertsburapa	Kirkeith	MD	Cardiovascular Disease
Martini	Muawia	MD	Cardiovascular Disease
Ramadurai	Govind	MD	Cardiovascular Disease
Sankari	Abdulhamid	MD	Cardiovascular Disease
Shroff	Sunil	MD	Cardiovascular Disease
Sumida	Colin	MD	Cardiovascular Disease
Yi	Jong	MD	Cardiovascular Disease
Jenkins	Cary	MD	Dermatology
Zuberi	Meiraj	MD	Endocrinology, Diabetes and Metabolism
Jurak	Daniel	DO	Family Medicine
Rotnicki	Richard	DO	Gastroenterology
Lee	Choongkoon	MD	Internal Medicine
Pedraza	Gustavo	MD	Internal Medicine
Shahbain	Abdul-Hamid	MD	Internal Medicine
Ahmed	Naila	MD	Nephrology
Gurfinchel	Aaron	MD	Nephrology
Kisiel	Beata	MD	Nephrology
Kravets	Z. Teresa	MD	Nephrology
McFadden	David	MD	Nephrology
Nagarkatte	Preeti	MD	Nephrology
Sharma	Ankur	MD	Nephrology
Bennett	Ivona	NP	Nurse Practitioner
DeWaele- Guzman	Lucinda	NP	Nurse Practitioner
Dubik	Jayci	NP	Nurse Practitioner
Durham	Trisha	NP	Nurse Practitioner
Dworsky	Marguerite (Meg)	NP	Nurse Practitioner
Gonzalez	Dawn	NP	Nurse Practitioner
Kammin	Evelyn	NP	Nurse Practitioner
Rogers	Stacey	NP	Nurse Practitioner

Lelis	Eligijus	MD	Ophthalmology
Rassouli	Majid	DO	Ophthalmology
Marino	Angelo	OD	Optometry
Ortiz	Timothy	OD	Optometry
Bartindale	Matthew	MD	Otolaryngology
Chung	Sung	MD	Otolaryngology
DiVenere	Scott	MD	Otolaryngology
Gartlan	Michael	MD	Otolaryngology
Mehta	Rajeev	MD	Otolaryngology
Patel	Ankit	MD	Otolaryngology
Weishaar	Jeffrey	MD	Otolaryngology
Estilo	Maria	MD	Pain Medicine, Pain Medicine
Khan	Farooq	MD	Pain Medicine, Pain Medicine
Rehman	Atiq	MD	Pain Medicine, Pain Medicine
Yano	Shingo	MD	Pain Medicine, Pain Medicine
Muangmingsuk	Sunthorn	MD	Pediatric Cardiology
Saroli	Tania	MD	Pediatric Cardiology
Siddiqui	Saad	MD	Pediatric Cardiology
Johnson	Richard	MD	Pediatrics
Hung	Ming	MD	Physical Medicine & Rehabilitation
Aguilar	Jeffrey	PA	Physician Assistant
Burt	Tripti	MD	Plastic Surgery
Will	Neena	MD	Plastic Surgery
Bishop	Paul	DPM	Podiatry
Fox	Howard	DPM	Podiatry
MacNab	Robert	DPM	Podiatry
Rappette	Thomas	DPM	Podiatry
Agha	Ahmad	MD	Pulmonary Disease
Katilius	Marius	MD	Surgery (General Surgery)
Kokoszka	Joseph	MD	Surgery (General Surgery)
Oswalt	Kristopher	MD	Surgery (General Surgery)
Wojcik	Robert	MD	Surgery (General Surgery)
Wu	Jonathan	MD	Surgery (General Surgery)

EXHIBIT 5

Other Physicians and Providers Providing Care at Morris Hospital Not Covered by this Policy

