



**YALE-NEW HAVEN  
HOSPITAL**

**Certificate of Need Application**

**Alignment of Yale-New Haven Hospital  
Occupational Medicine Services  
In East Haven and Branford**

**November 17, 2015**

# **Exhibit I**

## Checklist

### Instructions:

1. Please check each box below, as appropriate; and
  2. The completed checklist *must* be submitted as the first page of the CON application.
- Attached is a paginated hard copy of the CON application including a completed affidavit, signed and notarized by the appropriate individuals.
  - (\*New\*). A completed supplemental application specific to the proposal type, available on OHCA's website under "OHCA Forms." A list of supplemental forms can be found on page 2.
  - Attached is the CON application filing fee in the form of a check made out to the "Treasurer State of Connecticut" in the amount of \$500.
  - Attached is evidence demonstrating that public notice has been published in a suitable newspaper that relates to the location of the proposal, 3 days in a row, at least 20 days prior to the submission of the CON application to OHCA. (*OHCA requests that the Applicant fax a courtesy copy to OHCA (860) 418-7053, at the time of the publication*)
  - Attached is a completed Financial Attachment
  - Submission includes one (1) original and four (4) hard copies with each set placed in 3-ring binders.
  - The following have been submitted on a CD
    1. A scanned copy of each submission in its entirety, including all attachments in Adobe (.pdf) format.
    2. An electronic copy of the applicant's responses in MS Word (the applications) and MS Excel (the financial attachment).

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### For OHCA Use Only:

Docket No.: \_\_\_\_\_

OHCA Verified by: \_\_\_\_\_

Check No.: \_\_\_\_\_

Date: \_\_\_\_\_

1321105814  
11/18/29

SL

## General Information

<b>Main Site</b>	<b>MAIN SITE</b>	<b>MEDICAID PROVIDER ID</b>	<b>TYPE OF FACILITY</b>	<b>MAIN SITE NAME</b>
	<b>Yale-New Haven Hospital</b>	<b>004041836</b>	<b>Acute Care Hospital</b>	<b>Yale-New Haven Hospital</b>
	<b>STREET &amp; NUMBER</b>			
	<b>20 York Street</b>			
	<b>TOWN</b>			<b>ZIP CODE</b>
<b>New Haven</b>			<b>06510</b>	

<b>Project Site 1</b>	<b>PROJECT SITE</b>	<b>MEDICAID PROVIDER ID</b>	<b>TYPE OF FACILITY</b>	<b>PROJECT SITE NAME</b>
	<b>Occupational Medicine and Wellness Services</b>	<b>N/A</b>	<b>Hospital Outpatient Department</b>	<b>Yale-New Haven Hospital Occupational Medicine and Wellness Services at East Haven</b>
	<b>STREET &amp; NUMBER</b>			
	<b>317 Foxon Road</b>			
	<b>TOWN</b>			<b>ZIP CODE</b>
<b>East Haven</b>			<b>06512</b>	

<b>Project Site 2</b>	<b>PROJECT SITE</b>	<b>MEDICAID PROVIDER ID</b>	<b>TYPE OF FACILITY</b>	<b>PROJECT SITE NAME</b>
	<b>Occupational Medicine and Wellness Services</b>	<b>N/A</b>	<b>Hospital Outpatient Department</b>	<b>Yale-New Haven Hospital Occupational Medicine and Wellness Services at Branford</b>
	<b>STREET &amp; NUMBER</b>			
	<b>84 N. Main Street, 2<sup>nd</sup> Floor</b>			
	<b>TOWN</b>			<b>ZIP CODE</b>
<b>Branford</b>			<b>06405</b>	

<b>Operator</b>	<b>OPERATING CERTIFICATE NUMBER</b>	<b>TYPE OF FACILITY</b>	<b>LEGAL ENTITY THAT WILL OPERATE OF THE FACILITY (or proposed operator)</b>
	<b>1851568828 (NPI)</b>	<b>Acute Care Hospital</b>	<b>Yale-New Haven Hospital</b>
	<b>STREET &amp; NUMBER</b>		
	<b>20 York Street</b>		
	<b>TOWN</b>		<b>ZIP CODE</b>
<b>New Haven</b>		<b>06510</b>	

<b>Chief Executive</b>	NAME		TITLE		
	Marna Borgstrom		Chief Executive Officer		
	STREET & NUMBER				
	20 York Street				
	TOWN		STATE	ZIP CODE	
	New Haven		CT	06510	
	TELEPHONE	FAX	E-MAIL ADDRESS		
(203) 688-2608	N/A	marna.borgstrom@ynhh.org			

Title of Attachment:

Is the applicant an existing facility? If yes, attach a copy of the resolution of partners, corporate directors, or LLC managers, as the case may be, authorizing the project.	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	Not applicable.
Does the Applicant have non-profit status? If yes, attach documentation.	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	See Attachment 1
Identify the Applicant's ownership type.	PC <input type="checkbox"/> LLC <input type="checkbox"/> Corporation <input checked="" type="checkbox"/>	Other: _____
Applicant's Fiscal Year (mm/dd)	Start 10/1	End 9/30

**Contact:**

Identify a single person that will act as the contact between OHCA and the Applicant.

<b>Contact Information</b>	NAME		TITLE		
	Nancy Rosenthal		SVP, Strategy and Regulatory Planning		
	STREET & NUMBER				
	5 Perryridge Road				
	TOWN		STATE	ZIP CODE	
	Greenwich		CT	06830	
	TELEPHONE	FAX	E-MAIL ADDRESS		
	(203) 863-3908	(203) 863-4736	nancy.rosenthal@ynhh.org		
RELATIONSHIP TO APPLICANT	Employee				

Identify the person primarily responsible for preparation of the application (optional):

<b>Prepared by</b>	NAME		TITLE
	Jennifer Fusco		Principal, Updike, Kelly & Spellacy, P.C.
	STREET & NUMBER		
	One Century Tower, 265 Church Street		
	TOWN	STATE	ZIP CODE
	New Haven	CT	06510
	TELEPHONE	FAX	E-MAIL ADDRESS
	(203) 786-8316	(203) 772-2037	jfusco@uks.com
	RELATIONSHIP TO APPLICANT	Legal Counsel	

# EXHIBIT II

Cashier's Check - Customer Copy No. 1321105814

Date 09/29/15 10:16:37 AM

Void After 90 Days 30-1/1140

NTX

Notice to Purchaser - In the event that this check is lost, misplaced or stolen, a sworn statement and 90-day waiting period will be required prior to replacement. This check should be negotiated within 90 days.

GREENWICH TRUST

0901 0001397 0030



Pay

\*\*\*\$500.00

To The TREASURER STATE OF CONNECTICUT  
Order Of

Not-Negotiable  
Customer Copy  
Retain for your Records

Remitter (Purchased By): MATTHEW J MCKENNAN

Bank of America, N.A.  
SAN ANTONIO, TX

001641005594

00-53-3364B 11-2010



Cashier's Check

No. 1321105814

Notice to Purchaser - In the event that this check is lost, misplaced or stolen, a sworn statement and 90-day waiting period will be required prior to replacement. This check should be negotiated within 90 days.

GREENWICH TRUST

0901 0001397 0030



Pay

\*\*\*\$500.00

To The TREASURER STATE OF CONNECTICUT  
Order Of

Remitter (Purchased By): MATTHEW J MCKENNAN

Bank of America, N.A.  
SAN ANTONIO, TX

Void After 90 Days 30-1/1140

NTX

Date 09/29/15 10:16:37 AM

AUTHORIZED SIGNATURE

00-53-3364B 11-2010

⑆ 1321105814⑆ ⑆ 14000019⑆ 001641005594⑆

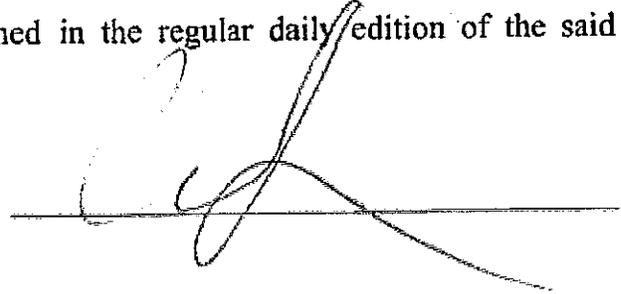
## **Exhibit III**

# AFFIDAVIT OF PUBLICATION

## NEW HAVEN REGISTER

STATE OF CONNECTICUT, County of New Haven

I Christopher Gilson of New Haven, Connecticut, being duly sworn, do depose and say that I am a Sales Representative of the New Haven Register, and that on the following date 9/9, 10, 11/15..... there was published in the regular daily edition of the said newspaper an advertisement,



**PUBLIC NOTICE**  
Pursuant to section 19a-63B of the Connecticut General Statutes, Yale-New Haven Hospital will submit the following Certificate of Need application:  
  
Applicant(s):  
Yale-New Haven Hospital  
Address 1:  
317 Foxon Road,  
East Haven, CT 06513  
Address 2:  
84 North Main Street,  
Branford, CT 06405  
  
Proposal:  
Discontinuation of occupational medicine services in East Haven and Branford, CT.  
  
Estimated Total Project Cost/Expenditure:  
\$0

And that the newspaper extracts hereto annexed were clipped from each of the above-named issues of said newspaper. Subscribed and sworn to this 28th.... day of October, 2015... Before me.



My commission expires July 31, 2019

**HELP WANTED  
FULL TIME**

**DIGITAL SALES  
MANAGER**

We are seeking a Digital Sales Manager for our local digital sales effort. This role will work with our team of Sales Specialists as well as be an active seller of a number of digital products. This position is based in our Torrington, CT office.

Successful candidates will possess 3-5 years of outside sales management experience that includes at least 2 years of managing employees selling digital advertising.

We offer a competitive salary plus commission based on team performance and an incentive plan and a full benefits package. Interested candidates should forward a copy of their resume and salary requirements to Teresa Spak, tsapak@newhavenregister.com. Please place "Digital Sales Manager" in the subject line of your email. EOE.

**HELP WANTED  
SEASONAL**

**NEW HAVEN/  
HAMDEN AREA  
STREET SALES  
PLEASE CALL  
RON AT  
203-627-8760  
FOR INFO.**

**CLERICAL/  
ADMINISTRATIVE  
BOOKKEEPER**

**LEGAL NOTICES**

**Legal Notice -  
Request  
for Proposals,  
Integrated Basic  
Education and Skills  
Training for  
the Ex-offender**

The Connecticut Department of Labor (DOL) is soliciting proposals for the implementation of "Integrated Basic Education and Skills Training, Second Chance" (I-BEST-SC) program targeting ex-offenders in Hartford County as administered by the Department of Labor. The program intent is to help ex-offenders compete in today's labor market by providing relevant training and support that in turn reduces the threat of recidivism. Interested parties will find pertinent solicitation information at <http://www.ctdol.state.ct.us/> listed under "News and Announcements". A Letter of Intent must be received no later than 3:30 p.m. on Tuesday September 15, 2015.

**NOTICE OF DECISION  
BETHANY  
PLANNING & ZONING  
COMMISSION  
REGULAR MEETING  
OF SEPTEMBER 2, 2015**

Granted the approval of Appl #2015-015 submitted by CT Basement Finishing for a Special Exception Permit for accessory apartment located at 67 Antonia Marek, PZC Clerk

**The West Haven  
Planning and Zoning**

**LEGAL NOTICES**

**PUBLIC NOTICE**

Pursuant to section 19a-638 of the Connecticut General Statutes, Yale-New Haven Hospital will submit the following Certificate of Need application:

Applicant(s):  
Yale-New Haven Hospital  
Address:  
84 North Main Street,  
Branford, CT 06405

Proposal:  
Discontinuation of outpatient rehabilitation services in Branford, CT.

Estimated Total Project Cost/Expenditure:  
\$0

**PUBLIC NOTICE**

Pursuant to section 19a-638 of the Connecticut General Statutes, Yale-New Haven Hospital will submit the following Certificate of Need application:

Applicant(s):  
Yale-New Haven Hospital  
Address 1:  
317 Foxon Road,  
East Haven, CT 06513  
Address 2:  
84 North Main Street,  
Branford, CT 06405

Proposal:  
Discontinuation of occupational medicine services in East Haven and Branford, CT.

Estimated Total Project Cost/Expenditure:  
\$0

**LEGAL NOTICES**

**STATE OF CONN  
Superior Court  
Juvenile Matters  
NOTICE TO  
Khalif Kierce,  
of Parts Unknown**

A petition has been filed seeking: Commitment of minor child(ren) of the above named or vesting of custody and care of said child(ren) of the above named in a lawful, private or public agency or a suitable and worthy person. The petition, whereby the court's decision can affect your parental rights, if any, regarding minor child(ren) will be heard on: 10/1/15 at 11:00A.M. at: 239 Whalley Avenue, New Haven, CT 06511. Therefore, ORDERED, that notice of the hearing of this petition be given by publishing this Order of Notice once, immediately upon receipt, in the New Haven Register, a newspaper having a circulation in the town/city of: New Haven, CT.

Hon. John Cronan  
Judge  
M Lauder  
Clerk  
9/3/15

Right to Counsel: Upon proof of inability to pay for a lawyer, the court will provide one for you at court expense. Any such request should be made immediately at the court office where your hearing is to be held.

**MAKE YOUR WALLET  
HAPPY** shopping the classifieds. They offer a variety of affordable goods & services.

**LEGAL NOTICES**

**STATE OF CONNECTICUT  
Court of Probate, District  
of New Haven Regional  
Children's Probate Court**

**NOTICE TO: Victor M. Cas-tillo, whose last known residence was in the town of New Haven, CT.**

Pursuant to an order of Hon. Beverly K. Streit-Kefalas, Judge, a hearing will be held at New Haven Regional Children's Court, 873 State Street, New Haven, CT 06511-3923 on September 18, 2015 at 10:45 AM on an application for Termination of Parental Rights concerning Victoria C., a minor child born to Paula M. Rosa on August 7, 2002 at Yale New Haven Hospital, New Haven. The Court's decision will affect your interest, if any, as in the petition on file more fully appears.

**RIGHT TO COUNSEL:** If the above-named person wishes to have an attorney, but is unable to pay for one, the Court will provide an attorney upon proof of inability to pay. Any such request should be made immediately by contacting the court office where the hearing is to be held.

By Order of the Court  
John A. Keyes, Judge

**PROBATE NOTICES**

**NOTICE TO  
CREDITORS  
ESTATE OF  
Marcella C. Koproski**

The Hon. Michael R. Brandt, Judge of the Court of Probate, District of East Haven - North Haven pro-

**PROBATE NOTICES**

**NOTICE TO  
CREDITORS  
ESTATE OF  
Mary E. Shackleton**

The Hon. Beverly K. Streit-Kefalas, Judge of the District of Milford - Orange Probate District, by decree dated July 24, 2015, ordered that all claims must be presented to the fiduciary at the address below. Failure to promptly present any such claim may result in the loss of rights to recover on such claim.

Nabil E. Valencia,  
Assistant Clerk

The fiduciary is:  
Ian S. Shackleton  
c/o Joseph J. Mager Jr.  
Esq.  
Mager & Mager,  
Attorneys at Law,  
87 River St.,  
Milford, CT 06460  
701677

**NOTICE TO  
CREDITORS  
ESTATE OF  
Robert C. Rittner**

The Hon. Edward C. Burt, Jr., Judge of the District of Hamden - Bethany Probate District, by decree dated September 2, 2015, ordered that all claims must be presented to the fiduciary at the address below. Failure to promptly present any such claim may result in the loss of rights to recover on such claim.

Valerie A. Dondi, Clerk

**LEGAL NOTICES**

**INVITATION TO BID**

The Town of Madison Board of Education reserves the right to waive any informalities, irregularities or defects in bids, to reject any and all bids and to accept a bid that, in its sole discretion, is in the best interest of the Board of Education. Questions regarding the bid should be addressed to Laina Piscitelli, Construction Manager, 284 Green Hill Road, Madison, Connecticut, 06443, 203-245-5697 or by email at [piscitella@madisonct.org](mailto:piscitella@madisonct.org).

A site visit can be arranged by contacting Laina Piscitelli, 284 Green Hill Road, Madison, Connecticut, 06443, 203-245-5697 or by email at [piscitella@madisonct.org](mailto:piscitella@madisonct.org).

The Town of Madison reserves the right to waive any informalities, irregularities or defects in bids, to reject any and all bids and to accept a bid that, in its sole discretion, is in the best interest of the Town. Questions regarding the project should be addressed to Laina Piscitelli, Construction Manager, 284 Green Hill Road, Madison, Connecticut, 06443, 203-245-5697 (telephone) and 203-245-6713 (fax).

**Legal Notice - Request for Proposals, Integrated Basic Education and Skills Training for the Ex-offender**

The Connecticut Department of Labor (DOL) is soliciting proposals for the implementation of "Integrated Basic Education and Skills Training, Second Chance" (I-BEST-SC) program targeting ex-offenders in Hartford County as administered by the Department of Labor. The program intent is to help ex-offenders compete in today's labor market by providing relevant training and support that in turn reduces the threat of recidivism. Interested parties will find pertinent solicitation information at <http://www.ctdol.state.ct.us/> listed under "News and Announcements". A Letter of Intent must be

**LEGAL NOTICES**

**Legal Notice**

The Connecticut Department of Energy and Environmental Protection

**Notice of Permit Application Municipality: New Haven, CT**

Notice is hereby given that Murphy Road Recycling, LLC (the "applicant") has submitted to the Department of Energy & Environmental Protection an application under Connecticut General Statutes Section 22a-208a for renewal of an existing permit for operation of solid waste facilities. The facility is located at 19 Wheeler Street, New Haven, CT.

The existing permit to operate this solid waste facility is set to expire on January 18, 2016.

The solid waste operations for this permit are conducted in the on-site buildings at this facility. The operations at the Facility, under this permit renewal, will remain essentially unchanged from the current permit conditions and regulatory requirements.

Interested persons may obtain copies of the application from Anchor Engineering Services, Inc., 41 Sequin Drive, Glastonbury, CT 06033, (860) 633-8770, contact T.J. Therriault, at cost.

The application is available for inspection at the Department of Energy & Environmental Protection, Waste Engineering & Enforcement Division, 79 Elm Street, Hartford, CT 06106-5127, telephone (860) 424-3366 from 8:30 to 4:30 Monday through Friday.

**LEGAL NOTICES**

**NOTICE OF SALE Secured Self Storage**

**PUBLIC NOTICE**

Pursuant to section 19a-638 of the Connecticut General Statutes, Yale-New Haven Hospital will submit the following Certificate of Need application:

Applicant(s): Yale-New Haven Hospital  
Address: 84 North Main Street, Branford, CT 06405

Proposal: Discontinuation of outpatient rehabilitation services in Branford, CT.

Estimated Total Project Cost/Expenditure: \$0

**PUBLIC NOTICE**

Pursuant to section 19a-638 of the Connecticut General Statutes, Yale-New Haven Hospital will submit the following Certificate of Need application:

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Address 1: 317 Foxon Road, East Haven, CT 06513  
Address 2: 84 North Main Street, Branford, CT 06405

Proposal: Discontinuation of occupational medicine services in East Haven and Branford, CT.

Estimated Total Project Cost/Expenditure: \$0.

**CANT FIND what you're looking for?**

**LEGAL NOTICES**

The Zoning Board of Appeals, Town of Hamden, will hold a Public Hearing & Regular Meeting on September 10, 2015.

Section 654.b to allow outdoor storage of trucks that exceed the height of the screening or fencing, T-4 zone, Kyle DeLucia, Applicant  
15-6573 2101 Dixwell Ave, Requesting variance to allow a 25ft high free standing sign where only 20ft is permitted; Section 550.2.1.d, to permit 4 signs where only 2 signs are permitted; Section 550.2.1.e, to allow 241.66 sf of signage where only 64 sf is permitted; Section 550.2.4.a, to permit a wall sign of 3ft 4 inches where only 3ft is permitted, T-5 zone, Tracey Diehl, Applicant.

15-6574 265 Lane St, Requesting variance: Section 220, Table 2.3 to allow a side yard of 2ft where 12ft is required for a garage and sided, R-4 zone, Jorge Mendoza, Applicant  
15-6575 65 Hodder St, Requesting variance: Section 620.b to permit an 894sf accessory apartment where only 600sf is permitted, R-4 zone, M9-named Taroua, Applicant  
Regular Meeting: Action on the items heard during the Public Hearing. Submitted: Stacy Sheppard, Commission Clerk

**TOWN OF ORANGE NOTICE IS HEREBY GIVEN**  
THAT administrative approval was given to R.D. Scinto, Inc. for the construction of an 80,378 sq.ft. office building and associated parking and all utilities located at 161 Marsh Hill Rd. on September 3, 2015. A copy of ap-

**LEGAL NOTICES**

**TOWN OF EAST HAVEN NOTICE OF DOGS**

**AKC-YELLOW LABS 3 MO.**  
OLD \$500: Call 203-219-8886.  
Bulldogs \$950+, Yorkie \$550+, Chih \$450+, Shih-Tzu \$650+, Bengal Kittens \$250+. Health guar. shots. 860-930-4001

**FURNITURE**

**DINING ROOM SET** with glass top, 6 brown chairs, 2 captain chairs with glass hutch, \$475/obo.; **TRIPLE DRESSER** with mirror, 9 drawers, men's chest, 2 night stands \$300. Call 203-997-5056

**DIRT, SAND & SHELL FARM FRESH TOP SOIL AND FILL**

**BEST QUALITY!**

REASONABLE DELIVERY RATES

CALL 203-488-7929

**AUTOS WANTED**



**NICHOLS Salvage** - Will buy your scrap steel, cars, trucks, alum., trailers, copper, batteries, heavy equip. 46 Meadow Rd. Clinton CT. 860-669-2808

**CLASSIFIED IS OPEN**

8:00 AM - 5:00 PM  
MON-FRI  
Call 1.800.922.7066

or email:  
**CLASSIFIEDS@NHREGISTER.COM**

**REMEMBER** - when placing

**HELP WANTED  
GENERAL**

- HVAC TECH AND  
- OIL DRIVER NEEDED  
Minimum B2 License.  
CDL Hazmat & Twic required.  
Dependable  
Heating & Cooling  
Call 203-488-8006

**HELP WANTED  
FULL TIME**

**DIGITAL SALES  
MANAGER**

We are seeking a Digital Sales Manager for our local digital sales effort. This role will work with our team of Sales Specialists as well as be an active seller of a number of digital products. This position is based in our Torrington, CT office.

Successful candidates will possess 3-5 years of outside sales management experience that includes at least 2 years of managing employees selling digital advertising.

We offer a competitive salary plus commission based on team performance and an incentive plan and a full benefits package. Interested candidates should forward a copy of their resume and salary requirements to Teresa Spak, [tspak@newhavenregister.com](mailto:tspak@newhavenregister.com). Please place "Digital Sales Manager" in the subject line of your email. EOE.

**HELP WANTED  
PART TIME**

**PRESSER NEEDED** for small Seymour dry cleaner. PT mornings. Exp. a must! Call (203) 888-9921

**HELP WANTED  
SEASONAL**

**NEW HAVEN/  
HAMDEN AREA  
STREET SALES  
PLEASE CALL  
RON AT  
203-627-8760  
FOR INFO.**

**LEGAL NOTICES**

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Proposal:  
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Estimated Total Project Cost/Expenditure:  
\$0

**LEGAL NOTICES**

**City of New Haven  
Notice of Availability  
for Public Comment  
Draft Consolidated  
Annual Performance  
and Evaluation  
Report  
CAPER: 2014-2015**

In accordance with 91 CFR Part 520, the City of New Haven is required to submit a **Consolidated Annual Performance and Evaluation Report (CAPER)**, documenting its housing and community development performance to the U.S. Department of Housing and Urban Development (HUD) 90 days after the close of its grant program year. The City is the recipient of four (4) entitlement grants through HUD - they are the Community Development Block Grant Program (CDBG), HOME Investment Partnerships (HOME), Emergency Solutions Grant (ESG) (formerly the Emergency Shelter Grant), and Housing Opportunities for Persons with AIDS (HOPWA) programs. The CAPER summarizes the City's performance in implementing its HUD-funded Housing and Community Development programs over the past program year (July 1, 2014 - June 30, 2015).

Copies of the City's Draft CAPER will be made available for review on September 11, 2015 in the City's Office of Management and Budget located on the 3rd floor of 165 Church Street and will remain available through close of business on September 25, 2015. It is also posted on the City's website under Government/Budgets and Finances/Consolidated Plan.

The City invites all interested parties to comment on the Draft CAPER. Written comments will be received in the Office of Management and Budget, Attn: Elizabeth Smith, Third Floor, 165 Church Street, New Haven, CT, 06510. All comments will be reviewed and considered for inclusion in the final CAPER to be submitted to HUD. The final CAPER will be available for viewing on the City's web page, in the community police substations and the main library after submission to HUD.

**LEGAL NOTICE  
CITY OF ANSONIA**

**LEGAL NOTICES**

**LEGAL NOTICE**

Pursuant to Conn. Gen. Stat. §516-11 and 16-43, the Public Utilities Regulatory Authority (PURA) will conduct a public hearing at Ten Franklin Square, New Britain, Connecticut, on **Friday, September 18, 2015, at 9:00 a.m.**, concerning Docket No. 15-08-11 - Application of Yankee Gas Services Company d/b/a Eversource Energy Pursuant to Conn. Gen. Stat. §§16-11 & 16-43 and Conn. Agencies Reg. §16-43-3 for Approval of the Sale of the Advantage Protection Service Plan and the Discontinuance of Billable Services. The PURA may continue the hearing. For information and the Notice of Hearing filed with the Secretary of State's Office, contact: PUBLIC UTILITIES REGULATORY AUTHORITY, JEFFREY R. GAUDIOSI, ESQ., EXECUTIVE SECRETARY. The public may call the Authority's offices, at (860) 827-1553, option 4 (using a touch tone phone), commencing each day from 7:30 a.m., to be advised as to whether this hearing has been cancelled or postponed due to inclement weather. The Connecticut Department of Energy and Environmental Protection is an Affirmative Action and Equal Opportunity Employer that is committed to complying with the Americans with Disabilities Act. To request an accommodation contact us at (860) 418-5910 or deep.accommodations@ct.gov.

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Yale-New Haven Hospital  
Address 1:  
317 Foxon Road,  
East Haven, CT 06513  
Address 2:  
84 North Main Street,  
Branford, CT 06405

Proposal:  
Discontinuation of occupational medicine services in East Haven and Branford, CT.

Estimated Total Project Cost/Expenditure:  
\$0

[Your Ad Here.]

**Call to place your Classified ad:**  
**1.800.922.7066**  
Mon-Fri • 8:00AM-5:00pm

Ads can also be placed through our website [newhavenregister.com](http://newhavenregister.com) or by emailing [classifiedads@nhregister.com](mailto:classifiedads@nhregister.com)

**NEW HAVEN REGISTER** [NewHavenRegister.com](http://NewHavenRegister.com)

**Office of Health Care Access Public Hearing**

Statute Reference: 19a-638  
Applicant: Yale-New Haven Hospital  
Town: East Haven  
Docket Number: 15-32011-CON  
Proposal: Termination of Yale-New Haven Hospital's Urgent Care Center on...

# EXHIBIT IV

# Affidavit

Applicant: Yale-New Haven Hospital

Project Title: Alignment of Yale-New Haven Hospital Occupational Medicine Services In East Haven and Branford

I, James Staten, Chief Financial Officer  
(Name) (Position – CEO or CFO)

of Yale-New Haven Hospital being duly sworn, depose and state that the (Facility Name) said facility complies with the appropriate and applicable criteria as set forth in the Sections 19a-630, 19a-637, 19a-638, 19a-639, 19a-486 and/or 4-181 of the Connecticut General Statutes.

James Staten 11-11-15  
Signature Date

Subscribed and sworn to before me on 11-11-15

Rose Arminio

Notary Public/Commissioner of Superior Court

**ROSE ARMINIO**  
NOTARY PUBLIC  
State of Connecticut  
My Commission Expires  
February 28, 2018

My commission expires: \_\_\_\_\_

## Executive Summary

The purpose of the Executive Summary is to give the reviewer a conceptual understanding of the proposal. In the space below, provide a succinct overview of your proposal (this may be done in bullet format). Summarize the key elements of the proposed project. Details should be provided in the appropriate sections of the application that follow.

**This proposal involves discontinuance of the Yale-New Haven Hospital (“YNHH” or the “Hospital”) Occupational Medicine and Wellness Services located at 317 Foxon Road in East Haven and 84 North Main Street in Branford.**

**As part of its ambulatory space and program optimization planning around the acquisition of St. Raphael’s Health System, YNHH reviewed all of its occupational health locations and identified potential service improvement opportunities and cost savings. The Hospital determined that there is duplication of services among its occupational health locations and capacity at each of its occupational health sites.**

**YNHH occupational health services are available *exclusively* for employees of companies and municipalities that make arrangements with the Hospital for this type of care. These services are not available to the general public.**

**Access to occupational health services will be maintained for existing employers and patients, even with termination of the YNHH sites in East Haven and Branford. The Hospital will continue to offer these services at locations in New Haven and Hamden, which have ample capacity to absorb any displaced patients. These alternate locations are, in many instances, located closer to the employers that arrange with YNHH for occupational health services and the employees who use the services. In addition, there are numerous non-YNHH occupational health providers in the East Haven and Branford service areas that can care for patients going forward.**

**Consolidation of the East Haven and Branford occupational health sites into alternate locations is consistent with the Statewide Healthcare Facilities and Services Plan (“SHP”) requirement that duplicative services be avoided. It will also result in cost savings for the Hospital at a time when it faces additional taxes and lower reimbursement. In order to ensure that the community has continued access to YNHH’s core services, the Hospital must determine the most efficient way to deliver services to its patients. This proposal is consistent with that objective.**

*Pursuant to Section 19a-639 of the Connecticut General Statutes, the Office of Health Care Access is required to consider specific criteria and principles when reviewing a Certificate of Need application. Text marked with a "§" indicates it is actual text from the statute and may be helpful when responding to prompts.*

## **Project Description**

1. Provide a detailed narrative describing the proposal. Explain how the Applicant(s) determined the necessity for the proposal and discuss the benefits for each Applicant separately (if multiple Applicants). Include all key elements, including the parties involved, what the proposal will entail, the equipment/service location(s), the geographic area the proposal will serve, the implementation timeline and why the proposal is needed in the community.

**RESPONSE:** YNHH is proposing to terminate its Occupational Medicine and Wellness Services in East Haven and Branford and consolidate patients from these locations to YNHH occupational health sites in New Haven and Hamden. This consolidation is part of YNHH's plan to optimize ambulatory space and programming following its acquisition of the Hospital of St. Raphael ("HSR") in September of 2012. The proposal will help to achieve a more cost-effective delivery of occupational health care and avoid the unnecessary duplication of services by YNHH. At the same time, access to the high-quality care provided by YNHH Occupational Medicine and Wellness Services will be preserved for area employers and patients.

### Overview of Services

YNHH is a 1,541-bed (including bassinets) teaching hospital with two integrated campuses located in New Haven, as well as a pediatric campus in Bridgeport. YNHH includes the Smilow Cancer Hospital, the Yale-New Haven Children's Hospital, and the Yale-New Haven Psychiatric Hospital, and is the primary teaching hospital of the Yale School of Medicine. YNHH provides primary, secondary, tertiary, and many quaternary acute-care services. A copy of the Department of Public Health license for YNHH is included as Attachment 2.

YNHH currently provides occupational health services at the following locations: 175 Sherman Avenue, New Haven; 84 North Main Street, Branford; 317 Foxon Road, East Haven; and 2080 Whitney Avenue, Hamden. All four sites are operated as hospital outpatient departments under YNHH's acute-care hospital license. The Branford site (f/k/a Occupational Health Plus™) was established in 1996, and was originally owned and operated by HSR. It became part of YNHH when the Hospital acquired HSR in September of 2012. The East Haven site (f/k/a Worker Health Solutions) opened in September of 2012, as part of an outpatient facility operated by YNHH that includes an urgent care center. YNHH is also seeking Certificate of Need ("CON") approval to terminate the East Haven urgent care service (see Docket No. 15-32011-CON).

Services at the YNHH Occupational Medicine and Wellness sites (specifically East Haven and Branford) include treatment and follow-up care for injuries received on the job,

workers' compensation case management, pre-employment physicals, drug testing, Department of Transportation ("DOT") examination certifications, fitness for duty assessments, return to work assessments, respirator clearance and fit testing, as well as various health screening services. Occupational health services in East Haven and Branford are provided by NEMG and YNHH physicians and staff.

YNHH Occupational Medicine and Wellness Services are available *exclusively* for employees of companies and municipalities that make arrangements with the Hospital for this type of care. These services are not available to the general public. As a result, payers for YNHH occupational health services are limited primarily to the companies/municipalities under arrangement with YNHH and workers' compensation. Neither Medicare nor Medicaid provides reimbursement for YNHH's occupational health services. These pricing arrangements are non-exclusive, meaning employers can make arrangements with non-YNHH providers as well and offer their employees a choice for occupational healthcare.

Branford and East Haven occupational health staff (some of which are shared with the urgent care service at East Haven that is also intended for closure) will be redeployed to other Yale-New Haven Health System ("YNHHS") sites once these locations are closed. Accordingly, this proposal will not result in any job losses.

#### Reasons for Termination of East Haven & Branford Occupational Health Sites

Pursuant to the Agreed Settlement in Docket No. 12-31747-CON, as modified by Docket No. 12-31747-MDF, YNHH's Acquisition of Saint Raphael's Health System, Inc., YNHH has been engaged in a three-year integration plan. As documented in the update provided to OHCA on May 29, 2015, clinical and cultural integration are near completion and YNHH is now focusing on ambulatory space and program optimization planning (see Attachment 3).

As part of this planning process, YNHH has reviewed all of its occupational health locations and identified potential service improvement opportunities and cost savings. The Hospital identified duplication of services and determined that capacity exists at all four occupational health sites and that operational efficiencies can increase throughput, creating even greater capacity.

Further, employers located near the occupational health sites in Branford and East Haven do not have a large enough employment base to sustain dedicated occupational health services and significant employer growth is not projected in these areas. A substantial number of patients using each site reside in towns other than East Haven and Branford. Towns of origin include New Haven and points west (i.e. West Haven, Milford & Bridgeport) and Hamden and surrounding communities (i.e. North Haven & Wallingford). For these patients, the YNHH Occupational Medicine and Wellness Services in New Haven and Hamden will provide better access than the sites in East Haven and Branford.

In addition, many of the employers who utilize the occupational health services in East

Haven and Branford are located in other towns and cities. For example, the largest numbers of companies using each site are located in New Haven. In East Haven, only 16 percent of visit volume originates from companies located in East Haven (compared to 29 percent from New Haven companies). In Branford, only 21 percent of visit volume originates from companies located in Branford (compared to 29 percent from New Haven companies). Further, at both sites YNHH itself is the highest utilizer in terms of occupational health visits.

Access to occupational health services will be maintained, even with termination of the YNHH sites in East Haven and Branford. First and foremost, YNHH will continue to offer Occupational Medicine and Wellness Services at locations in New Haven and Hamden, which have ample capacity to absorb East Haven and Branford patients and are located in closer proximity to the employers that make arrangements with YNHH for occupational health services and the employees who use the services. Employers and patients who opt to use alternate YNHH sites will be ensured the same high-quality occupational health services that they currently receive in East Haven and Branford. YNHH's consolidation plan will avoid the unnecessary duplication of services and eliminate underutilized sites, which is consistent with the goals of the SHP.

In addition, there are numerous non-YNHH occupational health providers in the East Haven and Branford service areas. Many of these providers entered the market after the YNHH services opened and they have always existed as alternatives for patients. These providers are listed in OHCA Table 9. At least two providers are located in Branford or other towns on the shoreline east for patients who would rather not travel to New Haven and points north and west. Others are located in the New Haven and Hamden areas and offer more accessible services for these growing markets, as discussed above. Although utilization and capacity data for most of these providers is unavailable to the public, YNHH has procured letters of support for its proposal from several occupational health providers who state that they are willing and able to accept any displaced YNHH patients and/or employers (see Attachment 4). Note also that many of the existing YNHH and non-YNHH providers are located along public transportation lines and offer ample parking for patients who choose to drive.

Lastly, as discussed in greater detail below, consolidation of the YNHH East Haven and Branford occupational health sites into the New Haven and Hamden locations will result in cost savings for the Hospital. These cost savings are critical at a time when hospitals are facing additional taxes and lower reimbursement. In order to ensure that the community has continued access to YNHH's core services, the Hospital must determine the most efficient way to deliver these and other services to its patients. This includes consolidating services and closing locations that offer duplicate services within close geographic proximity, which is the case with YNHH's Occupational Wellness and Medicine Services.

2. Provide the history and timeline of the proposal (i.e., When did discussions begin internally or between Applicant(s)? What have the Applicant(s) accomplished so far?).

**RESPONSE:** The Branford occupational health service was established by HSR in 1996, as part of an outpatient facility that includes rehabilitation and other services. It became part of YNHH when the Hospital acquired HSR in September of 2012. The East Haven occupational health service was established by YNHH in 2012, as part of an outpatient facility that also includes urgent care. Both the Branford outpatient rehabilitation service and the East Haven urgent care service are the subject of separate CON filings to terminate.

Discussions around termination of the East Haven and Branford Occupational Medicine and Wellness Services began within the last 6-12 months. As previously mentioned, pursuant to an Agreed Settlement in the YNHH-HSR acquisition CON proceeding, the Hospital has been engaged in a three-year integration plan. As set forth in the May 2015 update to OHCA, clinical and cultural integration of the two institutions is near completion and YNHH is now focusing on ambulatory space and program optimization planning (see Attachment 3). This has included a thorough review of the capacity, utilization and cost of occupational health services across the system. Out of these analyses, YNHH determined that the most cost-effective approach, which guarantees continued access for patients, is to consolidate the East Haven and Branford locations into the YNHH Occupational Medicine and Wellness sites in New Haven and Hamden.

YNHH has notified some of its larger employers that it intends to close the East Haven and Branford sites, subject to regulatory approval. All employers will be given formal notice that regulatory approval has been obtained. This notice will include the dates on which the East Haven and Branford sites will be closing. At least 30-days' notice will be given to all employers. YNHH will work with employers to ensure seamless care for patients. YNHH has also made arrangements, pending OHCA approval, to terminate its lease in East Haven and is evaluating possible repurposing of the space in Branford for outpatient cardiology services.

YNHH intends to implement this proposal upon receipt of CON approval.

3. Provide the following information:
- a. utilizing **OHCA Table 1**, list all services to be added, terminated or modified, their physical location (street address, town and zip code), the population to be served and the existing/proposed days/hours of operation;

**RESPONSE:** See OHCA Table 1.

- b. identify in **OHCA Table 2** the service area towns and the reason for their inclusion (e.g., provider availability, increased/decreased patient demand for service, market share);

**RESPONSE:** See OHCA Table 2. The service area towns represent approximately 80% of

visit volume for each location (East Haven and Branford) for FY 2014. These also include many of the municipalities that arrange with YNHHS for Occupational Medicine and Wellness Services and the towns where employers who use these services for their employees are located.

4. List the health care facility license(s) that will be needed to implement the proposal;

**RESPONSE: Not applicable. This CON Application is for the termination of services provided as part of a hospital outpatient department. No licensure action is required.**

5. Submit the following information as attachments to the application:

- a. a copy of all State of Connecticut, Department of Public Health license(s) currently held by the Applicant(s);

**RESPONSE: See Attachment 2.**

- b. a list of all key professional, administrative, clinical and direct service personnel related to the proposal and attach a copy of their Curriculum Vitae;

**RESPONSE: The following Curriculum Vitae are included as Attachment 5:**

- **Richard D'Aquila, Executive Vice President, YNHHS; President, YNHHS**
- **Chris O'Connor, Executive Vice President & Chief Operating Officer, YNHHS**
- **Linda F. Pettine, MBA, PT, Associate Director of Occupational Medicine and Wellness Services, YNHHS**
- **Jodie Boldrighini, Director of Occupational and Employee Population Health Solutions, YNHHS.**

- c. copies of any scholarly articles, studies or reports that support the need to establish the proposed service, along with a brief explanation regarding the relevance of the selected articles;

**RESPONSE: Not applicable. No new services are proposed.**

- d. letters of support for the proposal;

**RESPONSE: See Attachment 4.**

- e. the protocols or the Standard of Practice Guidelines that will be utilized in relation to the proposal. Attach copies of relevant sections and briefly describe how the Applicant proposes to meet the protocols or guidelines.

**RESPONSE: Not applicable. No new services are proposed.**

- f. copies of agreements (e.g., memorandum of understanding, transfer agreement, operating agreement) related to the proposal. If a final signed version is not available, provide a draft with an estimated date by which the final agreement will be available.

**RESPONSE: See letters of support from existing providers with the capacity to absorb any displaced patients included as Attachment 4.**

## Public Need and Access to Care

§ "Whether the proposed project is consistent with any applicable policies and standards adopted in regulations by the Department of Public Health;" (Conn.Gen.Stat. § 19a-639(a)(1))

6. Describe how the proposed project is consistent with any applicable policies and standards in regulations adopted by the Connecticut Department of Public Health.

**RESPONSE:** This proposal is consistent with the policies and standards adopted by the Connecticut Department of Public Health in that it removes duplicative services from the market while ensuring continued access to quality care and achieving cost savings for YNHH.

§ "The relationship of the proposed project to the statewide health care facilities and services plan;" (Conn.Gen.Stat. § 19a-639(a)(2))

7. Describe how the proposed project aligns with the Connecticut Department of Public Health Statewide Health Care Facilities and Services Plan, available on OHCA's website.

**RESPONSE:** The SHP is intended to examine access, utilization and distribution of healthcare services, to ensure sustained hospital and health care system financial viability, and to improve patient access to services. Some of the ways in which the SHP accomplishes these objectives are by:

- Helping to prevent excess capacity and underutilization of medical facilities;
- Providing better access to services through planned geographic distribution; and
- Lowering overall cost to the healthcare system by limiting duplication of services.

SHP, Section 1.1.

The proposal to consolidate the YNHH Occupational Medicine and Wellness Services in East Haven and Branford with Hospital sites in New Haven and Hamden is consistent with each of these goals. The result will be removal from the market of two occupational health sites that are underutilized in an area where similar providers have excess capacity as well. The YNHH sites that remain will offer patients access to the high-quality care they have come to expect at facilities located closer to their workplaces and homes. In addition, there are numerous non-YNHH facilities in the East Haven and Branford areas and beyond that can accommodate any displaced patients. To have low-volume, underutilized occupational health services in East Haven and Branford with substantial excess capacity is counter to the SHP's intentions regarding capacity. Discontinuing these duplicative services will lower overall costs to the healthcare system, as the SHP anticipates.

§ "Whether there is a clear public need for the health care facility or services proposed by the applicant;" (Conn.Gen.Stat. § 19a-639(a)(3))

8. With respect to the proposal, provide evidence and documentation to support clear public need:
- a. identify the target patient population to be served;

**RESPONSE:** The target population for the East Haven and Branford Occupational Medicine and Wellness Services is employees of companies and municipalities that make arrangements with YNHH for occupational health services. These services include treatment and follow-up care for job-related injuries, workers' compensation case management, pre-employment physicals, drug testing, DOT examination certifications, fitness for duty assessments, return to work assessments, respirator clearance and fit testing, and various health screening services.

- b. discuss how the target patient population is currently being served;

**RESPONSE:** The target population is currently being served by the YNHH Occupational Medicine and Wellness sites in East Haven, Branford, New Haven, and Hamden. In addition, please refer to OHCA Table 9 for a list of existing non-YNHH providers in the immediate area that offer occupational health services. These providers, as well as the New Haven and Hamden YNHH sites, will remain open and available for occupational health services once the East Haven and Branford YNHH sites are closed.

- c. document the need for the equipment and/or service in the community;

**RESPONSE:** The East Haven and Branford markets are saturated with occupational health providers (see OHCA Table 9). Any demand for occupational health services that is currently being filled by the YNHH facilities in East Haven and Branford can be met by the YNHH facilities in New Haven and Hamden, both of which have excess capacity, or by any of the existing non-YNHH providers in the area.

- d. explain why the location of the facility or service was chosen;

**RESPONSE:** Not applicable. The CON Application is for termination of a service.

- e. provide incidence, prevalence or other demographic data that demonstrates community need;

**RESPONSE:** Not applicable. Please refer to OHCA Table 9, which lists a number of occupational health providers operating in the immediate area. The market is saturated with like providers that have their own patient bases.

- f. discuss how low income persons, racial and ethnic minorities, disabled persons and other underserved groups will benefit from this proposal;

**RESPONSE:** All YNHH facilities accept all patients regardless of race, sex, ethnicity, disability, and economic status. Occupational health services are paid for primarily by patients' employers and/or workers' compensation. Upon closure of the East Haven and Branford sites, patients will have continued access to YNHH occupational health services at their facilities in New Haven and Hamden.

- g. list any changes to the clinical services offered by the Applicant(s) and explain why the change was necessary;

**RESPONSE:** See OHCA Table 1 for clinical services provided at the East Haven and Branford occupational health sites. More specifically, the following clinical services are provided at all locations, including Branford, East Haven, New Haven, and Hamden:

**Audiograms**  
**Blood-borne Pathogen Exposure**  
**Breath Alcohol Testing**  
**DOT Physicals and Follow-up Exams**  
**Drug Testing**  
**Firefighter Physicals**  
**Fitness for Duty Exams**  
**Injury Care**  
**Periodic Physicals**  
**Pre-placement Physicals**  
**Pulmonary Function Testing**  
**Respirator Fit Testing**  
**Tuberculosis Surveillance**  
**Vaccinations**  
**X-rays**

See Response to Question 1 (Project Description) regarding the need to consolidate East Haven and Branford occupational health services with other YNHH occupational health locations.

- h. explain how access to care will be affected;

**RESPONSE:** Access to care will not be impacted by this proposal. There are Occupational Medicine and Wellness Services operated by YNHH in New Haven and Hamden, which will remain open once the East Haven and Branford sites close. The New Haven site is 6.8 miles from the current East Haven site and 8.1 miles from the current Branford site. The Hamden site is 7.4 miles from the current East Haven site and 11.8 miles from the current Branford site. Driving times range from 16 to 19 minutes. As OHCA Tables 2 and 8

demonstrate, a significant number of patients who use the East Haven and Branford facilities actually live in and around Hamden and New Haven. In addition, many of the corporations and municipalities that arrange for services for their employees through YNHH Occupational Medicine and Wellness Services are located in and around New Haven. For these employers/patients, access to occupational health services will be improved when considering geographic proximity to service sites.

In addition, there are several non-YNHH occupational health sites located in New Haven, to the north of New Haven (i.e. Hamden, North Haven), to the west of New Haven (i.e. West Haven, Orange) and to the east of New Haven where the YNHH facilities scheduled for closure are located (i.e. Branford, Guilford). See OHCA Table 9. Employers who elect not to continue their arrangements with YNHH will be able to send their employees to these non-YNHH sites. In fact, many may already offer these sites as an alternative to the YNHH services so that their employees have a choice in provider. Several providers have submitted letters of support for this proposal attesting to their capacity and willingness to take on any displaced YNHH patients (see Attachment 4). Note that many of the existing YNHH and non-YNHH providers are located along public transportation lines and offer ample parking for patients who choose to drive.

- i. discuss any alternative proposals that were considered.

**RESPONSE:** YNHH considered consolidating the East Haven and Branford Occupational Medicine and Wellness sites into a single site located in East Haven. However, YNHH determined that the immediate areas of East Haven and Branford were not experiencing a growth in employers in need of occupational health services. Nor were there sufficient employee patients in the area to sustain either location or a combined location.

§ "Whether the applicant has satisfactorily demonstrated how the proposal will improve quality, accessibility and cost effectiveness of health care delivery in the region, including, but not limited to, (A) provision of or any change in the access to services for Medicaid recipients and indigent persons, and (B) the impact upon the cost effectiveness of providing access to services provided under the Medicaid program;"  
(Conn.Gen.Stat. § 19a-639(a)(5))

9. Describe how the proposal will:

- a. improve the quality of health care in the region;

**RESPONSE:** Ensuring continued access to occupational health services for corporations and municipalities in the area will improve the overall quality of healthcare in the region. This will be done through existing YNHH sites in New Haven and Hamden, which have ample capacity to absorb any displaced East Haven and Branford patients and provide the same exceptional quality of care provided at all YNHH ambulatory facilities. Employers who elect to continue with YNHH Occupational Medicine and Wellness Services will

experience a seamless transition of care for their employees. Care will be provided by the same or comparable staff and health records will be available through the Hospital's electronic medical record systems.

In addition, there are many existing providers of occupational health services in the area who have the availability and willingness to absorb any patients displaced by the closure of YNHH's sites in East Haven and Branford (see Attachment 4). Employers will have the option of making arrangements with any of these non-YNHH providers to maintain access to quality care for their employees at whichever locations are most convenient.

- b. improve accessibility of health care in the region; and

**RESPONSE:** The proposal has been structured to ensure continued access to occupational health services for corporations and municipalities at locations within the YNHH system. Patients will be able to access Occupational Medicine and Wellness Services at existing YNHH sites in New Haven and Hamden, which have ample capacity to absorb any displaced East Haven and Branford patients and provide the same exceptional quality of care provided at all YNHH ambulatory facilities. Employers who elect to continue with YNHH Occupational Medicine and Wellness Services will experience a seamless transition of care for their employees. Care will be provided by the same or comparable staff and health records will be available through the Hospital's electronic medical record systems.

In addition, there are many existing providers of occupational health services in the service area who have the availability and willingness to absorb any patients displaced by the closure of YNHH's sites in East Haven and Branford (see Attachment 4). Employers will have the option of making arrangements with any of these non-YNHH providers to maintain access to quality care for their employees at whichever locations are most convenient.

- c. improve the cost effectiveness of health care delivery in the region.

**RESPONSE:** The closure of underutilized, duplicative occupational health sites in East Haven and Branford, and the consolidation of patients from these sites to existing YNHH facilities in New Haven and Hamden, will result in cost savings for the Hospital and improve the cost-effectiveness of healthcare delivery in the region.

10. How will this proposal help improve the coordination of patient care (explain in detail regardless of whether your answer is in the negative or affirmative)?

**RESPONSE:** This proposal will maintain access to occupational health services for patients within the YNHH system. Patients who are currently seen in East Haven and Branford will have the option of transitioning care to YNHH sites in New Haven and Hamden. These facilities have ample capacity to absorb any displaced patients and provide the same exceptional quality of care provided at all YNHH ambulatory facilities.

**Employers who elect to continue with YNHH Occupational Medicine and Wellness Services will experience a seamless transition of care for their employees. Care will be provided by the same or comparable staff and health records will be available through the Hospital's electronic medical record systems.**

**YNHH has notified some of its larger employers that it intends to close the East Haven and Branford sites, subject to regulatory approval. All employers will be given formal notice that regulatory approval has been obtained. This notice will include the dates on which the East Haven and Branford sites will be closing. At least 30-days' notice will be given to all employers. YNHH will work with employers to ensure seamless care for patients.**

**In addition, there are many existing providers of occupational health services in the service area who have the availability and willingness to absorb any patients displaced by the closure of YNHH's sites in East Haven and Branford (see Attachment 4). Employers will have the option of making arrangements with any of these non-YNHH providers to maintain access to quality care for their employees at whichever locations are most convenient.**

**The Hospital is committed to working with employers and patients to ensure that patients have continued, coordinated access to occupational health services in locations of their choosing.**

11. Describe how this proposal will impact access to care for Medicaid recipients and indigent persons.

**RESPONSE: Not applicable. The YNHH Occupational Medicine and Wellness Services in East Haven and Branford are exclusively for the use of employers who make arrangements with YNHH for these services. Services are paid for either by the employers themselves or through workers' compensation (or in limited instances self-pay, i.e. drivers who require DOT physicals for their commercial driver's licenses). These facilities do not serve any Medicaid or indigent persons. Therefore, no Medicaid beneficiaries or indigent persons will be displaced by the proposed closure of these sites.**

*§ "Whether an applicant, who has failed to provide or reduced access to services by Medicaid recipients or indigent persons, has demonstrated good cause for doing so, which shall not be demonstrated solely on the basis of differences in reimbursement rates between Medicaid and other health care payers;" (Conn.Gen.Stat. § 19a-639(a)(10))*

12. If the proposal fails to provide or reduces access to services by Medicaid recipients or indigent persons, provide explanation of good cause for doing so.

**RESPONSE: Not applicable.**

§ "Whether the applicant has satisfactorily demonstrated that any consolidation resulting from the proposal will not adversely affect health care costs or accessibility to care." (Conn.Gen.Stat. § 19a-639(a)(12))

13. Will the proposal adversely affect patient health care costs in any way? Quantify and provide the rationale for any changes in price structure that will result from this proposal, including, but not limited to, the addition of any imposed facility fees.

**RESPONSE:** The proposal will not adversely impact healthcare costs in any way. Employers will have continued access to YNH Occupational Medicine and Wellness Services for their employees at alternate sites in New Haven and Hamden. The cost for services will be identical to the cost at the East Haven and Branford facilities. No facility fees are charged for occupational health services.

## Financial Information

*§ "Whether the applicant has satisfactorily demonstrated how the proposal will impact the financial strength of the health care system in the state or that the proposal is financially feasible for the application,"  
(Conn.Gen.Stat. § 19a-639(a)(4))*

14. Describe the impact of this proposal on the financial strength of the state's health care system or demonstrate that the proposal is financially feasible for the applicant.

**RESPONSE: Consolidation of the East Haven and Branford occupational health sites with YNHH Occupational Medicine and Wellness sites in New Haven and Hamden will result in cost savings for YNHH. These savings will arise from elimination of lease expenses in East Haven and the removal of underutilized, duplicative occupational health sites in markets without sufficient employee bases or growth. The cost-savings strengthens the Hospital and statewide health system as a whole.**

15. Provide a final version of all capital expenditure/costs for the proposal using OHCA Table 3.

**RESPONSE: Not applicable. No capital expenditures/costs will be incurred.**

16. List all funding or financing sources for the proposal and the dollar amount of each. Provide applicable details such as interest rate; term; monthly payment; pledges and funds received to date; letter of interest or approval from a lending institution.

**RESPONSE: Not applicable. No capital expenditures/costs will be incurred.**

17. Include as an attachment:

- a. audited financial statements for the most recently completed fiscal year. If audited financial statements do not exist, provide other financial documentation (e.g., unaudited balance sheet, statement of operations, tax return, or other set of books.). Connecticut hospitals required to submit annual audited financial statements may reference that filing, if current;

**RESPONSE: YNHH's most recent audited financial statements are on file with OHCA.**

- b. a complete **Financial Worksheet A (not-for-profit entity)** or **B (for-profit entity)**, available on OHCA's website under "OHCA Forms," providing a summary of revenue, expense, and volume statistics, "without the CON project," "incremental to the CON project," and "with the CON project." Note: the actual results reported in the Financial Worksheet must match the audited financial statement that was submitted or referenced.

**RESPONSE: See Attachment 6.**

18. Complete **OHCA Table 4** utilizing the information reported in the attached Financial Worksheet.

**RESPONSE:** See **OHCA Table 4**.

19. Explain all assumptions used in developing the financial projections reported in the Financial Worksheet.

**RESPONSE:** See **Attachment 6**.

20. Explain any projected incremental losses from operations resulting from the implementation of the CON proposal.

**RESPONSE:** The projected losses from operations resulting from the implementation of this CON proposal are based on the loss of a portion of the revenue at these sites as some patients choose to find alternative care elsewhere outside of the YNHH network, and the redeployment of staff elsewhere within the YNHHS. There will be savings associated with the redeployment of staff to vacant positions and elimination of lease payments due to the reconfiguration of services.

21. Indicate the minimum number of units required to show an incremental gain from operations for each projected fiscal year.

**RESPONSE:** Not applicable. This CON Application is for termination of a service.

## Utilization

§ "The applicant's past and proposed provision of health care services to relevant patient populations and payer mix, including, but not limited to, access to services by Medicaid recipients and indigent persons;"  
(Conn.Gen.Stat. § 19a-639(a)(6))

21. Complete **OHCA Table 5** and **OHCA Table 6** for the past three fiscal years ("FY"), current fiscal year ("CFY") and first three projected FYs of the proposal, for each of the Applicant's existing and/or proposed services. Report the units by service, service type or service level.

**RESPONSE:** See **OHCA Tables 5**, which includes historical visit volume for both the East Haven and Branford sites. **OHCA Table 6** is not applicable given that this is a termination of services.

22. Provide a detailed explanation of all assumptions used in the derivation/ calculation of the projected service volume; explain any increases and/or decreases in volume reported in OHCA Tables 4 and 5.

**RESPONSE:** There is no projected volume because this is a termination of services.

There are various reasons for the increases and decreases in occupational health volume seen at both the East Haven and Branford sites. The East Haven location has experienced slow growth since FY 2012. The Branford location saw a decrease in volume between FY 2012 and 2013, and has since experienced modest growth. Neither site is operating at or near optimal capacity.

Low volume at these sites can be attributed, in part, to the fact that employers located near the occupational health sites in Branford and East Haven do not have a large enough employee base to sustain dedicated occupational health sites and significant employer growth is not projected in these areas (versus the New Haven and Hamden markets).

In addition, issues with the economy have been at the forefront of volume decreases in occupational health services at YNHH. There are fewer employers in general to arrange with for occupational health services. Moreover, employees tend to underreport work-related injuries and illnesses in difficult economic times because they are concerned about potentially losing their jobs.

23. Provide the current and projected patient population mix (number and percentage of patients by payer) for the proposal using **OHCA Table 7** and provide all assumptions. **Note: payer mix should be calculated from patient volumes, not patient revenues.**

**RESPONSE:** See **OHCA Table 7**. There is no projected payer mix or assumptions because this is a termination of services.

§ "Whether the applicant has satisfactorily identified the population to be served by the proposed project and satisfactorily demonstrated that the identified population has a need for the proposed services;"  
(Conn.Gen.Stat. § 19a-639(a)(7))

24. Describe the population (as identified in question 8(a)) by gender, age groups or persons with a specific condition or disorder and provide evidence (i.e., incidence, prevalence or other demographic data) that demonstrates a need for the proposed service or proposal. **Please note: if population estimates or other demographic data are submitted, provide only publicly available and verifiable information (e.g., U.S. Census Bureau, Department of Public Health, CT State Data Center) and document the source.**

**RESPONSE:** See OHCA Table 1 and response to Question 8(a) (Public Need & Access to Care) regarding the population served by the East Haven and Branford Occupational Medicine and Wellness Services. See Response to Question 1 (Project Description) regarding the need to consolidate YNHH Occupational Medicines and Wellness Services locations and how access to care will be ensured via other YNHH occupational health providers in the immediate area that can provide care to any displaced patients.

25. Using **OHCA Table 8**, provide a breakdown of utilization by town for the most recently completed FY. Utilization may be reported as number of persons, visits, scans or other unit appropriate for the information being reported.

**RESPONSE:** See OHCA Table 8. Utilization is reported as visits by patient town of origin.

Note also that many of the employers who utilize the occupational health services in East Haven and Branford are located in other towns and cities. For example, the largest numbers of companies using each site are located in New Haven. In East Haven, only 16 percent of visit volume originates from companies located in East Haven (compared to 29 percent from New Haven companies). In Branford, only 21 percent of visit volume originates from companies located in Branford (compared to 29 percent from New Haven companies). Further, at both sites YNHH itself is the highest utilizer in terms of occupational health visits.

§ "The utilization of existing health care facilities and health care services in the service area of the applicant;" (Conn. Gen. Stat. § 19a-639(a)(8))

26. Using **OHCA Table 9**, identify all existing providers in the service area and, as available, list the services provided, population served, facility ID (see table footnote), address, hours/days of operation and current utilization of the facility. Include providers in the towns served or proposed to be served by the Applicant, as well as providers in towns contiguous to the service area.

**RESPONSE:** See **OHCA Table 9**.

27. Describe the effect of the proposal on these existing providers.

**RESPONSE:** The proposal to consolidate the East Haven and Branford Occupational Medicine and Wellness Services with YNHH sites in New Haven and Hamden will have a positive impact on existing providers, if any impact at all. It is YNHH's expectation that a majority of employers and their employees who use the East Haven and Branford sites will simply transition their care to YNHH's New Haven and Hamden locations. This will allow for continuity of care, maintaining both access to and quality of services for the existing patient population.

To the extent that employers decide not to list YNHH as option for employees to obtain occupational health services, or that patients opt to use non-YNHH providers rather than transition their care to other YNHH sites, existing providers may benefit from increased patient volume and revenue. This should contribute to the financial stability of these providers.

28. Describe the existing referral patterns in the area served by the proposal.

**RESPONSE:** Occupational medicine patients are referred exclusively by their employers. Typically, an employer will give an employee several providers to choose from, each of which is approved by the employer and/or its workers' compensation carrier.

29. Explain how current referral patterns will be affected by the proposal.

**RESPONSE:** Current referral patterns will not be affected by the proposal. Employers will still have a number of YNHH and non-YNHH occupational health sites available in the area to serve their employees (see **OHCA Table 9**).

§ "Whether the applicant has satisfactorily demonstrated that the proposed project shall not result in an unnecessary duplication of existing or approved health care services or facilities;" (Conn.Gen.Stat. § 19a-639(a)(9))

30. If applicable, explain why approval of the proposal will not result in an unnecessary duplication of services.

**RESPONSE:** This proposal will in fact eliminate the unnecessary duplication of occupational health services in the East Haven and Branford markets. As previously noted, YNHH has determined that each of its four Occupational Medicine and Wellness sites has capacity and, therefore, these sites are unnecessarily duplicative of each other. Closing East Haven and Branford and consolidating the patients from these sites at locations in New Haven and Hamden will avoid this duplication. In addition, there are numerous non-YNHH providers (most of which were established after the East Haven and Branford sites opened) that duplicate the services provided by YNHH in East Haven and Branford and that have the capacity and willingness to absorb any displaced patients (see Attachment 4).

§ "Whether the applicant has satisfactorily demonstrated that the proposal will not negatively impact the diversity of health care providers and patient choice in the geographic region. . ." (Conn.Gen.Stat. § 19a-639(a)(11))

31. How will the proposal impact the diversity of health care providers and patient choice or reduce competition in the geographic region?

**RESPONSE:** The proposal will not adversely impact the diversity of healthcare providers or patient choice in the service area. Employers and their patients will still have access to YNHH Occupational Medicine and Wellness sites within a short travel distance. In addition, as is the case presently, these employers and patients have access to a number of non-YNHH occupational health providers in the service area (15 locations total). There remains sufficient diversity of providers to ensure patient choice and competition for services, even with closure of the YNHH sites in East Haven and Branford.

## Tables

**TABLE 1  
APPLICANT'S SERVICES AND SERVICE LOCATIONS**

Service	Street Address, Town	Population Served	Days/Hours of Operation	New Service or Proposed Termination
Yale-New Haven Hospital Occupational Medicine and Wellness Services at East Haven	317 Foxon Road East Haven, CT 06512	Both sites serve employees of companies and municipalities that make arrangements with YNH for occupational health services, including treatment and follow up care for job-related injuries, workers' compensation case management, pre-employment physicals, drug testing, DOT examination	M-F, 9am – 4pm	Termination
Yale-New Haven Occupational Medicine and Wellness Services at Branford	84 North Main Street 2 <sup>nd</sup> Floor Branford, CT 06405	certifications, fitness for duty assessments, return to work assessments, respirator clearance and fit testing, and various health screening services.	M-F, 8:30 am – 5 pm	Termination

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**TABLE 2  
SERVICE AREA TOWNS (EAST HAVEN LOCATION)**

List the official name of town\* and provide the reason for inclusion.

Town*	Reason for Inclusion
<p align="center"> <b>East Haven West Haven New Haven Branford Hamden Northford North Haven Wallingford North Branford Bridgeport Milford Guilford</b> </p>	<p align="center"> <b>These towns represent approximately 80% of occupational medicine and wellness visit volume at East Haven for FY 2014.</b> </p>

\* Village or place names are not acceptable.

[back to question]

**TABLE 2  
SERVICE AREA TOWNS (BRANFORD LOCATION)**

List the official name of town\* and provide the reason for inclusion.

Town*	Reason for Inclusion
<b>East Haven Branford Guilford West Haven New Haven North Branford Madison Hamden Clinton Wallingford North Haven Milford Northford Bridgeport</b>	<b>These towns represent approximately 80% of occupational medicine and wellness visit volume at Branford for FY 2014.</b>

\* Village or place names are not acceptable.

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**TABLE 3  
TOTAL PROPOSAL CAPITAL EXPENDITURE (EAST HAVEN & BRANFORD LOCATIONS)**

<b>Purchase/Lease</b>	<b>Cost</b>
Equipment (Medical, Non-medical, Imaging)	\$0
Land/Building Purchase*	
Construction/Renovation**	
Other (specify)	
<b>Total Capital Expenditure (TCE)</b>	<b>\$0</b>
Lease (Medical, Non-medical, Imaging)***	\$0
<b>Total Capital Cost (TCC)</b>	<b>\$0</b>
<b>Total Project Cost (TCE+TCC)</b>	<b>\$0</b>

\* If the proposal involves a land/building purchase, attach a real estate property appraisal including the amount; the useful life of the building; and a schedule of depreciation.

\*\* If the proposal involves construction/renovations, attach a description of the proposed building work, including the gross square feet; existing and proposed floor plans; commencement date for the construction/ renovation; completion date of the construction/renovation; and commencement of operations date.

\*\*\* If the proposal involves a capital or operating equipment lease and/or purchase, attach a vendor quote or invoice; schedule of depreciation; useful life of the equipment; and anticipated residual value at the end of the lease or loan term.

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**TABLE 4  
PROJECTED INCREMENTAL REVENUES AND EXPENSES**

	<b>FY 2016*</b>	<b>FY 2017*</b>	<b>FY 2018*</b>
Revenue from Operations	(\$246,000)	(\$248,000)	(\$250,900)
Total Operating Expenses	(\$148,000)	(\$150,600)	(\$154,400)
<b>Gain/Loss from Operations</b>	<b>(\$97,900)</b>	<b>(\$97,800)</b>	<b>(\$96,500)</b>

\* Fill in years using those reported in the Financial Worksheet attached.

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**TABLE 5  
HISTORICAL UTILIZATION BY SERVICE (EAST HAVEN LOCATION)**

Service**	Actual Volume (Last 3 Completed FYs)			CFY Volume*
	FY 2012***	FY 2013***	FY 2014***	FY 2015***
Occupational Medicine and Wellness (Visits)	223 <sup>1</sup>	1,477	2,382	2,311 actual
<b>Total</b>	<b>223</b>	<b>1,477</b>	<b>2,382</b>	<b>2,311</b>

\* For periods greater than 6 months, report annualized volume, identifying the number of actual months covered and the method of annualizing. For periods less than 6 months, report actual volume and identify the period covered.

\*\* Identify each service type and level adding lines as necessary. Provide the number of visits or discharges as appropriate for each service type and level listed.

\*\*\* Fill in years. If the time period reported is not *identical* to the fiscal year reported in Table 4 of the application, provide the date range using the mm/dd format as a footnote to the table.

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**TABLE 5  
HISTORICAL UTILIZATION BY SERVICE (BRANFORD LOCATION)**

Service**	Actual Volume (Last 3 Completed FYs)			CFY Volume*
	FY 2012***	FY 2013***	FY 2014***	FY 2015***
Occupational Medicine and Wellness (Visits)	4,891	4,252	5,087	5,420 actual
<b>Total</b>	<b>4,891</b>	<b>4,252</b>	<b>5,087</b>	<b>5,420</b>

\* For periods greater than 6 months, report annualized volume, identifying the number of actual months covered and the method of annualizing. For periods less than 6 months, report actual volume and identify the period covered.

\*\* Identify each service type and level adding lines as necessary. Provide the number of visits or discharges as appropriate for each service type and level listed.

\*\*\* Fill in years. If the time period reported is not *identical* to the fiscal year reported in Table 4 of the application, provide the date range using the mm/dd format as a footnote to the table.

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<sup>1</sup> The Occupational Medicine and Wellness Service at East Haven opened in May of 2012. This number, therefore, reflects approximately 4 months (May – September, 2012) of actual volume.

**TABLE 6  
PROJECTED UTILIZATION BY SERVICE (EAST HAVEN & LOCATIONS)**

Service*	Projected Volume		
	FY 2016**	FY 2017**	FY 2018**
Occupational Medicine and Wellness (Visits)	0	0	0
<b>Total</b>	<b>0</b>	<b>0</b>	<b>0</b>

\* Identify each service type by location and add lines as necessary. Provide the number of visits/discharges as appropriate for each service listed.

\*\* If the first year of the proposal is only a partial year, provide the first partial year and then the first three full FYs. Add columns as necessary. If the time period reported is not *identical* to the fiscal year reported in Table 4 of the application, provide the date range using the mm/dd format as a footnote to the table.

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**TABLE 7  
APPLICANT'S CURRENT & PROJECTED PAYER MIX (EAST HAVEN LOCATION)**

Payer	Current		Projected					
	FY 2015**		FY 2016**		FY 2017**		FY 2018**	
	Discharges	%	Discharges	%	Discharges	%	Discharges	%
Medicare*	0	0%	N/A	N/A	N/A	N/A	N/A	N/A
Medicaid*	0	0%						
CHAMPUS & TriCare	0	0%						
<b>Total Government</b>	<b>0</b>	<b>0%</b>						
Commercial Insurers	0	0%						
Uninsured	0	0%						
Workers Compensation	1,002	43%						
Other (Company/Municipality; Self-pay; Drug Lab)	1,309	57%						
<b>Total Non-Government</b>	<b>2,311</b>	<b>100%</b>						
<b>Total Payer Mix</b>	<b>2,311</b>	<b>100%</b>						

\* Includes managed care activity.

\*\* Fill in years. Ensure the period covered by this table corresponds to the period covered in the projections provided. New programs may leave the "current" column blank.

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**TABLE 7  
APPLICANT'S CURRENT & PROJECTED PAYER MIX (BRANFORD LOCATION)**

Payer	Current FY 2015**		Projected					
	Discharges	%	FY 2016**		FY 2017**		FY 2018**	
			Discharges	%	Discharges	%	Discharges	%
Medicare*	0	0%	N/A	N/A	N/A	N/A	N/A	N/A
Medicaid*	0	0%						
CHAMPUS & TriCare	0	0%						
<b>Total Government</b>	0	0%						
Commercial Insurers	0	0%						
Uninsured	0	0%						
Workers Compensation	1,585	29%						
Other (Company/Municipality; Self-pay; Drug lab)	3,835	71%						
<b>Total Non- Government</b>	5,420	100%						
<b>Total Payer Mix</b>	5,420	100%						

\* Includes managed care activity.

\*\* Fill in years. Ensure the period covered by this table corresponds to the period covered in the projections provided. New programs may leave the "current" column blank.

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**TABLE 8  
UTILIZATION BY TOWN (EAST HAVEN LOCATION)**

Town	Utilization FY 14** (Visits & Percentage)
East Haven	800 (33.58%)
West Haven	278 (11.67%)
New Haven	189 (7.93%)
Branford	121 (5.08%)
Hamden	101 (4.24%)
Northford	90 (3.78%)
North Haven	83 (3.48%)
Wallingford	71 (2.98%)
North Branford	69 (2.90%)
Bridgeport	44 (1.85%)
Milford	41 (1.72%)
Guilford	34 (1.43%)
OTHER	461 (19.36%)
<b><u>TOTAL</u></b>	<b>2,382 (100%)</b>

\* List inpatient/outpatient/ED volumes separately, if applicable

\*\* Fill in year if the time period reported is not *identical* to the fiscal year reported on pg. 2 of the application; provide the date range using the mm/dd format as a footnote to the table.

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**TABLE 8  
UTILIZATION BY TOWN (BRANFORD LOCATION)**

<b>Town</b>	<b>Utilization FY 14** (Visits &amp; Percentages)</b>
East Haven	916 (18.01%)
Branford	890 (17.50%)
Guilford	433 (8.51%)
West Haven	345 (6.78%)
New Haven	242 (4.76%)
North Branford	203 (3.99%)
Madison	190 (3.74%)
Hamden	174 (3.42%)
Clinton	164 (3.22%)
Wallingford	129 (2.54%)
North Haven	120 (2.36%)
Milford	101 (1.99%)
Northford	98 (1.93%)
Bridgeport	80 (1.57%)
OTHER	1,002 (19.68%)
<b>TOTAL</b>	<b>5,087 (100%)</b>

\* List inpatient/outpatient/ED volumes separately, if applicable

\*\* Fill in year if the time period reported is not *identical* to the fiscal year reported on pg. 2 of the application; provide the date range using the mm/dd format as a footnote to the table.

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TABLE 9  
SERVICES AND SERVICE LOCATIONS OF EXISTING PROVIDERS

Alternate Sites of Service – Within Yale-New Haven Health System									
Count	Service or Program Name	Population Served	Type of Service	Facility ID	Street Address and Town	Hours/Days of Operation	Current Utilization	Distance from YNH at Branford	Distance from YNH at Foxon
1	YNHH Occupational Health Services at Branford	Employers/employees.	Occupational health.	1851568828	84 North Main Street, Suite 200 Branford, CT	M-F (8:30am - 5pm)	5000 visits / year	0 miles	4.7 miles
2	YNHH Occupational Health Services at East Haven	Employers/employees.	Occupational health.	1851568828	317 Foxon Road East Haven, CT	M-F (9am - 4pm)	2000 visits / year	4.7 miles	0 miles
3	YNHH Occupational Health Services at New Haven	Employers/employees.	Occupational health.	1851568828	175 Sherman Avenue New Haven, CT	M-F (8am - 5:00pm)	16000 visits / year	8.1 miles	7.8 miles
4	YNHH Occupational Health Services at Hamden	Employers/employees.	Occupational health.	1851568829	2080 Whitney Avenue Hamden, CT	M-F (8:30am - 5pm)	8000 visits / year	11.8 miles	7.4 miles

TABLE 9  
SERVICES AND SERVICE LOCATIONS OF EXISTING PROVIDERS

Alternate Sites of Service – Outside of Yale-New Haven Health System									
Count	Service or Program Name	Population Served	Type of Service	Facility ID	Street Address and Town	Hours/Days of Operation	Current Utilization	Distance from YNH at Branford	Distance from YNH at Foxon
1	ACAP Urgent Care	Employers, employees, commercially insured, Medicare, Medicaid children and adults	Occupational health, urgent care.	N/A	79 Washington Ave North Haven, CT	M-F (11am - 7pm) Sat-Sun (9am - 5pm)	Proprietary.	10.1 miles	6.5 miles
2	ASAP Urgent Care	Employers, employees, commercially insured, Medicare, Medicaid children and adults	Occupational health, urgent care.	N/A	2165 Dixwell Avenue Hamden, CT	M-F (8am - 8pm) Sat-Sun (9am - 5pm)	Proprietary.	11.5 miles	8.0 miles
3	203 Urgent Care	Employers, employees, commercially insured, Medicare, Medicaid children and adults	Occupational health, urgent care.	N/A	163 Universal Drive North Haven, CT	M-F (8am - 9pm) Sat-Sun (8am - 6pm)	Proprietary.	8.6 miles	4.6 miles
4	203 Urgent Care	Employers, employees, commercially insured, Medicare, Medicaid children and adults	Occupational health, urgent care.	N/A	109 Boston Post Road Orange, CT	M-F (8am - 9pm) Sat-Sun (8am - 6pm)	Proprietary.	11.0 miles	10.4 miles
5	203 Urgent Care	Employers, employees, commercially insured, Medicare, Medicaid children and adults	Occupational health, urgent care.	N/A	636 Campbell Avenue West Haven, CT	M-F (8am - 8pm) Sat-Sun (10am - 4pm)	Proprietary.	9.3 miles	8.7 miles
6	203 Urgent Care	Employers, employees, commercially insured, Medicare, Medicaid children and adults	Occupational health, urgent care.	N/A	1700 Dixwell Ave Hamden, CT	M-F (8am - 9pm) Sat-Sun (10am - 4pm)	Proprietary.	10.8 miles	7.2 miles
7	Express Care Urgent Care	Employers, employees, commercially insured, Medicare, Medicaid children and adults	Occupational health, urgent care.	N/A	1650 Dixwell Ave Hamden, CT	7 days a week (8am - 8pm)	Proprietary.	10.4 miles	7.3 miles
8	Concraza Urgent Care	Employers, employees, commercially insured, Medicare.	Occupational health, urgent care.	N/A	370 James Street New Haven, CT	M-F (8am - 5pm)	Proprietary.	7.9 miles	4.0 miles
9	Stony Creek Urgent Care	Employers, employees, commercially insured, Medicare, Medicaid children and adults	Occupational health, urgent care.	N/A	6 Business Park Drive Branford, CT	M-F (8am - 7:30pm) Sat-Sun (9am - 4:30pm)	Proprietary.	3.1 miles	6.1 miles
10	Stony Creek Urgent Care	Employers, employees, commercially insured, Medicare, Medicaid children and adults	Occupational health, urgent care.	N/A	236 Boston Post Road Orange, CT	M-F (8am - 7:30pm) Sat-Sun (9am - 2:30pm)	Proprietary.	11.6 miles	11.0 miles
11	CVS Minute Clinic	Employers, employees, commercially insured, Medicare, Medicaid children and adults	Occupational health, urgent care.	N/A	162 Washington Ave North Haven, CT	M-F (8:30am - 7:30pm) Sat. (9am - 5:30pm) Sun. (10am - 5:30pm)	Proprietary.	10.3 miles	6.9 miles
12	CVS Minute Clinic	Employers, employees, commercially insured, Medicare, Medicaid children and adults	Occupational health, urgent care.	N/A	2045 Dixwell Ave Hamden, CT	M-F (8:30am - 7:30pm) Sat. (9am - 5:30pm) Sun. (10am - 5:30pm)	Proprietary.	11.4 miles	7.8 miles
13	CVS Minute Clinic	Employers, employees, commercially insured, Medicare, Medicaid children and adults	Occupational health, urgent care.	N/A	1057 Boston Post Road Gulfport, CT	M-F (8:30am - 7:30pm) Sat. (9am - 5:30pm) Sun. (10am - 5:30pm)	Proprietary.	8.0 miles	9.3 miles



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Supplemental CON Application Form  
**Termination of a Service**  
Conn. Gen. Stat. § 19a-638(a)(5),(7),(8),(15)

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**Applicant:** Yale-New Haven Hospital

**Project Name:** Alignment of Occupational Medicine Services

## 1. Project Description: Service Termination

a. Please provide

- i. a description of the history of the services proposed for termination, including when they commenced,

**RESPONSE:** YNHH currently provides occupational health services at the following locations: 175 Sherman Avenue, New Haven; 84 North Main Street, Branford; 317 Foxon Road, East Haven; and 2080 Whitney Avenue, Hamden. All four sites are operated as hospital outpatient departments under YNHH's acute-care hospital license.

The Branford Occupational Medicine and Wellness site (f/k/a Occupational Health Plus <sup>TM</sup>) was established in 1996, and was originally owned and operated by HSR. It became part of YNHH when the Hospital acquired HSR in September of 2012.

The East Haven Occupational Medicine and Wellness site (f/k/a Worker Health Solutions) opened in September of 2012, as part of an outpatient facility operated by YNHH that includes an urgent care center. YNHH is also seeking CON approval to terminate the East Haven urgent care service (see Docket No. 15-32011-CON).

Although YNHH is requesting permission to close two of its Occupational Medicine and Wellness locations, sites in New Haven and Hamden will remain open. The Hospital is not terminating occupational health services altogether.

- ii. whether CON authorization was received and,

**RESPONSE:** To the best of YNHH's knowledge, HSR did not require or receive CON approval to establish the Branford Occupational Medicine and Wellness Service (f/k/a Occupational Health Plus <sup>TM</sup>). YNHH received a determination from OHCA that no CON was required to establish the East Haven Occupational and Wellness Service (see Docket No. 09-31470-DTR).

- iii. if CON authorization was required, the docket number for that approval.

**RESPONSE:** To the best of YNHH's knowledge, HSR did not require or receive CON approval to establish the Branford Occupational Medicine and Wellness Service (f/k/a Occupational Health Plus <sup>TM</sup>). YNHH received a determination from OHCA that no CON was required to establish the East Haven Occupational and Wellness Service (see Docket No. 09-31470-DTR).

- b. Explain in detail the Applicant's rationale for this termination of services, and the process undertaken by the Applicant in making the decision to terminate.

**RESPONSE:** As noted in the Main CON Application Form, pursuant to the Agreed Settlement in Docket No. 12-31747-CON, as modified by Docket No. 12-31747-MDF, YNHH's Acquisition of Saint Raphael's Health System, Inc., YNHH has been engaged in a three-year integration plan. As documented in the update provided to OHCA on May 29, 2015, clinical and cultural integration are near completion and YNHH is now focusing on ambulatory space and program optimization planning (see Attachment 3).

As part of this planning process, which has taken place over the last 6-12 months, YNHH has reviewed all of its occupational health locations and identified potential service improvement opportunities and cost savings. The Hospital determined that capacity exists at all four occupational health sites and that operational efficiencies can increase throughput, creating even greater capacity while removing cost and expenses in underutilized satellite locations.

Further, employers located near the occupational health sites in Branford and East Haven do not have a large enough employee base to sustain dedicated occupational health sites and significant employer growth is not projected in these areas (versus the New Haven and Hamden markets). A significant number of patients using each site reside in towns other than East Haven and Branford. Towns of origin include New Haven and points west (i.e. West Haven, Milford & Bridgeport) and Hamden and surrounding communities (i.e. North Haven & Wallingford). For these patients, the YNHH Occupational Medicine and Wellness Services in New Haven and Hamden will provide better access than the sites in East Haven and Branford.

Access to occupational health services will be ensured, even with termination of the YNHH sites in East Haven and Branford. First and foremost, YNHH will continue to offer Occupational Medicine and Wellness Services at locations in New Haven and Hamden, which have ample capacity to absorb East Haven and Branford patients and are located in closer proximity to the employers that arrange with YNHH for occupational health services and the employees who use the services. Employers and patients who opt to use alternate YNHH sites will be ensured the same high-quality occupational health services that they currently receive in East Haven and Branford.

In addition, there are numerous non-YNHH occupational health providers in the East Haven and Branford areas. Many of these providers entered the market after the YNHH services opened and they have always existed as an alternative for patients. Employers typically offer employees a choice among several providers for their occupational health services. These providers are listed in OHCA Table 9. Some are located in the immediate Branford and East Haven areas for patients who would rather not travel to New Haven and points north and west. Others are located in the New Haven area and offer more accessible services for these growing markets, as discussed above. Although utilization and capacity data for most of these providers is unavailable to the public, YNHH has procured letters of support for its proposal from several occupational health providers who state that they are

willing and able to accept any displaced YNHH patients and/or employers (see Attachment 6).

Lastly, as discussed in greater detail in the Main CON Application Form, consolidation of the YNHH East Haven and Branford occupational health sites into the New Haven and Hamden locations will result in cost savings for the Hospital. These cost savings are critical at a time when hospitals are facing additional taxes and lower reimbursement. In order to ensure that the community has continued access to YNHH's core services, the Hospital must determine the most efficient way to deliver these and other services to its patients. This includes consolidating services and closing locations that offer duplicate services within close geographic proximity, which is the case with YNHH's Occupational Wellness and Medicine Services. Note that all displaced employees will be relocated to other YNHHS positions.

- c. Did the proposed termination require the vote of the Board of Directors of the Applicant? If so, provide copy of the minutes (excerpted for other unrelated material) for the meeting(s) the proposed termination was discussed and voted on.

**RESPONSE:** The proposed terminations did not require a vote of the YNHH Board of Directors.

## **2. Termination's Impact on Patients and Provider Community**

- a. For each provider to which the Applicant proposes transferring or referring clients, provide the below information for the last completed fiscal year and current fiscal year.

**RESPONSE:** Please see the list of providers in OHCA Table 9. Prior to closing, YNHH will notify all employers who have arrangements with the Hospital for occupational health services that the East Haven and Branford sites will be discontinued. These employers will then notify their employees and make alternate arrangements for care with YNHH and/or non-YNHH providers.

- a. Provide evidence (e.g., written agreements or memorandum of understanding) that other providers in the area are willing and able to absorb the displaced patients.

**RESPONSE:** See Attachment 6.

- b. Identify any special populations that utilize the service(s) and explain how these populations will maintain access to the service following termination at the specific location; also, specifically address how the termination of this service will affect access to care for Medicaid recipients and indigent persons.

**RESPONSE:** The Occupational Medicine and Wellness Services in East Haven and Branford are utilized exclusively by employees of corporations and municipalities that arrange with YNHH for these services. These employees will be able to obtain services going forward at YNHH locations in New Haven and Hamden. Employers can also arrange for their employees to access occupational health services from the numerous non-YNHH providers in the area. See OHCA Table 9.

Medicaid does not reimburse for occupational health services at YNHH. See Main CON Application Form for more details on how this proposal will have no impact on access to care for Medicaid recipients and indigent persons.

- c. Describe how clients will be notified about the termination and transfer to other providers.

**RESPONSE:** Because the Occupational Medicine and Wellness Services are provided through arrangements with employers, the employers will be notified of the change in service availability. YNHH has already notified some of its larger employers that it intends to close the East Haven and Branford sites, subject to regulatory approval. All employers will be given formal notice that regulatory approval has been obtained. This notice will include the dates on which the East Haven and Branford sites will be closing. YNHH will contact these employers by telephone or letter and advise them that the New Haven and Hamden sites will remain available for their employees. Employers will then communicate with their employees about whether they can continue to receive occupational health services at YNHH or if the company/municipality will be making arrangements with alternate providers. All employers will be given at least 30-days' notice prior to closing the East Haven and Branford occupational health sites.

- d. For DMHAS-funded programs only, attach a report that provides the following information for the last three full FYs and the current FY to-date:
  - i. Average daily census;
  - ii. Number of clients on the last day of the month;

- iii. Number of clients admitted during the month; and
- iv. Number of clients discharged during the month.

**RESPONSE: Not Applicable.**

# ATTACHMENT 1

Internal Revenue Service

Department of the Treasury

District  
Director

P.O. Box 9107

JFK Federal Bldg., Boston, Mass. 02203

Yale-New Haven Hospital Inc.  
769 Howard Avenue  
New Haven, Ct. 06504

Person to Contact: Daniel T. Valenzano

Telephone Number: (617) 223-1442

Refer Reply to: EO:Processing Unit

Date: JUL 10 1978

Name of Organization: Same

Gentlemen:

This is in reply to your recent letter requesting a copy of an exemption letter for the above-named organization.

Due to our records retention program, a copy of the original letter is not available.

However, records in this office show that a determination letter was issued in November 1966 ruling that the organization was exempt from Federal Income Tax under Section (now) 501(C)(3) of the Internal Revenue Code of 1954.