First Name	Last Name	Degree	Primary Specialty
John	Dongas	MD	Cardiovascular Disease
Chris	Kolyvas	MD	Cardiovascular Disease
Colin	Sumida	MD	Cardiovascular Disease
Govind	Ramadurai	MD	Cardiovascular Disease
Robert	Elgar	DO	Cardiovascular Disease
Muawia	Martini	MD	Cardiovascular Disease
Parag	Jain	MD	Cardiovascular Disease
Sunil	Shroff	MD	Cardiovascular Disease
Kirkeith	Lertsburapa	MD	Cardiovascular Disease
Hazem	Al Muradi	MD	Cardiovascular Disease
Hazem	Alhawasli	MD	Cardiovascular Disease
Daniele	DeGirolami	MD	Cardiovascular Disease
Jong	Yi	MD	Cardiovascular Disease
Abdulhamid	Sankari	MD	Cardiovascular Disease
Ahmad	Abdul-Karim	MD	Clinical Cardiac Electrophysiology
Cary	Jenkins	MD	Dermatology
Meiraj	Zuberi	MD	Endocrinology, Diabetes and Metabolism
Richard	Rotnicki	DO	Gastroenterology
Jason	Suh	MD	Hematology & Oncology
Ellen	Gustafson	MD	Hematology & Oncology
Worood	Abboud	MD	Hematology & Oncology
Ali	Lakhani	MD	Hematology & Oncology
Nafisa	Burhani	MD	Hematology & Oncology
Sanjiv	Modi	MD	Hematology & Oncology
Salman	Waheed	MD	Hematology & Oncology
Gustavo	Pedraza	MD	Internal Medicine
Choongkoon	Lee	MD	Internal Medicine
Laura	Kucinski	DO	Internal Medicine
Abdul-Hamid	Shahbain	MD	Internal Medicine
Nijal	Patel	MD	Internal Medicine
Ryan	Lahey	MD	Internal Medicine
David	McFadden	MD	Nephrology
Preeti	Nagarkatte	MD	Nephrology
Naila	Ahmed	MD	Nephrology
Mohamad	Barakat	MD	Nephrology
Aaron	Gurfinchel	MD	Nephrology
Ankur	Sharma	MD	Nephrology
Z. Teresa	Kravets	MD	Nephrology
Lucinda	DeWaele-Guzman	NP	Nurse Practitioner

Tammy	Zweeres	NP	Nurse Practitioner
Dawn	Hawkins	NP	Nurse Practitioner
Trisha	Durham	NP	Nurse Practitioner
Jayci	Dubik	NP	Nurse Practitioner
Evelyn	Kammin	NP	Nurse Practitioner
Ivona	Bennett	NP	Nurse Practitioner
Carrie	De Fuss	NP	Nurse Practitioner
Mark	Kijek	MD	Obstetrics and Gynecology
Eligijus	Lelis	MD	Ophthalmology
Majid	Rassouli	DO	Ophthalmology
Timothy	Ortiz	OD	Optometry
Angelo	Marino	OD	Optometry
Rebecca	Kuo	MD	Orthopaedic Surgery
Michael	Gartlan	MD	Otolaryngology
Rajeev	Mehta	MD	Otolaryngology
Scott	DiVenere	MD	Otolaryngology
Sung	Chung	MD	Otolaryngology
Ankit	Patel	MD	Otolaryngology
Matthew	Bartindale	MD	Otolaryngology
Farooq	Khan	MD	Pain Medicine, Pain Medicine
Maria	Estilo	MD	Pain Medicine, Pain Medicine
Atiq	Rehman	MD	Pain Medicine, Pain Medicine
Saad	Siddiqui	MD	Pediatric Cardiology
Sunthorn	Muangmingsuk	MD	Pediatric Cardiology
Kulumani	Sivarajan	MD	Pediatric Cardiology
David	Vermillion	MD	Pediatrics
Richard	Johnson	MD	Pediatrics
Ming	Hung	MD	Physical Medicine & Rehabilitation
Jeffrey	Aguilar	PA	Physician Assistant
Tripti	Burt	MD	Plastic Surgery
Neena	Will	MD	Plastic Surgery
Howard	Fox	DPM	Podiatric Surgery
Paul	Bishop	DPM	Podiatric Surgery
Thomas	Rappette	DPM	Podiatric Surgery
Ahmad	Agha	MD	Pulmonary Disease
Joseph	Kokoszka	MD	Surgery (General Surgery)
Marius	Katilius	MD	Surgery (General Surgery)
Jonathan	Wu	MD	Surgery (General Surgery)
Robert	Wojcik	MD	Surgery (General Surgery)
Kristopher	Oswalt	MD	Surgery (General Surgery)
Robert	MacNab	DPM	Surgery, Podiatric
Ryan	Manecke	MD	Urology
Thomas	Burns	MD	Urology
Gregory	Andros	MD	Urology
Thai	Nguyen	MD	Urology
Luke	Cho	MD	Urology