However, records in this office show that the organization is exempt under Section (now) of the Internal Revenue Code as part of a group ruling issued to \_\_\_\_\_

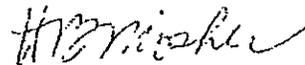
Further, the organization is not a private foundation because it is an organization described under Section 170(b)(1)(a)(vi) and

509(a)(1). This ruling remains in effect as long as there are no changes in the character, purposes, or method of operation of the organization.

I trust the foregoing information will serve your purpose.

If you have any questions, you may contact the person whose name and telephone number are shown in the heading of this letter.

Sincerely yours,



District Director

# ATTACHMENT 2

## STATE OF CONNECTICUT

## Department of Public Health

## LICENSE

License No. 0044

General Hospital

In accordance with the provisions of the General Statutes of Connecticut Section 19a-493:

Yale-New Haven Hospital, Inc. of New Haven, CT d/b/a Yale-New Haven Hospital, Inc. is hereby licensed to maintain and operate a General Hospital.

Yale-New Haven Hospital, Inc. is located at 20 York Street, New Haven, CT 06510-3220.

The maximum number of beds shall not exceed at any time:

134 Bassinets

1407 General Hospital Beds

This license expires **September 30, 2015** and may be revoked for cause at any time.

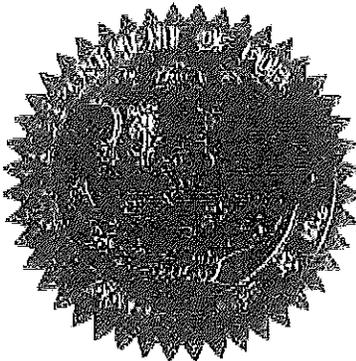
Dated at Hartford, Connecticut, October 1, 2013.

## SATELLITES

Hill Regional Career High School, 140 Legion Avenue, New Haven, CT  
 Branford High School Based Health Center, 185 East Main Street, Branford, CT  
 Welsh Middle School, 185 Damascus Road, Branford, CT  
 James Hillhouse High School Based Health Center, 480 Sherman Parkway, New Haven, CT  
 Weller Building, 425 George Street, New Haven, CT  
 Yale-New Haven Psychiatric Hospital, 184 Liberty Street, New Haven, CT  
 Yale-New Haven Shoreline Medical Center, 111 Goose Lane, Guilford, CT  
 Pediatric Dentistry Center, 1 Long Wharf Drive, New Haven, CT  
 YNHASC Temple Surgical Center, 60 Temple Street, New Haven, CT  
 YNHASC Women's Surgical Center, 40 Temple Street, New Haven, CT  
 Mauro-Sheridan School Based Health Center, 191 Fountain Street, New Haven, CT  
 Yale-New Haven Hospital Dental Center, 2560 Dixwell Avenue, Hamden, CT  
 Murphy School Based Health Center, 14 Brushy Plain Road, Branford, CT  
 YNHCH at Bridgeport, 267 Grant Street, 6<sup>th</sup> Floor, Bridgeport, CT  
 Pediatric Primary Care Center, 226 Mill Hill Avenue, Bridgeport, CT  
 Yale-New Haven Hospital-Saint Raphael Campus, 1430 Chapel Street, New Haven, CT  
 Adolescent Day Hospital, 646 George Street, New Haven, CT  
 Psychiatric Day Hospital, 1294 Chapel Street, New Haven, CT  
 Children's Psychiatric Day Hospital, 1430 Chapel Street, New Haven, CT  
 Elder Care Clinic, Atwater Clinic, 26 Atwater Street, New Haven, CT  
 Elder Care Clinic/Tower One, 13 Tower Lane, New Haven, CT  
 Elder Care Clinic/Casa Otonal, 135 Sylvan Avenue, New Haven, CT  
 Elder Care Clinic/Edith Johnson Tower, 134 Bristol Street, New Haven, CT  
 Adult Psychiatric PHP and Continuing Care, 1294 Chapel Street, New Haven, CT  
 Elder Care Clinic/Sunside, 209 Oak Street, West Haven, CT  
 Troup Magnet Academy School-Based Health Center, 259 Edgewood Avenue, New Haven, CT  
 Adult PHP, 1100 Sherman Avenue, Hamden, CT  
 Project MotherCare at Wheat, 674 Washington Avenue, West Haven, CT  
 Barnard Environmental Studies Magnet School, 170 Derby Avenue, New Haven, CT  
 Project Eldercare, 2080 Whitney Avenue, Suite 130, Hamden, CT  
 Shoreline Child and Adolescent Mental Health Services, 21 Business Park Drive, Branford, CT

License Revised to Reflect:

\*Removed (1) Satellite effective 10/3/13



*Jewel Mullen MD*

Jewel Mullen, MD, MPH, MPA  
 Commissioner

# ATTACHMENT 3



**YALE-NEW HAVEN  
HOSPITAL**

**Yale New-Haven Hospital's Acquisition  
of the Saint Raphael Healthcare System, Inc.  
Docket No: 12-31747-CON**

**Three Year Integration Plan  
Narrative**

**May 2015**

**Yale New-Haven Hospital's Acquisition  
of the Saint Raphael Healthcare System, Inc.  
Docket No: 12-31747-CON**

**Three Year Integration Plan  
Narrative**

**INTRODUCTION**

This narrative report has been prepared as part of the reporting requirements for Yale-New Haven Hospital (YNHH) in accordance with the Agreed Settlement for Docket Number: (DN) 12-31747-CON, subsequently modified as DN: 12-31757-MDF for the acquisition of the Saint Raphael Healthcare System, including the Hospital of Saint Raphael (HSR).

This report is structured into the following sections:

- A. PROGRESS AGAINST THREE-YEAR INTEGRATION PLAN
- B. SUMMARY OF BEDS & SERVICES BY CAMPUS
- C. COST SAVINGS AND REVENUE ENHANCEMENTS
- D. ONGOING REPORTING

**A. PROGRESS AGAINST THREE-YEAR INTEGRATION PLAN**

Consistent with the three-year integration plan submitted on March 31, 2013, the focus of the last fiscal year has been on developing one standard of care across all inpatient campuses and ambulatory operations. The clinical vision for its inpatient campuses for FY 2015 and a summary can be found below. Many of the activities described in this report were developed to support the successful implementation of the clinical vision.

**YNHH Clinical Vision - 2015**

Yale New Haven Campus	Health Care Service	Saint Raphael Campus
• Children's Hospital	• Behavioral Health	• Musculoskeletal
• High Risk OB	• Emergency Services	• Low-Risk, High Amenities OB
• Major Trauma	• General Medicine	• Specialty Geriatrics Care
• Transplant	• General Surgery	• Specialty Programs
• Cardiac Surgery	• Heart & Vascular	- GI Surgery
	• Neurosciences	- Neurovascular
	• Oncology	- Medical Heart Failure
	• Urology	
	• Women's	

Attachment I contains the updated Integration Workplan for FY 2013 through FY 2015 in Gantt chart format which is organized into five major sections including: (1) Major Strategic Initiatives; (2) Service Lines; (3) Clinical Areas; (4) Non-Clinical Areas; and (5) Corporate Services. The Integration Workplan includes specific activities for each of these five areas and the actual or estimated time frame by fiscal year for completion. Progress to date since the last submission in November 2014 as well as remaining focus areas for the next six months is detailed in the narrative below.

### **Section 1. Major Strategic Initiatives:**

Major strategic initiatives pertain to activities with a broad impact throughout the organization. YNHH is focusing on ten key areas:

#### *1. Physician Integration*

Consistent with the November 2014 submission, all hospital-based services have been integrated.

#### *2. Epic Implementation*

Consistent with the November 2014 submission, Analytics (Epic reporting) was integrated across the medical center and health system. Epic optimization remains ongoing and will remain a key medical center priority in coming years.

#### *3. Patient Experience*

As was reported in the November 2014 submission, the focus in recent months has been establishing physician/nursing leadership teams (dyads) to lead unit/service operations. The teams have yielded significant improvements in unit ownership and improved employee engagement, safety and quality outcomes and operational efficiencies. Creating a healing environment remains a key medical center goal, which is being supported by the roll out of clustered care designed to minimize patients' sleep interruptions between 10pm and 6am. The Departments of Pharmacy, Radiology, Laboratory Medicine, Respiratory Therapy and Environmental Services have begun implementing work flow changes and revised testing protocols to achieve this goal.

#### *4. Regulatory / Safety and Quality*

Over 7,500 YNHH employees completed the 2015 safety culture survey; an 18% increase compared to the last survey in 2013. The results demonstrate the value of high reliability organization training our employees and medical staff members completed last year. We are now focusing on the steps to sustain high reliability organization safety behaviors, including continued training for current and new employees, leadership rounding, deployment of 400 volunteer unit safety coaches and implementation of an accountability program.

#### *5. Transforming Patient Care*

Transforming Patient Care refers to a review of nursing workflows and supporting systems/processes to remove unnecessary activities. As was discussed in the November 2014 submission, a comprehensive roll-out of best practices from the York Street Campus began in FY 2014 and will continue in FY 2015. Further improvement activities remain ongoing at the York Street Campus.

Preparedness activities for Nursing Magnet recertification remain underway and will be completed in calendar 2016.

6. *Safe Patient Flow*

Safe Patient Flow refers to throughput improvement activities and was instrumental in allowing YNH to meet its patient care demand prior to the integration of the HSR. The Safe Patient Flow process was implemented at the Saint Raphael campus in FY 2014 and has already resulted in significant improvements in inpatient throughput. Prior to implementation, the percentage of discharges by 11am was 15% and it is now at 25% (same level as York Street Campus). The diligent focus on Safe Patient Flow processes at both campuses remains ongoing and will help to ensure sufficient medical center inpatient capacity.

7. *Cultural Integration*

As stated in the November 2014 submission, employee and medical staff open forums as well as management meetings remain ongoing. A President's Council has been established to continue to obtain direct feedback from front-line staff on ongoing integration efforts.

8. *Bed Management/Capacity*

YNH will be relocating its intensive rehabilitation unit from the Saint Raphael campus to Milford Hospital on July 1, 2015. The new unit at Milford Hospital is consistent with the musculoskeletal growth strategy outlined in previous OHCA submissions, and the vacated unit (Verdi 4 East) will be renovated to meet patient care needs.

Consistent with the November 2014 submission, planning to relocate gastrointestinal surgery (bariatric and hernia) as well as neurovascular services at the Saint Raphael campus are underway. Main 6 is being renovated and will serve as the primary unit for non-oncological gastrointestinal surgery. The Cardiothoracic Intensive Care Unit will serve as the primary location for neurovascular and will be supported by interventional laboratories. The gastrointestinal surgery unit is expected to be online by late fall 2015 and the neurovascular service will be online by late fall 2016. Bed allocation by service is outlined in Section B "Summary of Beds and Services by Campus" of this report.

9. *Infrastructure*

Consistent with the November 2014 submission, no additional care infrastructure changes have taken place.

10. *Care Management Across the Continuum*

Consistent with the November 2014 submission, work remains ongoing to improve care coordination and handoffs across services.

## Section 2. Service Lines

Vision, facility investments and integration activities for major clinical service lines comprise the second section of the Integration Workplan. It is important to note that the information provided below predominantly addresses inpatient services as ambulatory activities are currently being reviewed as part of a comprehensive ambulatory strategic planning exercise, discussed in Section 3.

The following service lines are included:

### 1. *Children's*

Consistent with the November 2014 submission, construction of a new Neonatal Intensive Care Unit and Obstetrical Services at the York Street Campus began May 2015 with upgrading of the infrastructure of the West Pavilion, required to support the new facilities. The new NICU will feature a dedicated operating room, neonatal MRI, pharmacy and single rooms for neonates and for "couplets" of maternity patients and their babies who require lower levels of intensive care. Reconstruction of four floors in West Pavilion will begin late Fall 2015 and be completed fall 2017.

### 2. *Heart and Vascular*

Consistent with the November 2014 submission, a medical heart failure cohort was established at the Saint Raphael campus, in order to provide appropriate care for this growing segment of the population. Work remains underway to optimize interventional laboratories (cardiac catheterization and electrophysiology).

### 3. *Musculoskeletal*

In February 2015, we opened two state-of-the-art musculoskeletal operating rooms, housing the latest in infection control technology and designed with the input of key musculoskeletal surgeons. The transition of elective total joints to the Saint Raphael campus has been completed and the relocation of spine surgery to the Saint Raphael campus is underway and will be completed by Fall 2015. Mary O'Connor, M.D., former Chair of Orthopedics at the Mayo in Jacksonville, Florida joined the medical center in early May to serve as the inaugural Director of the Musculoskeletal Center. We are fortunate to have someone of her exceptional leadership stature join our senior leadership team and help us shape the future of musculoskeletal care delivery.

As was discussed in the bed management section, the intensive rehabilitation unit will be relocated from the Saint Raphael campus to Milford Hospital on July 1, 2015.

### 4. *Neurosciences*

As discussed in the bed management section, YNH will be relocating its neurovascular service to the Saint Raphael campus in late 2016. The service will include inpatient beds and radiology services (including interventional radiology capabilities), and would have synergies with the advanced elderly inpatient services referenced earlier. Program planning is in the early stages and will be refined in coming months.

5. *Oncology*

Consistent with the November 2014 submission, no additional service configurations have taken place in Oncology. Evaluation of technology consolidation opportunities remains ongoing.

6. *Transplant*

Consistent with the November 2014 submission, no additional service configurations have taken place in Transplant.

### Section 3. Clinical Areas

Additional clinical integration beyond the service lines described in Section 2 are described and listed below:

1. *Diagnostic Radiology*

Consistent with the November 2014 submission, the assessment of radiology equipment and master planning for radiology services remains ongoing as the clinical vision for the campuses evolves.

2. *Emergency Department*

Consistent with the November 2014 submission, Yale New Haven Health System and North Shore Long Island Jewish launched a helicopter transportation collaboration named Sky Health, focused predominantly on the I-95 corridor. To date, over 65 patients have been transported to YNHH via Sky Health. Sponsor hospital training opportunities are being identified and will be implemented in 2015. After a comprehensive evaluation process, YNHH also consolidated ground patient transportation services to one preferred vendor (AMR) to improve transportation times and cost effectiveness.

3. *Laboratory/Pathology*

Consistent with the November 2014 submission, work is underway to consolidate core laboratory and blood bank systems at YNHH, Greenwich Hospital and Bridgeport Hospital by August 2016.

4. *Medicine*

As it pertains to electronic ICU implementation referenced in the November 2014 submission, 26 rooms have been outfitted with the technology and a new control room will be completed by end of May 2015. Clinical workflows and shared goals have been established and training will begin in June. The service will be operational in August 2015.

5. *Nursing*

As was referenced in section 1, YNHH will be undergoing its Magnet re-designation in 2016 and preparedness activities remain ongoing. The system-wide nursing standardization effort remains underway across all delivery network hospitals.

6. *Pharmacy*

Consistent with the November 2014 submission, no additional changes have taken place in Pharmacy.

7. *Psychiatry*

In April 2015, YNHH relocated its psychiatric observation unit to a newly constructed space in the Fitkin building. The new unit includes an 18-bed video camera monitored patient care area that provides patient comfort, privacy, and security.

8. *Surgical Services*

Consistent with the November 2014 submission, a physician leader to co-lead perioperative services was recruited. William Nealon, M.D., nationally recognized surgeon joined the medical center, from Vanderbilt Medical Center, in April 2015. Under his leadership, a number of operational enhancements will be implemented across all perioperative services sites focused on safety and quality, pre-admission testing and Epic reporting. Optimization of perioperative resources remains a focus area in FY 2015.

As was referenced earlier, a center of excellence for gastrointestinal surgery (bariatric and hernia) will be established at the Saint Raphael campus in late 2015. Main 6 will serve as the primary inpatient unit, and required operating room resources and ambulatory/clinical practice facilities will also be put in place to support program growth.

9. *Women's Services*

Consistent with the November 2014 submission, the two Obstetrical Primary Care Centers located at the York Street and St. Raphael campuses which serve the local New Haven community were combined into a single site in January 2015.

10. *Ambulatory Services*

Ambulatory space optimization and programmatic recommendations are currently being developed and consolidation opportunities will be identified by summer 2015. Consolidation opportunity execution will span at least 24-36 month, based on lease terms and other program considerations.

Additionally, consistent with the November 2014 submission, YNHH will be opening a multidisciplinary physician specialty ambulatory center in Old Saybrook on June 1, 2015. The center will offer a broad array of clinical services including pediatric specialty services, a comprehensive Smilow Cancer Care Center, musculoskeletal services, urology and vascular services, among others. Supportive ancillary services will also be provided. Finally, planning for a New Haven ambulatory center is currently underway and will be completed later this summer.

#### **Section 4. Non-Clinical Support Services**

As it pertains to non-clinical support services, vendor consolidation opportunities were identified for Environmental Services, Food and Nutrition, Linen Services and Protective Services. Estimated savings can be found in Section C of this narrative.

## Section 5. Corporate Services

Corporate services include seven key areas and integration activities for each are described on the following page.

1. *Accounting and Finance*  
Consistent with the November 2014 submission, no additional changes have taken place in Accounting and Finance.
2. *Compliance*  
Annual compliance training via Healthstream for all employees remains ongoing.
3. *Human Resources*  
Over 95.7% of Yale-New Haven employees took part in the recent employee engagement survey, conducted in April 2015. Results are expected by end of May and will lead to the development of targeted improvement plans to address any deficiencies.
4. *Information Technology and Information Systems*  
While the immediate focus was on the implementation of Epic, focus has shifted to optimizing the Epic system (reporting, analytics, etc.) and additional areas/opportunities for standardization include streamlining of technology applications for clinical services.
5. *Legal and Planning*  
Integration work with MCIC (malpractice insurance captive) remains ongoing.
6. *Marketing, Communications, Image and Community Wellness*  
The development of new employee and manager communication strategies employing new media (e.g. social media) remains ongoing. The organization remains a strong advocate with State and Federal government agencies for continued access to high quality healthcare services for Connecticut residents.
7. *Supply Chain*  
Consistent with the November 2014 submission, no additional changes have taken place in Supply Chain. Supply chain savings achieved through vendor contracts will be discussed in Section C (5).

## B. SUMMARY OF SERVICES AND BEDS BY CAMPUS

As described in Section A above, integrating clinical services is still underway and specific campus locations and allocated beds continue to be adjusted. The two tables below summarize the current plan for the services and beds by location. This information is subject to change and any changes will be provided to OHCA in subsequent semi-annual reports.

## Planned Services by Campus for 2015 (as of May 2015)

Services	York Street Campus	Saint Raphael Campus
<b>Service Lines</b>		
Children's	X	
Heart & Vascular	X (Tertiary/Quaternary)	X Medical Heart Failure
Musculoskeletal	X (Trauma / Pediatrics)	X
Neurosciences	X (Tertiary/Quaternary)	X Neurovascular
Oncology	X (Tertiary/Quaternary)	X
Transplant	X	
<b>Clinical Areas</b>		
Anesthesia	X	X
Diagnostic Radiology	X	X
Emergency Department	X	X
Laboratory/Pathology	X	X
Medicine	X	X Geriatrics
Psychiatry	Older Adolescents/Adult	Children's/ Younger Adolescents/Adult
Surgery	X	X GI Surgery (Bariatric)
Women's	Low & High Risk Maternity	Low Risk Maternity/ Midwifery Program

## FY 2015 (as of Mar, 2015)

Beds:	York Street Campus			Saint Raphael Campus		
	General Care	ICU	Total	General Care	ICU	Total
Adult Med/Surg	570	109	679	300	56	356
Rehabilitation				18		18
Maternity	56		56	19		19
Pediatric*	73	17	90			
Pediatric Psych Only	16		16	20		20
Adult Psych	73		73	25		25
Future Use				17	16	33
<b>Total Beds</b>	<b>788</b>	<b>126</b>	<b>914</b>	<b>399</b>	<b>72</b>	<b>471</b>
Bassinets	40	52	92	13	9	22

Note: Included in the YNH license is another 22 pediatric beds and 20 bassinets located at Bridgeport Hospital campus.

### C. COST SAVINGS AND REVENUE ENHANCEMENTS

Actual cost savings achieved in the first six months of FY 2015 have been provided according to the categories outlined by OHCA and Report 175.

Projected Cost Savings	Actual FY 2015 YTD Mar	Projected FY 2015 YTD Mar
Salaries & Wages	\$19.8M	\$14.0M
Fringe Benefits	\$6.1M	\$3.9M
Contractual Labor Fees	\$0.6M	\$0.6M
Medical Supplies & Pharmaceuticals	\$4.8M	\$6.6M
Malpractice	\$0.3M	\$0M
Utilities	\$0.5M	\$0.7M
Business Expenses	\$6.7M	\$9.0M
Other Operating Expenses	\$0	\$0
<b>TOTAL</b>	<b>\$38.2M</b>	<b>\$34.7M</b>

#### 1. *Cost and Value Project*

Consistent with the November 2014 submission the Saint Raphael's Campus has been fully integrated into the Cost and Value Project. As YNHH continues its goal to reduce cost and improve care, a process has been initiated to redesign and refocus effort on this project. In the first six months of this fiscal year, the hospital developed a single internal consulting team focused on Salary, Non-Salary, Employee Benefits, and Clinical Redesign.

These efforts will allow us to continue to maintain the savings achieved at the Saint Raphael's Campus relative to salaries, and enhance non-salary initiatives through supply standardization, contracting, and professional service utilization. In addition, in March 2015, a new clinical redesign program began with strong clinical leadership to identify and eliminate clinical processes that result in waste throughout the hospital.

#### 2. *Salaries and Wages / Fringe Benefits*

In fiscal year 2015, YNHH has continued its efforts to maintain salary savings achieved through the first two years of integration, as well as identify new opportunities throughout both campuses. Consistent with the November 2014 submission, the hospital now has a standard staffing model for inpatient nursing units.

In addition to the inpatient nursing units, the hospital continues to explore and review improved staffing models in other areas such as outpatient settings, or areas that provide supportive services. In October 2014 a redesigned staffing model was implemented for the Emergency Departments on both campuses. Through aligning Registered Nurses (RN) and Advanced Practice Nurses (APN) shifts with peak volume times in the ED, the hospital was able to reduce staffing and achieve salary savings. Assessments of personnel utilization will continue and it is expected that additional synergies will be achieved through these efforts.

3. *Contractual Labor Fees*

Please note that discussion of Contractual Labor and Legal Fees is included under Business expense consistent with previous submissions. This change was made in order to be consistent with OHCA Report 175.

Professional Service Agreements (PSA)

As mentioned in section 1.1, the physician integration of the two campuses has been completed for all hospital-based services. The savings achieved through clinical alignment and standardization of physician PSAs continues, and remains consistent with the November 2014 submission.

Psychiatric MD Alignment

A group of community physicians have historically supplemented the inpatient and outpatient psychiatric service at the Saint Raphael's Campus. This relationship has been strong and positive and continues to be a critical part of the clinical service. As the physician enterprise is further aligned, the process of adding of the community physicians to the employed staff is underway. While this will not result in additional savings, it will aid in the continued effort to improve care and generate savings through the aligning clinical services on a single platform.

4. *Malpractice Expense*

As referenced in section 5.5, YNHH continues to work with the insurance captive MCIC and savings continue to be consistent with the November 2014 filing.

5. *Utilities*

Cost reduction activities for electricity rate, electricity utilization, and other utilities remain consistent with the November 2014 submission.

6. *Medical/Surgical (Med/Surg) Supplies and Pharmaceuticals*

Activities to continue to achieve non-salary savings through contracting efforts remain consistent with the November 2014 filing. Despite the large number of initiatives achieved through the integration to date, there are still a number of opportunities that YNHH continues to actively pursue, and utilize to generate savings.

System Contracting/Cost and Value Non-Labor Team

Consistent with the November 2014, filing efforts at the Saint Raphael's Campus have been fully integrated into the Non-Labor Teams within the Cost and Value Project, as well as the NPC (Northeast Purchasing Coalition).

Pharmaceuticals

Consistent with the November 2014 submission, YNHH successfully switched pharmaceutical distributors from Cardinal to McKesson. This project, which started in late fiscal year 2014, is now fully implemented and will provide a full year of savings in FY 2015.

At the start of FY 2015 the Saint Raphael's Campus was able to register with HRSA to become a 340b eligible site. This initiative represents a tremendous opportunity to further reduce cost for pharmaceutical supplies, and is one of the largest current initiatives to

improve non-salary savings due to the integration. In order to appropriately administer this program on both campuses and meet all regulatory and compliance requirements the hospital implemented a new system to track 340b eligible patients. This system took several months to implement, and 340b savings were not achieved until the month of March 2015. Additional savings related to the 340b program are anticipated to provide additional savings for the latter half of fiscal year 2015.

*Additional information for high impact initiatives for this category started in the first six months of FY 15.*

#### Lithotripsy

After evaluating proposed pricing from various vendors, YNHHS remained with United Medical Systems (UMS) whose pricing offered the greatest savings. This initiative standardized pricing across the Health System and resulted in savings related to the Saint Raphael's Campus.

#### Drug Eluting Stents and Bare Metal Stents

This was a Northeast Purchasing Coalition (NPC) initiative which resulted in a dual award to Medtronic and Abbott. The NPC moved from three to two vendors, eliminating Boston Scientific. This process not only helped align clinical practice across the system, but generate savings.

#### 7. *Business Expenses*

YNHH continues to achieve savings through the business expense initiatives generated through the first two years of the integration. As contracts expire and new consolidation efforts continue to be explored YNHHS finds new ways to generate non-salary savings within this category. Consistent with the November filing, the hospital continues to focus on IT legacy system elimination, and consolidation utilizing the EPIC system integrated in Fiscal Year 2013. At the beginning of this fiscal year the contract associated with one of the largest portions of the legacy EMR, provided by Quadramed came up for renewal. This contract ended up being eliminated and represents one of the top savings items of this year. Smaller legacy contracts continue to be pursued and are expected to improve savings efforts this year.

In addition to IT system related savings there have been some significant strides in service contracts that were made in the first six months of Fiscal Year 2015. YNHHS was also able to include the Saint Raphael's Campus in the snow removal contract historically utilized by the York Street Campus. While the savings associated with the base component of this contract was small, the legacy Saint Raphael's contract contained a provision which required additional payments for each inch of snow. Through renegotiating this contract the hospital was able to avoid what would have been large payments due the severity of this past winter.

#### 8. *Other Consolidation and Integration Savings*

Activities associated with incorporating the Temple Recovery Care Center into the Grimes Center remains consistent with the November 2014 Submission.

Below is a description of recent activities in Joint Venture Partnerships that were part of the Saint Raphael's integration efforts.

Renal Research Institute Dialysis Joint Venture

As reviewed in the November FY 2014 submission, the Renal Research Institute (RRI) continues to display strong financial performance. This year's improvement in the operations of the Joint Venture is consistent with the financial strength displayed in fiscal year 2014. Additional efforts to develop and enhance this clinical program are underway, and it is expected that this partnership will provide further benefits.

9. *Depreciation, Bad Debt, and Interest Expense*

Consistent with the information provided to follow-up questions in DN 12-31747-MDF, due to the financing needed to acquire the Hospital of Saint Raphael, required infrastructure investments at the Saint Raphael Campus and the unified Bad Debt and Charity Care policy, Yale-New Haven Hospital continues to see no savings related to these categories.

**Revenue Enhancements**

Consistent with the November 2014 submission, YNHH continues to focus on the revenue enhancement capabilities of the Epic system. The improvements seen through standardization of the master patient index, shared accounts receivables, bedside procedures, recovery room documentation and centralization of services all continue to show enhanced revenue capture in fiscal year 2015. In the first six months of this year, YNHH implemented a new system called Craneware to supplement the revenue cycle features of the EPIC system. Craneware will help the Saint Raphael's Campus with proactive charge capture and will assist with development of revenue improvement strategies.

The Clinical Documentation and Management Program continues to see success through the integrated system wide committee outlines in the November 2014 submission. Starting in late FY 2015, the health system will move to further integrate this program. These efforts will further enhance the improvements made in previous years to create a standardized central platform for the improvement of documentation at the Saint Raphael's Campus.

Key Activities	Pre-2013	FY 2013	FY 2014	FY 2015
<b>1. Medical Planning &amp; Delivery</b>				
<b>1A. Physical &amp; Information Programs</b>				
A1. Consolidate Hospital Based Services				
1. Anesthesiology				
2. Diagnostic Radiology				
3. Emergency Medicine				
4. Laboratory/Pathology				
A2. Integrated ACGME Residency and Fellowship Programs				
<b>1B. EPIC Implementation</b>				
A1. EPIC Go-Live at York Street Campus				
A2. EPIC Go-Live at Chapel Street Campus				Ongoing
A3. Optimize Epic System				
<b>2. Patient Experience</b>				
A1. Implement Patient Experience Workplan and Supporting Infrastructure at SAC				
1. Patient and Family Advisor Program				
2. Resident and Recognition Structure				
3. Service Recovery Training/On-Us Driftcatcher				
A2. Implementation of the "Quiet Place" across both Campuses				
1. Implement Leader Roundings				
2. Manager Train Staff				
A3. Launch Patient Experience Forum				
A4. FY 2014 Patient Experience Strategic Plan				Ongoing
1. Emphasis on "Every Patient, Every Time"				
2. Physician and Nurse Leadership Training and Engagement				Ongoing
3. Developing a healing environment				
<b>3. Regulatory, Safety and Quality</b>				
A1. Preparation for Department of Public Health and Joint Commission surveys				
1. Enhancements of Care [JCR]				Ongoing
2. Live Safety				Ongoing
3. Protection of Care Records of Care				Ongoing
4. Adherence to Hours				Ongoing
5. Infection Prevention				Ongoing
A2. Compliant Regulatory Compliance and Practices				
1. Audit of Policies and Procedures to Ensure Adherence				Ongoing
A3. Ongoing Regulatory Education and Improvements				
1. Self-Review and Integrated Audits				Ongoing
2. Structure Implemented for Twice Monthly CMS/DPH Audits & Twice Yearly TIC Audits at SAC				Ongoing
A4. Clean and Safe Hospital				Ongoing
A5. Achieve HAI High Reliability Level 3 and Ongoing Sustainability				Ongoing
<b>4. Emergency Preparedness</b>				
A1. Implement Evidence Based Nursing Transformation at SAC to Ensure Core/Intensive Nursing Models/Overlapping Hours Across Both Campuses				Ongoing
A2. Medication Reconciliation Process Implemented				
A3. Implement Second Generation Bedside Nursing Transformation at the York Street Campus				Ongoing
A4. Implement Magnet readiness plan				
<b>5. Core Patient Flow</b>				
A1. Implement Common Safe Patient Flow Throughput Improvement				Ongoing
A2. Identify Process Changes				
<b>6. Cultural Integration</b>				
A1. Formation of Catholic Heritage Committee				
A2. Common Value System Defined				
A3. Audiences of Two Campuses Integrated in Operations				Ongoing
A4. Medical Staff Open Forums				Ongoing
A5. Employee Open Forums and Management Meetings				Ongoing

Yale-New Haven Hospital Acquisition of Saint Raphael Health Care System (HSR)  
 Integration Workplan  
 Certificate of Need Document Number: 22-31747-CON  
 As of May 22, 2025

Page 2 of 5

	FY2023	FY2024	FY2025	FY2026
<b>2b. Bed Management/Capacity</b>				
A1. Common Bed Management System-Optimization of Beds Across Campuses				
A2. Open Vent 4 North				Complete
A3. Develop Strategies to Optimize Inpatient Bed Utilization Across Both Campuses				
A4. Realignment of Medicine and Surgery Beds at the Saint Raphael Campus				
A5. Open Vent 4 West (very specialty beds) at HSH				
A6. Repurpose Main 6 for GI Surgery				
A7. Renovate V4 East				
A8. Renovate CHCU for Neurovascular				
<b>2c. Staff Infrastructure</b>				
A1. Common Admissions on Call and Off-Site Executive Model Implemented				
A2. Off-Hours Department Management				
<b>2d. Care Management to Integrate Services Across the Campuses</b>				
A1. Common Care Management Structure Implemented				
A2. Transitional Care Rounds in all York Street campus inpatient units				
A3. Transitional Care Rounds consistency across both campuses				
<b>3. Services Unit</b>				
<b>3a. Children</b>				
A1. Vision				
1. YHCH is a destination of choice for pediatric care.				Complete
A2. Facilities & Capital				
1. Develop and implement the Plan for MCHU Expansion and Funding				
A3. Integration Activities				
1. Integrate Pediatric Services Across Both Campuses				
2. Align Child and Adolescent Psychiatry Across Campuses				
3. Combine Hospital Programs at YHCH Campuses				
<b>3b. Heart &amp; Vascular</b>				
A1. Vision				
1. Integrate Heart and Vascular Operations Across Both Campuses and Outpatient Centers				
A2. Facilities & Capital				
1. Renovate Catheterization Laboratories				
A3. Integration Activities				
1. Development of Aortic Institute				
2. Expansion of the Interventional Radiology Program at SRC				
3. Consolidate cardiac surgery to York Street campus				
4. Development of a Heart Failure Unit at SRC				
<b>3c. Hospitalist/telet</b>				
A1. Vision				
1. Multispecialty) Hospitalist Established and recognized as leading program				
A2. Facilities & Capital				
1. Operational and Capital Plan in Place				Complete
A3. Integration Activities				
1. Business plan definition and implementation				Complete
2. Recruitment of physician leader				
3. Transition of elective jobs and appt volume from York Street to Saint Raphael campus				
4. Relocation of Intensive Rehabilitation Unit (IRU) to Saint Raphael (New)				
<b>3d. Neurosciences</b>				
A1. Vision				
Leading Neurosciences program in CT				Complete
A2. Facilities & Capital				
1. Allocated appropriate number of beds to Neurosciences				Complete
A3. Integration Activities				

	FY 2014	FY 2015	FY 2016	FY 2017
<b>1. Clinical Areas</b>				
<b>1A. Radiology</b>				
Relocation of Saint Raphael Campus Relocation of Nucleonuclear Service to Saint Raphael Campus				
<b>2A. Oncology</b>				
<b>A1. Vision</b>				
1. Integrated Oncology Operations Across Both Campuses				
<b>A3. Integration Activities</b>				Complete
Chemotherapy and radiation therapy on both campuses				
<b>2B. Transplant</b>				
<b>A1. Vision</b>				
1. Provide leading solid organ transplantation services in CT (ongoing)				Complete
<b>A3. Integration Activities</b>				
2. Organ Donation Campaign consolidation				
<b>1B. Diagnostic Radiology</b>				
<b>A1. Staffing/Coverage</b>				
1. Enterprise-wide Scheduling (Consolidation of Scheduling/Registration Functions)				
<b>A2. Facilities &amp; Equipment</b>				
1. COH for YNH to acquire SRHSC Joint Venture				
2. Facilities Plan Completed				
<b>A3. Integration Activities</b>				Complete
1. Assessment of all radiology services and equipment and implementation				
1. Professional readiness available 2A/7 at SRC				
<b>1C. Emergency Department</b>				
<b>A1. Staffing/Coverage</b>				
1. Realign ED Structure to Create an Integrated Model				
<b>A3. Facilities &amp; Equipment</b>				Complete Complete
1. Review Emergency Transportation (Ambulance and Helicopter)				
2. Standardized Equipment (As Replacements Are Needed)				
<b>A3. Integration Activities</b>				
1. Consolidation of Major Trauma at York Street				
2. Review Sponsor Hospital Program Offering, Infrastructure, Costs and Opportunities				
<b>1D. Laboratory and Pathology</b>				
<b>A1. Integration Activities</b>				
1. Evaluate consolidation of Laboratory Services System-wide (Integrated Lab and Shared LIS)				
1. Install and Operate SOFT Laboratory IS system on Both Campuses				
<b>1E. Maternity</b>				
<b>A1. Review Hospitalist Staffing Model and Admission Criteria to Hospital Services</b>				
<b>A2. Develop Business Case for nCU</b>				Complete
<b>A3. Evaluate and Implement Geriatric Center of Excellence at the Saint Raphael campus</b>				
<b>A4. Complete MCH nCU deployment</b>				
<b>1F. Nursing</b>				
<b>A1. Quality</b>				Complete
1. Implement Magnet Reimbursement Plans				
<b>A3. Integration Activities</b>				Complete
1. Consistent Metrics and Standards and Creation of Unit/System Line Dashboard				
2. Achieve Reduction in Caregiver Hours (see Transforming Patient Care)				
<b>1G. Pharmacy</b>				
<b>A1. Staffing/Coverage</b>				
2. Establish staffing with YNH employees (abolish Cardinal Health contract)				
<b>A2. Facilities &amp; Equipment</b>				

Yale-New Haven Hospital Acquisition of Saint Raphael Health Care System (HSR)  
 Integration Workplan  
 Certificate of Need Docket Number 12-21747-CON  
 As of 6/29/2015

	FY 2013	FY 2014	FY 2015
<b>1. Purchases and standardize product mix/lines</b>			
<b>AS, Integrating Activities</b>			
1. Pharmacy Strategy Essential with Single Unified Product Formulary Cross Campus			
<b>2. Pharmacy</b>			
<b>A1. Billing/Covers</b>			
1. Develop a Standard Model of Care for Psychiatric Services at Both Campuses			
a. 12 Years Old and Under on Winchester One, YSC			
b. 13-19 Year Old on Celentano 5, SRC			
c. 20-22 Year Old on LM2, YSC			
2. Develop Standard Model of Care with One Psych ED			
<b>A2. Quality &amp; Regulatory</b>			
1. Participate in State Collaborative Regional Plan- Integrating Behavioral Health Service Payment and Delivery			Ongoing
<b>A3. Integration Activities</b>			
1. Conduct Crisis Intervention Unit Assessment & Develop/Implement an Improvement Plan for ED			Ongoing
2. Develop Strategies to Reduce Long LOS for Psychiatric Patients			
<b>2. Surgical Services</b>			
<b>A1. Leadership</b>			
1. Conduct an Assessment of Operating Rooms and Clinical Support Services			
2. Recruit physician leader to co-lead operating rooms			
3. Implement nursing clinical leadership roles across all practice sites			
<b>A2. Core/Key Operations</b>			
1. Integrate OR Operations Across Both Campuses, Temple and Stratford			
2. Optimize Utilization Across all Sites			
3. Optimize Integration (SIC, SRC, and Temple)			
4. Develop a 24 Surgery Center of Excellence (Anatomical Home) at the Saint Raphael Campus			
5. Establish Common Set of Metrics			
6. Implement operational recommendations from consulting engagement			
7. Develop OR master plan			
<b>3. Women</b>			
<b>A1. Integration Activities</b>			
1. Integrate OB-GYN Services Across Both Campuses			
2. Expand OB Residency to Cover SRC			
3. Establish low threshold service at SR Campus utilizing midwifery program			
<b>4. Ambulatory Services</b>			
<b>A1. Complete Ambulatory Strategic Plan</b>			
1. Develop Inventory of all ambulatory locations and services			
2. Develop and implement programmatic recommendations			
<b>A2. Planning for new multi-specialty ambulatory</b>			
Old Site/retrofit opening			
New Site/retrofit planning			
<b>4. Non-Clinical Areas</b>			
<b>A1. Consolidation of Vendors for Environmental Services, Food/Nutrition, Linen and Protective Services</b>			
<b>5. Corporate Services</b>			
<b>A1. Accounting &amp; Finance</b>			
<b>A1. Integrated Capital Budgeting Process Covering Both Campuses</b>			
<b>A2. Integrated Operating Budgeting Process Covering Both Campuses</b>			
<b>A3. Consolidation of Cost Accounting and Billing Support Systems</b>			
<b>A4. Consolidated Account Receivable for HSC A/R with One Invoice Model</b>			
<b>A5. Maintain In-House Accounts Receivable for legacy SDX and Medpac Receivables</b>			
<b>A6. Replicate Financial Structure for Service Lines</b>			
<b>A7. Institute Flex Budgeting</b>			
<b>A8. Reduce Electronic Fees Paid for Audit and Banking Operations at SHC</b>			

Vale-New Haven Hospital Acquisition of Saint Raphael Health Care System (HSR)  
 Integration Workplan  
 Certificate of Need Docket Number: 12-01747-CD09  
 As of May 29, 2015

	Pre-2013	FY 2013	FY 2014	FY 2015
<b>SA. Review All Membership and Fees for Both Companies and Remove/Re negotiate Duplicates</b>				
<b>SB. Compliance</b>				
A1. Ensure All Staff Bezelon Compliance Education Annually (Ongoing Communications and In-services)			Ongoing	Ongoing
A2. Billing Codes and Documentation Audit of Both Hospital and Physician Activities			Critical	Critical
A3. EHR Incorporated into WHHS Conflict of Interest Process				
<b>SC. Human Resources</b>				
A1. Standardize Career Ladders				
A2. Standardize Performance Management System and Process				
A3. Standardize Rewards, Recognition, and Incentive Performance Based Pay				
A4. Employee Engagement Survey				Complete Ongoing
A5. Develop and Implement Saint Raphael Campus Manager Education Programs				
<b>SD. Information Technology and Information Systems</b>				
A1. Consolidation of Approvals Applications				
1. Reduce Application Portfolio for EPIC Implementation				
2. Application Consolidation for The Following Areas: Laboratory - Anatomic Pathology, Cardiology, Radiation Oncology & Hemat/Onc				
3. Application Consolidation for The Following Areas: Gastroenterology, Dietary Services, PHS & Resp Center				
A2. Service Desk Standardized				
A3. Consolidation of Telecom Operator Services				
A4. Review Service Contracts for Systems Used Prior to EPIC Integration				
<b>SE. Legal &amp; Planning</b>				
A1. Identify vendor consolidation opportunities				
A2. Continue Interim Work with multiple vendors			Ongoing	Ongoing
<b>SF. Marketing, Communications, Image, and Community Wellness</b>				
A1. Develop and Implement Community Reintegration Strategy			Ongoing	Ongoing
A2. Implement Communication Strategies for Managers and Employees			Ongoing	Ongoing
A3. Complete Advisory Groups				
<b>SG. Revenue Cycle</b>				
A1. Transfer and Combine Accounts Receivable via EPIC				
A2. Identical CDMs and Charge Levels				
A3. Integrated Master Patient Index				
A4. Identical Billing Systems and Vendors to Support Revenue Cycle Functions				
A5. Revenue Cycle Functions Centralized Organizationally and Physically, Where Possible				
A6. Consistent Forms Throughout Entire Revenue Cycle				
A7. Revenue Cycle Opportunities Complete				
1. Pricing Strategies				
2. Denial				
3. Charge Capture				
<b>SH. Patient Care and Managed Care</b>				
A1. Model/Consistent Rules for All Payers Across Both Companies				
<b>SI. Supply Chain</b>				
A1. Contract renegotiations				Ongoing
A2. Inventory management				
A3. Service Response Center consolidation				

YALE-NEW HAVEN HOSPITAL  
 TWELVE MONTH PRELIMINARY FILING  
 FISCAL YEAR 2015  
 REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)
LINE	DESCRIPTION	Oct-Mar 2014 ACTUAL	Oct-Mar 2015 ACTUAL
<b>I. OPERATING EXPENSE BY CATEGORY</b>			
<b>A. Salaries &amp; Wages:</b>			
1	Nursing Salaries	163,838,665	169,389,756
2	Physician Salaries	0	0
3	Non-Nursing, Non-Physician Salaries	236,516,515	236,009,960
	<b>Total Salaries &amp; Wages</b>	<b>400,355,180</b>	<b>405,399,716</b>
<b>B. Fringe Benefits:</b>			
1	Nursing Fringe Benefits	69,720,682	67,194,595
2	Physician Fringe Benefits	0	0
3	Non-Nursing, Non-Physician Fringe Benefits	48,296,599	48,227,101
	<b>Total Fringe Benefits</b>	<b>118,017,281</b>	<b>115,421,696</b>
<b>C. Contractual Labor Fees:</b>			
1	Nursing Fees	2,471,091	4,264,384
2	Physician Fees	38,722,596	46,057,910
3	Non-Nursing, Non-Physician Fees	18,265,189	22,312,793
	<b>Total Contractual Labor Fees</b>	<b>59,458,876</b>	<b>72,635,087</b>
<b>D. Medical Supplies and Pharmaceutical Cost:</b>			
1	Medical Supplies	106,703,959	113,597,697
2	Pharmaceutical Costs	79,880,160	98,498,044
	<b>Total Medical Supplies and Pharmaceutical Cost</b>	<b>186,584,119</b>	<b>212,095,742</b>
<b>E. Depreciation and Amortization:</b>			
1	Depreciation-Building	22,656,973	23,079,251
2	Depreciation-Equipment	35,963,915	37,655,620
3	Amortization	0	0
	<b>Total Depreciation and Amortization</b>	<b>58,620,888</b>	<b>60,734,871</b>
<b>F. Bad Debts:</b>			
1	Bad Debts	0	0
<b>G. Interest Expense:</b>			
1	Interest Expense	12,665,748	10,155,636
<b>H. Malpractice Insurance Cost:</b>			
1	Malpractice Insurance Cost	714,855	8,196,077
<b>I. Utilities:</b>			
1	Water	831,550	1,006,896
2	Natural Gas	1,046,700	1,054,333
3	Oil	0	0

YALE-NEW HAVEN HOSPITAL  
 TWELVE MONTH PRELIMINARY FILING  
 FISCAL YEAR 2015  
 REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)
LINE	DESCRIPTION	Oct-Mar 2014 ACTUAL	Oct-Mar 2015 ACTUAL
4	Electricity	9,159,138	10,777,823
5	Telephone	2,202,016	1,886,236
6	Other Utilities	623,802	724,172
	<b>Total Utilities</b>	<b>13,863,206</b>	<b>15,449,460</b>
<b>J.</b>	<b>Business Expenses:</b>		
1	Accounting Fees	515,641	567,158
2	Legal Fees	1,706,089	1,638,001
3	Consulting Fees	37,762	184,657
4	Dues and Membership	1,068,160	739,887
5	Equipment Leases	3,574,656	3,447,061
6	Building Leases	9,135,869	10,568,414
7	Repairs and Maintenance	17,716,058	17,941,569
8	Insurance	1,526,132	1,259,282
9	Travel	775	2,775
10	Conferences	1,386,745	1,624,331
11	Property Tax	2,258,637	2,229,724
12	General Supplies	7,741,589	9,936,467
13	Licenses and Subscriptions	752,480	890,577
14	Postage and Shipping	769,827	371,301
15	Advertising	55,383	15,427
16	Corporate parent/system fees	14,003,376	14,579,324
17	Computer Software	0	0
18	Computer hardware & small equipment	2,566	3,418
19	Dietary / Food Services	1,461,061	1,798,175
20	Lab Fees / Red Cross charges	8,256,484	7,163,951
21	Billing & Collection / Bank Fees	458,771	542,115
22	Recruiting / Employee Education & Recognition	558,430	141,423
23	Laundry / Linen	2,847,033	3,100,118
24	Professional / Physician Fees	1,935,988	3,103,157
25	Waste disposal	691,808	913,345
26	Purchased Services - Medical	55,434,626	72,914,965
27	Purchased Services - Non Medical	139,846,673	133,980,557
28	Other Business Expenses	398,752	913,539
	<b>Total Business Expenses</b>	<b>274,141,371</b>	<b>290,570,716</b>
<b>K.</b>	<b>Other Operating Expense:</b>		
1	Miscellaneous Other Operating Expenses	0	0
	<b>Total Operating Expenses - All Expense Categories*</b>	<b>1,124,421,523</b>	<b>1,190,559,000</b>
	*A.- K. The total operating expenses amount above must agree with the total operating expense		
<b>II.</b>	<b>OPERATING EXPENSE BY DEPARTMENT</b>		

YALE-NEW HAVEN HOSPITAL  
 TWELVE MONTH PRELIMINARY FILING  
 FISCAL YEAR 2015  
 REPORT 176 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)
LINE	DESCRIPTION	Oct-Mar 2014 ACTUAL	Oct-Mar 2015 ACTUAL
<b>A.</b>	<b>General Services:</b>		
1	General Administration	38,057,838	37,527,197
2	General Accounting	2,925,371	2,884,426
3	Patient Billing & Collection	14,471,010	21,206,901
4	Admitting / Registration Office	7,331,207	7,957,340
5	Data Processing	0	0
6	Communications	3,028,760	2,970,789
7	Personnel	2,162,985	2,065,679
8	Public Relations	559,083	604,259
9	Purchasing	1,891,384	2,699,389
10	Dietary and Cafeteria	15,159,492	15,294,246
11	Housekeeping	13,464,845	12,858,466
12	Laundry & Linen	101,526	172,319
13	Operation of Plant	15,508,765	19,201,802
14	Security	5,336,472	5,243,593
15	Repairs and Maintenance	12,901,731	13,429,183
16	Central Sterile Supply	5,181,552	6,567,786
17	Pharmacy Department	31,371,873	48,408,533
18	Other General Services	224,186,619	218,632,136
	<b>Total General Services</b>	<b>393,640,513</b>	<b>417,724,244</b>
<b>B.</b>	<b>Professional Services:</b>		
1	Medical Care Administration	23,085,960	25,499,409
2	Residency Program	34,974,593	44,524,160
3	Nursing Services Administration	8,853,941	8,083,604
4	Medical Records	3,452,675	3,908,516
5	Social Service	3,046,004	4,250,781
6	Other Professional Services	0	0
	<b>Total Professional Services</b>	<b>73,413,163</b>	<b>86,266,470</b>
<b>C.</b>	<b>Special Services:</b>		
1	Operating Room	72,450,721	81,655,113
2	Recovery Room	5,494,048	5,691,856
3	Anesthesiology	10,033,530	13,634,798
4	Delivery Room	6,210,445	6,055,232
5	Diagnostic Radiology	18,606,885	18,813,561
6	Diagnostic Ultrasound	3,411,269	2,005,444
7	Radiation Therapy	7,749,588	9,182,538
8	Radioisotopes	18,397,466	21,102,669
9	CT Scan	3,017,593	3,265,495
10	Laboratory	34,531,372	37,543,462
11	Blood Storing/Processing	11,173,712	10,138,368
12	Cardiology	0	0
13	Electrocardiology	10,784,930	10,401,416

**YALE-NEW HAVEN HOSPITAL**  
**TWELVE MONTH PRELIMINARY FILING**  
**FISCAL YEAR 2015**  
**REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT**

(1)	(2)	(3)	(4)
LINE	DESCRIPTION	Oct-Mar 2014 ACTUAL	Oct-Mar 2015 ACTUAL
14	Electroencephalography	3,285,639	2,168,297
15	Occupational Therapy	0	0
16	Speech Pathology	0	0
17	Audiology	0	0
18	Respiratory Therapy	7,820,515	8,339,846
19	Pulmonary Function	1,520,652	1,766,585
20	Intravenous Therapy	536,189	670,880
21	Shock Therapy	0	0
22	Psychiatry / Psychology Services	2,790,014	3,782,872
23	Renal Dialysis	1,957,467	1,961,618
24	Emergency Room	32,397,885	32,656,830
25	MRI	3,595,854	3,731,793
26	PET Scan	0	0
27	PET/CT Scan	0	0
28	Endoscopy	1,617,510	952,885
29	Sleep Center	0	0
30	Lithotripsy	0	0
31	Cardiac Catheterization/Rehabilitation	3,253,940	2,968,710
32	Occupational Therapy / Physical Therapy	4,427,768	5,086,485
33	Dental Clinic	2,014,448	2,415,593
34	Other Special Services	2,737,232	2,236,706
	<b>Total Special Services</b>	<b>269,816,662</b>	<b>288,229,052</b>
<b>D.</b>	<b><u>Routine Services:</u></b>		
1	Medical & Surgical Units	107,489,738	116,495,947
2	Intensive Care Unit	27,645,820	25,016,787
3	Coronary Care Unit	5,076,888	4,890,249
4	Psychiatric Unit	12,782,972	13,736,305
5	Pediatric Unit	7,775,799	7,939,875
6	Maternity Unit	4,448,808	4,040,181
7	Newborn Nursery Unit	2,307,986	2,095,995
8	Neonatal ICU	9,602,946	9,780,496
9	Rehabilitation Unit	0	0
10	Ambulatory Surgery	5,051,154	6,540,694
11	Home Care	0	0
12	Outpatient Clinics	100,740,305	119,015,544
13	Other Routine Services	0	0
	<b>Total Routine Services</b>	<b>282,922,216</b>	<b>309,552,273</b>
<b>E.</b>	<b><u>Other Departments:</u></b>		
1	Miscellaneous Other Departments	104,628,969	88,886,961
	<b>Total Operating Expenses - All Departments*</b>	<b>1,124,421,523</b>	<b>1,190,659,000</b>

YALE-NEW HAVEN HOSPITAL  
TWELVE MONTH PRELIMINARY FILING  
FISCAL YEAR 2015  
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)
LINE	DESCRIPTION	Oct-Mar 2014 <u>ACTUAL</u>	Oct-Mar 2015 <u>ACTUAL</u>
	*A.- 0. The total operating expenses amount above must agree with the total operating expens		

# ATTACHMENT 4

**ASAP**  **URGENT CARE**

Date: August 3, 2015

Ms. Janet Brancifort  
Deputy Commissioner  
Department of Public Health  
Office of Health Care Access  
410 Capitol Avenue, MS#13HCA  
PO Box 340308  
Hartford CT 06134

Dear Deputy Commissioner Brancifort:

I am writing to express my support for Yale-New Haven Hospital's (YNHH) Certificate of Need (CON) Application to terminate its urgent care center located at 317 Foxon Road, East Haven, CT and its occupational medicine services located at 317 Foxon Road, East Haven and 84 Main Street, Branford, Connecticut. Since YNHH opened its urgent care and occupational medicine sites (one opened as part of the Hospital of Saint Raphael), there has been a doubling of the number of similar sites within a ten-mile radius. Most of the urgent care centers, such as mine, handle occupational medicine injuries as well as non-occupational medicine walk in patients. The area's citizens and employers will be well served and will continue to have access and choice among alternate quality providers in the area.

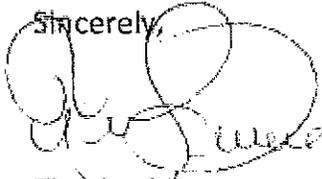
We understand that YNHH's North Haven, New Haven and West Haven sites will remain open for those who choose to continue to use Yale-New Haven Hospital for urgent care and occupational medicine services.

Our sites are on bus lines, have sufficient free parking and accepts all payers (except Medicaid D). We have ample capacity and the ability and willingness to accommodate any YNHH patients who are displaced by the closure of these

services. We welcome the additional volume and opportunity to serve the area residents.

Thank you in advance.

Sincerely,

A handwritten signature in black ink, appearing to read 'Tina Lariviere', written over the word 'Sincerely,'.

Tina Lariviere  
Chief Operating Officer  
ASAP Urgent Care  
tlariviere@asap-urgentcare.com



**HARTFORD** 1700 DIXWELL AVENUE  
**NORTH HAVEN** 163 UNIVERSAL DRIVE NORTH  
**NORWALK** 677 CONNECTICUT AVENUE  
**ORANGE** 109 BOSTON POST ROAD  
**STRAFORD** 200 EAST MAIN STREET  
**WATERBURY** 279 CHASE AVENUE / 506 FROST ROAD  
**WEST HAVEN** 636 CAMPBELL AVENUE

Date 8/6/2015

Ms. Janet Brancifort  
 Deputy Commissioner  
 Department of Public Health  
 Office of Health Care Access  
 410 Capitol Avenue, MS#13HCA  
 PO Box 340308  
 Hartford CT 06134

Dear Deputy Commissioner Brancifort:

I am writing to express my support for Yale-New Haven Hospital's (YNHH) Certificate of Need (CON) Application to terminate its urgent care center located at 317 Foxon Road, East Haven, CT and its occupational medicine services located at 317 Foxon Road, East Haven and 84 Main Street, Branford, Connecticut. Since YNHH opened its urgent care and occupational medicine sites (one opened as part of the Hospital of Saint Raphael), there has been a doubling of the number of similar sites within a ten mile radius. Most of the urgent care centers, such as mine, handle occupational medicine injuries as well as non-occupational medicine walk in patients. The area's citizens and employers will be well served and will continue to have access and choice among alternate quality providers in the area.

We understand that YNHH's North Haven, New Haven and West Haven sites will remain open for those who choose to continue to use Yale-New Haven Hospital for urgent care and occupational medicine services.

My site is on a bus line, has sufficient free parking and accepts all payers. We have ample capacity and the ability and willingness to accommodate any YNHH patients who are displaced by the closure of these services. We welcome the additional volume and opportunity to serve the area residents.

Thank you in advance.

Sincerely,

  
JD Sidana  
203URGENT CARE

# ATTACHMENT 5

## CURRICULUM VITAE

### **RICHARD D'AQUILA**

282 Boston Post Road

Westbrook, CT 06498

Telephone (860) 669-0871



### **BUSINESS ADDRESS:**

Yale-New Haven Hospital  
20 York Street  
New Haven, CT 06510  
Telephone: (203)-688-2606

### **PROFESSIONAL EXPERIENCE:**

June, 2014  
President

**President**  
Yale-New Haven Hospital  
**Executive Vice President**  
Yale-New Haven Health System

February, 2012  
June, 2014

**President and Chief Operating Officer**  
Yale-New Haven Hospital  
**Executive Vice President**  
Yale New Haven Health System

May, 2006 to  
February, 2012

**Executive Vice President and Chief Operating Officer**  
Yale-New Haven Hospital/Yale New Haven Health System

### Organizational Profile

Yale New Haven Health System (YNHHS) is a 1597-bed delivery network formed in 1995 which consists of Yale-New Haven, Bridgeport and Greenwich Hospitals. YNHHS has revenues in excess of \$2.3 billion in FY '11 based on 90,000 discharges and 1.3 million outpatient visits. Yale-New Haven Hospital is a 1,008-bed tertiary referral medical center that includes the 201-bed Yale New Haven Children's Hospital and the 76-bed Yale New Haven Psychiatric Hospital. Both Yale New Haven Health System and Yale-New Haven Hospital are formally affiliated with Yale University School of Medicine.

### Responsibilities

Overall responsibility for all aspects of day to day operations for Yale-New Haven Hospital (YNHH) and the

senior network leader at the Yale New Haven Health System representing the YNHH delivery network. Hospital leadership responsibilities include direct accountability for the senior leadership team, strategic planning, organizational performance, quality improvement, labor relations and human resources management, system integrations, external relations and service line development. Senior leadership and implementation responsibility for all aspects of the hospital's annual business (operating) plan. Senior level oversight of the hospital's facility plan including construction of a 112-bed, \$450 million Comprehensive Cancer Pavilion commencing construction in the fall of 2006.

August, 2000 to April, 2006

**Senior Vice President/Chief Operating Officer**  
New York Presbyterian Hospital/  
Weill Cornell Medical Center  
New York, New York

Organizational Profile

New York Presbyterian Hospital is a 2,369 bed Academic Medical Center created from the merger between the New York Hospital and the Presbyterian Hospital in the City of New York. The Weill Cornell Medical Center consists of an 880 bed acute care facility in Manhattan and the 239 bed Westchester Division campus in White Plains specializing in behavioral health.

Responsibilities

Overall responsibility for all aspects of day to day operations for the Weill Cornell Medical Center and the Westchester Division, a two campus Academic Medical Center of 1120 beds. Direct responsibility for a total operating expense budget in excess of \$450,000,000 and revenues of \$850,000,000. Senior leadership and implementation for all aspects of the Medical Center's operating plan including quaternary and tertiary service development, medical staff relations and recruitment, employee relations and labor strategy. System level member of the Corporate Management Team with involvement in strategic and facilities planning, service line development, information technology and performance improvement.

May 1992 to June 2000

**Executive Vice President/Chief Operating Officer**  
St. Vincent's Medical Center  
Bridgeport, Connecticut

**President**  
Vincentures, Inc.

**President**  
St. Vincent's Development Corporation, Inc.

Chief Operating Officer of 391 bed, university-affiliated acute care hospital and health system. President/CEO of affiliated subsidiaries with management responsibility at the Medical Center and corporate level. Medical Center responsibilities including day to day operations oversight for patient care services; support services and facilities planning and development. Corporate responsibilities including information systems, ambulatory network development, managed care contracting network oversight and real estate/satellite facility development.

January 1987-April 1992

**President/CEO**  
Health Initiatives Corporation  
Providence, Rhode Island

Chief Executive Officer of a consulting practice specializing in strategic planning, business development and project implementation assistance for acute care and specialty hospitals, state planning agencies and private investors. Specific responsibilities included:

- Practice Leadership
- Engagement Planning and Management
- Project Supervision and Control
- Client Interface
- Practice Marketing and Business Development

June 1984-December 1986

**Vice President**  
The Mount Sinai Hospital Corporation  
Hartford, Connecticut

June 1981-June 1984

**Vice President, Division of Planning  
and Community Services**  
The Mount Sinai Hospital  
Hartford, Connecticut

June 1979-June 1981

**Assistant Executive Director**  
The Mount Sinai Hospital  
Hartford, Connecticut

January 1979-May 1979

**Administrative Resident**  
The Mount Sinai Hospital  
Hartford, Connecticut

**OTHER APPOINTMENTS:**

November 2000 To Present	<b>Member, Board of Directors</b> Voluntary Hospitals of America/Metro New York New Rochelle, New York
January 1995- June 2000	<b>Member, Board of Directors</b> Goodwill Industries Bridgeport, Connecticut
December 1993- June 2000	<b>Founding Board Member</b> Park City Primary Care Center Bridgeport, Connecticut
May, 1992- June 2000	<b>Member, Board of Directors</b> St. Vincent's Development Corporation Vincentures, Inc. Omicron, Inc. Connecticut Health Enterprises Bridgeport, Connecticut
January 1992- December 1994	<b>Member, Board of Directors</b> Visiting Nurses Association of Fairfield County Bridgeport, Connecticut
January 1989- December 1991	<b>Member, Board of Directors</b> Easter Seal Society/Meeting Street Rehabilitation Center, Inc. of Rhode Island Providence, Rhode Island
January 1980- December 1989	<b>Member, Board of Directors</b> Combined Hospitals Alcohol Program Hartford, Connecticut
September 1985- December 1986	<b>President, Board of Directors</b> Regional Alcohol and Drug Abuse Resources, Inc. Hartford, Connecticut
September 1981- December 1986	<b>Adjunct Faculty/Lecturer</b> University of Hartford, Barney School of Business and Public Administration West Hartford, Connecticut
January 2001 - Present	<b>Adjunct Faculty/Residency Preceptor and Lecturer</b> Robert F. Wagner Graduate School of Public Service New York University New York, N.Y.
December 2000 - Present	<b>Adjunct Faculty/Lecturer</b> Weill Medical College of Cornell University Department of Public Health, New York New York, N.Y.

January, 2009 to Present      **Member, Board of Directors**  
 Habitat of Greater New Haven  
 New Haven, Connecticut

February, 2012 to Present      **Member, Board of Trustees**  
 Yale-New Haven Hospital  
 New Haven, Connecticut

September 2012-  
 May 2013      **Preceptor**  
 Fairfield University School of Nursing

**EDUCATION:**

**Yale University School of Medicine**  
 Graduate Program in Hospital Administration  
 Academic Distinctions: Research Excellence Award (1979)  
 1979 Graduate

**Central Connecticut State University**  
 Bachelor of Arts: Economics/Business  
 Academic Distinctions: Omicron Delta Epsilon  
 Economics Honor Society  
 1977 Graduate

**PUBLICATIONS:**

1. *Evidence-Based Management in Healthcare*, Kovner, Anthony R., Fine, David J., and D'Aquila, Richard. Health Administration Press Textbook, 2009.
2. *Yale-New Haven Hospital's Asset Acquisition of the Hospital of St. Raphael: Pre-Close, Planning and Transition Activities*, D'Aquila, Richard; Aseltyne, William; Lopman, Abe; Jweinat, Jillian; Ciacco, Teresa; Comerford, Matthew; American Journal of Medicine, August 2013 (Accepted).
3. *Achieving Safe Patient Flow in an Academic Medical Center: A Quality Improvement Journey at Yale-New Haven Hospital*; The Joint Commission Journal on Quality and Patient Safety (Accepted).

**PROFESSIONAL AFFILIATIONS:**

Fellow, American College of Health Care Executives  
 Yale Hospital Administration Alumni Association  
 Connecticut Hospital Association

**CHRISTOPHER M. O'CONNOR, FACHE**

54 Connelly Hill Road  
Hopkinton, MA 01748

oconnor.chris09@gmail.com

Tel: (508) 625-1487  
Mobile: (203) 444-5789

**PROFESSIONAL EXPERIENCE****YALE NEW HAVEN HEALTH SYSTEM, NEW HAVEN, CT**

*Large academic health system with nearly \$3.4 billion in revenue, 2,130 beds and over 19,000 employees located in southern Connecticut*

**Executive Vice President, Chief Operating Officer (2012 – present)**

Responsible for system operations of this large, academic multihospital integrated delivery system including overseeing the 300+ physician medical foundation.

- Integrated the employee health, occupational medicine and corporate health components into a consolidated and aligned business unit with gains in efficiencies and revenue performance.
- Leading the system's cost and value positioning effort to improve our annual cost performance by more than \$125 million on an ongoing annual basis. Chair of the system implementation steering committee that coordinates the four committees driving this project.
- Coordinating the effort to improve the operations through a system approach in the laboratory, pharmacy, care management, medical staff credentialing – these areas are under system development to meet operational benchmark targets as well as business plan opportunities.
- Leading the "big data" effort across the health system to ensure the capability to manage data and produce information meets the changing needs across the health care spectrum.

**SAINT RAPHAEL HEALTHCARE SYSTEM, NEW HAVEN, CT**

*Large community teaching hospital (511 beds) affiliated with the Yale School of Medicine encompassing over \$500 million in revenue, long term care and other ancillary services*

**President and Chief Executive Officer (2009-2012)**

Reporting to the Board, oversaw all aspects of the health care system up to and including the asset sale of the system to Yale-New Haven Hospital in September of 2012.

- Led the team to negotiate and ultimately execute a letter of intent and Asset Purchase Agreement with Yale-New Haven Hospital. This process included a full second request investigation by the Federal Trade Commission as well as reviews by the Attorney General and the Office of Health Care Access regarding a Certificate of Need process.
- Implemented a broad strategy to investigate an opportunity to affiliate with a system that included national catholic systems, for-profit systems and systems within the state of Connecticut.
- Over the two year period managed to maintain operational focus and performance while managing through the purchase process while uncertain of the approval process.
- Improved profitability of the medical center by implementing widespread redesign and cost improvement targets.

**CARITAS ST. ELIZABETH'S MEDICAL CENTER, BOSTON, MA**

*Flagship tertiary teaching hospital of a six-hospital system affiliated with Tufts School of Medicine, located in eastern Massachusetts with 340 licensed beds and 2,500 employees and nearly \$400 million in net revenue.*

**President (2006 – 2009)****Chief Operating Officer (2006)**

Responsible for medical center operations including strategic plan, operational performance and community engagement for this urban tertiary teaching hospital.

- Exceeded budgeted performance, earning progressively larger bottom-lines of 1.1%, 1.5% and 2% during the three fiscal years under my leadership.

- Successfully recruited more than 40 new physicians, including key leadership as well as clinical staff to facilitate clinical activity turnaround.
- Improved patient satisfaction from the 70<sup>th</sup> percentile to the 90<sup>th</sup> percentile by linking service, quality and access to leadership performance.
- Through a team approach, worked to improve quality goals in many areas including surgical care infection, cardiac outcomes, infection control and ventilator associated pneumonia. Facilitated the implementation of a transparent patient safety program with non-punitive reporting as well as a thorough root cause analysis process to ensure process improvements.
- Recognized as a Tompson Performance Improvement hospital in both 2007 and 2008 in the large teaching category.
- Improved quality outcomes, including benchmark performance in the surgical care infection program to over 95% compliance, and achieved distinction from the Institute of Healthcare Improvement.
- Facilitated programmatic expansion into hyperbaric wound care, neurosciences and robotic surgery. Oversaw milestone construction projects including: a new emergency department, operating suite renovations, a neuroscience and spine center and a multi-disciplinary wound center.
- Led the implementation of Leadership Development initiative across the system in conjunction with the "Achieving Exceptional Care" program -- A Studer Group collaborative for over 600 system-wide leaders that focused on improving leadership tools.

#### OCHSNER HEALTH SYSTEM, NEW ORLEANS, LA

*A non-profit, academic, multi-specialty healthcare delivery system dedicated to patient care, research and education. The system includes seven hospitals, more than 35 healthcare centers and 11,000 employees.*

#### **Vice President Clinical Operations (2003 – 2006)**

Responsible for specialty clinical services including cardiac, oncology, digestive diseases, musculoskeletal, transplant, surgical and perioperative services. Included within these service lines are both clinic operations and hospital services for areas including infusion therapy, radiation therapy, endoscopy, cardiac cath labs and EP labs, 23 OR suites, 6 OR ASC, and 2 plastic surgical OR suites.

- Hurricane Katrina - Led the organization through its response to this national disaster. Ochsner was one of three hospitals to remain functional throughout the storm and flooding. Facilitated the emergency preparedness and response to this regional catastrophe including countless leadership and staff meetings and briefings for the 2,500 staff, patients and dependants sheltered at Ochsner. Assisted in communicating current operational status with media outlets. Assisted in coordination of assets and security needs with state and local emergency operations centers. Maintained a structured decision making process in the face of failing utilities, flooding, civil unrest and numerous operational and human resource issues.
- Assisted in the acquisition process that resulted in the purchase of three Tenet hospitals in the greater New Orleans region. Finalized planning for new cancer center and heart and vascular institute. Facilitated the operational opening of main campus ASC in January 2004.
- Facilitated the focus on patient satisfaction, patient safety and quality, including implementing quality metrics as well as improving patient satisfaction within the operating room setting by 50% over a 12-month period.
- Upon arrival, addressed significant resource shortage within Anesthesia. Implemented recruitment and retention tactics to increase CRNA staff, recruited a new chair and increased staffed anesthesia locations 20% within a year of implementation.
- Improved endoscopy scheduling by both resource allocation and process improvement that increased procedures from 50 to 70 per day.

#### HOSPITAL OF SAINT RAPHAEL, NEW HAVEN, CT

*A 510 bed tertiary teaching hospital affiliated with the Yale School of Medicine in New Haven, Connecticut. St. Raphael's has more than 3,500 employees with a broad range of clinical programs with over \$600 million in net patient revenue.*

#### **Vice President, Clinical Operations (2001 – 2003)**

**Administrative Director, Departments of Surgery and Emergency Medicine (1999 – 2001)**

**Administrator, St. Raphael Physician Organization (1997 – 1999)**

Progressive responsibility focused on operational performance of major clinical departments including surgery, emergency medicine, radiology, pathology, gastroenterology, cardiac and oncology services. Responsible for more than 400 FTE's and \$200+ million in net patient service revenue.

- Following 9/11, established the first regional emergency response agreement in Connecticut in collaboration with Yale New Haven Hospital and other local healthcare providers.
- Improved OR efficiency by both adding supply (from 19 OR suites to 23) and increasing production by \$25 million in gross revenue. Improved cost per case by 5%, and increased OR utilization (saving approximately \$3 million in both med/surg supplies and implant costs).
- Implemented OR information system (ORSOS) following a difficult period for both scheduling and preference cards.
- Implemented a capitated defibrillator agreement with Medtronic that enabled savings of more than \$1.2 million in pacemaker and defibrillator implants in one year.
- Coordinated the integration of additional subspecialties within the practice, increasing gross professional revenue to \$1.5 million.

SINAI HOSPITAL OF BALTIMORE, BALTIMORE, MD (1995 – 1997)

*A large acute tertiary teaching hospital with nearly 500 beds and affiliated with the Johns Hopkins School of Medicine. It is the flagship for Lifebridge Health an two-hospital integrated healthcare delivery system.*

**Coordinator, Emergency Medicine Operations (1996 – 1997)**

**Administrative Resident (1995 – 1996)**

Following post graduate residency, worked with then CEO Warren Green and the senior leadership team. Remained and managed this large emergency department, which at the time was seeing 65,000 patients annually with more than 20 physicians and PA FTE's.

**AFFILIATIONS / BOARD MEMBERSHIPS / RECOGNITIONS**

**CONNECTICUT HOSPITAL ASSOCIATION, Board Member (2010-present)**

*Diversified Network Services, Board Member (2010-present)*

*Financial Oversight Committee, Member (2010-present)*

**VHA, NORTHEAST PURCHASING COALITION, Board Member (2012-present)**

**AMERICAN COLLEGE OF HEALTHCARE EXECUTIVES, Fellow**

*Member of Article of the Year Committee*

**AMERICAN HEART ASSOCIATION, Founders Affiliate, Board Member (2008)**

*Chair of the Heart Walk Leadership Committee*

**SAINT RAPHAEL LEADERSHIP AWARD, ( September, 2012)**

**GOOD SCOUTING LEADERSHIP AWARD (October, 2012)**

**NEW HAVEN BUSINESS TIMES, Forty under 40 Award (September 2000)**

**EDUCATION**

THE GEORGE WASHINGTON UNIVERSITY, Washington, DC - 1996

**Masters in Health Service Administration**

THE GEORGE WASHINGTON UNIVERSITY, Washington, DC - 1993

**Bachelor of Arts, Economics**

Linda F. Pettine

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**EMPLOYMENT HISTORY:**

**Yale-New Haven Hospital**

- 3/2014-Present Associate Director, Yale New Haven Health Occupational Medicine and Wellness Services
- Member of the executive team responsible for the planning and implementation of a system-wide strategy for Occupational Health and Wellness Services. Specific duties have included:
    - Collaboration on modeling different strategies for standardization of various clinical processes.
    - Integration of employee health onto a unified practice management and EMR software platform.
    - Chairing the system occupational health fee standardization committee.
  - Chair the annual hospital system-wide influenza vaccination program responsible for the vaccination of 19,000 Yale New Haven Health System employees.
  - Oversee billing operations for system-wide occupational health program

- 9/2012-3.2014 Manager, Occupational Health Plus a Component of Worker Health Solutions, Yale-New Haven Hospital, New Haven, CT
- .Operational oversight of four clinics including financial and clinical resource management.
  - Negotiate vendor agreements, having developed relationships with different vendors. Manage contracts and draft RFP and grant responses.

**Hospital of Saint Raphael**

- 11/2010-9/2012 Administrative Director, Occupational Health Plus™, Hospital of Saint Raphael, New Haven, CT
- Provided administrative oversight of four clinics
  - Supervised managerial level staff and successfully developed a very cohesive team responsible for managing over 50 employees.
  - Negotiated agreements with client companies and maintained key client companies through direct interaction and participation in the pre-sales and sales processes.
  - Provided managerial oversight of the Employee Wellness Program for a major municipality and assisted in the development of the program

as well as the successful RFP response.

- Managed a budget of over \$5,000,000

1/2004-2/2011

Manager, Outpatient Rehabilitation Services, Hospital of Saint Raphael  
New Haven, CT

- Oversaw three out-patient rehabilitation facilities
- Year over year growth in volume and revenue
- Developed and implemented productivity and quality improvement standards and auditing tools for outpatient rehabilitation

### **Connecticut Physical Therapy, L.L.C.**

6/1999-1/2004

Multi-Facility Director, Cheshire and Wallingford, CT

- Managed staff and operations of two outpatient physical therapy offices
- Consistent profitability each quarter

### **Keystone Physical Therapy & Sports Medicine P.C., Cheshire and Wallingford, CT (Originally Pettine & McDiarmid Physical Therapy)**

1/1986-6/1999:

Founder and President, Founded and managed a highly successful physical therapy practice with revenues exceeding \$2,000,000 annually.

- Operated multiple offices and managed 12 employees.
- Innovations included bringing aquatic-therapy to the practice and marketing the practice to home-care agencies.
- Was the sole therapy provider to a major Connecticut HMO
- Designed and oversaw facility construction
- Developed and implemented all practice policies and procedures
- Negotiated insurance contracts
- Developed and maintained physician relationships
- Implemented the company's practice management software system
- Ensured compliance with regulatory standards and obtained Medicare certification for outpatient physical therapy clinics
- Negotiated sale of practice to a regional provider

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### **CLINICAL POSITIONS:**

1980 – 1986:

Hospital-Rehab Center Coordinator, Easter Seal Rehabilitation Center of  
Central Connecticut, Meriden, CT

Easter Seal Rehabilitation Center of Central Connecticut, Meriden, CT

Middlebury Orthopaedic Group, Waterbury, CT

Newport Hospital, Newport, RI

Worcester-Hahnemann Hospital, Worcester, MA

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**EDUCATION:**

MBA, focus in Health Care Management  
Quinnipiac University

Completed Masters level courses in Orthopedic Physical Therapy  
Quinnipiac College

Bachelor of Science in Physical Therapy, Magna Cum Laude  
University of Connecticut

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**PROFESSIONAL AFFILIATIONS:**

Member, Beta Gamma Sigma – International Honor Society of Business Students  
Member, American College of Healthcare Executives (ACHE)  
Member, National Association of Occupational Healthcare Professionals.  
Past President, Quinnipiac Chapter, American College of Healthcare Executives  
Secretary, Board of Directors, Greater New Haven Chamber of Commerce Health Care Council

Jodie A. Boldrighini

123 Harbor Drive #305, Stamford, CT 06902 ~ 203-912-7405 ~

[jojobrnr@hotmail.com](mailto:jojobrnr@hotmail.com)

### SUMMARY OF QUALIFICATIONS

- Registered Nurse with 14 years of progressive leadership experience in different aspects of health care delivery including in-patient care, out-patient care, ambulatory care, home hospice care, as well as corporate/employee health.
- Experienced and resourceful leader in healthcare operations and management with excellent customer service skills, creative approach to new initiatives and growing a business.
- Self-starter with a demonstrated ability to work well under pressure and complete multiple projects with a positive attitude
- Professional, team player with a proven track record of successfully working closely with a variety of personnel
- Keen ability to navigate and capitalize on political factors.

### PROFESSIONAL EXPERIENCES

#### YALE-NEW HAVEN HEALTH SYSTEM

Director, Occupational Health and Employee Population Health Solutions, June 2015 – present

- Set Strategic and Operational Plan for Occupational Health Services
- Set Strategic and Operational Plan for Employee Population Health Services
- Management of Sales and Marketing Teams

Associate Director, Corporate Health and Wellness, October 2013- June 2015

- Set Strategic Plan for growth of Corporate Health and Wellness across CT and Westchester County
- Management of Sales and Marketing Team
- Oversight of 12 On-Site Corporate Health Units/Services
- 35+ direct reports through restructuring
- Oversight of EPIC EMR implementation at Corporate Health Units
- Capital and Operational budgets, payroll, productivity
- Recruiting hiring and retention
- Committee Involvement: Member - Occupational Health Executive Team, Chair - Employee and Corporate Wellness Collaborative Team, Member – Corporate Management Group
- Achievements: Identified need and initiated Workflow Analysis and Capacity Study, Identified need and initiated Market Analysis of external market as well as Internal Stakeholders, Identified need and initiated RFP for Wellness through Towers Watson for the YNHHS, Consolidated Sales and Marketing Team, Initiated Corporate and Employee Wellness Collaborative Team

#### GREENWICH HOSPITAL

Manager of Sales and Operations, Occupational Health Services, October 2008-October 2013

- Management of Employee Health for the Hospital, Employee health services for 200 corporations and
- 8 corporate off site health units
- 20+ direct reports, client relations, employee relations
- Project management of multiple software conversions; EMR upgrades and conversion, billing software conversion
- Contract management, RFP responses, BIDs, negotiations, completion and implementation
- Capital and Operational budgets, payroll, productivity

- Management of day to day operations
- Recruiting hiring and retention
- Committee Involvement: Safety Committee Meeting, Environment of Care Council, Nursing Leadership, Leadership Forum
- Achievement: successful staff turnover to get the right 'team' in place, increase scope by 4 corporate health units, expanded into New Jersey, EMR implementation, conversion of billing software

Nurse Manager Medical Oncology Services, July 2006-October 2008

- 24 bed in-patient medical oncology unit, 9 chair out-patient infusing center
- 57 employees
- Capital and Operating budgets, payroll, productivity
- Quarterly Quality Measures and System Core Measures
- Successful preparation and completion of State and JCAHO surveys
- Committee Involvement: Steering Committee for Patient Satisfaction, Environment of Care Council, Nursing Leadership, Leadership Forum, Patient Through-Put Steering Committee
- Achievement: Improved Employee Satisfaction through internal study, resulting in improved Patient Satisfaction Scores to 99 percentile

Director of Home Hospice Department, September 2005-July 2006

- 20 employees
- Management of State and Federal Regulations, Quarterly Quality Measures
- Capital and Operating budgets, payroll, productivity
- Sales and marketing of program
- Organizing Annual Fundraiser, Nationally recognized Tree of Light Event
- Committee Involvement: Nursing Leadership, Leadership Forum, Chair -- Patient Advisory Council for Hospice
- Achievement: Doubled Daily Census of patients on service, AND Doubled length of stay on service

Clinical Leader, Oncology Services, November 2002 – September 2005

Clinical Nurse, Oncology Services, November 2001 – November 2002

### EDUCATION

THE UNIVERSITY OF NEW HAVEN New Haven, CT, 2013-2015

- Executive Masters in Business Administration

GEORGETOWN UNIVERSITY, Washington, DC, 1995-1999

- Bachelors in the Science of Nursing

### ADDITIONAL

- Recipient of Fairfield County's 40 under 40 award 2008
- Award for Quality Improvement 2002, 2003, 2007, 2011, 2012, 2013
  - Initiatives: Hand washing, Management of patients with CHF, Decreasing employee injuries related to employee

handling, 100% Employee Participation in Flu Vaccination Program

- Helen Meehan (RN of the year finalist - GH) Award Nominee 2002, 2003, 2007
- Nightingale (RN of the year finalist – CT) Aware Nominee 2002, 2003
- Oncology Nursing Society – member since 2001
- Teddy Bear Clinic, Look Good Feel Better 2001-2008
- American Cancer Society, Coordinator of First Relay for Life Greenwich 2007 – 2012
- Hospice, Tree of Light, Coordinator of First event at new GH campus, 2003-2005
- BCLS and First Aid Certifications
- Certificate of Achievement for completion of Dale Carnegie Course, 2006; coach 2007
- National Certification, Occupational Health Professional, NAOHP, 2008
- Business Administration Award, High School, 1999

# ATTACHMENT 6



YALE- NEW HAVEN HOSPITAL  
Occupational Health Services at Branford & Foxon

Prior 3 Year Analysis - Full YNH - Service (Foxon / Branford Occ Health) - YNH w/o Occ Health Services FY 2012 thru FY 2014

LINE/Total Entry:	FY 2012		FY 2013		FY 2014		FY 2015		FY 2015	
	Results	Service	Results	Service	Actual	Actual w/o Service	Projected Actual	Service	Projected Actual	w/o Service
<b>A. OPERATING REVENUE</b>										
1	Total Gross Patient Revenue	\$ 5,740,304,100	\$ 6,160,000	\$ 5,740,242,900	\$ 2,634,400	\$ 8,240,518,900	\$ 2,733,100	\$ 8,274,080,900	\$ 2,829,500	\$ 9,534,985,500
2	Leas. Allowances	4,027,033,100	49,300	4,026,983,800	1,812,100	5,895,888,100	1,954,200	6,201,191,800	2,025,500	7,089,439,500
3	Leas. Charity Care	-	-	-	-	-	-	-	-	-
4	Net Patient Service Revenue	\$ 1,713,271,000	\$ 18,300	\$ 1,713,252,700	\$ 722,300	\$ 2,446,630,400	\$ 778,900	\$ 2,472,989,100	\$ 804,000	\$ 2,445,547,000
5	Medicaid	543,533,400	\$ -	543,533,400	\$ -	868,645,000	\$ -	868,645,000	\$ -	782,985,000
6	Medicaid	248,711,000	\$ -	248,711,000	\$ -	337,136,899	\$ -	337,136,899	\$ -	339,468,000
7	CHAMPUS & Tricare	-	\$ -	-	\$ -	-	\$ -	-	\$ -	-
8	Other	799,244,400	\$ -	799,244,400	\$ -	1,055,986,300	\$ -	1,055,986,300	\$ -	1,122,483,000
9	Total Government	892,614,300	\$ -	892,614,300	\$ -	1,221,926,800	\$ -	1,221,926,800	\$ -	1,238,609,000
10	Commercial Insurers	27,412,300	\$ -	27,412,300	\$ -	41,789,000	\$ -	41,789,000	\$ -	85,260,000
11	State Pay	12,200	\$ -	12,200	\$ -	519,900	\$ -	519,900	\$ -	541,200
12	Workers Compensation	6,100	\$ -	6,100	\$ -	240,500	\$ -	240,500	\$ -	1,841,200
13	Other	18,300	\$ -	18,300	\$ -	722,300	\$ -	778,900	\$ -	811,800
14	Total Non-Government	\$ 1,713,271,000	\$ 18,300	\$ 1,713,252,700	\$ 722,300	\$ 2,224,703,600	\$ 778,900	\$ 2,472,989,100	\$ 811,800	\$ 2,445,547,000
15	Other Operating Revenue	47,580,300	\$ -	47,580,300	\$ -	71,754,000	\$ -	71,754,000	\$ -	69,549,000
17	Net Assets Released from Restriction	\$ 1,760,851,300	\$ 18,300	\$ 1,760,813,000	\$ 722,300	\$ 2,340,478,800	\$ 778,900	\$ 2,401,125,100	\$ 811,800	\$ 2,416,586,200
<b>B. OPERATING EXPENSES</b>										
1	Salaries and Wages	\$ 585,246,993	\$ 149,500	\$ 585,097,493	\$ 500,500	\$ 769,618,900	\$ 548,900	\$ 806,135,200	\$ 654,400	\$ 818,939,600
2	Pharmaceuticals	172,016,200	44,700	171,971,500	159,100	236,216,600	172,200	253,428,800	177,800	269,783,000
3	Physicians Fees	249,959,100	300	249,659,100	383,200	333,234,300	20,800	357,135,000	23,200	430,085,800
4	Supplies and Drugs	294,353,400	300	294,353,100	17,900	395,072,600	407,250,000	407,250,000	420,089,000	420,089,000
5	Depreciation and Amortization	79,100,600	-	79,100,600	81,913,500	81,913,500	122,543,000	122,543,000	124,084,000	124,084,000
6	Provision for Bad Debts-Other	35,622,100	-	35,622,100	-	-	-	-	-	-
7	Medical Expense	17,719,700	-	17,719,700	23,920,200	23,920,200	23,742,000	23,742,000	26,033,000	26,033,000
8	Lease Expenses	14,388,700	-	14,388,700	109,400	14,698,000	14,698,000	14,698,000	21,070,000	21,070,000
9	Other Operating Expenses	202,831,200	33,700	202,803,300	269,795,600	270,600,000	321,215,000	321,215,000	321,215,000	321,215,000
10	Other Operating Expenses	1,854,251,900	\$ 229,200	\$ 1,854,023,300	\$ 911,900	\$ 2,338,673,700	\$ 816,700	\$ 2,331,689,000	\$ 869,900	\$ 2,330,948,100
<b>C. INCOME/(LOSS) FROM OPERATIONS</b>										
1	Income/(Loss) from Operations	\$ 106,579,800	\$ (208,900)	\$ 106,789,700	\$ (189,500)	\$ 1,050,664,900	\$ (137,800)	\$ 1,346,862,800	\$ (139,100)	\$ 97,640,100
2	Non-Operating Revenue	\$ 24,029,000	\$ -	\$ 24,029,000	\$ -	\$ 73,846,000	\$ -	\$ 30,155,000	\$ -	\$ 50,000,000
<b>D. EXPENSE/DEFICIENCY OF REVENUE OVER EXPENSES</b>										
1	Expense/Deficiency of Revenue over Expenses	\$ 130,608,800	\$ (209,900)	\$ 130,818,700	\$ (189,500)	\$ 178,910,900	\$ (137,800)	\$ 164,837,800	\$ (139,100)	\$ 137,640,100
<b>E. VOLUME STATISTICS</b>										
1	Hospital Operating Margin	6.0%	-1147.0%	6.0%	4.3%	-26.2%	-17.7%	5.5%	5.7%	5.7%
2	Hospital Non-Operating Margin	1.3%	0.0%	1.3%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
3	Hospital Total Margin	7.3%	-1147.0%	7.3%	7.4%	-26.2%	-17.7%	6.5%	6.7%	6.7%
<b>F. VOLUME STATISTICS</b>										
1	Inpatient Discharges	61,958	-	61,958	89,503	80,503	78,315	78,315	80,531	80,531
2	Outpatient Visits	1,055,289	223	1,055,512	1,085,289	1,085,580	1,175,988	1,175,988	1,201,347	1,201,347
3	FTEs	838,043	223	838,266	1,166,241	5,729	7,469	7,469	7,731	7,731

**YALE-NEW HAVEN HOSPITAL**  
 Proposal for the Termination of Occupational Health at Foxon & Branford  
 Yale-New Haven Hospital  
**Assumptions**

<u>Net Revenue Rate Increases</u>		<u>FY 2016</u>	<u>FY 2017</u>	<u>FY 2018</u>
1) Government		0 - 1.4%	0 - 1.2%	0 - 2%
2) Non-Government		2.0%	2.0%	1.0%
		<u>FY 2016</u>	<u>FY 2017</u>	<u>FY 2018</u>
<u>EXPENSES</u>				
A.	<b>Salaries and Fringe Benefits</b>	3.7%	3.1%	3.4%
B.	<b>Non-Salary</b>			
1)	Medical and Surgical Supplies	3.7%	3.7%	3.7%
2)	Pharmacy and Solutions	3.7%	3.7%	3.7%
3)	Malpractice Insurance	3.0%	3.0%	3.0%
4)	Professional and Contracted Services	6.5%	3.0%	3.0%
5)	All Other Expenses	2 - 3%	2 - 3%	2 - 3%
		<u>FY 2016</u>	<u>FY 2017</u>	<u>FY 2018</u>
<u>FTEs</u>				
1)	Total estimated FTEs	<u>10,454</u>	<u>10,503</u>	<u>10,539</u>

Note - The above increase projections reflect all changes relating to Medicare and Medicaid reimbursement regulations.