Sandeep	Sawhney	MD	Urology
Constance	Marks	MD	Urology
Peter	Tek	DO	Urology
Vincent	Olorunnisomo	MD	Urology
Scott	Reishus	DO	Vascular Surgery

Exhibit 6

Plain-Language Summary of Financial Assistance Policy

Morris Hospital & Healthcare Centers will provide emergency and medically necessary healthcare services for free or at discounted rates to patients who are uninsured or have limited insurance available. Generally speaking, patients eligible for discounted charges must have family incomes under 600% of the Federal Poverty Guidelines, while patients eligible for free care must have family incomes under 200% of the Federal Poverty Guidelines. Financial assistance may also be available in other limited circumstances, depending on the size of the patient's medical bills and whether the patient meets certain other criteria for eligibility.

Patients seeking financial assistance may apply by completing a Financial Assistance Application. Copies of the Financial Assistance Application, as well as Morris Hospital & Healthcare Centers' Financial Assistance Policy and Billing and Collection Policy, are available at <https://www.morrishospital.org/financialassistanceapplication>. Patients may also request free copies of the Financial Assistance Application and the foregoing policies by mail, by calling (815)942-2932, or may obtain free copies in person at the Morris Hospital Patient Accounting Office, 150 W. High St., Morris, IL (First Floor). The Financial Assistance Application and the foregoing policies (as well as this plain-language summary) are available in both English and Spanish.

Completed Financial Assistance Applications should be submitted to Morris Hospital & Healthcare Centers, Attn: Patient Accounting Office, 150 W. High St., Morris, IL 60450. Applications may be delivered in person to the Patient Accounting Office (First Floor of Hospital) or to the Patient Registration Desk at any of the Healthcare Centers. Applications also may be sent by U.S. mail to the address indicated above, or e-mailed to financialassistance@morrishospital.org.

Persons seeking more information or needing assistance in completing the Financial Assistance Application may contact one of Morris Hospital & Healthcare Centers' trained Financial Service Representatives in the Patient Accounting Office at (815)9423-2932.

A patient qualifying for financial assistance under Morris Hospital & Healthcare Centers' Financial Assistance Policy with respect to emergency or medically necessary care will not be charged more than the amounts generally billed by Morris Hospital & Healthcare Centers for the same services to individuals who have insurance covering such care.