## Greer, Leslie

---

**From:** Huber, Jack  
**Sent:** Wednesday, December 16, 2015 3:28 PM  
**To:** Rosenthal, Nancy (Nancy.Rosenthal@greenwichhospital.org)  
**Cc:** Roberts, Karen; Foster, Tillman; Greer, Leslie  
**Subject:** Completeness Letter, Docket Number: 15-32040-CON  
**Attachments:** Completeness Letter\_ DN 15-32040-CON.docx

Good Afternoon Nancy,

Please find the attached Completeness Letter in the matter of Yale-New Haven Hospital's proposal to terminate its occupational medicine and wellness services locate in East Haven and Branford. In responding to the Completeness Letter question, please follow the instructions included in the letter and provide the response letter as an attachment to an email only. Email the response letter to [OHCA@ct.gov](mailto:OHCA@ct.gov) and copy [Jack.Huber@ct.gov](mailto:Jack.Huber@ct.gov) and [Tillman.Foster@ct.gov](mailto:Tillman.Foster@ct.gov). No hard copies are required. If you have any questions regarding the completeness letter, please feel free to contact me at (860) 418-7069 or Tillman Foster at (860) 418-7031.

Sincerely,

*Jack A. Huber*

Jack A. Huber, Health Care Analyst  
Department of Public Health | Office of Health Care Access | 410 Capitol Avenue  
P.O. Box 340308 MS #13HCA | Hartford, CT 06134 | Ph:860-418-7069 | Fax:860-418-7053 | Email: [Jack.Huber@ct.gov](mailto:Jack.Huber@ct.gov)  
| Web: [www.ct.gov/ohca](http://www.ct.gov/ohca)



Dear Ms. Rosenthal:

On November 17, 2015, OHCA received the Certificate of Need application of Yale New-Haven Hospital proposing to terminate its occupational medicine and wellness services located at 317 Foxon Road in East Haven and 84 North Main Street in Branford. OHCA requests additional information pursuant to Connecticut General Statutes §19a-639a(c). *Please electronically confirm receipt of this email as soon as you receive it.* Provide responses to the questions below in both a Word document and PDF format at the earliest convenience as an attachment to a responding email.

Repeat each question before providing your response and paginate and date your response, i.e., each page in its entirety. Information filed after the initial CON application submission (e.g., completeness response letter, prefile testimony, late file submissions and the like) must be numbered sequentially from the Applicant's document preceding it. Please begin your submission using **Page 104** and reference "**Docket Number: 15-32040-CON.**"

1. Revise each Table 5 on p. 40 to update the actual FY 2015 utilization for each site for full twelve months actual results.
2. Revise Table 6 on p. 41 to update the projected FY 2016 utilization for each site to include fiscal year-to-date results. Include in your response what time frame (i.e. 2 mos., 1<sup>st</sup> qtr.) this utilization represents.
3. Revise Table 8 on pp. 43 and 44 by providing a breakdown of utilization by town, for FY 2015, the most recently completed fiscal year. Also, include only incorporated town names.
4. Explain why the Branford site was selected for termination of the occupational medicine and wellness services.
5. Per a statement on p.32, the East Haven and Branford sites are not operating at capacity. Explain how the New Haven and Hamden sites will have ample capacity to accommodate the displaced patients from the East Haven & Branford sites.
6. In reference to financial Worksheet submitted on p. 101:
  - a. File a separate Worksheet for each of the two sites.
  - b. Replace *Actual Results* (col. 1) to use twelve months actual FY 2015 information.
  - c. Is the stated reduction in lease expenses applicable only to the East Haven site if, per page 20, YNHH is evaluating the possible repurposing of space in Branford for outpatient cardiology services?
7. Verify that there will be no Yale-New Haven Hospital revenue or expenses attributable to the occupational medicine and wellness services at either of these two sites moving forward. Further, verify that Table 10 below is accurately reflective of this termination of services.

**TABLE 10**  
**PROJECTED REVENUES AND EXPENSES FOR THE**  
**YALE BRANFORD AND EAST HAVEN OCCUPATIONAL MEDICINE PROGRAMS**

Fiscal Year (FY)	FY 2017	FY 2018
Revenue from Operations	\$0	\$0
Total Operating Expenses	\$0	\$0
<b>Gain/Loss from Operations</b>	\$0	\$0

8. In reference to financial Worksheet submitted on p. 102:
  - a. File a separate Worksheet for each of the two sites.
  - b. Revise the Title of Columns 10 and 12 to reflect FY 2015 actual results with and without the proposed terminated services.
  
9. Provide any revised assumptions for the tables and the financial worksheets requested above, if necessary.

Please note that pursuant to Section 19a-639a(c) of the Connecticut General Statutes, you must submit your response to this request no later than sixty days from the date of this email transmission. Therefore, please provide your written responses to OHCA no later than XXX 2015, otherwise your application will be automatically considered withdrawn. ***Please email your responses to all of the following email addresses: [OHCA@ct.gov](mailto:OHCA@ct.gov), [karen.roberts@ct.gov](mailto:karen.roberts@ct.gov), [jack.huber@ct.gov](mailto:jack.huber@ct.gov), [tillman.foster@ct.gov](mailto:tillman.foster@ct.gov).*** If you have any questions concerning this letter, please feel free to contact Jack Huber at (860) 418-7069, Karen Roberts at (860) 418-7041 or Tillman Foster at (860) 418-7031.

Sincerely,

***Jack A. Huber***

Jack A. Huber  
 Health Care Analyst

STATE OF CONNECTICUT  
DEPARTMENT OF PUBLIC HEALTH

Jewel Mullen, M.D., M.P.H., M.P.A.  
Commissioner



Dannel P. Malloy  
Governor  
Nancy Wyman  
Lt. Governor

TO: Kevin Hansted, Hearing Officer

FROM: Jewel Mullen, M.D., M.P.H., M.P.A., Commissioner 

DATE: December 16, 2015

RE: Certificate of Need Application; Docket Number: 15-32040-CON  
Yale-New Haven Hospital  
Alignment of Yale- New Haven Hospital Occupational Medicine Services in  
East Haven and Branford.

---

I hereby designate you to sit as a hearing officer in the above-captioned matter to rule on all motions and recommend findings of fact and conclusions of law upon completion of the hearing.



Phone: (860) 509-8000 • Fax: (860) 509-7184 • VP: (860) 899-1611  
410 Capitol Avenue, P.O. Box 340308  
Hartford, Connecticut 06134-0308  
[www.ct.gov/dph](http://www.ct.gov/dph)

*Affirmative Action/Equal Opportunity Employer*

## Greer, Leslie

---

**From:** McKennan, Matthew <Matthew.McKenna@YNHH.ORG>  
**Sent:** Wednesday, January 20, 2016 4:06 PM  
**To:** Foster, Tillman; Huber, Jack  
**Cc:** User, OHCA; Martone, Kim; Roberts, Karen; Veyberman, Alla; Rosenthal, Nancy; Jennifer Groves Fusco; Willcox, Jennifer  
**Subject:** Completeness Response (Dockets 15-32040 & 15-32041)  
**Attachments:** Cover Letter (15-32040 and 15-32041).pdf; Completeness Response Occupational Health (DN 15-32040).pdf; Completeness Response Rehabilitation (DN 15-32041).pdf

Good afternoon. Please find attached responses from Yale-New Haven Hospital to the completeness questions issued under Docket Numbers 15-32040 and 15-32041. Thank you.

Matt

**Matthew J. McKenna, JD/MBA**  
**Senior Planner**  
**Yale New Haven Health System**  
2 Howe Street  
New Haven, CT 06511  
Phone: (203) 688-9987  
Cell: (203) 907-9858

<https://www.ynhhs.org/>

This message originates from the Yale New Haven Health System. The information contained in this message may be privileged and confidential. If you are the intended recipient you must maintain this message in a secure and confidential manner. If you are not the intended recipient, please notify the sender immediately and destroy this message. Thank you.



## **Completeness Question Responses**

### **Alignment of Yale-New Haven Hospital Occupational Medicine Services In East Haven and Branford**

**Docket No. 15-32040-CON**

**January 20, 2016**

1. Revise each Table 5 on p. 40 to update the actual FY 2015 utilization for each site for full twelve months actual results.

**RESPONSE:**

OHCA Tables 5, as contained at page 40 of the CON Application and restated below, include actual FY2015 utilization for each site for the full 12 months. The 2,311 visits reported for East Haven and the 5,420 visits reported for Branford are actual visits from October 1, 2014 through September 30, 2015 (FY 2015).

**TABLE 5  
HISTORICAL UTILIZATION BY SERVICE (EAST HAVEN LOCATION)**

Service**	Actual Volume (Last 3 Completed FYs)			CFY Volume
	FY 2012	FY 2013	FY 2014	FY 2015
Occupational Medicine and Wellness (Visits)	223	1,477	2,382	2,311 actual
<b>Total</b>	<b>223</b>	<b>1,477</b>	<b>2,382</b>	<b>2,311</b>

**TABLE 5  
HISTORICAL UTILIZATION BY SERVICE (BRANFORD LOCATION)**

Service**	Actual Volume (Last 3 Completed FYs)			CFY Volume
	FY 2012	FY 2013	FY 2014	FY 2015
Occupational Medicine and Wellness (Visits)	4,891	4,252	5,087	5,420 actual
<b>Total</b>	<b>4,891</b>	<b>4,252</b>	<b>5,087</b>	<b>5,420</b>

2. Revise Table 6 on p. 41 to update the projected FY 2016 utilization for each site to include fiscal year-to-date results. Include in your response what time frame (i.e. 2 mos., 1<sup>st</sup> qtr.) this utilization represents.

**RESPONSE:**

OHCA Table 6 has been updated to include year-to-date FY 2016 visits for the East Haven and Branford locations. These figures represent visits from October 1, 2015 through November 30, 2015 for each site.

**TABLE 6  
PROJECTED UTILIZATION BY SERVICE (EAST HAVEN LOCATION)**

Service*	Projected Volume		
	FY 2016	FY 2017	FY 2018
Occupational Medicine and Wellness (Visits)	229	0	0
<b>Total</b>	<b>229</b>	<b>0</b>	<b>0</b>

**TABLE 6  
PROJECTED UTILIZATION BY SERVICE (BRANFORD LOCATION)**

Service*	Projected Volume		
	FY 2016	FY 2017	FY 2018
Occupational Medicine and Wellness (Visits)	986	0	0
<b>Total</b>	<b>986</b>	<b>0</b>	<b>0</b>

3. Revise Table 8 on pp. 43 and 44 by providing a breakdown of utilization by town, for FY 2015, the most recently completed fiscal year. Also, include only incorporated town names.

**RESPONSE:**

**TABLE 8  
UTILIZATION BY TOWN (EAST HAVEN LOCATION)**

<b>Town</b>	<b>Utilization FY 15 (Visits &amp; Percentage)</b>
East Haven	520 (22.50%)
New Haven	520 (22.50%)
West Haven	219 (9.48%)
North Branford	146 (6.32%)
Branford	128 (5.54%)
Hamden	105 (4.54%)
North Haven	90 (3.89%)
Wallingford	63 (2.73%)
Bridgeport	47 (2.03%)
Milford	40 (1.73%)
Guilford	37 (1.60%)
OTHER	396 (17.14%)
<b><u>TOTAL</u></b>	<b>2,311 (100%)</b>

**TABLE 8  
UTILIZATION BY TOWN (BRANFORD LOCATION)**

Town	Utilization FY 15 (Visits & Percentages)
Branford	963 (17.77%)
New Haven	659 (12.16%)
East Haven	629 (11.61%)
Guilford	475 (8.76%)
North Branford	385 (7.10%)
West Haven	295 (5.44%)
Madison	221 (4.08%)
Hamden	197 (3.63%)
Clinton	187 (3.45%)
Wallingford	137 (2.53%)
North Haven	92 (1.70%)
Milford	71 (1.31%)
Bridgeport	62 (1.14%)
<b>OTHER</b>	<b>1,047 (19.32%)</b>
<b>TOTAL</b>	<b>5,420 (100%)</b>

4. Explain why the Branford site was selected for termination of the occupational medicine and wellness services.

**RESPONSE:**

As noted in the CON Application, Yale-New Haven Hospital (“YNHH” or the “Hospital”) is currently engaged in a three-year integration plan in connection with its acquisition of Saint Raphael’s Health System. YNHH has been assessing its ambulatory space post-acquisition. As part of this process, the Hospital reviewed all of its occupational health sites in order to identify potential service improvement opportunities and cost savings. YNHH determined that excess capacity existed at all of its occupational health locations, which resulted in this proposal to close both the East Haven and Branford sites.

The Branford site in particular was selected for termination for several reasons. First, YNHH looked at where the employers who utilize its occupational health services are located. A significant percentage of these employers are located in the greater New Haven area – for example, 29% of companies using the Branford occupational health site are located in New Haven. Fewer employers are located in towns closer to Branford. There is also more growth in employer/employee base projected for the New Haven area versus Branford.

In addition, the employees/patients who have used the Branford site historically tend to originate from towns other than Branford. As you can see from OHCA Table 8 above, a significant

percentage of Branford occupational health patients originate from New Haven, West Haven, Hamden, Wallingford, North Haven, Milford and Bridgeport (28% total). For these patients the YNHH occupational health sites in New Haven and Hamden are more accessible.

YNHH also considered the space needs of other services as part of its decision to terminate the Branford occupational health site. The Hospital's outpatient cardiology service needs additional space, which will become available in Branford (where the service has an existing office) through the consolidation of occupational health services to sites in New Haven and Hamden.

5. Per a statement on p.32, the East Haven and Branford sites are not operating at capacity. Explain how the New Haven and Hamden sites will have ample capacity to accommodate the displaced patients from the East Haven & Branford sites.

**RESPONSE:**

As part of its assessment of ambulatory space and programming, YNHH looked at available capacity at all of its occupational health locations. The Hospital determined that each of the sites has the capacity to accommodate additional patients and that increased operating efficiency could create even more capacity.

The New Haven site at Sherman Avenue saw approximately 15,500 occupational health visits in FY 2014, and the Hamden site saw approximately 7,500 visits. These included a mix of provider visits (i.e. pre-employment physicals) and clinical staff visits (i.e. immunizations). At current staffing levels, these sites have the ability to absorb additional visits of all types. The sites together can absorb the approximately 600 visits per month that will be displaced by the closure of East Haven and Branford. Patients will be scheduled based upon the type of service needed and the staff available at a given location at the time of scheduling. In addition, YNHH continually evaluates its outpatient services and is prepared to make adjustments and increases in hours, staffing and locations in order to ensure patient access.

As mentioned in the CON Application, YNHH plans to redeploy staff as a means of increasing capacity at its remaining occupational health sites. All clinical staff from the Branford site and several staff members from East Haven will be absorbed into the New Haven and Hamden offices. This will allow these locations to schedule additional appointments and accommodate more patients. There is ample physical space to accommodate more providers and patients at both locations as well.

Note that not all of the employers that currently utilize the YNHH occupational health sites in East Haven and Branford are expected to remain with the system. Some will opt to make arrangements with alternate providers for their employees and this has been taken into consideration in the financial projections submitted with the CON Application. As OHCA Table 9 in the CON Application shows, there are 13 additional providers of occupational health services in the East Haven and Branford areas to accommodate any employers/patients who choose not to use YNHH for their services.

6. In reference to financial Worksheet submitted on p. 101:

- a. File a separate Worksheet for each of the two sites.

**RESPONSE:**

See Attachment 1.

- b. Replace *Actual Results* (col. 1) to use twelve months actual FY 2015 information.

**RESPONSE:**

See Attachment 1.

- c. Is the stated reduction in lease expenses applicable only to the East Haven site if, per page 20, YNHH is evaluating the possible repurposing of space in Branford for outpatient cardiology services?

**RESPONSE:**

The stated reduction in lease expenses is not applicable to East Haven, but is related to the reconfiguration of services in Branford. Although YNHH intends to terminate its lease at the East Haven site (which will result in cost savings to YNHH) these lease expenses are carried by the urgent care cost center that operated in East Haven. The occupational health and urgent care services shared space in East Haven, much of which was dedicated to urgent care, which paid for this expense. Thus, any reduction in lease expenses at the East Haven site are not within this CON, but were presented in the CON that YNHH filed to close urgent care at this site under Docket No. 15-32011-CON.

Nevertheless, there is a reduction in lease expenses with this CON related to the reconfiguration of services in Branford. YNHH currently operates a cardiology service in Branford approximately 0.5 miles from its occupational health site in Branford. Once this CON is approved, the occupational health cost center in Branford will no longer operate in Branford and will no longer be required to pay a lease expense. These costs will be incurred by the cardiology service, which will move into this space. However, the cardiology service will no longer be required to pay the lease at its former location approximately 0.5 miles away. This represents a lease savings for YNHH.

7. Verify that there will be no Yale-New Haven Hospital revenue or expenses attributable to the occupational medicine and wellness services at either of these two sites moving forward. Further, verify that Table 10 below is accurately reflective of this termination of services.

**TABLE 10  
PROJECTED REVENUES AND EXPENSES FOR THE  
YALE BRANFORD AND EAST HAVEN OCCUPATIONAL MEDICINE PROGRAMS**

Fiscal Year (FY)	FY 2017	FY 2018
Revenue from Operations	\$0	\$0
Total Operating Expenses	\$0	\$0
<b>Gain/Loss from Operations</b>	\$0	\$0

**RESPONSE:**

There will be no YNHH revenue or expenses attributable to the occupational medicine and wellness services in East Haven and Branford moving forward. OHCA Table 10 above is accurate.

8. In reference to financial Worksheet submitted on p. 102:
- a. File a separate Worksheet for each of the two sites.

**RESPONSE:** See Attachment 2.

- b. Revise the Title of Columns 10 and 12 to reflect FY 2015 actual results with and without the proposed terminated services.

**RESPONSE:** See Attachment 2.

9. Provide any revised assumptions for the tables and the financial worksheets requested above, if necessary.

**RESPONSE:**

The revised financial attachments include FY 2015 actual results. The projected figures for FY 2016 through FY 2018 remain unchanged from the original CON Application. The assumptions included on page 103 of the CON are accurate with respect to the forecasted numbers. Because the FY 2015 total facility actual results vary slightly from the projected FY 2015 results contained in the CON Application, there are certain line-item variances in assumptions between FY 2015 and FY 2016.

**Attachment 1**



**NON-PROFIT - Occupational Health Services - Foxon**

Please provide one year of actual results and three years of projections of Total Entity revenue, expense and volume statistics without, incremental to and with the CON proposal in the following reporting format.

Financial Worksheet (A)

Applicant:

LINE Total Entity:

Description

FY 2015 Actual Results

FY 2016 Projected Without CON

FY 2016 Projected With CON

FY 2016 Incremental

FY 2017 Projected Without CON

FY 2017 Projected With CON

FY 2017 Incremental

FY 2018 Projected Without CON

FY 2018 Projected With CON

FY 2018 Incremental

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Actual Results

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Projected Without CON

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**Attachment 2**

YALE-NEW HAVEN HOSPITAL  
Occupational Health Services at Branford

Prior 3 Year Analysis- Full YNH - Service (Branford Occ Health) - YNH w/o Occ Health Services FY 2012 thru FY 2014

LINE	Description	(1)		(1)		(1)		(1)		(1)	
		FY 2012 Actual Results	FY 2012 Service	FY 2013 Actual Results	FY 2013 Service	FY 2014 Actual Results	FY 2014 Service	FY 2014 Actual Results	FY 2014 Service	FY 2015 Actual Results	FY 2015 Service
A.	OPERATING REVENUE										
1	Total Patient Revenue	\$ 5,740,304.100	\$ -	\$ 5,740,304.100	\$ -	\$ 8,243,052.900	\$ 8,240,000.000	\$ 8,676,814.000	\$ 2,014.000	\$ 8,750,695.600	\$ 2,043.900
2	Allow Patient Revenue	4,027,033.100	-	4,027,033.100	-	5,897,700.200	1,487.200	6,203,146.000	1,440.600	6,203,732.400	1,461.100
3	Less: Chair Care	-	-	-	-	-	-	-	-	-	-
4	Less: Other Deductions	-	-	-	-	-	-	-	-	-	-
5	Net Patient Service Revenue	\$ 1,713,271.000	\$ -	\$ 1,713,271.000	\$ -	\$ 2,345,352.700	\$ 592.800	\$ 2,473,093.900	\$ 574.200	\$ 2,540,863.200	\$ 582.400
6	Medicare	546,533.400	-	546,533.400	-	748,167.900	-	766,843.000	-	808,011.500	-
7	Medicaid	246,711.000	-	246,711.000	-	337,730.900	-	293,960.000	-	308,108.200	-
8	CHAMPUS & Tricare	-	-	-	-	-	-	-	-	-	-
9	Other	769,244.400	-	769,244.400	-	1,065,898.300	-	1,066,603.000	-	1,116,119.700	-
10	Total Government	862,614.300	-	862,614.300	-	1,221,928.800	-	1,345,277.000	-	1,381,820.400	-
11	Uninsured	27,412.300	-	27,412.300	-	37,525.600	-	41,788.000	-	42,923.100	-
12	Workers Compensation	-	-	-	-	385.400	-	383.000	-	388.500	-
13	Other	920,026.600	-	920,026.600	-	1,258,861.500	-	1,387,065.000	-	1,424,743.500	-
	Total Non-Government	\$ 1,713,271.000	\$ -	\$ 1,713,271.000	\$ -	\$ 2,345,352.700	\$ 592.800	\$ 2,473,093.900	\$ 574.200	\$ 2,540,863.200	\$ 582.400
14	Less: Provision for Bad Debts	-	-	-	-	62,436.600	-	71,764.000	-	50,362.400	-
	Net Patient Service Revenue less provision for bad debts	\$ 1,713,271.000	\$ -	\$ 1,713,271.000	\$ -	\$ 2,282,916.100	\$ 592.800	\$ 2,401,904.000	\$ 574.200	\$ 2,490,480.800	\$ 582.400
15	Other Operating Revenue	47,563.900	-	47,563.900	-	58,633.000	-	64,676.500	-	64,676.500	-
	Net Assets Released from Restrictions	-	-	-	-	-	-	-	-	-	-
	TOTAL OPERATING REVENUE	\$ 1,760,834.900	\$ -	\$ 1,760,834.900	\$ -	\$ 2,341,549.100	\$ 592.800	\$ 2,401,322.800	\$ 574.200	\$ 2,555,157.300	\$ 582.400
B.	OPERATING EXPENSES										
1	Salaries and Wages	\$ 585,246.900	\$ -	\$ 585,246.900	\$ -	\$ 790,319.400	\$ 264.200	\$ 806,684.000	\$ 340.700	\$ 831,282.100	\$ 366.300
2	Office Benefits	172,016.200	-	172,016.200	-	235,969.600	65.000	225,961.000	106.600	229,584.400	98.400
3	Physicians Fees	248,959.100	-	248,959.100	-	393,234.300	17.400	667,133.000	20.700	627,545.400	20.300
4	Supplies and Drugs	284,363.400	-	294,363.400	-	396,090.600	-	407,726.300	-	480,230.100	-
5	Depreciation and Amortization	73,100.800	-	73,100.800	-	91,913.900	-	126,543.000	-	93,281.200	-
6	Provision for Bad Debts-Other	32,622.000	-	32,622.000	-	23,920.200	-	23,742.000	-	20,679.700	-
7	Interest Expense	17,719.000	-	13,017.600	-	13,750.800	-	14,809.000	-	23,857.600	-
8	Malpractice Insurance Cost	14,368.700	-	14,568.700	-	22,279.800	109.400	14,516.000	117.900	23,519.600	115.200
9	Other Operating Expenses	202,837.200	-	202,837.200	-	268,795.800	27.600	82,219.000	29.400	83,012.000	21.400
	Other Operating Expenses	1,654,251.900	\$ -	\$ 1,654,251.900	\$ -	\$ 2,235,176.100	\$ 503.600	\$ 2,267,359.000	\$ 615.900	\$ 2,443,946.900	\$ 614.300
	TOTAL OPERATING EXPENSES	\$ 1,065,579.800	\$ -	\$ 1,065,579.800	\$ -	\$ 1,048,754.400	\$ 89.200	\$ 1,341,586.100	\$ (41,100)	\$ 1,112,114.400	\$ (31,900)
	INCOME/(LOSS) FROM OPERATIONS	\$ 24,029.000	\$ -	\$ 24,029.000	\$ -	\$ 73,846.000	\$ -	\$ 30,155.000	\$ -	\$ (6,287.600)	\$ -
	NON-OPERATING REVENUE	\$ 130,608.800	\$ -	\$ 130,608.800	\$ -	\$ 178,721.400	\$ 89.200	\$ 164,700.000	\$ (41,100)	\$ 105,616.600	\$ (31,900)
	EXPRESS(DEFICIENCY) OF REVENUE OVER EXPENSES	\$ 154,637.800	\$ -	\$ 154,637.800	\$ -	\$ 252,567.400	\$ 89.200	\$ 198,855.000	\$ (82,200)	\$ 98,928.000	\$ (63,800)
	Principal Payments	-	-	-	-	-	-	-	-	-	-
C.	PROFITABILITY SUMMARY										
1	Operating Margin	6.1%	#DIV/0!	6.1%	#DIV/0!	4.5%	15.1%	5.5%	-7.2%	4.4%	5.5%
2	Hospital Non-Operating Margin	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
3	Hospital Total Margin	7.4%	7.4%	7.4%	15.1%	7.6%	15.1%	6.9%	-7.2%	4.4%	5.5%
D.	FTEs										
E.	VOLUME STATISTICS										
1	Inpatient Discharges	61,958	-	61,958	-	80,503	76,315	78,315	5,057	76,444	5,420
2	TOTAL VOLUME	774,063	0	774,063	0	1,085,738	1,161,988	1,175,388	1,283,703	1,292,589	1,354,663
	Notes To Schedule	838,043	0	838,043	0	1,166,241	1,161,988	1,253,703	1,283,703	1,360,803	1,424,161

**YALE - NEW HAVEN HOSPITAL**  
Occupational Health Services at Foxon

Prior 3 Year Analysis- Full YNHH - Service (Foxon Occ Health) - YNHH w/o Occ Health Services FY 2012 thru FY 2014

LINE	Total Enroll	FY 2012		FY 2013		FY 2014		FY 2015		FY 2016	
		Actual	Service	Actual	Service	Actual	Service	Actual	Service	Actual	Service
<b>A. OPERATING REVENUE</b>											
1 Total Gross Patient Revenue		5,740,304,100	\$ 61,600	\$ 5,740,242,500	\$ 6,242,952,900	\$ 454,400	\$ 6,242,958,500	\$ 6,716,814,000	\$ 718,200	\$ 6,676,095,900	\$ 8,749,875,200
2 Less: Allowances		4,027,033,100	43,300	4,026,898,300	5,897,700,200	324,900	5,897,375,300	6,203,145,000	513,500	6,202,632,500	8,209,217,900
3 Less: Charity Care		-	-	-	-	-	-	-	-	-	-
4 Less: Other Deductions		1,713,271,000	18,300	1,713,257,700	2,445,352,700	128,500	2,445,224,200	2,473,568,000	204,700	2,473,463,300	2,540,657,900
5 Net Patient Service Revenue		546,533,400	-	546,533,400	749,167,500	748,167,500	748,167,500	786,643,000	-	786,643,000	809,011,500
6 Medicare		245,711,000	-	245,711,000	337,730,300	337,730,300	337,730,300	289,960,000	-	289,960,000	308,108,200
7 CHAMPUS & Tricare		-	-	-	-	-	-	-	-	-	-
8 Other		793,244,400	-	793,244,400	1,085,698,300	1,085,698,300	1,085,698,300	1,086,603,000	-	1,086,603,000	1,116,119,700
9 Commercial Insurers		826,614,300	-	826,614,300	1,221,928,800	1,221,928,800	1,221,928,800	1,345,277,000	-	1,345,277,000	1,381,820,400
10 Uninsured		27,412,300	12,200	27,412,300	37,525,600	66,400	37,525,600	41,788,000	138,500	41,788,000	42,923,100
11 Workers Compensation		6,100	(6,100)	6,100	43,100	43,100	43,100	69,200	69,200	69,200	138,900
12 Other		920,026,600	18,300	920,026,600	1,259,324,900	1,259,324,900	1,259,324,900	1,387,065,000	204,700	1,386,860,300	1,424,538,200
13 Total Non-Government		1,713,271,000	18,300	1,713,257,700	2,345,352,700	129,500	2,345,223,200	2,473,568,000	204,700	2,473,463,300	2,540,657,900
14 Government (Non-Government)		-	-	-	62,436,600	-	62,436,600	71,784,000	-	71,784,000	50,392,400
15 Net Patient Service Revenue less provision for bad debts		1,713,271,000	18,300	1,713,257,700	2,282,916,100	129,500	2,282,786,600	2,401,904,000	204,700	2,401,699,300	2,490,275,500
16 Other Operating Revenue		47,560,300	-	47,560,300	59,633,000	-	59,633,000	64,676,500	-	64,676,500	64,676,500
17 Net Assets Released from Restraint		1,760,831,300	18,300	1,760,813,000	2,341,419,000	-	2,341,419,000	2,401,904,000	204,700	2,401,699,300	2,555,167,300
<b>TOTAL OPERATING REVENUE</b>		<b>1,760,831,300</b>	<b>18,300</b>	<b>1,760,813,000</b>	<b>2,341,419,000</b>	<b>-</b>	<b>2,341,419,000</b>	<b>2,401,904,000</b>	<b>204,700</b>	<b>2,401,699,300</b>	<b>2,555,167,300</b>
<b>B. OPERATING EXPENSES</b>											
1 Salaries and Wages		585,246,900	\$ 149,500	\$ 585,097,400	790,319,400	236,300	790,083,100	808,684,000	208,100	809,475,900	830,915,300
2 State and Local Taxes		172,016,200	44,700	171,971,500	235,369,600	74,200	235,295,400	225,861,000	65,600	225,795,400	239,423,700
3 Supplies and Drugs		248,958,100	300	248,958,100	393,234,300	600	393,234,300	567,135,000	200	567,135,000	629,545,400
4 Depreciation and Amortization		73,100,600	-	73,100,600	91,913,500	-	91,913,500	122,543,000	-	122,543,000	139,320,700
5 Provision for Bad Debts-Other		32,622,100	-	32,622,100	23,920,200	-	23,920,200	23,742,000	-	23,742,000	20,879,700
6 Interest Expense		17,719,700	-	17,719,700	13,759,600	-	13,759,600	14,809,000	-	14,809,000	23,857,600
7 Malpractice Insurance Cost		14,368,700	33,700	14,368,700	22,279,800	97,300	22,279,800	4,915,000	27,500	4,915,000	23,519,600
8 Lease Expense		202,837,200	228,200	202,805,500	2,239,673,700	498,400	2,239,673,700	2,267,655,000	301,100	2,267,655,000	2,443,042,900
9 Other Operating Expenses		1,654,251,500	106,789,700	1,654,023,300	104,975,400	(278,900)	105,154,300	134,545,000	(96,700)	134,641,700	112,244,200
<b>TOTAL OPERATING EXPENSES</b>		<b>1,654,251,500</b>	<b>106,789,700</b>	<b>1,654,023,300</b>	<b>2,239,673,700</b>	<b>(278,900)</b>	<b>105,154,300</b>	<b>2,267,655,000</b>	<b>301,100</b>	<b>2,267,655,000</b>	<b>2,443,042,900</b>
<b>INCOME/(LOSS) FROM OPERATIONS</b>		<b>106,579,800</b>	<b>(88,400)</b>	<b>106,789,700</b>	<b>106,745,300</b>	<b>(749,000)</b>	<b>136,264,700</b>	<b>134,249,000</b>	<b>(96,400)</b>	<b>134,047,600</b>	<b>112,122,400</b>
<b>NON-OPERATING REVENUE</b>		<b>24,029,000</b>	<b>-</b>	<b>24,029,000</b>	<b>-</b>	<b>-</b>	<b>30,155,000</b>	<b>30,155,000</b>	<b>-</b>	<b>30,155,000</b>	<b>(6,297,800)</b>
<b>EXCESS/(DEFICIENCY) OF REVENUE OVER EXPENSES</b>		<b>130,608,800</b>	<b>(88,400)</b>	<b>130,818,700</b>	<b>106,745,300</b>	<b>(749,000)</b>	<b>166,419,700</b>	<b>164,404,000</b>	<b>(96,400)</b>	<b>164,202,600</b>	<b>105,824,600</b>
<b>C. PROFITABILITY SUMMARY</b>											
1 Hospital Operating Margin		6.1%	-1147.0%	6.1%	4.5%	-215.4%	4.5%	5.6%	-47.2%	5.6%	4.2%
2 Hospital Non-Operating Margin		0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
3 Hospital Total Margin		7.4%	-1147.0%	7.4%	7.6%	-215.4%	7.6%	6.9%	-47.2%	6.9%	4.2%
<b>D. FTEs</b>											
1 Inpatient Discharges		61,958	-	61,958	60,503	-	60,503	78,315	-	78,315	78,444
2 Outpatient Visits		774,065	223	773,662	1,085,738	1,477	1,084,261	1,175,388	2,362	1,173,026	1,280,228
<b>TOTAL VOLUME</b>		<b>836,043</b>	<b>223</b>	<b>835,620</b>	<b>1,146,241</b>	<b>1,477</b>	<b>1,164,764</b>	<b>1,253,703</b>	<b>2,364</b>	<b>1,251,351</b>	<b>1,358,672</b>

Notes To Schedule  
- FY 2012 reflects only Y-NHH Foxon Road Occ Health as Branford was not acquired until mid-September 2012. The last month of the Fiscal Year

## Greer, Leslie

---

**From:** Foster, Tillman  
**Sent:** Wednesday, February 17, 2016 5:19 PM  
**To:** Nancy Rosenthal (Greenwich)  
**Cc:** Greer, Leslie; Huber, Jack; Veyberman, Alla; Roberts, Karen; Riggott, Kaila; Lazarus, Steven  
**Subject:** DNs 15-32040 and 15-32041  
**Attachments:** 15-32041-CON Notification of Application Deemed Complete.docx.pdf; 15-32040-CON Notification of Application Deemed Complete.docx.pdf

Good afternoon Ms. Rosenthal – Please find attached two letters deeming complete your applications filed under Docket Numbers 15-32040. Please feel free to contact me or Jack Huber if you have any questions regarding the attached documents.

Thank you. Regards, Tillman.

Tillman Foster  
Associate Health Care Analyst  
Department of Public Health  
Office of Health Care Access  
410 Capitol Avenue  
MS #13HCA, P.O. Box 340308  
Hartford, CT 06134  
Phone: (860) 418-7031  
Fax: (860) 418-7053  
Email: [Tillman.Foster@CT.GOV](mailto:Tillman.Foster@CT.GOV)



# STATE OF CONNECTICUT

## DEPARTMENT OF PUBLIC HEALTH



Raul Pino, M.D., M.P.H.  
Acting Commissioner

Dannel P. Malloy  
Governor  
Nancy Wyman  
Lt. Governor

### Office of Health Care Access

February 17, 2016

VIA EMAIL ONLY

Nancy Rosenthal  
Senior Vice President,  
Strategy and Regulatory Planning  
Yale-New Haven Hospital Health System  
5 Perryridge Road  
Greenwich, CT 06830

RE: Certificate of Need Application; Docket Number: 15-32040-CON  
The Yale-New Haven Hospital's Proposal to Terminate its Occupational  
Medicine and Wellness Services located at 317 Foxon Road in East Haven and  
84 North Main Street in Branford  
Notification Deeming the CON Application Complete

Dear Ms. Rosenthal:

This letter is to inform you that, pursuant to Section 19a-639a (d) of the Connecticut General Statutes, the Office of Health Care Access has deemed the above-referenced application complete as of February 17, 2016.

If you have any questions regarding this matter, please feel free to contact Jack Huber at (860) 418-7069 or me at (860) 418-7031.

Sincerely,

A handwritten signature in blue ink that reads "Tillman Foster".

Tillman Foster  
Associate Health Care Analyst



Phone: (860) 509-8000 • Fax: (860) 509-7184 • VP: (860) 899-1611  
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Hartford, Connecticut 06134-0308  
[www.ct.gov/dph](http://www.ct.gov/dph)

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## Greer, Leslie

---

**Subject:** FW: YNHH Public Hearings for the Following Service Terminations - Occupational Medicine DN: 15-32040 & Rehabilitative Services DN: 15-32041

**From:** Huber, Jack [<mailto:Jack.Huber@ct.gov>]

**Sent:** Tuesday, March 01, 2016 2:18 PM

**To:** Rosenthal, Nancy

**Cc:** Roberts, Karen; Veyberman, Alla; Foster, Tillman

**Subject:** YNHH Public Hearings for the Following Service Terminations - Occupational Medicine DN: 15-32040 & Rehabilitative Services DN: 15-32041

Good afternoon Nancy – I trust this email finds you well. This is a follow-up email to the telephone message I left with you today.

As the Office of Health Care Access (“OHCA”) deemed the above referenced CON applications complete, OHCA’s website has been updated to reflect the change in each CON applications’ status.

As OHCA prepares to coordinate with you the scheduling of the public hearings in the above referenced matters, it is important to note that the hearings need to be scheduled in the community where the proposed service terminations are to take place –East Haven or Branford. The Applicant selects a hearing site that will be conducive to the expected turn out for the public hearing. The logistics of the public hearing held for the termination of Foxon Urgent Care Center at the East Haven High School seemed to work well. The date for the public hearing is arranged in agreement with OHCA and the Applicant. Here are some of the general operating parameters with respect to the scheduling of the public hearings:

1. Timing Aspects:

- a. Generally OHCA prefers the scheduling of the public hearing on Tuesday, Wednesdays or Thursdays. We have cleared the following dates with OHCA personnel that will be attending the hearings:
  - i. Thursday, April 7, 2016;
  - ii. Tuesday, April 12, 2016;
  - iii. Wednesday, April 13, 2016; or
  - iv. Thursday, April 14, 2016.
- b. The hearings would be conducted back to back with DN: 32040 going first followed by DN: 32041.
- c. The hearing room should be reserved for use between the hours of 3:00 pm and 8:00 pm with an intended start time of the first hearing at 4:00 pm.
- d. In recognition of public notification requirements the scheduling window for this hearing would be optimal for the second full week in March, tentatively March 14, 15, or 16<sup>th</sup>.

2. Considerations OHCA will need to establish prior to the scheduling notice for the hearings in an area newspaper:

- a. Prospective Hearing Date
- b. Hearing Location (address, building and/or room designation).
- c. Directions to the hearing site.
- d. The application’s contact person for Barbara Olejarz, OHCA Administrative Assistant, if the person is to be someone other than yourself.

Please feel free to contact me to discuss matters relating to the scheduling of the public hearings. Telephone number and email address are noted below. Thank you. Regards, Jack

Jack A. Huber, Health Care Analyst  
CT Department of Public Health | Office of Health Care Access | 410 Capitol Avenue  
P.O. Box 340308, MS #13HCA | Hartford, CT 06134-0308 | Ph: 860-418-7069 | Fax: 860-418-7053  
Email: [Jack.Huber@ct.gov](mailto:Jack.Huber@ct.gov) | Web: [www.ct.gov/ohca](http://www.ct.gov/ohca)



This message originates from the Yale New Haven Health System. The information contained in this message may be privileged and confidential. If you are the intended recipient you must maintain this message in a secure and confidential manner. If you are not the intended recipient, please notify the sender immediately and destroy this message. Thank you.

STATE OF CONNECTICUT  
DEPARTMENT OF PUBLIC HEALTH

Raul Pino, M.D., M.P.H.  
Commissioner



Dannel P. Malloy  
Governor  
Nancy Wyman  
Lt. Governor

Office of Health Care Access

March 8, 2016

Nancy Rosenthal  
SVP, Strategy and Regulatory Planning  
Yale-New Haven Hospital  
C/o Greenwich Hospital  
5 Perryridge Road  
Greenwich, Connecticut 06830

RE: Certificate of Need Applications by Yale-New Haven Hospital:  
To Terminate Occupational Medicine & Wellness Services in East Haven & Branford  
Docket Number: 15-32040-CON; and  
To Terminate Outpatient Rehabilitation Services in Branford  
Docket Number: 15-32041-CON

Dear Ms. Rosenthal:

Enclosed is the order by the Department of Public Health, Office of Health Care Access, dated March 8, 2016, regarding the public hearings for the above referenced Certificate of Need applications received from Yale-New Haven Hospital.

If you have any questions concerning this matter, please contact me at (860) 418-7069.

Sincerely,

A handwritten signature in cursive script that reads "Jack A. Huber".

Jack A. Huber  
Health Care Analyst



Phone: (860) 418-7001 • Fax: (860) 418-7053  
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STATE OF CONNECTICUT  
DEPARTMENT OF PUBLIC HEALTH  
*Office of Health Care Access*

IN THE MATTERS OF:

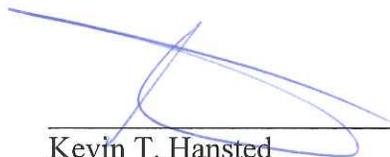
Yale-New Haven Hospital, Inc.  
Yale-New Haven Hospital, Inc.

Docket Number: 15-32040-CON  
Docket Number: 15-32041-CON

**ORDER**

Pursuant to Conn. Gen. Stat. § 19a-639a(f), the above-referenced Dockets are hereby consolidated for purposes of conducting a public hearing. All other proceedings pertaining to the Dockets shall remain separate, including the issuance of a decision in each Docket.

3/8/16  
Date

  
Kevin T. Hansted  
Hearing Officer

\* \* \* COMMUNICATION RESULT REPORT ( MAR. 8. 2016 3:16PM ) \* \* \*

FAX HEADER:

TRANSMITTED/STORED : MAR. 8. 2016 3:15PM	FILE MODE	OPTION	ADDRESS	RESULT	PAGE
502	MEMORY TX		912036885013	OK	3/3

REASON FOR ERROR  
 E-1) HANG UP OR LINE FAIL  
 E-3) NO ANSWER

E-2) BUSY  
 E-4) NO FACSIMILE CONNECTION



**STATE OF CONNECTICUT  
 DEPARTMENT OF PUBLIC HEALTH  
 OFFICE OF HEALTH CARE ACCESS**

**FAX SHEET**

**TO:** NANCY ROSENTHAL

**FAX:** (203) 688-5013

**AGENCY:** YALE NEW HAVEN HOSPITAL

**FROM:** JACK HUBER

**DATE:** 3/8/2016 **Time:** ~3:20 pm

**NUMBER OF PAGES:** 3  
*(including transmittal sheet)*

**Transmitted:** OHCA's Order with cover letter regarding the consolidation of public hearings for YNH's proposals to terminate occupational medicine services in East Haven & Branford, DN: 15-32040-CON, and to terminate outpatient rehabilitation service in Branford, DN: 15-32041-CON.

**PLEASE PHONE Jack A. Huber at (860) 418-7069  
 IF THERE ARE ANY TRANSMISSION PROBLEMS.**

**Phone: (860) 418-7001 Fax: (860) 418-7053**

**410 Capitol Ave., MS#13HCA  
 P.O. Box 340308  
 Hartford, CT 06134**

## Greer, Leslie

---

**From:** Greer, Leslie  
**Sent:** Friday, March 18, 2016 11:56 AM  
**To:** 'nancy.rosenthal@ynhh.org'  
**Cc:** Foster, Tillman; Veyberman, Alla; Riggott, Kaila; Hansted, Kevin; Martone, Kim  
**Subject:** Yale-New Haven Hospital Hearing Notice  
**Attachments:** 32040 & 32041.pdf

Nancy,

Attached is the hearing notice for Yale-New Haven Hospital's hearing scheduled on April 7, 2016.

Leslie M. Greer  
Office of Health Care Access  
Connecticut Department of Public Health  
410 Capitol Avenue, MS#13HCA, Hartford, CT 06134  
Phone: (860) 418-7013 Fax: (860) 418-7053  
*Website:* [www.ct.gov/ohca](http://www.ct.gov/ohca)



# STATE OF CONNECTICUT

## DEPARTMENT OF PUBLIC HEALTH



Raul Pino, M.D., M.P.H.  
Commissioner

Dannel P. Malloy  
Governor  
Nancy Wyman  
Lt. Governor

### Office of Health Care Access

March 18, 2016

Nancy Rosenthal  
SVP, Strategy and Regulatory Planning  
Yale-New Haven Hospital  
5 Perryridge Road  
Greenwich, CT 06830

RE: Certificate of Need Application, Docket Number 15-32040-CON and 15-32041-CON  
Docket Number: 15-32040-CON  
To Terminate Occupational Medicine & Wellness Services in East Haven &  
Branford  
Docket Number: 15-32041-CON  
To Terminate Outpatient Rehabilitation Services in Branford

Dear Ms. Rosenthal,

With the receipt of the completed Certificate of Need ("CON") application information submitted by Yale-New Haven Hospital ("Applicant") on February 17, 2016, the Office of Health Care Access ("OHCA") has initiated its review of the CON application identified above.

Pursuant to General Statutes § 19a-639a (f), OHCA may hold a hearing with respect to any Certificate of Need application.

This hearing notice is being issued pursuant to General Statutes § 19a-639a (f)

Applicant: Yale-New Haven Hospital

Docket Number(s): 15-32040-CON and 15-32041-CON



Phone: (860) 418-7001 • Fax: (860) 418-7053  
410 Capitol Avenue, MS#13HCA  
Hartford, Connecticut 06134-0308  
[www.ct.gov/dph](http://www.ct.gov/dph)

*Affirmative Action/Equal Opportunity Employer*

March 18, 2016

Proposal: Docket Number: 15-32040-CON  
To Terminate Occupational Medicine & Wellness Services in East Haven &  
Branford  
Docket Number: 15-32041-CON  
To Terminate Outpatient Rehabilitation Services in Branford

Notice is hereby given of a public hearing to be held in this matter to commence on:

Date: April 7, 2016

Time: 4:00 p.m.

Place: Branford Recreation Department  
45 Church Street (2<sup>nd</sup> Floor Activity Room)  
Branford, CT 06405

The Applicants are designated as parties in this proceeding. Enclosed for your information is a copy of the hearing notice for the public hearing that will be published in *The New Haven Register* pursuant to General Statutes § 19a-639a (f) and 19a-486 (f).

Sincerely,



Kimberly R. Martone  
Director of Operations  
Enclosure

cc: Henry Salton, Esq., Office of the Attorney General  
Antony Casagrande, Department of Public Health  
Kevin Hansted, Department of Public Health  
Wendy Furniss, Department of Public Health  
Maura Downes, Department of Public Health  
Jill Kentfield, Department of Public Health  
Chris Stan, Department of Public Health  
DeVaughn Ward, Department of Public Health  
Marielle Daniels, Connecticut Hospital Association

KRM:TF:AV:lmg

# STATE OF CONNECTICUT

## DEPARTMENT OF PUBLIC HEALTH



Raul Pino, M.D., M.P.H.  
Commissioner

Dannel P. Malloy  
Governor  
Nancy Wyman  
Lt. Governor

Office of Health Care Access

March 18, 2016

P.O. #54772

The New Haven Register  
40 Sargent Drive  
New Haven, CT 06511

Gentlemen/Ladies:

Please make an insertion of the attached copy, in a single column space, set solid under legal notices, in the issue of your newspaper by no later than **Monday, March 21, 2016**. Please provide the following within 30 days of publication:

- Proof of publication (copy of legal ad. acceptable) showing published date along with the invoice.

If there are any questions regarding this legal notice, please contact Kaila Riggott at (860) 418-7001.

KINDLY RENDER BILL IN DUPLICATE ATTACHED TO THE TEAR SHEET.

Sincerely,

Handwritten signature of Kimberly R. Martone in black ink.

Kimberly R. Martone  
Director of Operations

Attachment

cc: Danielle Pare, DPH  
Marielle Daniels, Connecticut Hospital Association

KRM:TF:AV;lmg



Phone: (860) 418-7001 • Fax: (860) 418-7053  
410 Capitol Avenue, MS#13HCA  
Hartford, Connecticut 06134-0308  
[www.ct.gov/dph](http://www.ct.gov/dph)

*Affirmative Action/Equal Opportunity Employer*

PLEASE INSERT THE FOLLOWING:

Office of Health Care Access Public Hearings

Statute Reference: 19a-638

Applicant: Yale-New Haven Hospital

Town: New Haven

Docket Numbers: 15-32040-CON and 15-32041-CON

Proposal(s): Docket Number: 15-32040-CON  
To Terminate Occupational Medicine & Wellness Services in East Haven  
& Branford  
Docket Number: 15-32041-CON  
To Terminate Outpatient Rehabilitation Services in Branford

Date: April 7, 2016

Time: 4:00 p.m.

Place: Branford Recreation Department  
45 Church Street (2<sup>nd</sup> Floor Activity Room)  
Branford, CT 06405

Any person who wishes to request status in the above listed public hearing may file a written petition no later than March 30, 2016 (5 calendar days before the date of the hearing) pursuant to the Regulations of Connecticut State Agencies §§ 19a-9-26 and 19a-9-27. If the request for status is granted, such person shall be designated as a Party, an Intervenor or an Informal Participant in the above proceeding. Please check OHCA's website at [www.ct.gov/ohca](http://www.ct.gov/ohca) for more information or call OHCA directly at (860) 418-7001. If you require aid or accommodation to participate fully and fairly in this hearing, please phone (860) 418-7001.

## Greer, Leslie

---

**From:** ADS <ADS@graystoneadv.com>  
**Sent:** Friday, March 18, 2016 11:51 AM  
**To:** Greer, Leslie  
**Subject:** Re: DN's: 15-32040-CON and 15-32041-CON Hearing Notice

Good day!

Thanks so much for your ad submission.  
We will be in touch shortly and look forward to serving you.

### **[Don't forget to ask for ideas to expand your diversity coverage.](#)**

PLEASE NOTE: New Department of Labor guidelines allow web based advertising when hiring foreign nationals. To provide required documentation Graystone will retrieve & archive verification for the 1st and 30th days of posting for \$115.00/web site. If required, notify Graystone when ad placement is approved.

If you have any questions or concerns, please don't hesitate to contact us at the number below.

We sincerely appreciate your business.

Thank you,  
Graystone Group Advertising

2710 North Avenue  
Bridgeport, CT 06604  
Phone: 800-544-0005  
Fax: 203-549-0061

**E-mail new ad requests to:** [ads@graystoneadv.com](mailto:ads@graystoneadv.com)  
<http://www.graystoneadv.com/>

---

**From:** "Greer, Leslie" <[Leslie.Greer@ct.gov](mailto:Leslie.Greer@ct.gov)>  
**Date:** Friday, March 18, 2016 at 11:46 AM  
**To:** Ads Desk <[ads@graystoneadv.com](mailto:ads@graystoneadv.com)>  
**Cc:** "Olejarz, Barbara" <[Barbara.Olejarz@ct.gov](mailto:Barbara.Olejarz@ct.gov)>  
**Subject:** DN's: 15-32040-CON and 15-32041-CON Hearing Notice

Please run the attached hearing notice in the New Haven Register **on 3/21/16**. For billing purposes, please reference P.O. 54772. In addition, please forward me a copy of the "proof of publication" when it becomes available.

Thank you,

Leslie M. Greer  
Office of Health Care Access  
Connecticut Department of Public Health  
410 Capitol Avenue, MS#13HCA, Hartford, CT 06134  
Phone: (860) 418-7013 Fax: (860) 418-7053  
*Website:* [www.ct.gov/ohca](http://www.ct.gov/ohca)

## Greer, Leslie

---

**From:** Robert Taylor <RTaylor@graystoneadv.com>  
**Sent:** Friday, March 18, 2016 5:29 PM  
**To:** Greer, Leslie  
**Cc:** Olejarz, Barbara  
**Subject:** FW: DN's: 15-32040-CON and 15-32041-CON Hearing Notice  
**Attachments:** 15-32040 and 15-32041 New Haven Register.docx

Good afternoon,

This notice is set to publish on Monday.  
\$503.98

Thanks,

Robert Taylor  
Graystone Group Advertising  
[www.graystoneadv.com](http://www.graystoneadv.com)  
2710 North Avenue, Suite 200  
Bridgeport, CT 06604  
Phone: 203-549-0060  
Toll Free: 800-544-0005  
Fax: 203-549-0061

---

**From:** ADS <[ADS@graystoneadv.com](mailto:ADS@graystoneadv.com)>  
**Date:** Fri, 18 Mar 2016 11:51:17 -0400  
**To:** RTaylor <[rtaylor@graystoneadv.com](mailto:rtaylor@graystoneadv.com)>  
**Subject:** FW: DN's: 15-32040-CON and 15-32041-CON Hearing Notice

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**From:** "Greer, Leslie" <[Leslie.Greer@ct.gov](mailto:Leslie.Greer@ct.gov)>  
**Date:** Friday, March 18, 2016 at 11:46 AM  
**To:** Ads Desk <[ads@graystoneadv.com](mailto:ads@graystoneadv.com)>  
**Cc:** "Olejarz, Barbara" <[Barbara.Olejarz@ct.gov](mailto:Barbara.Olejarz@ct.gov)>  
**Subject:** DN's: 15-32040-CON and 15-32041-CON Hearing Notice

Please run the attached hearing notice in the New Haven Register **on 3/21/16**. For billing purposes, please reference P.O. 54772. In addition, please forward me a copy of the "proof of publication" when it becomes available.

Thank you,

Leslie M. Greer  
Office of Health Care Access  
Connecticut Department of Public Health  
410 Capitol Avenue, MS#13HCA, Hartford, CT 06134  
Phone: (860) 418-7013 Fax: (860) 418-7053  
*Website:* [www.ct.gov/ohca](http://www.ct.gov/ohca)



**Office of Health Care Access Public Hearings**

Statute Reference: 19a-638  
 Applicant: Yale-New Haven Hospital  
 Town: New Haven  
 Docket Numbers: 15-32040-CON and 15-32041-CON  
 Proposal(s): Docket Number: 15-32040-CON  
 To Terminate Occupational Medicine & Wellness Services in East Haven & Branford  
 Docket Number: 15-32041-CON  
 To Terminate Outpatient Rehabilitation Services in Branford  
 April 7, 2016  
 Date: 4:00 p.m.  
 Time: Branford Recreation Department  
 Place: 45 Church Street  
 (2nd Floor Activity Room)  
 Branford, CT 06405

Any person who wishes to request status in the above listed public hearing may file a written petition no later than March 30, 2016 (5 calendar days before the date of the hearing) pursuant to the Regulations of Connecticut State Agencies §§ 19a-9-26 and 19a-9-27. If the request for status is granted, such person shall be designated as a Party, an Intervenor or an Informal Participant in the above proceeding. Please check OHCA's website at www.ct.gov/ohca for more information or call OHCA directly at (860) 418-7001. If you require aid or accommodation to participate fully and fairly in this hearing, please phone (860) 418-7001.

**Notice Of Tentative Decision Intent To Issue The General Permit For The Discharge Of Stormwater From Department Of Transportation Separate Storm Sewer Systems**

**TENTATIVE DETERMINATION**  
 The Commissioner of Energy and Environmental Protection ("the Commissioner") hereby gives notice of a tentative decision to issue a General Permit for the Discharge of Stormwater from Department of Transportation Separate Storm Sewer Systems ("DOT MS4 general permit").

In accordance with applicable federal and state law, the Commissioner has made a tentative decision that issuance of the DOT MS4 general permit would protect the waters of the state from pollution. The proposed general permit, if issued, will require registration, the preparation and implementation of a Stormwater Management Plan ("Plan") containing stormwater minimum control measures to ensure that the discharge will not cause pollution and the submission of annual reports tracking the progress of implementation of the Plan.

**DOT MS4 GENERAL PERMIT**  
 The purpose of the DOT MS4 general permit is to protect waters of the state from pollution associated with stormwater runoff discharging through DOT separate storm sewer systems. EPA defines a municipal separate storm sewer as a conveyance or system of conveyances (including roads with drainage systems, municipal streets, catch basins, curbs, gutters, ditches, man-made channels, or storm drains) owned or operated by a state or municipal entity or other public body created by or pursuant to state law. The proposed general permit covers separate storm sewer systems owned or operated by DOT located within Urbanized Areas (UAs) as defined by the latest Census Bureau maps, and other areas outside UAs which discharge to impaired waters or which have significant levels of directly connected impervious surfaces. The issuance of the proposed DOT MS4 general permit will complete coverage of all EPA mandated MS4s.

**COMMISSIONER'S AUTHORITY**  
 The Commissioner is authorized to issue this general permit pursuant to sections 22a-430 and 22a-430b of the Connecticut General Statutes (CGS) and the Water Discharge Permit Regulations (Section 22a-430-3 and 4 of the Regulations of Connecticut State Agencies). The Commissioner is authorized to approve or deny any registration under this general permit pursuant to CGS section 22a-430b.

**INFORMATION REQUESTS**  
 Interested persons may obtain a copy of this public notice, the draft DOT MS4 general permit and associated Fact Sheet on the Department of Energy and Environmental Protection's website at www.ct.gov/deep/publicnotices. The general permit is also available for inspection at the Department of Energy and Environmental Protection, Bureau of Materials Management and Compliance Assurance, Water Permitting and Enforcement Division, 79 Elm Street, Hartford, CT from 8:30 - 4:30, Monday through Friday. Questions may be directed to Christopher Stone at 860-424-3850 or chris.stone@ct.gov.

**PUBLIC COMMENT**  
 Prior to making a final determination on this proposed general permit, the Commissioner shall consider written comments from interested persons that are received within thirty (30) days of this public notice. Written comments should be directed to: Christopher Stone, Bureau of Materials Management and Compliance Assurance, Water Permitting and Enforcement Division, Department of Energy and Environmental Protection, 79 Elm Street, Hartford, CT 06106-5127 or may be submitted via electronic mail to: chris.stone@ct.gov. The Commissioner may hold a public hearing if the Commissioner determines that the public interest will be best served thereby, or shall hold a hearing upon receipt of a petition signed by at least twenty-five (25) persons.

Petitions for a hearing should include the name of the general permit noted above and also identify a contact person to receive notifications. Petitions may also identify a person who is authorized to engage in discussions regarding the proposed general permit and, if resolution is reached, withdraw the petition. Original signed petitions may be scanned and sent electronically to deep.adjudications@ct.gov or may be mailed or delivered to: DEEP Office of Adjudications, 79 Elm Street, 3rd floor, Hartford, CT 06106-5127. All petitions must be received within the comment period noted above. If submitted electronically, original signed petitions must also be mailed or delivered to the address above within ten (10) days of electronic submission. Notice of any public hearing shall be published at least thirty (30) days prior to the hearing.

/s/Michael Sullivan  
 Deputy Commissioner

The Connecticut Department of Energy and Environmental Protection is an Affirmative Action and Equal Opportunity Employer that is committed to complying with the Americans with Disabilities Act. To request an accommodation contact us at 860-418-5910 or deep.accommodations@ct.gov.

Draft Permit and Fact Sheet: www.ct.gov/deep/municipal-stormwater

**LEGAL NOTICES**

**NEW HAVEN CITY PLAN COMMISSION NOTICE OF DECISIONS 3/16/16**

Approve with conditions:  
**EAST STREET (M/B/P 202/0556/00101).** Coastal Site Plan Review and Special Permit for outdoor storage of materials including aggregates, coils, rebar, and steel products. (Owner: Simkins Industries; Applicant: Coy Angelo of Petroleum Terminals)

**259 EAST STREET.** Coastal Site Plan Review and Special Permit for outdoor storage of materials including aggregates, coils, rebar, and steel products. (Owner: Simkins Industries; Applicant: Coy Angelo of Petroleum Terminals)

**RAILROAD AVENUE (M/B/P 179/0567/00110).** Coastal Site Plan Review and Special Permit for outdoor storage of materials including aggregates, coils, rebar, and steel products. (Owner: Simkins Industries; Applicant: Coy Angelo of Petroleum Terminals)

**24 AND 40 DIXWELL AVENUE, 49 GOFFE STREET.** Site Plan Review for construction of surface parking lot. (Owner/Applicant: Michael Peck, Director of Operations for Yale University)

**5 SCIENCE PARK (AKA 395 WINCHESTER AVENUE).** Site Plan Review and Detailed Site Plan Review for PDD #49 (Science Park) for temporary trailer in building courtyard. (Owner: Clio Nicolakis, Executive Director of Science Park Development Corporation; Applicant: James Segaloff for Susman, Duffy, & Segaloff, P.C.)

**27, 31, 33 CHURCH STREET.** Site Plan Review for conversion of retail space to first floor restaurant/food court and second floor private club/hookah lounge. (Owner: 27-31-33 Church, LLC; Applicant: Hala, Inc.)

**345 FORBES AVENUE.** Certificate of Approval of Location (CAL) for used car dealer with repairer's license. (Owner: John Laviola of Colonial Properties; Applicant: Kristie Violano and Anthony Violano for CRC Auto Sales and Service LLC)

**LEGAL NOTICES**

**Notice of Renewal for One Year of Four National Pollutant Discharge Elimination System General Permits into the Waters of the State of Connecticut**

The Department of Energy & Environmental Protection (DEEP) hereby gives notice it has renewed for one year the General Permit for the Discharge of Water Treatment Wastewater, the General Permit for the Discharge of Minor Non-contact Cooling and Heat Pump Water, the General Permit for the Discharge of Hydrostatic Pressure Testing Wastewater, and the General Permit for the Discharge of Groundwater Remediation Wastewater Directly to a Surface Water. Each of these general permits will now expire on March 29, 2017.

The Public Notice of Tentative Decision to renew the general permits was published in six newspapers statewide on January 25, 2016. No comments were received during the 30-day comment period.

The general permits are available on the DEEP website at www.ct.gov/deep/permits&licenses. Renewal registrations for existing registrants under these four general permits are not required for the one year extensions. Persons unable to access the information at the website may request paper copies of the permits by calling (860) 424-3025 from 8:30 a.m. - 4:30 p.m., Monday through Friday, by emailing dahlia.gordon@ct.gov or by writing to Ms. Dahlia Gordon; WPED/Bureau of Materials Management and Compliance Assurance, Department of Energy and Environmental Protection, 79 Elm Street, Hartford, CT, 06106 5127.

March 16, 2016  
 Date  
 Michael Sullivan /s/  
 Michael Sullivan  
 Deputy Commissioner

**CLASSIFIEDS** help new families find new homes.



**STATE OF CONNECTICUT**

RETURN DATE: APRIL 12, 2016 :SUPERIOR COURT  
 WELLS FARGO BANK, N.A. :JUDICIAL DISTRICT  
 :OF ANSONIA-  
 VS. :MILFORD  
 :AT MILFORD  
 THE WIDOW, HEIRS AND/OR CREDITORS OF THE ESTATE OF GERALDINE O'CONNOR, ET AL :FEBRUARY 17, 2016

**NOTICE TO THE WIDOW, HEIRS AND/OR CREDITORS OF THE ESTATE OF GERALDINE O'CONNOR AND ALL UNKNOWN PERSONS, CLAIMING OR WHO MAY CLAIM, ANY RIGHTS, TITLE, INTEREST OR ESTATE IN OR LIEN OR ENCUMBRANCE UPON THE PROPERTY DESCRIBED IN THIS COMPLAINT, ADVERSE TO THE PLAINTIFF, WHETHER SUCH CLAIM OR POSSIBLE CLAIM BE VESTED OR CONTINGENT.**

The Plaintiff has named as a Defendant, THE WIDOW, HEIRS AND/OR CREDITORS OF THE ESTATE OF GERALDINE O'CONNOR, and all unknown persons, claiming or who may claim, any rights, title, interest or estate in or lien or encumbrance upon the property described in this Complaint, adverse to the Plaintiff, whether such claim or possible claim can be vested or contingent, if not living, as a party defendant(s) in the complaint which it is bringing to the above-named Court seeking a foreclosure of its mortgage upon premises known as 340 BUCKINGHAM AVENUE, MILFORD, CT 06460.

The Plaintiff has represented to the said Court, by means of an affidavit annexed to the Complaint, that, despite all reasonable efforts to ascertain such information, it has been unable to determine the identity and/or whereabouts of THE WIDOW, HEIRS AND/OR CREDITORS OF THE ESTATE OF GERALDINE O'CONNOR, and all unknown persons, claiming or who may claim, any rights, title, interest or estate in or lien or encumbrance upon the property described in this Complaint, adverse to the Plaintiff, whether such claim or possible claim can be vested or contingent, if not living.

Now, Therefore, it is hereby ORDERED that notice of the institution of this action be given to said THE WIDOW, HEIRS AND/OR CREDITORS OF THE ESTATE OF GERALDINE O'CONNOR and all unknown persons, claiming or who may claim, any rights, title, interest or estate in or lien or encumbrance upon the property described in this Complaint, adverse to the Plaintiff, whether such claim or possible claim can be vested or contingent, by some proper officer causing a true and attested copy of this Order of Notice to be published in the New Haven Register, once a week for two successive weeks, commencing on or before March 31, 2016, and that return of such service be made to this Court.

BY THE COURT  
 By: Moran, J.  
 2/24/2016  
 A TRUE COPY ATTEST:  
 Edward DiLieto - State Marshal  
 New Haven County

**LEGAL NOTICES**

**NOTICE TO CREDITORS**

ESTATE OF: Emily Granata

The Hon. Beverly K. Streit-Kefalas, Judge of the Court of Probate, District of Milford - Orange Probate District, by decree dated March 8, 2016, ordered that all claims must be presented to the fiduciary at the address below. Failure to promptly present any such claim may result in the loss of rights to recover on such claim.

Karen Adams,  
 Assistant Clerk

The fiduciary is:

Dona Granata  
 c/o Mark J. DeGennaro, Esq.  
 44 Church Street,  
 West Haven, CT 06516  
 938123

**PROBATE NOTICES**

**NOTICE TO CREDITORS**

ESTATE OF Bernard Eberle, AKA Bernard A. Eberle

The Hon. Edward C. Burt, Jr., Judge of the Court of Probate, District of Hamden - Bethany Probate District, by decree dated February 25, 2016, ordered that all claims must be presented to the fiduciary at the address below. Failure to promptly present any such claim may result in the loss of rights to recover on such claim.

Karen Adams,  
 Assistant Clerk

The fiduciary is:

Stanley Rutowicz  
 c/o William S. Colwell, Esq.  
 Parrett, Porto, Parese & Colwell  
 2319 Whitney Ave.  
 Hamden, CT 06518  
 925286

**NOTICE TO CREDITORS**

ESTATE OF George Corcoran, AKA George M. Corcoran

The Hon. Beverly K. Streit-Kefalas, Judge of the Court of Probate, District of Milford - Orange Probate District, by decree dated February 23, 2016, ordered that all claims must be presented to the fiduciary at the address below. Failure to promptly present any such claim may result in the loss of rights to recover on such claim.

Karen Adams,  
 Assistant Clerk

The fiduciary is:

Joseph Corcoran  
 c/o Nicholas G. Framularo, Esq.  
 2900 Main Street  
 Suite 2B  
 Stratford, CT 06614  
 925297

**PROBATE NOTICES**

**NOTICE TO CREDITORS**

ESTATE OF Elizabeth Tiano

The Hon. Clifford P. Hoyle, Judge of the Court of Probate, Derby Probate District, by decree dated November 25, 2015, ordered that all claims must be presented to the fiduciary at the address below. Failure to promptly present any such claim may result in the loss of rights to recover on such claim.

Deborah Meshell,  
 Assistant Clerk

The fiduciary is:

Eugene J. Tiano & Reverend Christopher Tiano  
 c/o Timothy P. Dillon, Esq., Sheehy & Dillon,  
 303 Wakelee Ave,  
 Ansonia, CT 06401  
 948571

**NOTICE TO CREDITORS**

ESTATE OF Robert C. McGuire, Sr.

The Hon. Michael R. Brandt, Judge of the Court of Probate, District of East Haven - North Haven Probate District, by decree dated January 28, 2016, ordered that all claims must be presented to the fiduciary at the address below. Failure to promptly present any such claim may result in the loss of rights to recover on such claim.

Mary-Beth Luzzi,  
 Chief Clerk

The fiduciary is:

Ellen D. McGuire, Administratrix  
 c/o George P. Guertin, Esq.  
 26 Broadway  
 North Haven, CT 06473  
 943110

**NOTICE TO CREDITORS**

ESTATE OF Evelyn D. Charboneau

The Hon. Michael R. Brandt, Judge of the Court of Probate, District of East Haven - North Haven Probate Court, by decree dated March 8, 2016, ordered that all claims must be presented to the fiduciary at the address below. Failure to promptly present any such claim may result in the loss of rights to recover on such claim.

Mary-Beth Luzzi,  
 Chief Clerk

The fiduciary is:

Thomas Charboneau, Jr. Executor  
 16 Hudson Street  
 East Haven, CT 06512  
 938553

**CLASSIFIEDS** hold many, many opportunities. They give opportunity for you to buy items, meet people, sell unwanted items, find housing, save money, earn a couple bucks, and much, much more.

**STATE OF CONNECTICUT**

RETURN DATE: APRIL 5, 2016 :SUPERIOR COURT  
 WELLS FARGO BANK, N.A. :JUDICIAL DISTRICT  
 :OF ANSONIA-  
 VS. :MILFORD  
 :AT MILFORD  
 THE WIDOW, HEIRS AND/OR CREDITORS OF THE ESTATE OF JOSEPH R. KELLER, ET AL :FEBRUARY 12, 2016

**NOTICE TO THE WIDOW, HEIRS AND/OR CREDITORS OF THE ESTATE OF JOSEPH R. KELLER AND ALL UNKNOWN PERSONS, CLAIMING OR WHO MAY CLAIM, ANY RIGHTS, TITLE, INTEREST OR ESTATE IN OR LIEN OR ENCUMBRANCE UPON THE PROPERTY DESCRIBED IN THIS COMPLAINT, ADVERSE TO THE PLAINTIFF, WHETHER SUCH CLAIM OR POSSIBLE CLAIM BE VESTED OR CONTINGENT.**

The Plaintiff has named as a Defendant, THE WIDOW, HEIRS AND/OR CREDITORS OF THE ESTATE OF JOSEPH R. KELLER, and all unknown persons, claiming or who may claim, any rights, title, interest or estate in or lien or encumbrance upon the property described in this Complaint, adverse to the Plaintiff, whether such claim or possible claim can be vested or contingent, if not living, as a party defendant(s) in the complaint which it is bringing to the above-named Court seeking a foreclosure of its mortgage upon premises known as 145 SOUTHWORTH STREET, MILFORD, CT 06461.

The Plaintiff has represented to the said Court, by means of an affidavit annexed to the Complaint, that, despite all reasonable efforts to ascertain such information, it has been unable to determine the identity and/or whereabouts of THE WIDOW, HEIRS AND/OR CREDITORS OF THE ESTATE OF JOSEPH R. KELLER, and all unknown persons, claiming or who may claim, any rights, title, interest or estate in or lien or encumbrance upon the property described in this Complaint, adverse to the Plaintiff, whether such claim or possible claim can be vested or contingent, if not living.

Now, Therefore, it is hereby ORDERED that notice of the institution of this action be given to said THE WIDOW, HEIRS AND/OR CREDITORS OF THE ESTATE OF JOSEPH R. KELLER and all unknown persons, claiming or who may claim, any rights, title, interest or estate in or lien or encumbrance upon the property described in this Complaint, adverse to the Plaintiff, whether such claim or possible claim can be vested or contingent, by some proper officer causing a true and attested copy of this Order of Notice to be published in the New Haven Register, once a week for two successive weeks, commencing on or before March 24, 2016, and that return of such service be made to this Court.

BY THE COURT  
 By: Moran, J.  
 Judge  
 2/24/2016  
 A TRUE COPY ATTEST:  
 Edward DiLieto - State Marshal  
 New Haven County

## Greer, Leslie

---

**From:** Foster, Tillman  
**Sent:** Thursday, March 24, 2016 10:45 AM  
**To:** Greer, Leslie  
**Subject:** FW: 15-32040 and 15-32041  
**Attachments:** YNHH 32041 OP Rehab.pdf; YNHH 32040-Occ Medicine & Wellness.pdf; 32040 Issues.docx; 32041 Issues.docx

---

**From:** Foster, Tillman  
**Sent:** Thursday, March 24, 2016 10:34 AM  
**To:** Nancy Rosenthal (YNHSC) <[nancy.rosenthal@ynhh.org](mailto:nancy.rosenthal@ynhh.org)>  
**Cc:** Hansted, Kevin <[Kevin.Hansted@ct.gov](mailto:Kevin.Hansted@ct.gov)>; Roberts, Karen <[Karen.Roberts@ct.gov](mailto:Karen.Roberts@ct.gov)>; Huber, Jack <[Jack.Huber@ct.gov](mailto:Jack.Huber@ct.gov)>; Veyberman, Alla <[Alla.Veyberman@ct.gov](mailto:Alla.Veyberman@ct.gov)>  
**Subject:** 15-32040 and 15-32041

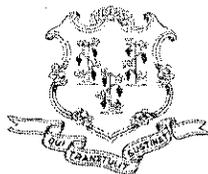
Good morning Ms. Rosenthal – Please find attached PDF versions of OHCA’s letters requesting prefiled testimony and issue responses for the public hearing scheduled for Thursday, April 7, 2016 in the matters of Yale-New Haven Hospital’s proposals to terminate its occupational medicine and wellness and outpatient rehabilitation services. Also attached are Word versions of the issues that you may wish to use in preparation of your issues response. Please feel free to contact me, Jack Huber or Alla Veyberman if you have any questions regarding the attached documents. Thank you. Regards,  
Tillman

Tillman Foster  
Associate Health Care Analyst  
Department of Public Health  
Office of Health Care Access  
410 Capitol Avenue  
MS #13HCA, P.O. Box 340308  
Hartford, CT 06134  
Phone: (860) 418-7031  
Fax: (860) 418-7053  
Email: [Tillman.Foster@CT.GOV](mailto:Tillman.Foster@CT.GOV)



# STATE OF CONNECTICUT

## DEPARTMENT OF PUBLIC HEALTH



Dannel P. Malloy  
Governor  
Nancy Wyman  
Lt. Governor

Raul Pino, M.D., M.P.H.  
Commissioner

### Office of Health Care Access

March 24, 2016

Via Email Only

Nancy Rosenthal  
Senior Vice President, Strategy and Regulatory Planning  
Yale-New Haven Health Services Corporation  
5 Perryridge Road  
Greenwich, CT 06360

RE: Certificate of Need Application, Docket Numbers 15-32040  
Yale-New Haven Hospital, Termination of Occupational Medicine & Wellness Services in East  
Haven & Branford

Dear Ms. Rosenthal,

The Office of Health Care Access ("OHCA") will hold a public hearing on the above docket number on April 7, 2016. The hearing is at 4:00 p.m. at the Branford Recreation Department, 45 Church Street (2nd Floor Activity Room), Branford, Connecticut. Pursuant to the Regulations of Connecticut State Agencies § 19a-9-29(e), any party or other participant is required to prefile in written form all substantive, technical, or expert testimony that it proposes to offer at the hearing. Yale-New Haven Hospital ("Applicant") submit prefiled testimony by 4:00 p.m. on **March 31, 2016**.

All persons providing prefiled testimony must be present at the public hearing to adopt their written testimony under oath and must be available for cross-examination for the entire duration of the hearing. If you are unable to meet the specified time for filing the prefiled testimony you must request a time extension in writing, detailing the reasons for not being able to meet the specified deadline.

Additionally, please find attached OHCA's Issues. Please respond to the attached Issues in writing to OHCA by 4:00 p.m. on **March 31, 2016**.

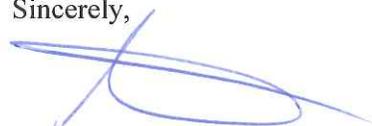


Phone: (860) 418-7001 • Fax: (860) 418-7053  
410 Capitol Avenue, MS#13HCA  
Hartford, Connecticut 06134-0308  
[www.ct.gov/dph](http://www.ct.gov/dph)

*Affirmative Action/Equal Opportunity Employer*

Please contact Tillman Foster or Jack Huber at (860) 418-7001 if you have any questions concerning this request.

Sincerely,

A handwritten signature in blue ink, appearing to read 'Kevin T. Hansted', with a large, sweeping flourish extending to the right.

Kevin T. Hansted  
Hearing Officer

Attachment

## Issues

**Certificate of Need Application; Docket Number: 15-32040-CON**

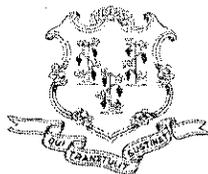
**Yale-New Haven Hospital ("YNHH")  
Termination of Yale-New Haven Hospital Occupational Medicine Services  
in East Haven and Branford**

The Applicant should be prepared to present and discuss supporting evidence on the following issue:

1. The preservation of or improvement to access to occupational medicine services for patients in the service area, including the availability of the same or improved services at other YNHH system locations.

# STATE OF CONNECTICUT

## DEPARTMENT OF PUBLIC HEALTH



Dannel P. Malloy  
Governor  
Nancy Wyman  
Lt. Governor

Raul Pino, M.D., M.P.H.  
Commissioner

### Office of Health Care Access

March 24, 2016

Via Email Only

Nancy Rosenthal  
Senior Vice President, Strategy and Regulatory Planning  
Yale-New Haven Health Services Corporation  
5 Perryridge Road  
Greenwich, CT 06360

RE: Certificate of Need Application, Docket Numbers 15-32040  
Yale-New Haven Hospital, Termination of Occupational Medicine & Wellness Services in East  
Haven & Branford

Dear Ms. Rosenthal,

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Additionally, please find attached OHCA's Issues. Please respond to the attached Issues in writing to OHCA by 4:00 p.m. on **March 31, 2016**.

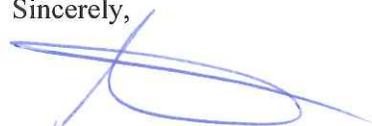


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Please contact Tillman Foster or Jack Huber at (860) 418-7001 if you have any questions concerning this request.

Sincerely,

A handwritten signature in blue ink, appearing to read "Kevin T. Hansted", with a large, sweeping flourish extending to the right.

Kevin T. Hansted  
Hearing Officer

Attachment

## Issues

**Certificate of Need Application; Docket Number: 15-32040-CON**

**Yale-New Haven Hospital ("YNHH")  
Termination of Yale-New Haven Hospital Occupational Medicine Services  
in East Haven and Branford**

The Applicant should be prepared to present and discuss supporting evidence on the following issue:

1. The preservation of or improvement to access to occupational medicine services for patients in the service area, including the availability of the same or improved services at other YNHH system locations.

## Greer, Leslie

---

**From:** Jennifer Groves Fusco <jfusco@uks.com>  
**Sent:** Thursday, March 31, 2016 3:02 PM  
**To:** User, OHCA; Hansted, Kevin; Veyberman, Alla; Foster, Tillman  
**Cc:** Nancy Rosenthal (Nancy.Rosenthal@greenwichhospital.org)  
**Subject:** Yale-New Haven Hospital -- Docket Nos. 15-32040-CON & 15-32041-CON  
**Attachments:** Outpatient Rehabilitation Testimony.pdf; Occupational Medicine Testimony.pdf

Kevin,

Attached please find YNH's Prefile Testimony for the April 7 hearing on the above-referenced dockets. The originals are being overnighted to OHCA.

Please let me know if you need anything else.

Thanks,  
Jen

Jennifer Groves Fusco, Esq.  
Principal  
Updike, Kelly & Spellacy, P.C.  
One Century Tower  
265 Church Street  
New Haven, CT 06510  
Office (203) 786.8316  
Cell (203) 927.8122  
Fax (203) 772.2037  
[www.uks.com](http://www.uks.com)



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**LEGAL NOTICE:** Unless expressly stated otherwise, this message is confidential and may be privileged. It is intended for the addressee(s) only. If you are not an addressee, any disclosure, copying or use of the information in this e-mail is unauthorized and may be unlawful. If you are not an addressee, please inform the sender immediately and permanently delete and/or destroy the original and any copies or printouts of this message. Thank you. Updike, Kelly & Spellacy, P.C.



Jennifer Groves Fusco  
(t) 203.786.8316  
(f) 203.772.2037  
jfusco@uks.com

March 31, 2016

**VIA ELECTRONIC & OVERNIGHT MAIL**

Hon. Janet Brancifort, M.P.H.  
Deputy Commissioner  
Office of Health Care Access Division  
Department of Public Health  
410 Capitol Avenue  
Post Office Box 340308  
Hartford, CT 06134-0308

**Re: *Yale-New Haven Hospital  
Aignment of Occupational Medicine Services in East Haven & Branford  
Docket No. 15-32040-CON***

Dear Deputy Commissioner Brancifort:

This office represents Yale-New Haven Hospital in connection with the above-referenced docket. Enclosed are an original and four (4) copies of the following:

- Notice of Appearance of Updike, Kelly & Spellacy, P.C.;
- Prefiled Testimony of Amit Rastogi, M.D., Interim Chief Executive Officer, Northeast Medical Group; and
- Prefiled Testimony of Jodie Boldrighini, Director of Occupational and Employee Population Health Solutions, Yale-New Haven Hospital.

These documents are being submitted in connection with the public hearing on the above matter scheduled for April 7, 2016 at 4:00 p.m. They address the issues for discussion raised by OHCA in a letter dated March 24, 2016. Dr. Rastogi and Ms. Boldrighini will be present at the hearing to adopt their prefiled testimony under oath and for cross-examination.

Should you require anything further, please feel free to call me at (203) 786-8316.

Very truly yours,

Jennifer Groves Fusco

Enclosures

cc: Nancy Rosenthal (w/enc)

**STATE OF CONNECTICUT  
DEPARTMENT OF PUBLIC HEALTH  
OFFICE OF HEALTH CARE ACCESS DIVISION**

..... )  
 IN RE: ALIGNMENT OF YALE-NEW )  
 HAVEN HOSPITAL OCCUPATIONAL )  
 MEDICINE SERVICES IN EAST HAVEN )  
 AND BRANFORD )  
 )  
 )

DOCKET NO. 15-32040-CON

MARCH 31, 2016

.....

**NOTICE OF APPEARANCE**

In accordance with Section 19a-9-28 of the Regulations of Connecticut State Agencies, please enter the appearance of Updike, Kelly & Spellacy, P.C. ("Firm") in the above-captioned proceeding on behalf of Yale-New Haven Hospital ("YNHH"). The Firm will appear and represent YNHH at the public hearing on this matter, scheduled for April 7, 2016.

Respectfully Submitted,

YALE-NEW HAVEN HOSPITAL

By:  \_\_\_\_\_  
 JENNIFER GROVES FUSCO, ESQ.  
 Updike, Kelly & Spellacy, P.C.  
 265 Church Street  
 One Century Tower  
 New Haven, CT 06510  
 Tel: (203) 786-8300  
 Fax (203) 772-2037

**STATE OF CONNECTICUT  
DEPARTMENT OF PUBLIC HEALTH  
OFFICE OF HEALTH CARE ACCESS DIVISION**

..... )  
 IN RE: ALIGNMENT OF YALE-NEW ) DOCKET NO. 15-32040-CON  
 HAVEN HOSPITAL OCCUPATIONAL )  
 MEDICINE SERVICES IN EAST HAVEN )  
 AND BRANFORD ) MARCH 31, 2016  
 .....