Exhibit 7

Location Name	Address	City	State	Zip
Braidwood Healthcare Center of Morris Hospital - Primary	389 E. Main St.	Braidwood	IL	60408
Channahon Healthcare Center of Morris Hospital - Primary	25259 Reed St.	Channahon	IL	60410
Channahon Healthcare Center of Morris Hospital - Rheumatology	25259 Reed St.	Channahon	IL	60410
Channahon Healthcare Center of Morris Hospital - Neurology	25259 Reed St.	Channahon	IL	60410
Channahon Healthcare Center of Morris Hospital - Endocrinology	25259 Reed St.	Channahon	IL	60410
Morris Hospital Ridge Road Campus - Immediate Care/Occ Med	27240 W. Saxony Drive	Channahon	IL	60410
Morris Hospital Ridge Road Campus - Primary	27240 W. Saxony Dr., #201	Channahon	IL	60410
Morris Hospital Ridge Road Campus - Allergy	27240 W. Saxony Dr., #203	Channahon	IL	60410
Morris Hospital Diamond - Coal City Campus - Convenient Care/Occ Med	1450 East Division St	Diamond	IL	60416
Morris Hospital Diamond - Coal City Campus - Primary	1450 East Division St	Diamond	IL	60416
Dwight Healthcare Center of Morris Hospital - Primary	101 S. Prairie Ave.	Dwight	IL	60420
Gardner Healthcare Center of Morris Hospital - Primary	409 N Route 53	Gardner	IL	60424
Marseilles Healthcare Center of Morris Hospital - Primary	580 Sycamore St	Marseilles	IL	61341
Marseilles Healthcare Center of Morris Hospital - Pedaitrics	580 Sycamore St	Marseilles	IL	61341
Mazon Healthcare Center of Morris Hospital - Primary	522 Depot St.	Mazon	IL	60444
Minooka Healthcare Center of Morris Hospital - Primary	603 W Mondamin St	Minooka	IL	60447
Morris Healthcare Center of Morris Hospital - Rheumatology/Endrocrinology	1345 N Edwards St., Suite 1	Morris	IL	60450
Morris Healthcare Center of Morris Hospital - Primary (presently empty)	1345 N Edwards St., Suite 2	Morris	IL	60450
Morris Healthcare Center of Morris Hospital - Primary	1345 N Edwards St., Suite 3	Morris	IL	60450
Morris Healthcare Center of Morris Hospital - Infectiuos Disease	425 E US Rt. 6 - Suite A	Morris	IL	60450
Morris Healthcare Center of Morris Hospital - Primary	425 E US Rt. 6 - Suite B	Morris	IL	60450
Morris Healthcare Center of Morris Hospital - Primary	1300 W. Dresden Drive	Morris	IL	60450
Morris Healthcare Center of Morris Hospital - Primary	1499 Lakewood Dr. Suite C	Morris	IL	60450
Morris Healthcare Center of Morris Hospital - Primary	948 W US Rt. 6	Morris	IL	60450
Morris Hospital Obstetrics & Gynecology Specialists - Morris	237 W. Waverly St.	Morris	IL	60450
Morris Hospital Obstetrics & Gynecology Specialists - Ottawa	1300 Starfire Dr.	Ottawa	IL	61350
Morris Hospital Obstetrics & Gynecology Specialists - Ridge Road	27240 W. Saxony Dr., Suite 202	Channahon	IL	60410
Morris Hospital Obstetrics & Gynecology Specialists - Diamond	1450 East Division St	Diamond	IL	60416
Morris Hospital Cardiovascular Specialists - Morris	151 W. High St. (Lower Level)	Morris	IL	60450
Morris Hospital Cardiovascular Specialists - Dwight	101 S. Prairie Ave.	Dwight	IL	60420
Morris Hospital Cardiovascular Specialists - Ottawa	1703 Polaris Circle	Ottawa	IL	61350
Morris Hospital Cardiovascular Specialists - Ridge Road	27240 W. Saxony Dr., #203	Channahon	IL	60410
Morris Hospital Pediatrics - Ottawa	1306 Gemini Circle Suite 1	Ottawa	IL	61350

Morris Hospital Pediatrics - Diamond - Coal City	1450 East Division St	Diamond	IL	60416
Morris Hospital Pediatrics - Marseilles	580 Sycamore St	Marseilles	IL	61341
Morris Hospital Pediatricians - Morris	151 W. High St, (Upper Level)	Morris	IL	60450
Morris Hospital Healthcare Center of Morris Hospital - Primary, Pediatrics	1802 North Division St. #201	Morris	IL	60450
Morris Hospital Neurology Specialists	1802 North Division St. #703	Morris	IL	60450
Morris Hospital Ottawa Campus - Primary	1306 Gemini Circle, Suite 1	Ottawa	IL	61350
Newark Healthcare Center of Morris Hospital - Primary	5 N. Johnson St.	Newark	IL	60451
Diagnostic & Rehabilitative Center of Morris Hospital IMC/OccMed	100 Gore Rd.	Morris	IL	60450
Diagnostic & Rehabilitative Center of Morris Hospital -Rehab	100 Gore Rd.	Morris	IL	60450
Radiation Therapy Center of Morris Hospital	1600 West US Rt. 6	Morris	IL	60450
Seneca Healthcare Center of Morris Hospital - Primary	271 N. Main St	Seneca	IL	61360
Morris Hospital (Main Campus)	150 W High St	Morris	IL	60450
Morris Hospital Orthopedics & Rehab - Diamond - Coal City	1450 East Division St	Diamond	IL	60416
Morris Hospital Orthopedics & Rehab - Joliet	1310 & 1312 Houbolt Road	Joliet	IL	60431
Morris Hospital Orthopedics & Rehab - Ottawa	1306 Gemini Circle Suite 2 & 3	Ottawa	IL	61350
Morris Hospital Orthopedics & Rehab - Morris	1051 West US Rt 6 -Ste. 100 & 400	Morris	IL	60450