**PREFILED TESTIMONY OF AMIT RASTOGI, M.D.,  
INTERIM CHIEF EXECUTIVE OFFICER  
NORTHEAST MEDICAL GROUP**

Good afternoon Hearing Officer Hansted and members of the Office of Health Care Access (“OHCA”) staff. My name is Dr. Amit Rastogi. I am a primary care physician and the Interim Chief Executive Officer of Northeast Medical Group (“NEMG”), the nonprofit medical foundation affiliated with the Yale-New Haven Health System (“YNHHS”). With me today is my colleague, Jodie Boldrighini, who serves as the Director of Occupational and Employee Population Health Solutions at YNHHS. Thank you for this opportunity to speak in support of Yale-New Haven Hospital’s (“YNHH” or “Hospital”) request for Certificate of Need (“CON”) approval to discontinue Occupational Medicine and Wellness Services in Branford and East Haven and consolidate these services at other existing YNHH locations.

YNHH’s plan to consolidate occupational health sites is part of our integration efforts following the Hospital’s acquisition of St. Raphael’s Health System (“HSR”) in 2012. YNHH is currently reviewing ambulatory space and program offerings, looking to eliminate duplicative and underutilized services while maintaining, and in many cases improving, access to care for

YNHH patients. The need to streamline the delivery of outpatient services and provide care in the most cost-effective manner is consistent with the goals of healthcare reform and state health planning objectives. Moreover, this type of consolidation is critical at a time when Connecticut hospitals are facing significant tax increases, budget cuts and declining reimbursement.

#### Overview of Occupational Medicine and Wellness Services

Occupational Medicine and Wellness Services have been offered at 84 N. Main Street in Branford and 317 Foxon Road in East Haven since 1996 and 2012, respectively. The Branford site (f/k/a Occupational Health Plus <sup>TM</sup>) was originally owned and operated by HSR. It became part of YNHH when the Hospital acquired HSR in September of 2012. The East Haven site (f/k/a Worker Health Solutions) operates as part of an outpatient facility that included an urgent care center. YNHH terminated the East Haven urgent care service in January of 2016, with OHCA's approval (*see* Docket No. 15-32011-CON). The Hospital also provides occupational health services at locations in New Haven and Hamden, both of which were formerly HSR sites. All four sites are operated as Hospital outpatient departments under YNHH's acute-care hospital license.

The YNHH Occupational Medicine and Wellness sites in Branford and East Haven offer both injury and non-injury related health services. The facilities are supported by NEMG physicians and YNHH staff. As Ms. Boldrighini will attest, YNHH has committed to relocating all current occupational health staff to alternate positions within YNHHS and this transition is underway.

YNHH occupational health services are available exclusively for employees of YNHHS and of companies and municipalities that make arrangements with the Hospital for this type of

care. These services are not available to the general public. As a result, payers are limited. Neither Medicare nor Medicaid provides reimbursement for occupational health services.

In addition, many employers enter into pricing arrangements with multiple providers so that their employees have a choice for occupational health services. There are 13 non-YNHH providers of occupational health services in the East Haven-Branford area, not including a new 203 Urgent Care site that will soon open in the East Haven space being vacated by YNHH. According to 203 Urgent Care's website (<http://www.203urgentcare.com/occupational-medicine/>), the company provides a full array of occupational health services. The company's Director, J.D. Sidana, provided a letter of support for this proposal, which was included with our CON Application.

#### Reasons for Termination

As previously mentioned, the Hospital's decision to consolidate its Occupational Medicine and Wellness Services in Branford and East Haven into locations in New Haven and Hamden arose out of efforts to identify and eliminate duplicative service offerings in nearby communities, which can lead to inefficiencies and increased costs. At the same time, YNHH is working to ensure that clinical programs are appropriately located within its service area. This planning process, which began with the acquisition of HSR in September of 2012, has become increasingly important in light of the financial burdens placed on YNHH by recent tax increases and reimbursement cuts.

Through this process, YNHH has determined that its occupational health services are duplicative and that each of its four locations has excess capacity. The Hospital analyzed operations at these sites and determined that processes could be more efficient, which would in

turn increase patient throughput and create even more capacity. As a result, YNHH determined that its Occupational Medicine and Wellness Services can be consolidated at two existing locations.

YNHH opted to terminate operations at the Branford and East Haven locations, and leave the New Haven and Hamden locations open, for several reasons. First, employers located near these sites do not have enough employee patients to sustain dedicated occupational health services. Significant employer growth is not projected in Branford and East Haven as compared with New Haven, for example. Many of the employers who utilize the occupational health services in Branford and East Haven are located in other towns and cities. In addition, a substantial number of patients using each site reside in towns other than Branford or East Haven. Towns of origin include New Haven and points west (i.e. West Haven, Milford & Bridgeport) and Hamden and surrounding communities (i.e. North Haven & Wallingford). For these patients, the YNHH Occupational Medicine and Wellness Services in New Haven and Hamden will provide better access than the sites in Branford and East Haven.

Consolidation of the Occupational Medicine and Wellness Services will also result in much-needed costs savings for YNHH. This will be accomplished, primarily, through a reduction in lease expenses associated with an underutilized site and the reallocation of existing staff to unfilled positions.

Like all Connecticut hospitals, YNHH must find ways to reduce costs and increase efficiencies in order to survive in the current financial climate. YNHHS is scheduled to pay more than \$180 million in state taxes for FY 2016. This makes the system – a non-profit healthcare organization – one of the largest, if not the largest, taxpayer in the State of

Connecticut. In light of the foregoing, YNHH needs to reexamine its service offerings and “right size” services where appropriate.

#### Maintaining Access to Care

Access to occupational health services will be maintained for patients at YNHH locations in New Haven and Hamden. These sites have ample capacity to absorb Branford and East Haven patients and are located in closer proximity to the employers that make arrangements with YNHH for these services and the employees who use the services. Employers and patients who opt to use alternate YNHH sites will be ensured the same high-quality occupational health services that they currently receive in Branford and East Haven. In addition, there are numerous non-YNHH occupational health providers in the Branford and East Haven service areas that continue to exist as alternatives for patients.

#### Conclusion

YNHH’s plan to consolidate Occupational Medicine and Wellness Services at underutilized locations closer to the employers and employees who use these services is consistent with the goals of healthcare reform and state health planning objectives. It honors YNHH’s commitment to integrate HSR in a way that promotes cost-effective delivery of care and eliminates the unnecessary duplication of services. It also ensures access to high-quality occupational health services both within and outside of the YNHH network.

In order to ensure that the community has continued access to YNHH’s core services, the Hospital must determine the most efficient way to deliver these and other services to its patients. This is particularly true at a time where YNHHS is facing significant financial challenges, including \$180 million in taxes.

For these reasons, I urge you to approve the CON Application for termination of YNHH's Occupational Medicine and Wellness Services in Branford and East Haven. Thank you for your time today and I would be happy to answer any questions you have.

I would now like to introduce Ms. Boldrighini.

The foregoing is my sworn testimony.

A handwritten signature in blue ink, appearing to read 'Rastogi', with a large, sweeping flourish above the name.

---

Amit Rastogi, M.D.  
Interim Chief Executive Officer  
Northeast Medical Group

**STATE OF CONNECTICUT  
DEPARTMENT OF PUBLIC HEALTH  
OFFICE OF HEALTH CARE ACCESS DIVISION**

..... )  
 IN RE: ALIGNMENT OF YALE-NEW ) DOCKET NO. 15-32040-CON  
 HAVEN HOSPITAL OCCUPATIONAL )  
 MEDICINE SERVICES IN EAST HAVEN )  
 AND BRANFORD ) MARCH 31, 2016  
 .....

**PREFILED TESTIMONY OF JODIE BOLDRIGHINI  
DIRECTOR OF OCCUPATIONAL AND  
EMPLOYEE POPULATION HEALTH SOLUTIONS  
YALE-NEW HAVEN HEALTH SYTEM**

Good afternoon Hearing Officer Hansted and members of the Office of Health Care Access (“OHCA”) staff. Thank you for this opportunity to testify in support of Yale-New Haven Hospital’s (“YNHH” or “Hospital”) proposal to consolidate its Occupational Medicine and Wellness Services at existing locations in New Haven and Hamden. My name is Jodie Boldrighini and I am the Director of Occupational and Employee Population Health Solutions for the Yale-New Haven Health System (“YNHHS”). My testimony today will focus on the occupational health services we provide, the populations we serve and why we believe this proposal will result in enhanced access for our Occupational Medicine and Wellness patients.

**Overview of Occupational Medicine and Wellness Services**

As Dr. Rastogi testified, YNHHS offers occupational health services at four locations: 175 Sherman Avenue, New Haven; 84 North Main Street, Branford; 317 Foxon Road, East Haven; and 2080 Whitney Avenue, Hamden. The YNHH Occupational Medicine and Wellness sites in Branford and East Haven offer both injury and non-injury related health services.

Services include treatment and follow-up care for injuries received on the job, workers' compensation case management, pre-employment physicals, drug testing, Department of Transportation examination certifications, fitness for duty assessments, return to work assessments, respirator clearance and fit testing, as well as various health screening services. YNHH's occupational health sites are supported by NEMG physicians and YNHH staff.

Historically, Occupational Medicine and Wellness Services at YNHH were available to YNHHS employees only. These services were later opened up to other employers in the community and their employees. All YNHH occupational health services, including medical and rehabilitation services, are provided through an arrangement with the Hospital. Employers enter into non-exclusive pricing agreements with YNHH to offer occupational health services to their employees. It is these employers, along with workers' compensation carriers, that pay for a majority of occupational health services provided by YNHH. The services are not available to the general public. Neither Medicare nor Medicaid reimburses for any occupational health services.

#### Decision to Close Branford and East Haven Clinics

Dr. Rastogi mentioned that as part of our ambulatory space and program optimization planning, we determined that there is excess capacity at all YNHH Occupational Medicine and Wellness Sites. There is also potential for improvements in operating efficiency at these sites, which would result in even more capacity. Based on this, we decided that two sites are all that is needed to serve our occupational and employee health populations.

The decision to close the Branford and East Haven locations was driven, in large part, by where employers and employees using these offices work and reside. Many patients access

occupational health services from their places of employment. As Dr. Rastogi testified, a number of the employers who have arrangements with the occupational health services in Branford and East Haven are located in other towns and cities. The largest numbers of companies using each site are located in New Haven. In Branford, only 21 percent of visit volume originates from companies located in Branford (compared to 29 percent from New Haven companies). In East Haven, only 16 percent of visit volume originates from companies located in East Haven (compared to 29 percent from New Haven companies). Moreover, YNHHS employees are by far the largest user of YNHHS Occupational Medicine and Wellness Services. YNHHS employee visits account for more visits than the five largest non-YNHHS employers combined.

Even if patients are traveling from their homes rather than their work sites, a significant percentage of patients who use the Branford and East Haven sites reside in towns other than Branford and East Haven. Many patients live closer to the Occupational Medicine and Wellness Services in New Haven and Hamden, which will remain open after the consolidation. For these patients, access to care will be enhanced as they will be able to obtain services nearer to their homes and without crossing the Quinnipiac Bridge, if they so choose.

#### Maintaining Access to Care

Patients who opt to stay with YNHHS for occupational health services will experience a seamless transition and receive the same exceptional care at our locations in New Haven and Hamden that they received in Branford and East Haven. Services will be provided by the same or comparable staff and health records will be available through the Hospital's electronic medical record systems.

Both the New Haven and Hamden Occupational Medicine and Wellness Services have ample capacity to care for any patients displaced by closure of the Branford and East Haven sites. The New Haven and Hamden sites combined performed 23,000 visits in FY 2014. They can easily absorb the roughly 600 visits per month currently handled in Branford and East Haven. These sites have the ability to absorb additional visits of all types. Patients will be scheduled based on the services needed and the staff available at any given location at the time of scheduling. Note that we continue to evaluate capacity for Occupational Medicine and Wellness Services and are prepared to adjust hours, staffing and locations at any time to ensure patient access.

We are also in the process of redeploying staff from the Branford and East Haven sites to the New Haven and Hamden locations. Some employees have relocated already and places are being held for others pending OHCA approval to close. The additional staff will allow more appointments to be scheduled at these locations. There is ample physical space to handle more providers and patients in New Haven and Hamden as well. Some of our larger employers have already begun to transition their employees to alternate YNHH sites and we have been able to accommodate these patients without any difficulty.

In addition, there are 13 non-YNHH occupational health providers in the Branford and East Haven service areas (not including the soon-to-be-opened East Haven location of 203 Urgent Care). We understand that not all of our employers will opt to stay with YNHH after the Branford and East Haven clinics close and these alternatives will continue to exist for their employees. Attached as Exhibit A is a map showing all existing occupational health locations in the service area, including the YNHH locations.

Conclusion

Thank you again for allowing me this opportunity to discuss our consolidation plans. We are confident that closure of the Branford and East Haven sites will have minimal impact on access to care for patients. If anything, it will provide easier access for a significant number of our patients who work and reside in and around New Haven. At the same time, this consolidation will result in cost-savings for YNHH at a time when the efficient delivery of care is critical.

For these reasons, I urge you to approve the CON Application for termination of YNHH's Occupational Medicine and Wellness Services in Branford and East Haven. I would be happy to answer any questions you have.

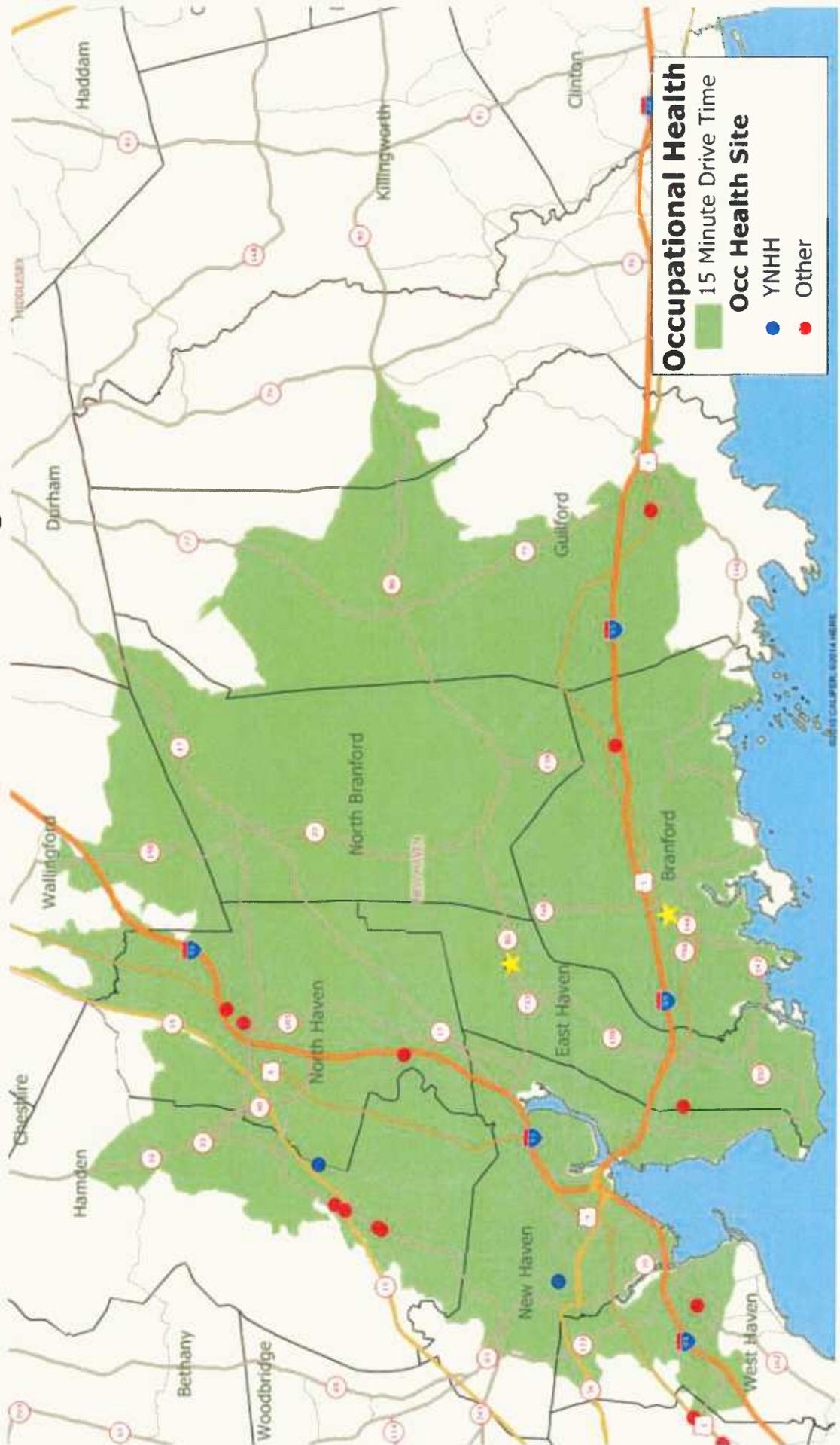
The foregoing is my sworn testimony.

A handwritten signature in blue ink, appearing to be 'J. Boldrighini', is written over a horizontal line.

Jodie Boldrighini  
Director of Occupational and Employee  
Population Health Solutions  
Yale-New Haven Health System

# *EXHIBIT A*

# Occupational Health Sites in the Region





**UKS**  
MERITAS LAW FIRMS WORLDWIDE

Jennifer Groves Fusco  
(t) 203.786.8316  
(f) 203.772.2037  
jfusco@uks.com

March 31, 2016

**VIA ELECTRONIC & OVERNIGHT MAIL**

Hon. Janet Brancifort, M.P.H.  
Deputy Commissioner  
Office of Health Care Access Division  
Department of Public Health  
410 Capitol Avenue  
Post Office Box 340308  
Hartford, CT 06134-0308



**Re: *Yale-New Haven Hospital  
Aignment of Occupational Medicine Services in East Haven & Branford  
Docket No. 15-32040-CON***

Dear Deputy Commissioner Brancifort:

This office represents Yale-New Haven Hospital in connection with the above-referenced docket. Enclosed are an original and four (4) copies of the following:

- Notice of Appearance of Updike, Kelly & Spellacy, P.C.;
- Prefiled Testimony of Amit Rastogi, M.D., Interim Chief Executive Officer, Northeast Medical Group; and
- Prefiled Testimony of Jodie Boldrighini, Director of Occupational and Employee Population Health Solutions, Yale-New Haven Hospital.

These documents are being submitted in connection with the public hearing on the above matter scheduled for April 7, 2016 at 4:00 p.m. They address the issues for discussion raised by OHCA in a letter dated March 24, 2016. Dr. Rastogi and Ms. Boldrighini will be present at the hearing to adopt their prefiled testimony under oath and for cross-examination.

Should you require anything further, please feel free to call me at (203) 786-8316.

Very truly yours,

Jennifer Groves Fusco

Enclosures

cc: Nancy Rosenthal (w/enc)

**Updike, Kelly & Spellacy, P.C.**

One Century Tower ■ 265 Church Street ■ New Haven, CT 06510 (t) 203.786.8300 (f) 203.772.2037 [www.uks.com](http://www.uks.com)

**STATE OF CONNECTICUT  
DEPARTMENT OF PUBLIC HEALTH  
OFFICE OF HEALTH CARE ACCESS DIVISION**

..... )  
 IN RE: ALIGNMENT OF YALE-NEW ) DOCKET NO. 15-32040-CON  
 HAVEN HOSPITAL OCCUPATIONAL )  
 MEDICINE SERVICES IN EAST HAVEN )  
 AND BRANFORD )  
 )  
 ) MARCH 31, 2016  
 .....

**NOTICE OF APPEARANCE**

In accordance with Section 19a-9-28 of the Regulations of Connecticut State Agencies, please enter the appearance of Updike, Kelly & Spellacy, P.C. ("Firm") in the above-captioned proceeding on behalf of Yale-New Haven Hospital ("YNHH"). The Firm will appear and represent YNHH at the public hearing on this matter, scheduled for April 7, 2016.

Respectfully Submitted,

YALE-NEW HAVEN HOSPITAL

By:  \_\_\_\_\_  
 JENNIFER GROVES FUSCO, ESQ.  
 Updike, Kelly & Spellacy, P.C.  
 265 Church Street  
 One Century Tower  
 New Haven, CT 06510  
 Tel: (203) 786-8300  
 Fax (203) 772-2037

STATE OF CONNECTICUT  
DEPARTMENT OF PUBLIC HEALTH  
OFFICE OF HEALTH CARE ACCESS DIVISION

..... )  
 IN RE: ALIGNMENT OF YALE-NEW ) DOCKET NO. 15-32040-CON  
 HAVEN HOSPITAL OCCUPATIONAL )  
 MEDICINE SERVICES IN EAST HAVEN )  
 AND BRANFORD ) MARCH 31, 2016  
 .....

**PREFILED TESTIMONY OF AMIT RASTOGI, M.D.,**  
**INTERIM CHIEF EXECUTIVE OFFICER**  
**NORTHEAST MEDICAL GROUP**

Good afternoon Hearing Officer Hansted and members of the Office of Health Care Access (“OHCA”) staff. My name is Dr. Amit Rastogi. I am a primary care physician and the Interim Chief Executive Officer of Northeast Medical Group (“NEMG”), the nonprofit medical foundation affiliated with the Yale-New Haven Health System (“YNHHS”). With me today is my colleague, Jodie Boldrighini, who serves as the Director of Occupational and Employee Population Health Solutions at YNHHS. Thank you for this opportunity to speak in support of Yale-New Haven Hospital’s (“YNHH” or “Hospital”) request for Certificate of Need (“CON”) approval to discontinue Occupational Medicine and Wellness Services in Branford and East Haven and consolidate these services at other existing YNHH locations.

YNHH’s plan to consolidate occupational health sites is part of our integration efforts following the Hospital’s acquisition of St. Raphael’s Health System (“HSR”) in 2012. YNHH is currently reviewing ambulatory space and program offerings, looking to eliminate duplicative and underutilized services while maintaining, and in many cases improving, access to care for

YNHH patients. The need to streamline the delivery of outpatient services and provide care in the most cost-effective manner is consistent with the goals of healthcare reform and state health planning objectives. Moreover, this type of consolidation is critical at a time when Connecticut hospitals are facing significant tax increases, budget cuts and declining reimbursement.

#### Overview of Occupational Medicine and Wellness Services

Occupational Medicine and Wellness Services have been offered at 84 N. Main Street in Branford and 317 Foxon Road in East Haven since 1996 and 2012, respectively. The Branford site (f/k/a Occupational Health Plus <sup>TM</sup>) was originally owned and operated by HSR. It became part of YNHH when the Hospital acquired HSR in September of 2012. The East Haven site (f/k/a Worker Health Solutions) operates as part of an outpatient facility that included an urgent care center. YNHH terminated the East Haven urgent care service in January of 2016, with OHCA's approval (*see* Docket No. 15-32011-CON). The Hospital also provides occupational health services at locations in New Haven and Hamden, both of which were formerly HSR sites. All four sites are operated as Hospital outpatient departments under YNHH's acute-care hospital license.

The YNHH Occupational Medicine and Wellness sites in Branford and East Haven offer both injury and non-injury related health services. The facilities are supported by NEMG physicians and YNHH staff. As Ms. Boldrighini will attest, YNHH has committed to relocating all current occupational health staff to alternate positions within YNHHS and this transition is underway.

YNHH occupational health services are available exclusively for employees of YNHHS and of companies and municipalities that make arrangements with the Hospital for this type of

care. These services are not available to the general public. As a result, payers are limited. Neither Medicare nor Medicaid provides reimbursement for occupational health services.

In addition, many employers enter into pricing arrangements with multiple providers so that their employees have a choice for occupational health services. There are 13 non-YNHH providers of occupational health services in the East Haven-Branford area, not including a new 203 Urgent Care site that will soon open in the East Haven space being vacated by YNHH. According to 203 Urgent Care's website (<http://www.203urgentcare.com/occupational-medicine/>), the company provides a full array of occupational health services. The company's Director, J.D. Sidana, provided a letter of support for this proposal, which was included with our CON Application.

#### Reasons for Termination

As previously mentioned, the Hospital's decision to consolidate its Occupational Medicine and Wellness Services in Branford and East Haven into locations in New Haven and Hamden arose out of efforts to identify and eliminate duplicative service offerings in nearby communities, which can lead to inefficiencies and increased costs. At the same time, YNHH is working to ensure that clinical programs are appropriately located within its service area. This planning process, which began with the acquisition of HSR in September of 2012, has become increasingly important in light of the financial burdens placed on YNHH by recent tax increases and reimbursement cuts.

Through this process, YNHH has determined that its occupational health services are duplicative and that each of its four locations has excess capacity. The Hospital analyzed operations at these sites and determined that processes could be more efficient, which would in

turn increase patient throughput and create even more capacity. As a result, YNHH determined that its Occupational Medicine and Wellness Services can be consolidated at two existing locations.

YNHH opted to terminate operations at the Branford and East Haven locations, and leave the New Haven and Hamden locations open, for several reasons. First, employers located near these sites do not have enough employee patients to sustain dedicated occupational health services. Significant employer growth is not projected in Branford and East Haven as compared with New Haven, for example. Many of the employers who utilize the occupational health services in Branford and East Haven are located in other towns and cities. In addition, a substantial number of patients using each site reside in towns other than Branford or East Haven. Towns of origin include New Haven and points west (i.e. West Haven, Milford & Bridgeport) and Hamden and surrounding communities (i.e. North Haven & Wallingford). For these patients, the YNHH Occupational Medicine and Wellness Services in New Haven and Hamden will provide better access than the sites in Branford and East Haven.

Consolidation of the Occupational Medicine and Wellness Services will also result in much-needed costs savings for YNHH. This will be accomplished, primarily, through a reduction in lease expenses associated with an underutilized site and the reallocation of existing staff to unfilled positions.

Like all Connecticut hospitals, YNHH must find ways to reduce costs and increase efficiencies in order to survive in the current financial climate. YNHHS is scheduled to pay more than \$180 million in state taxes for FY 2016. This makes the system – a non-profit healthcare organization – one of the largest, if not the largest, taxpayer in the State of

Connecticut. In light of the foregoing, YNHH needs to reexamine its service offerings and “right size” services where appropriate.

#### Maintaining Access to Care

Access to occupational health services will be maintained for patients at YNHH locations in New Haven and Hamden. These sites have ample capacity to absorb Branford and East Haven patients and are located in closer proximity to the employers that make arrangements with YNHH for these services and the employees who use the services. Employers and patients who opt to use alternate YNHH sites will be ensured the same high-quality occupational health services that they currently receive in Branford and East Haven. In addition, there are numerous non-YNHH occupational health providers in the Branford and East Haven service areas that continue to exist as alternatives for patients.

#### Conclusion

YNHH’s plan to consolidate Occupational Medicine and Wellness Services at underutilized locations closer to the employers and employees who use these services is consistent with the goals of healthcare reform and state health planning objectives. It honors YNHH’s commitment to integrate HSR in a way that promotes cost-effective delivery of care and eliminates the unnecessary duplication of services. It also ensures access to high-quality occupational health services both within and outside of the YNHH network.

In order to ensure that the community has continued access to YNHH’s core services, the Hospital must determine the most efficient way to deliver these and other services to its patients. This is particularly true at a time where YNHH is facing significant financial challenges, including \$180 million in taxes.

For these reasons, I urge you to approve the CON Application for termination of YNHH's Occupational Medicine and Wellness Services in Branford and East Haven. Thank you for your time today and I would be happy to answer any questions you have.

I would now like to introduce Ms. Boldrighini.

The foregoing is my sworn testimony.

A handwritten signature in blue ink, appearing to read "Rastogi", with a large, sweeping flourish above the name.

---

Amit Rastogi, M.D.  
Interim Chief Executive Officer  
Northeast Medical Group

STATE OF CONNECTICUT  
DEPARTMENT OF PUBLIC HEALTH  
OFFICE OF HEALTH CARE ACCESS DIVISION

..... )  
 IN RE: ALIGNMENT OF YALE-NEW ) DOCKET NO. 15-32040-CON  
 HAVEN HOSPITAL OCCUPATIONAL )  
 MEDICINE SERVICES IN EAST HAVEN )  
 AND BRANFORD ) MARCH 31, 2016  
 .....

**PREFILED TESTIMONY OF JODIE BOLDRIGHINI**  
**DIRECTOR OF OCCUPATIONAL AND**  
**EMPLOYEE POPULATION HEALTH SOLUTIONS**  
**YALE-NEW HAVEN HEALTH SYTEM**

Good afternoon Hearing Officer Hansted and members of the Office of Health Care Access (“OHCA”) staff. Thank you for this opportunity to testify in support of Yale-New Haven Hospital’s (“YNHH” or “Hospital”) proposal to consolidate its Occupational Medicine and Wellness Services at existing locations in New Haven and Hamden. My name is Jodie Boldrighini and I am the Director of Occupational and Employee Population Health Solutions for the Yale-New Haven Health System (“YNHHS”). My testimony today will focus on the occupational health services we provide, the populations we serve and why we believe this proposal will result in enhanced access for our Occupational Medicine and Wellness patients.

**Overview of Occupational Medicine and Wellness Services**

As Dr. Rastogi testified, YNHHS offers occupational health services at four locations: 175 Sherman Avenue, New Haven; 84 North Main Street, Branford; 317 Foxon Road, East Haven; and 2080 Whitney Avenue, Hamden. The YNHH Occupational Medicine and Wellness sites in Branford and East Haven offer both injury and non-injury related health services.

Services include treatment and follow-up care for injuries received on the job, workers' compensation case management, pre-employment physicals, drug testing, Department of Transportation examination certifications, fitness for duty assessments, return to work assessments, respirator clearance and fit testing, as well as various health screening services. YNHH's occupational health sites are supported by NEMG physicians and YNHH staff.

Historically, Occupational Medicine and Wellness Services at YNHH were available to YNHHS employees only. These services were later opened up to other employers in the community and their employees. All YNHH occupational health services, including medical and rehabilitation services, are provided through an arrangement with the Hospital. Employers enter into non-exclusive pricing agreements with YNHH to offer occupational health services to their employees. It is these employers, along with workers' compensation carriers, that pay for a majority of occupational health services provided by YNHH. The services are not available to the general public. Neither Medicare nor Medicaid reimburses for any occupational health services.

#### Decision to Close Branford and East Haven Clinics

Dr. Rastogi mentioned that as part of our ambulatory space and program optimization planning, we determined that there is excess capacity at all YNHH Occupational Medicine and Wellness Sites. There is also potential for improvements in operating efficiency at these sites, which would result in even more capacity. Based on this, we decided that two sites are all that is needed to serve our occupational and employee health populations.

The decision to close the Branford and East Haven locations was driven, in large part, by where employers and employees using these offices work and reside. Many patients access

occupational health services from their places of employment. As Dr. Rastogi testified, a number of the employers who have arrangements with the occupational health services in Branford and East Haven are located in other towns and cities. The largest numbers of companies using each site are located in New Haven. In Branford, only 21 percent of visit volume originates from companies located in Branford (compared to 29 percent from New Haven companies). In East Haven, only 16 percent of visit volume originates from companies located in East Haven (compared to 29 percent from New Haven companies). Moreover, YNHHS employees are by far the largest user of YNHH Occupational Medicine and Wellness Services. YNHHS employee visits account for more visits than the five largest non-YNHHS employers combined.

Even if patients are traveling from their homes rather than their work sites, a significant percentage of patients who use the Branford and East Haven sites reside in towns other than Branford and East Haven. Many patients live closer to the Occupational Medicine and Wellness Services in New Haven and Hamden, which will remain open after the consolidation. For these patients, access to care will be enhanced as they will be able to obtain services nearer to their homes and without crossing the Quinnipiac Bridge, if they so choose.

#### Maintaining Access to Care

Patients who opt to stay with YNHH for occupational health services will experience a seamless transition and receive the same exceptional care at our locations in New Haven and Hamden that they received in Branford and East Haven. Services will be provided by the same or comparable staff and health records will be available through the Hospital's electronic medical record systems.

Both the New Haven and Hamden Occupational Medicine and Wellness Services have ample capacity to care for any patients displaced by closure of the Branford and East Haven sites. The New Haven and Hamden sites combined performed 23,000 visits in FY 2014. They can easily absorb the roughly 600 visits per month currently handled in Branford and East Haven. These sites have the ability to absorb additional visits of all types. Patients will be scheduled based on the services needed and the staff available at any given location at the time of scheduling. Note that we continue to evaluate capacity for Occupational Medicine and Wellness Services and are prepared to adjust hours, staffing and locations at any time to ensure patient access.

We are also in the process of redeploying staff from the Branford and East Haven sites to the New Haven and Hamden locations. Some employees have relocated already and places are being held for others pending OHCA approval to close. The additional staff will allow more appointments to be scheduled at these locations. There is ample physical space to handle more providers and patients in New Haven and Hamden as well. Some of our larger employers have already begun to transition their employees to alternate YNHH sites and we have been able to accommodate these patients without any difficulty.

In addition, there are 13 non-YNHH occupational health providers in the Branford and East Haven service areas (not including the soon-to-be-opened East Haven location of 203 Urgent Care). We understand that not all of our employers will opt to stay with YNHH after the Branford and East Haven clinics close and these alternatives will continue to exist for their employees. Attached as Exhibit A is a map showing all existing occupational health locations in the service area, including the YNHH locations.

Conclusion

Thank you again for allowing me this opportunity to discuss our consolidation plans. We are confident that closure of the Branford and East Haven sites will have minimal impact on access to care for patients. If anything, it will provide easier access for a significant number of our patients who work and reside in and around New Haven. At the same time, this consolidation will result in cost-savings for YNHH at a time when the efficient delivery of care is critical.

For these reasons, I urge you to approve the CON Application for termination of YNHH's Occupational Medicine and Wellness Services in Branford and East Haven. I would be happy to answer any questions you have.

The foregoing is my sworn testimony.

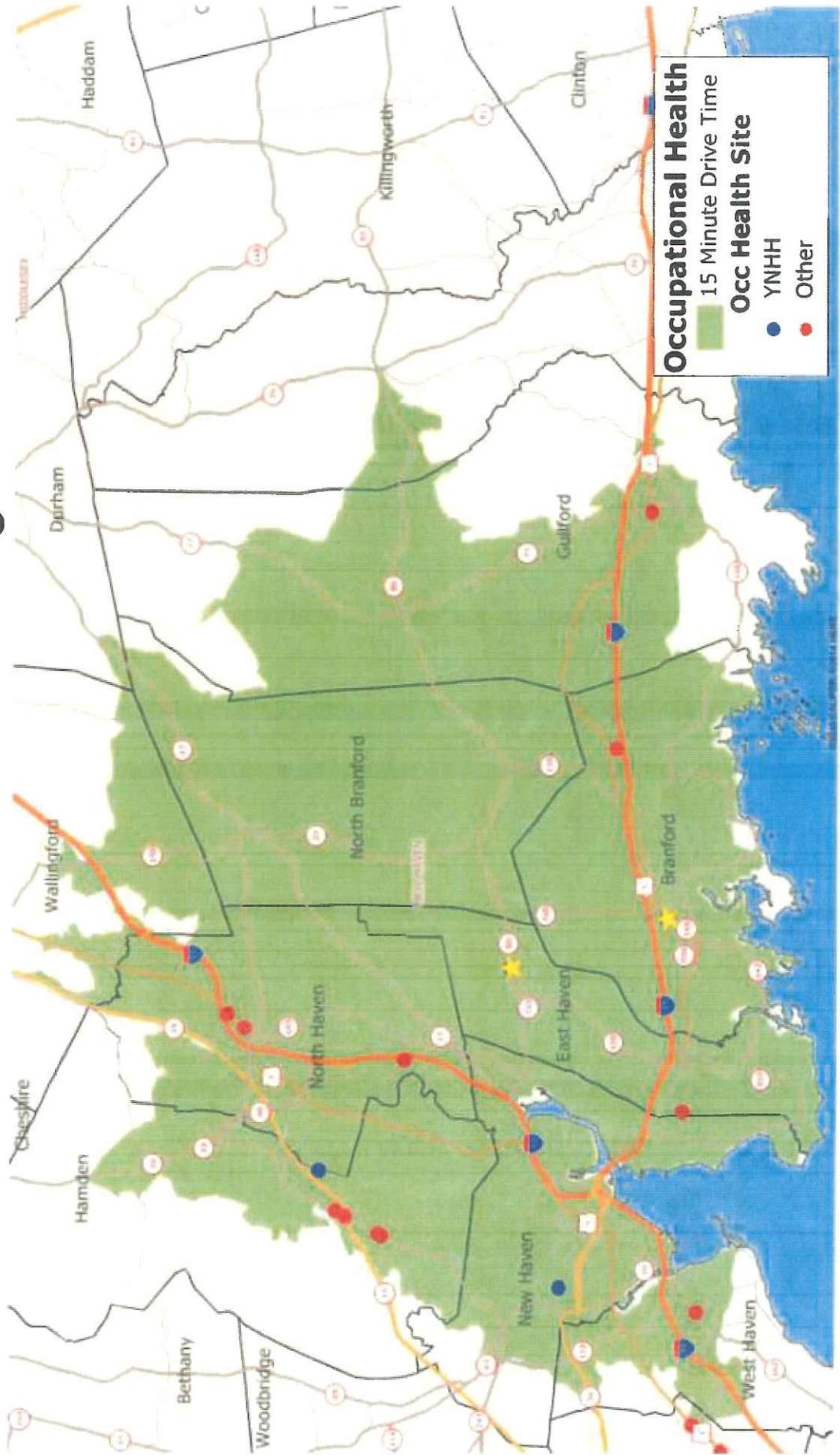
A handwritten signature in blue ink, consisting of stylized, overlapping loops and lines, positioned above a horizontal line.

Jodie Boldrighini  
Director of Occupational and Employee  
Population Health Solutions  
Yale-New Haven Health System

***EXHIBIT A***



# Occupational Health Sites in the Region





**STATE OF CONNECTICUT**  
 DEPARTMENT OF PUBLIC HEALTH  
*Office of Health Care Access*

**TABLE OF THE RECORD**

**APPLICANT:** Yale-New Haven Hospital

**DOCKET NUMBER:** 15-32040-CON

**PUBLIC HEARING:** April 7, 2016

**PLACE:** Branford Recreation Department  
 45 Church Street (2<sup>nd</sup> Floor Activity Room)  
 Branford, CT 06405

<b>EXHIBIT</b>	<b>DESCRIPTION</b>
<b>A</b>	Letter from Yale-New Haven Hospital (Applicant) dated Novemer 17, 2015, enclosing the Certificate of Need (CON) application for the alignment of Yale-New Haven Hospital Occupational Medicine Services in East Haven and Branford; Docket Number: 15-32040, received by OHCA on November 17, 2015. (103 Pages)
<b>B</b>	OHCA's letter to the Applicant dated December 16, 2015, requesting additional information and/or clarification in the matter of the CON application under Docket Number: 15-32040.(3 Pages)
<b>C</b>	Designation letter dated December 16, 2015, of Hearing Officer in the matter of the CON application under Docket Number: 15-32040. (1 page)
<b>D</b>	Applicant's responses to OHCA's letter of December 16, 2015, dated January 20, 2016, in the matter of the CON application under Docket Number: 15-32040, received by OHCA on January 20, 2016. (14 Pages)
<b>E</b>	OHCA's letter to the Applicant dated February 17, 2016, deeming the application complete in the matter of the CON application filed under Docket Number: 15-32040. (1 page)
<b>F</b>	OHCA's letter to the Applicant dated March 1, 2016, regarding hearing logistics in the matter of the CON application filed under Docket Number: 15-32040. (2 pages)

<b>G</b>	OHCA's letter to the Applicant dated March 8, 2016, enclosing an Order of Consolidation of the public hearing with Docket Number: 15-32041 in the matter of the CON application filed under Docket Number: 15-32040. (1 page)
<b>H</b>	OHCA's request for legal notification in the <i>New Haven Register</i> and OHCA's Notice to the Applicant of the public hearing scheduled for April 7, 2016, in the matter of the CON application under Docket Number: 15-32040, March 18, 2016. (4 pages)
<b>I</b>	OHCA's letter to the Applicant dated March 24, 2016, requesting prefile testimony and enclosing issues in the matter of the CON application under Docket Number: 15-32040. (4 pages)
<b>J</b>	Letter from the Applicant to OHCA enclosing notice of appearance of Updike, Kelly & Spellacy, P.C. and Prefile Testimony dated March 31, 2016, in the matter of the CON application under Docket Number: 15-32040, received by OHCA on April 1, 2016, 2015. (14 pages)

Administrative Notice is being taken of the following:

- Yale-New Haven Hospital Certificate of Need for Docket Number: 15-32041-CON to Terminate Outpatient Rehabilitation Services in Branford.



**STATE OF CONNECTICUT**  
DEPARTMENT OF PUBLIC HEALTH  
*Office of Health Care Access*

**TENTATIVE AGENDA**

**Yale New Haven Hospital**

**Docket Number: 15-32040-CON - Proposal to Terminate Occupational Medicine  
and Wellness Services in East Haven & Branford**

**Docket Number: 15-32041- CON - Proposal to Terminate Outpatient Rehabilitation  
Services in Branford**

**April 7, 2016 at 4:00 p.m.**

- I. Convening of the Public Hearing**
- II. Docket Number: 15-32040-CON**
  - A. Applicant's Direct Testimony**
  - B. OHCA's Questions**
- III. Docket Number: 15-32041-CON**
  - A. Applicant's Direct Testimony**
  - B. OHCA's Questions**
- IV. Public Comment**
- V. Closing Remarks**
- VI. Public Hearing Adjourned**

*An Equal Opportunity Provider*

*(If you require aid/accommodation to participate fully and fairly, contact us either by phone, fax or email)*  
410 Capitol Ave., MS#13HCA, P.O.Box 340308, Hartford, CT 06134-0308  
Telephone: (860) 418-7001 Fax: (860) 418-7053 Email: OHCA@ct.gov

\* \* \* COMMUNICATION RESULT REPORT ( APR. 6. 2016 2:44PM ) \* \* \*

FAX HEADER:

TRANSMITTED/STORED : FILE MODE	APR. 6. 2016 2:43PM OPTION	ADDRESS	RESULT	PAGE
556	MEMORY TX	912038634736	OK	4/4

REASON FOR ERROR  
 E-1) HANG UP OR LINE FAIL  
 E-3) NO ANSWER  
 E-2) BUSY  
 E-4) NO FACSIMILE CONNECTION



**STATE OF CONNECTICUT  
 DEPARTMENT OF PUBLIC HEALTH  
 OFFICE OF HEALTH CARE ACCESS**

**FAX SHEET**

**TO:** NANCY ROSENTHAL

**FAX:** 203 863-4736

**AGENCY:** YALE-NEW HVEN HOSPITAL

**FROM:** OHCA

**DATE:** 4/6/16 **Time:** \_\_\_\_\_

**NUMBER OF PAGES:** \_\_\_\_\_  
*(including transmittal sheet)*

**Comments:** Please see attache information regarding tomorrow's hearing for Docket Number 15-32040-CON

**PLEASE PHONE Barbara K. Olejarz IF THERE ARE ANY TRANSMISSION PROBLEMS.**

*Phone: (860) 418-7001 Fax: (860) 418-7053*

**410 Capitol Ave., MS#13HCA  
 P.O. Box 340308  
 Hartford, CT 06134**



**STATE OF CONNECTICUT**  
DEPARTMENT OF PUBLIC HEALTH  
*Office of Health Care Access*

**AGENDA**

**Yale New Haven Hospital**

**Docket Number: 15-32040-CON - Proposal to Terminate Occupational Medicine and Wellness Services in East Haven & Branford**

**Docket Number: 15-32041- CON - Proposal to Terminate Outpatient Rehabilitation Services in Branford**

**April 7, 2016 at 4:00 p.m.**

- I. Convening of the Public Hearing**
- II. Docket Number: 15-32040-CON**
  - A. Applicant's Direct Testimony**
  - B. OHCA's Questions**
- III. Docket Number: 15-32041-CON**
  - A. Applicant's Direct Testimony**
  - B. OHCA's Questions**
- IV. Public Comment**
- V. Closing Remarks**
- VI. Public Hearing Adjourned**

*An Equal Opportunity Provider*

*(If you require aid/accommodation to participate fully and fairly, contact us either by phone, fax or email)*

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Telephone: (860) 418-7001 Fax: (860) 418-7053 Email: OHCA@ct.gov



STATE OF CONNECTICUT  
DEPARTMENT OF PUBLIC HEALTH

Office of Health Care Access

*PUBLIC COMMENT*

**Yale-New Haven Hospital**

**Docket Number: 15-32040-CON to Terminate Occupational Medicine & Wellness Services in East Haven & Branford**

**Docket Number: 15-32041-CON to Terminate Outpatient Rehabilitation Services in Branford**

**April 7, 2016 at 4:00 p.m.**

***INFORMATIONAL SHEET FOR PERSONS  
SIGNING UP TO SPEAK FROM THE GENERAL PUBLIC***

Any and all persons are welcome to make a comment on the record at the public hearing for Docket Numbers: 15-32040-CON and 15-32041- CON. **All those who wish to speak must sign up prior to speaking.**

- Please make sure you have signed up on OHCA's Sign-Up Sheet for the General Public.
- Please only sign up for yourself.
- Individuals who have signed up to speak will be called in the order they appear on the sign-up sheet.
- Your comments should be your own personal opinion.
- Your comments should be limited to **three (3) minutes** or less.
- If you do not wish to speak on the record and would instead like to submit a written comment by mail please do so at your earliest convenience. Such written comments are part of OHCA's administrative record in this matter and have the same weight as all verbal comments made at the hearing. Please address your comments to:

Kimberly R. Martone  
Director of Operations  
Office of Health Care Access  
Division of the Department of Public Health  
410 Capitol Avenue, MS #13 HCA  
P.O. Box 340308  
Hartford, CT 06134-0308

*An Equal Opportunity Provider*

*(If you require aid/accommodation to participate fully and fairly, contact us either by phone, fax or email)*  
410 Capitol Ave., MS#13HCA, P.O.Box 340308, Hartford, CT 06134-0308  
Telephone: (860) 418-7001 Fax: (860) 418-7053 Email: OHCA@ct.gov

**OHCA HEARINGS - EXHIBIT AND LATE FILE FORM**

Applicants: Yale-New Haven Hospital

DN: 15-32041-CON

Hearing Date: April 7, 2016

Time: 4:00 PM

Proposal: Docket Number: 15-32041-CON To Terminate Outpatient Rehabilitation Services in Branford

OHCA  
Exhibit # Description

OHCA Exhibit #	Description
1	
2	
3	
4	
5	

Applicant  
Exhibit #                      Description

<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	
<b>5</b>	

Intervenor  
Exhibit #

Description

	Description
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Informal  
Exhibit #

Description

1	
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Applicant Late File #	Description	Due Date	Rec'd
1	<del>Difference between the O/P Rehab Sites-Physical Plant Considerations</del>		
2			
3	Physical Plant Differences between the YNHHS Locations offering Outpatient Rehabilitative Services		
4			
5			
6			

Intervenor Late File #	Description	Due Date	Rec'd
1			
2			
3			
4			
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6			

Notes:

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**PUBLIC HEARING  
 APPLICANT  
 SIGN UP SHEET**

April 7, 2016  
 4:00 p.m.

Docket Numbers: 15-32041-CON

Yale-New Haven Hospital

Docket Number: 15-32041-CON To Terminate Outpatient Rehabilitation Services in Branford

PRINT NAME	Phone	Fax	Representing Organization
AMIT RASTOGI	203 502 6502		Northeast Medical Group Yale New Haven Health
JENNIFER Fusco	203 786 8316		Yale-New Haven
Nancy Rosenthal	203-688-5721		NY R
Michael Dimenstein	203-688-4472		YNHH

STATE OF CONNECTICUT  
DEPARTMENT OF PUBLIC HEALTH  
OFFICE OF HEALTH CARE ACCESS

YALE-NEW HAVEN HOSPITAL

DOCKET NUMBER: 15-32040-CON  
PROPOSAL TO TERMINATE OCCUPATIONAL MEDICINE  
AND WELLNESS SERVICES IN EAST HAVEN & BRANFORD

DOCKET NUMBER: 15-32041-CON  
PROPOSAL TO TERMINATE OUTPATIENT REHABILITATION  
SERVICES IN BRANFORD

APRIL 7, 2016

4:00 P.M.

BRANFORD REC CENTER  
45 CHURCH STREET  
BRANFORD, CONNECTICUT

POST REPORTING SERVICE  
HAMDEN, CT (800) 262-4102

HEARING RE: YALE-NEW HAVEN HOSPITAL  
APRIL 7, 2016

1 . . .Verbatim proceedings of a hearing  
2 before the State of Connecticut, Department of Public  
3 Health, Office of Health Care Access, in the matter of  
4 Yale-New Haven Hospital, proposal to terminate  
5 occupational medicine and wellness services in East Haven  
6 & Branford and proposal to terminate outpatient  
7 rehabilitation services in Branford, held at the Branford  
8 Rec Center, 45 Church Street, Branford, Connecticut, on  
9 April 7, 2016 at 4:03 p.m. . . .

10  
11  
12  
13 HEARING OFFICER KEVIN HANSTED: Good  
14 afternoon, everyone. This public hearing before the  
15 Office of Health Care Access, identified by Docket Nos.  
16 15-32040-CON and 15-32041-CON, is being held on April 7th  
17 to consider Yale-New Haven Hospital's applications to  
18 terminate occupational medicine and wellness services and  
19 outpatient rehab services in East Haven and Branford.

20 This public hearing is being held pursuant  
21 to Connecticut General Statute, Section 19a-639a, and  
22 will be conducted as a contested case, in accordance with  
23 the provisions of Chapter 54 of the Connecticut General  
24 Statutes.

HEARING RE: YALE-NEW HAVEN HOSPITAL  
APRIL 7, 2016

1 My name is Kevin Hansted, and I have been  
2 designated as the Hearing Officer for this application.

3 The staff members assigned to this case  
4 are Karen Roberts and Jack Huber, and the hearing is  
5 being recorded by Post Reporting Services.

6 In making its decision, OHCA will consider  
7 and make written findings concerning the principles and  
8 guidelines set forth in Section 19a-639 of the  
9 Connecticut General Statutes.

10 Yale-New Haven Hospital has been  
11 designated as a party in this proceeding.

12 At this time, I will ask staff to read  
13 into the record those documents already appearing in  
14 OHCA's Table of the Record in this case. All documents  
15 have been identified in the Table of the Record for  
16 reference purposes. Mr. Huber?

17 MR. JACK HUBER: Thank you. Jack Huber  
18 for the record. Prior to today's hearing, a copy of each  
19 Table of the Record was conveyed to the Applicant. The  
20 Table of the Record identifies Exhibits A through J for  
21 the Occupational Medicine and Wellness Services Proposal.

22 Additionally, the Table of the Record  
23 identifies Exhibits A through J for the Outpatient  
24 Rehabilitation Services Proposal. If you and the

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1 Applicant have no objection, in the interest of time, I  
2 would like to suggest that we forego the formal reading  
3 of each individual exhibit into each of the records and  
4 offer the said Tables of the Record in their entirety for  
5 inclusion in today's proceedings.

6 HEARING OFFICER HANSTED: Any objection,  
7 Counsel?

8 MS. JENNIFER FUSCO: No. The Applicant  
9 has no objection.

10 HEARING OFFICER HANSTED: Okay. Thank  
11 you. And, for today's hearing, we will first hear from  
12 the Applicant for an overview of the first project, and  
13 then we will go to OHCA's questions.

14 After that point, we'll take a short break  
15 and then proceed to the Applicant's presentation on the  
16 second project, followed by OHCA's questions again.

17 At that point, I'll take another quick  
18 break, and then we'll hear any public comment we might  
19 have on both applications at the same time.

20 So would all of the individuals, who are  
21 going to testify, please stand, raise your right hand,  
22 and be sworn in by the court reporter?

23 (Whereupon, the parties were duly sworn  
24 in.)

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1 HEARING OFFICER HANSTED: And would  
2 everyone that just took an oath please identify  
3 yourselves for the record?

4 MR. AMIT RASTOGI: Amit Rastogi, Interim  
5 CEO, Northeast Medical Group.

6 MS. JODIE BOLDRIGHINI: Jodie Boldrighini,  
7 Director of Occupational Health and Employee Population  
8 Health Solutions.

9 MS. NANCY ROSENTHAL: Nancy Levitt  
10 Rosenthal, VP of Strategy and Regulatory Planning.

11 MR. JOHN TARUTIS: John Tarutis, Executive  
12 Director of Physical Medicine and Rehabilitation, Yale-  
13 New Haven Hospital.

14 MR. MATT McKENNAN: Matt McKennan, Yale-  
15 New Haven Health System Senior Planner.

16 MS. LINDA PETTINE: Linda Pettine,  
17 Associate Director, Yale-New Haven Health, Occupational  
18 Medicine and Wellness Services.

19 MR. JOHN MESSINA: John Messina, Yale-New  
20 Haven Health Services.

21 HEARING OFFICER HANSTED: Okay, thank you,  
22 all. And just as a reminder, for those of you who  
23 submitted pre-filed testimony, before you testify today,  
24 just adopt that on the record for me, and just, if you

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1 would, just state your name again before you testify.

2 At this time, Attorney Fusco, you may  
3 proceed.

4 MS. FUSCO: Dr. Rastogi is going to begin  
5 our presentation.

6 HEARING OFFICER HANSTED: Sure.

7 MR. RASTOGI: Good afternoon, Officer  
8 Hansted.

9 HEARING OFFICER HANSTED: Good afternoon.

10 MR. RASTOGI: And members of the OHCA  
11 staff. My name is Dr. Amit Rastogi. I'm the Interim CEO  
12 of Northeast Medical Group.

13 Northeast Medical Group is the medical  
14 foundation affiliated with the Yale-New Haven Health  
15 System. I would like to adopt my pre-filed testimony.

16 HEARING OFFICER HANSTED: Thank you.

17 MR. RASTOGI: With me today is my  
18 colleague, Jodi Boldrighini, the Director of Occupational  
19 and Employee Population Health Solutions at Yale-New  
20 Haven Hospital.

21 We thank you for this opportunity to speak  
22 to you about Yale-New Haven's health plan to consolidate  
23 its occupational medicine and wellness services at  
24 existing locations in New Haven and Hamden and to close

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1 under-utilized sites in Branford and East Haven.

2 My written testimony offers some context  
3 for our decision to terminate the Branford and East Haven  
4 occupational health sites, along with a Branford  
5 rehabilitation site that I will discuss in remarks later  
6 today.

7 Yale-New Haven is continually evaluating  
8 its clinical service offerings to ensure that it provides  
9 the highest quality care in the most efficient and cost-  
10 effective manner.

11 With respect to outpatient services, this  
12 often means eliminating duplicative sites that lead to  
13 inefficient delivery of care at an excess cost.

14 This type of planning has become  
15 increasingly important in light of the major financial  
16 challenges facing Yale-New Haven and other hospitals in  
17 Connecticut.

18 It is important to us that both OHCA and  
19 members of the Branford and East Haven communities  
20 understand why we have chosen to close these facilities.

21 Without getting into the various  
22 statistics included in our CON submissions and testimony,  
23 we have looked at the data and concluded that Yale-New  
24 Haven can accommodate all of its employee and

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1 occupational health patients at two locations.

2 We decided to close the Branford and East  
3 Haven facilities and to leave New Haven and Hamden open,  
4 in part because many of our occupational health patients  
5 work and live in and around New Haven.

6 Regardless of whether these individuals  
7 choose to serve, sorry, choose to access services from  
8 work or from home, the facilities in New Haven and Hamden  
9 provide better access than facilities on the shoreline.

10 We also want to affirm in this public  
11 forum Yale-New Haven's commitment to care for any and all  
12 occupational health clients displaced by this proposal.

13 The remaining Yale-New Haven occupational  
14 health sites have ample capacity to absorb Branford and  
15 East Haven patients.

16 As mentioned in our CON submissions, we  
17 will increase hours, staff and locations, as needed, to  
18 ensure adequate access to care for our patients.

19 While we are doing our best to transition  
20 Yale-New Haven occupational health patients, we  
21 understand that there will be some employers and  
22 employees that opt not to continue with our service once  
23 the Branford and East Haven clinics close.

24 For these individuals, there are 13 non-

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1 hospital occupational medicine providers in the immediate  
2 service area, and this does not include a new 203 Urgent  
3 Care site that is scheduled to open in Yale-New Haven's  
4 existing space in East Haven.

5 We are confident that between the  
6 remaining Yale-New Haven sites these optional, sorry,  
7 these non-hospital providers, patients will have adequate  
8 access to occupational health care and freedom of choice.

9 In conclusion, closure of the Branford and  
10 East Haven occupational medicine and wellness services  
11 will allow Yale-New Haven to adapt to the changing health  
12 care environment, reduce costs, eliminate duplicative  
13 services, all while preserving access to care.

14 Consolidation of this type is critical at  
15 a time when hospitals are facing significant financial  
16 challenges. For the Yale-New Haven health system, this  
17 includes an anticipated tax burden of \$180 million for FY  
18 2016.

19 We have thoroughly and carefully  
20 considered our options with respect to occupational  
21 health and believe that the proposal before you  
22 represents the best option for Yale-New Haven and our  
23 patients.

24 I, therefore, urge you to approve the CON

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1 application. Thank you again for your time and  
2 consideration, and I would like to introduce Ms.  
3 Boldrighini.

4 HEARING OFFICER HANSTED: Thank you,  
5 Doctor.

6 MS. BOLDRIGHINI: Good afternoon, Hearing  
7 Officer Hansted and members of the OHCA staff.

8 My name is Jodie Boldrighini, and I'm the  
9 Director of Occupational Health and Employee Population  
10 Health Solutions for Yale-New Haven Hospital. I would  
11 like to adopt my pre-filed testimony.

12 HEARING OFFICER HANSTED: Thank you.

13 MS. BOLDRIGHINI: So, first, thank you for  
14 the opportunity to speak in support of Yale-New Haven's  
15 proposal to consolidate the occupational medicine and  
16 wellness service locations.

17 There are five areas I'd like to review in  
18 my testimony today. The first is give a brief background  
19 and history to the program, second, to shed some light on  
20 the decision to reduce the number of sites as part of our  
21 ambulatory space and program optimization planning,  
22 third, to discuss our relationships with local employers,  
23 fourth, confirm our commitment to collaborating with  
24 employers on a transition plan that provides seamless

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1 care, and, last, but not least, confirm our commitment to  
2 our staff and redeployment of their positions.

3 So, first, historically, it's important to  
4 note that the occupational health service line at Yale-  
5 New Haven was started as an employee health program for  
6 ourselves. That was and still remains the core business  
7 of this department and this service line.

8 Of note, we have three regions. We serve  
9 our employees in the Greenwich territory, Bridgeport  
10 territory and New Haven territory, and, in the New Haven  
11 territory, our employee, internal employee business makes  
12 up 86 percent of the business, so that is our primary  
13 core of service of this department.

14 As part of our ambulatory space planning  
15 and optimization plan, we did an internal evaluation of  
16 our department and program, Dr. Rastogi mentioned this,  
17 and, through the evaluation, we determined that our  
18 external client volume really could be best served with  
19 two sites.

20 So when we started evaluating those  
21 locations, between Hamden, New Haven, East Haven and  
22 Branford, it became clear that the two sites that were  
23 ideal to serve the employers we have relationships with  
24 and their employees was New Haven and Hamden, reason

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1 being that the majority of employers in the marketplace  
2 were in those two towns, Hamden and New Haven, and their  
3 employees lived primarily in New Haven and was easily  
4 accessible to get to Hamden and New Haven.

5 There was not a large need that we saw in  
6 the Branford and East Haven marketplace for the service,  
7 so we felt the best plan would be focused on those two  
8 sites in New Haven and Hamden.

9 Our relationships with employers is  
10 something that's unique to this department, and it's a  
11 one off relationship directly with the hospital and the  
12 employer.

13 It's a non-exclusive pricing arrangement,  
14 so what that means is the employer that has a  
15 relationship with us is not bound to only use us. It's  
16 non-exclusive.

17 Even if we have an agreement with them,  
18 they can choose to go to 203 Urgent Care. They can go to  
19 any other competitor at their convenience. And now that  
20 there are many other sites coming up, there are other  
21 more convenient locations for them to access.

22 This service is not available to the  
23 general public. It is only accessible through an  
24 employer relationship with Yale-New Haven, and none of

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1 the services are reimbursable by Medicaid or Medicare.

2 As I mentioned earlier, we're committed to  
3 working with the employers and collaborating with them to  
4 make sure they have a seamless transition for their  
5 employees.

6 We began this process months ago when we  
7 filed the public notice of our intention to file the CON.  
8 We notified our clients. We've been working with them  
9 for many months, and some have elected on their own, in  
10 light of the possibility of these sites closing, to start  
11 moving their patients to the other, their employees to  
12 the other sites. That transition has occurred  
13 seamlessly, and we have not heard any complaints.

14 So as I mentioned before, New Haven and  
15 Hamden locations have adequate capacity to accommodate  
16 Branford and East Haven employees of the employers we  
17 have agreements with, and, if the need arises, we are  
18 well prepared to analyze the volume and capacity, if we  
19 need to extend hours, or add staff.

20 So the last and most important point is  
21 our commitment to staff redeployment. Through both of  
22 these hearings, we've expressed our commitment to our  
23 employees and have worked diligently with our Human  
24 Resources Department to make sure all employees were

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1 placed and no one will be displaced, so I'm here to  
2 confirm that with you again.

3 So, in closing, as Dr. Rastogi said, we're  
4 comfortable that our proposal to consolidate occupational  
5 health services will ensure access to care for employees  
6 that work for the employers we have relationships with.

7 It also represents a more efficient and  
8 cost-effective way of providing occupational health  
9 services from the Yale-New Haven health system to the  
10 local employers in the area.

11 We, therefore, urge you to approve our CON  
12 application. Thank you, and we're available for  
13 questions.

14 HEARING OFFICER HANSTED: Thank you.

15 MS. FUSCO: That concludes our  
16 presentation.

17 HEARING OFFICER HANSTED: Okay, thank you,  
18 Attorney Fusco. OHCA does have some questions.

19 MR. HUBER: I'll begin with several  
20 questions on the occupational medicine part of the  
21 proposal that you're bringing forth.

22 Dr. Rastogi, you indicate in your pre-  
23 filed testimony that occupational health services are  
24 available exclusively for employees of Yale-New Haven

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1 Health Services, and companies and municipalities make  
2 arrangements with the hospital for this type of care.

3 I believe you indicated in your testimony  
4 that 86 percent of the business for occupational medicine  
5 involved Yale Community Health Services employees?

6 MS. BOLDRIGHINI: Correct.

7 MR. HUBER: That's correct?

8 MS. BOLDRIGHINI: Um-hum. In the New  
9 Haven territory.

10 MR. HUBER: In the New Haven territory.

11 HEARING OFFICER HANSTED: How are you  
12 defining the New Haven territory?

13 MS. BOLDRIGHINI: So that includes all of  
14 our sites. It's the New Haven and surrounding territory,  
15 so all the sites in New Haven, Branford, East Haven and  
16 Hamden.

17 HEARING OFFICER HANSTED: Okay, so, it  
18 includes Branford and East Haven?

19 MS. BOLDRIGHINI: Yes.

20 HEARING OFFICER HANSTED: Okay.

21 MR. HUBER: Do you know what the  
22 percentage breakout is by the four individual sites  
23 percent?

24 MS. BOLDRIGHINI: I don't.

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1 MR. HUBER: You don't, okay. I guess  
2 either of you could respond. Could you please identify  
3 for us the municipalities that contracted with the  
4 hospital for occupational services?

5 MS. BOLDRIGHINI: So the, and I think I  
6 may turn to my colleague, Linda, for some help on this,  
7 the Town of Branford, Guilford, East Haven.

8 MS. PETTINE: East Haven, North Haven.

9 MS. BOLDRIGHINI: North Haven.

10 MS. PETTINE: Madison, limited services.

11 MS. BOLDRIGHINI: Madison has limited  
12 services.

13 MS. PETTINE: We also have West Haven.

14 MS. BOLDRIGHINI: West Haven. It's  
15 important to note, though, that, even though we have  
16 relationships with them, it is a non-exclusive  
17 relationship, so we have encountered where those clients  
18 do for some visits go elsewhere, as well.

19 MR. HUBER: Okay. And could you identify  
20 for us some of the major area businesses that have  
21 contracted with the hospital for these services?

22 MS. BOLDRIGHINI: Specifically for those  
23 locations? For East Haven and Branford?

24 MR. HUBER: No, just in terms of the

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1 general.

2 MS. BOLDRIGHINI: In general in New Haven?  
3 Do you want to come up, Linda?

4 HEARING OFFICER HANSTED: Why don't you  
5 come up in front of a microphone?

6 MS. PETTINE: Hello. I'm Linda Pettine.  
7 I'm the Associate Director for Occupational Medicine and  
8 Wellness Services.

9 So we serve a large number of companies in  
10 the New Haven area; United Illuminating, Gaylord  
11 Hospital, Alcoa, Honeywell, are some of our larger  
12 clients. The Regional Water Authority, Connecticut  
13 Transit, to name a few. They're some of our larger  
14 clients.

15 MR. HUBER: Thank you.

16 MS. KAREN ROBERTS: For some of the ones  
17 that you just mentioned -- I'm sorry. Karen Roberts,  
18 OHCA staff. Could you clarify their location? I think  
19 we know where Gaylord is, but United Illuminating is  
20 located in?

21 MS. PETTINE: In Orange.

22 MS. ROBERTS: Orange? And Alcoa?

23 MS. PETTINE: Is in Branford. Who else  
24 did I say?

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1 MS. ROBERTS: Honeywell.

2 MS. PETTINE: Honeywell is in North  
3 Branford.

4 MS. ROBERTS: And Regional Water?

5 MS. PETTINE: Water Authority is in New  
6 Haven. Connecticut Transit is in Hamden and in Stamford.

7 MS. ROBERTS: Okay.

8 MR. HUBER: Jack Huber for the record. It  
9 is mentioned in the pre-filed testimony that a 203 Urgent  
10 Care will soon be opening in the Foxon Road, East Haven  
11 space that is being vacated by the hospital.

12 Do you know whether this provider plans on  
13 offering a full array of occupational health services at  
14 this site, along with their urgent care services?

15 MS. BOLDRIGHINI: Yes. It's my  
16 understanding that he's committed to providing urgent  
17 care services, along with occupational health services,  
18 out of the East Haven site.

19 MR. HUBER: And this is something that you  
20 have verified with the Director?

21 MS. BOLDRIGHINI: Yes. He signed a  
22 letter.

23 MS. FUSCO: Yes. There's a letter of  
24 support for our proposal in there from him, but,

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1 separately, you've spoken to him, right?

2 MS. BOLDRIGHINI: Oh, yes.

3 MS. FUSCO: About what he's providing.

4 MS. BOLDRIGHINI: Yes, and he's anxiously  
5 awaiting for us to vacate the space, because he wants to  
6 open full-time.

7 HEARING OFFICER HANSTED: Now will he be  
8 offering the same services that are currently being  
9 provided, or will those be scaled back or increased?

10 MS. BOLDRIGHINI: It's my understanding  
11 it's the same, but I've not seen a side-by-side analysis  
12 of the services, but, yes.

13 HEARING OFFICER HANSTED: Okay, that's  
14 fine. Thank you.

15 MR. HUBER: In the review of your  
16 occupational services, you found the way these services  
17 were provided to be duplicative and that each of the four  
18 service sites possessed excess capacity.

19 After operations at the four sites were  
20 analyzed, you determined that processes at the sites  
21 could be made more efficient, which would, in turn,  
22 increase patient throughput and create even more  
23 operating capacity.

24 To what degree has increasing patient

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1 throughput improved service capacity over the service  
2 capacity that was originally observed?

3 MS. BOLDRIGHINI: We're still in the  
4 process of working through that, but, you know, improving  
5 workflow and utilizing our electronic EMR more  
6 efficiently we feel will assist in increasing capacity,  
7 but we don't have a value assigned to that.

8 HEARING OFFICER HANSTED: And just for the  
9 record, EMR is Electronic Medical Records?

10 MS. BOLDRIGHINI: Yes, correct.

11 HEARING OFFICER HANSTED: Thank you.

12 MR. HUBER: Also mentioned in that pre-  
13 file is that employers enter into a non-exclusive pricing  
14 arrangement for the hospital. It is the employers, along  
15 with worker's compensation carriers, that pay for the  
16 majority of the occupational health services provided by  
17 the hospital.

18 Has the pricing structure been the same  
19 for the occupational health services offered at each of  
20 the four sites?

21 MS. BOLDRIGHINI: Yes.

22 MR. HUBER: And will that remain the same  
23 at the two remaining sites?

24 MS. BOLDRIGHINI: Yes.

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1 MR. HUBER: The New Haven and Hamden sites  
2 combined performed 22,000 visits in fiscal year 2014.  
3 You indicate that they can easily absorb 600 visits per  
4 month currently handled in the Branford and East Haven  
5 sites.

6 How do you envision that the 600 visits  
7 per month will be distributed between the New Haven and  
8 Hamden sites?

9 MS. BOLDRIGHINI: It varies by visit type  
10 and seasonal volume and capacity, but moving staff back  
11 from the East Haven and Branford site, using that staff  
12 to go to Hamden and New Haven, we will have the ability  
13 to staff up to accommodate more capacity.

14 MR. HUBER: Since the CON was filed, has  
15 Yale continued to accept new occupational medicine  
16 patients at the East Haven and Branford locations?

17 MS. BOLDRIGHINI: That's a good question.  
18 I don't believe we have. That's my understanding, but we  
19 have to check. We're still seeing patients, but you  
20 asked new clients?

21 MR. HUBER: We're talking about new  
22 clients.

23 MS. BOLDRIGHINI: New clients. No, I  
24 don't believe we've brought on any new clients. We're

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1 waiting to learn the determination of the CON process.

2 We can confirm that.

3 MR. HUBER: Is there a likelihood that  
4 either the New Haven or Hamden sites will experience  
5 either a backlog or a waiting list situation in the  
6 future?

7 MS. BOLDRIGHINI: That is a possibility,  
8 but we're committed to assess the volume and capacity and  
9 staffing needs on a regular basis to accommodate any  
10 influx in volume.

11 What I didn't mention before is, when we  
12 started reaching out to our employees months ago, at the  
13 time we posted the public notice, there are some  
14 employers that we feel will fall off, due to attrition  
15 and not want to make the trip, so we can't predict what  
16 volume will stay and what volume will go. We have an  
17 idea, but we plan on tracking that closely and staffing  
18 accordingly, and, if we need to flex hours if the demand  
19 and needs are there, we will do so.

20 MR. HUBER: Thank you. That concludes my  
21 line of questioning.

22 MS. ROBERTS: Karen Roberts, OHCA staff.  
23 I have one further question on this CON. It regards the  
24 utilization projections specific, or the utilization of

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1 both historical and projected for the Branford location.

2 In your completeness responses, you  
3 provide us with the breakdown of historical and projected  
4 for FY '16 utilization by site.

5 For the Branford location, it has  
6 increased in volume for each of the three fiscal years;  
7 '13, '14 and '15, and, using the two months actual that  
8 you provided for '16 and annualizing it, it would still  
9 show a further increase.

10 Could you expand more on the reasoning  
11 regarding the closure or the decision to close the  
12 Branford location when compared to other locations that  
13 will remain in operation? And, in particular, you  
14 mentioned that one of your major employers is actually  
15 located in Branford, so could you go further with that  
16 discussion?

17 MS. BOLDRIGHINI: So in looking at  
18 comparing the sites, when we looked at New Haven, Hamden,  
19 Branford and East Haven and the marketplace in the area,  
20 there are always going to be one or two large employers  
21 per service area that need services, but one or two can't  
22 support the full expense or cost of running a standalone  
23 site, so, when we look, the marketplace in East Haven and  
24 Branford is significantly less than New Haven and Hamden.

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1                   There are going to be one or two clearly  
2 large employers in each territory, but it's not enough to  
3 maintain the site, and we do feel we have capacity to  
4 handle that volume at the other locations.

5                   MS. ROBERTS: Do you know if there's any  
6 particular reason that volume would have increased, or is  
7 that just a small increase trending upward?

8                   MS. BOLDRIGHINI: I mean, to me, it's a  
9 small increase trending upwards. I know Linda can speak  
10 to this, as well, but, at one point, we did move some of  
11 our employee volume out to that site, so we expected to  
12 see a spike of our own internal employees.

13                   MS. ROBERTS: Yale employee volume?

14                   MS. BOLDRIGHINI: Yeah. So we can control  
15 where those employees go, so I know that contributed to a  
16 part of that spike.

17                   I can't attribute that to any one large  
18 new employer we brought on, so I have to say a good  
19 portion that was from the employee physicals we moved out  
20 there.

21                   MS. ROBERTS: Thank you.

22                   HEARING OFFICER HANSTED: Thank you,  
23 Karen. Is there a -- with respect to volume at an  
24 occupational center, is there a national standard or even

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1 a Connecticut standard, whereby a reasonable volume is  
2 calculated?

3 MS. BOLDRIGHINI: I don't know the answer  
4 to that.

5 HEARING OFFICER HANSTED: Okay.

6 MS. BOLDRIGHINI: Do you know?

7 MS. PETTINE: For a standalone clinic, no.  
8 That, I don't know. They're usually volume benchmarks or  
9 by per provider, and Branford does not support -- the  
10 Branford office and the East Haven office for their occ  
11 med business do not see as many patients by a provider as  
12 any of our other locations.

13 HEARING OFFICER HANSTED: Okay. All  
14 right, thank you. That concludes OHCA's questions on  
15 this particular Docket number, 32040.

16 We're going to take a short break, and  
17 let's make it, well, we'll make it 10 minutes, and we'll  
18 go back on the record at that time.

19 (Off the record)

20 HEARING OFFICER HANSTED: Okay. Turning  
21 now to Docket No. 32041, Attorney Fusco, if you want to  
22 proceed with your opening presentation?

23 MS. FUSCO: Yup. And, once again, Dr.  
24 Rastogi is going to give the first part of our

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1 presentation.

2 HEARING OFFICER HANSTED: Okay.

3 MR. RASTOGI: Great. Good afternoon,  
4 Hearing Officer Hansted and members of the OHCA staff.  
5 My name is Dr. Amit Rastogi, and I'm the Interim CEO of  
6 Northeast Medical Group. NEMG is the medical foundation  
7 affiliated with the Yale-New Haven health system. I  
8 would like to adopt my pre-filed testimony.

9 HEARING OFFICER HANSTED: Thank you.

10 MR. RASTOGI: With me today is my  
11 colleague, John Tarutis, the Executive Director of  
12 Physical Medicine and Rehab at the Yale-New Haven  
13 Hospital.

14 We thank you for this opportunity to speak  
15 about Yale-New Haven health plans to consolidate its  
16 outpatient rehab services at existing locations in  
17 Guilford, New Haven, Hamden, Milford and Old Saybrook to  
18 close an under-utilized site in Branford.

19 My written testimony offers some context  
20 for our decision to terminate the Branford outpatient  
21 rehab site, along with occupational health sites in  
22 Branford and East Haven that I discussed in my remarks  
23 earlier today.

24 Yale-New Haven is continually evaluating

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1 its clinical service offerings to ensure that it provides  
2 the highest quality care in the most efficient and cost-  
3 effective manner.

4 With respect to outpatient services, this  
5 often means eliminating duplicative sites that lead to  
6 inefficient delivery of care and excess cost.

7 This type of planning has become  
8 increasingly important, in light of the major financial  
9 challenges facing Yale-New Haven and other hospitals in  
10 Connecticut.

11 It is important to both of us that both  
12 OHCA and, sorry, and members of the Branford community  
13 understand why we have chosen to close Branford  
14 rehabilitation service.

15 Without getting into the various  
16 statistics included in our CON submissions and testimony,  
17 we have looked at the data and concluded that Yale-New  
18 Haven can accommodate all of its outpatient rehab  
19 patients at its remaining seven sites.

20 We chose to close Branford for several  
21 reasons. First, it's located just a few miles from  
22 another Yale-New Haven rehab site in Guilford, and the  
23 duplication of services in neighboring communities can be  
24 both inefficient and costly.

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1                   As Mr. Tarutis will discuss, other Yale-  
2 New Haven sites have enhanced rehabilitation services and  
3 amenities and access to specialty positions and  
4 therapists not available in Branford.

5                   Because we intend to close the  
6 occupational health service in Branford, pending OHCA  
7 approval, it makes sense to reassign occupational health-  
8 based rehab patients, as well.

9                   By closing outpatient rehabilitation in  
10 Branford, we are allowing our cardiology service to  
11 repurpose the space at a cost savings for the hospital.

12                   We also want to affirm in this public  
13 forum Yale-New Haven's commitment to care for any and all  
14 outpatient rehabilitation patients displaced by this  
15 proposal.

16                   You heard me testify earlier that the  
17 remaining Yale-New Haven occupational health sites have  
18 ample capacity to absorb Branford and East Haven  
19 patients. This includes both medical and rehabilitation  
20 visits.

21                   The remaining seven outpatient  
22 rehabilitation sites can also accommodate the non-  
23 occupational health rehabilitation business from Branford  
24 and can be staffed up as necessary to meet patient

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1 demand.

2 As mentioned in our CON submissions, we  
3 will increase hours, staff and locations, as needed, to  
4 ensure adequate access to care for our patients.

5 While we're doing our best to transition  
6 Yale-New Haven outpatient rehabilitation patients, we  
7 understand that there will be some that opt not to  
8 continue with our service once the Branford clinic  
9 closes.

10 For these individuals, there are 23 non-  
11 hospital outpatient rehabilitation providers in the  
12 immediate service area. We are confident that between  
13 the remaining Yale-New Haven sites and these non-hospital  
14 providers patients will have adequate access to  
15 outpatient rehabilitation services and freedom of choice.

16 We are also confident that there will be  
17 continued access to care for Medicaid and indigent  
18 patients, who currently receive outpatient rehabilitation  
19 services in Branford.

20 As previously mentioned, there will be  
21 seven remaining Yale-New Haven outpatient rehabilitation  
22 locations. Each of these locations takes Medicaid and  
23 care for patients, regardless of their ability to pay.

24 In conclusion, closure of the Branford

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1 outpatient rehabilitation service will allow Yale-New  
2 Haven to adapt to a changing health care environment,  
3 reduce costs, and eliminate duplicative services, all  
4 while preserving the access to care.

5 Consolidation of this type is critical at  
6 a time when hospitals are facing significant financial  
7 challenges. For the Yale-New Haven health system, this  
8 includes an anticipated tax burden of \$180 million for FY  
9 2016.

10 We have thoroughly and carefully  
11 considered our options with respect to outpatient  
12 rehabilitation and believe that the proposal before you  
13 represents the best option for Yale-New Haven and for our  
14 patients.

15 I, therefore, urge you to approve this CON  
16 application. Thank you again for your time and  
17 consideration, and I would like to now introduce Mr.  
18 Tarutis.

19 HEARING OFFICER HANSTED: Thank you,  
20 Doctor.

21 MR. TARUTIS: Good afternoon, Hearing  
22 Officer Hansted and members of the OHCA staff. My name  
23 is John Tarutis. I'm the Executive Director of Physical  
24 Medicine and Rehabilitation Services at Yale-New Haven

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1 Hospital. I would like to adopt my pre-filed testimony.

2 Thank you for this opportunity to speak in  
3 support of Yale-New Haven's proposal to consolidate its  
4 outpatient rehabilitation services.

5 I would like to provide you with some  
6 background on our outpatient rehab services and briefly  
7 discuss the enhanced services available at alternative  
8 Yale-New Haven sites.

9 I was part of an internal evaluation of  
10 outpatient rehab services at Yale-New Haven, which led to  
11 our decision to close the Branford site.

12 There are several reasons why the Branford  
13 site was chosen for closure over other sites, including  
14 volume in Branford has declined in recent years.

15 This is due, in part, to a weak economy  
16 and a decline in occupational health visits, in general,  
17 including rehabilitation visits.

18 Also, this site originated as a Hospital  
19 of St. Raphael site, and we saw a transition-related  
20 decline in non-occupational health-based rehabilitation  
21 visits after the acquisition of Yale-New Haven Hospital.

22 Yale-New Haven plans to close the  
23 occupational health service in Branford, because the  
24 occupational health patients often have medical and

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1 rehabilitation visits on the same day. It makes sense to  
2 have these services co-located in the same building.  
3 Patients will be able to obtain both services at our  
4 clinics in New Haven and Hamden going forward.

5 The Branford site is located just 7.4  
6 miles from our outpatient rehabilitation site in  
7 Guilford. The Guilford site offers comparable services  
8 and is easily accessible for Branford area residents.

9 These are the types of duplicative  
10 services in the neighboring communities that Yale-New  
11 Haven is looking to eliminate, in order to deliver care  
12 in the most efficient, cost-effective manner.

13 Our patients will have continued and, in  
14 many cases, enhance access to outpatient rehab services  
15 once the Branford clinic closes. Alternative Yale-New  
16 Haven rehabilitation sites offer additional services and  
17 amenities, as well as access to specialty physicians and  
18 specialty therapists not available in Branford.

19 For example, the Guilford rehab site is  
20 co-located with orthopedics on site and certified hand  
21 therapists on staff.

22 Long Wharf rehabilitation service is co-  
23 located with Yale-New Haven Spine Clinic and physiatry  
24 physicians on that site.

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1 Co-location of rehabilitation and  
2 physician services allows for ease of referral and  
3 consultation.

4 Our clinics in New Haven are newer,  
5 larger, and provide easier access to many city residents,  
6 in terms of location, parking and proximity to public  
7 transportation.

8 New Haven city residents make up a large  
9 percentage of Medicaid patients seen in Branford. These  
10 patients and, in fact, all Medicaid and indigent patients  
11 will have continued access to care at existing Yale-New  
12 Haven sites.

13 As Dr. Rastogi said, we are comfortable  
14 that our proposal to consolidate outpatient  
15 rehabilitation services will ensure and, in many cases,  
16 enhance access to care for all of our patients.

17 It also represents a more efficient and  
18 more cost-effective way of providing outpatient rehab  
19 services to the community.

20 We, therefore, urge you to approve our CON  
21 application. Dr. Rastogi and I are available to answer  
22 questions.

23 HEARING OFFICER HANSTED: Okay, thank you.

24 MR. TARUTIS: Thank you.

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1 HEARING OFFICER HANSTED: OHCA does have  
2 some questions. Karen?

3 MS. ROBERTS: Thank you. Karen Roberts,  
4 OHCA staff. First, you mentioned something in your  
5 summarization that I wasn't too clear about, regarding  
6 after the merger of Yale and St. Raph's, there's a  
7 decline in volume? Could you clarify that a little bit?

8 MS. PETTINE: There was actually a decline  
9 in the occupational health related rehab patients after  
10 the acquisition of St. Raphael's by Yale-New Haven.

11 The Occupational Health Division declined  
12 significantly with the acquisition, and, so, the rehab  
13 services that were associated with those visits also  
14 declined.

15 MS. ROBERTS: Okay. Do you know why that  
16 happened?

17 MS. PETTINE: I don't. There were several  
18 reasons. One of the reasons was a transition to  
19 insurance panels that we were on, as St. Raphael's didn't  
20 transition initially to Yale-New Haven, and, so, that  
21 lost us volume, and we've slowly increased our volume as  
22 we've gotten back on the panel, so that was one of the  
23 reasons.

24 MS. ROBERTS: Thank you. In the

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1 occupational health CON, it was stated that a large  
2 percentage of the volume was for Yale-New Haven health  
3 system employees. Part of the outpatient rehab visits  
4 that are in this CON are for occupational medicine, 40  
5 percent, I believe.

6 Is it also true that a large portion of  
7 that would be for Yale system employees, as it is in the  
8 other CON?

9 MS. PETTINE: Yes. There are probably  
10 more rehab visits associated for Yale employees, because  
11 they may go from where they live, as opposed to going,  
12 you know, if they're working on campus, so I would say  
13 yes.

14 MS. ROBERTS: You wouldn't know the  
15 percentage?

16 MS. PETTINE: I don't know offhand. No, I  
17 don't.

18 MS. ROBERTS: It was mentioned in the pre-  
19 file and in your presentation an emphasis on the enhanced  
20 therapies, amenities and services in specialty positions  
21 at some of the other sites.

22 MR. TARUTIS: Correct.

23 MS. ROBERTS: Can you speak to, and I  
24 believe you just indicated that that enhances ease of

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1 referral, for example, but can you speak to why it would  
2 be important for the coordination of patient care in some  
3 instances, and when would patients necessarily receive  
4 both outpatient rehab and need these specialty visits or  
5 amenities within the same visit or at the same site?

6 MR. TARUTIS: So having disciplines on the  
7 same site does a lot to enhance the patient experience.  
8 For one, there's the speed at which an access to the  
9 other provider, whether it be going to the rehab  
10 department down the hall for an assessment there or  
11 conversely going to the physician or physiatrist rehab  
12 physician's office and just walking down the hall to that  
13 office for an assessment, so that's one caveat, is just  
14 ease of access.

15 It's essentially one-stop shopping,  
16 whereas now, if someone needs a physiatry visit, it has  
17 to get scheduled, you know, a phone call has to be made,  
18 and they have to go to Long Wharf, let's say, if they  
19 need to go into New Haven.

20 So, now, if they're in New Haven already  
21 or they're at that site or another site that has one of  
22 our specialty clinicians, they can, you know, essentially  
23 go either floor-to-floor or just down the hall, so it  
24 really makes it much easier and much faster and really

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1 enhances the patient experience in getting that person  
2 back to work.

3 MS. ROBERTS: And that would happen often,  
4 that that would be needed?

5 MR. TARUTIS: Well it could.

6 MS. ROBERTS: The need for one-stop  
7 shopping?

8 MR. TARUTIS: Unfortunately, in Branford,  
9 we don't have that option right now, so I can't tell you  
10 how much of this population would have fell into that.

11 MS. ROBERTS: When referrals are made,  
12 would the patient generally be sent to one of the  
13 facilities that has that specialty? For example, you  
14 said that Long Wharf is connected to the Spine Clinic.

15 MR. TARUTIS: Yeah.

16 MS. ROBERTS: Would that patient typically  
17 be referred to the Long Wharf now for that need?

18 MR. TARUTIS: I don't recall off the top  
19 of my head. I didn't really look at that kind of patient  
20 referral and flow.

21 MS. PETTINE: Our rehab department in  
22 Branford doesn't usually make referrals to specialists.  
23 The occupational health physicians would, but the rehab  
24 professionals would not, so, since they're not co-

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1 located, we wouldn't have that.

2 MS. ROBERTS: And I believe you spoke to  
3 some of the physical plant differences. I think you said  
4 on the pre-file one has a larger gym, and one has a more  
5 comprehensive gym.

6 I think that it might helpful for our  
7 record to have a late file, which better illustrates the  
8 differences between the sites that are being spoken of,  
9 so the existing sites, including the one slated for  
10 closure.

11 If we could have sort of a chart maybe or  
12 a table that provides the co-location of specialties,  
13 some of the different physical plants or amenity  
14 differences, lays that out in a table format, so that  
15 would be --

16 HEARING OFFICER HANSTED: That would be  
17 Late File No. 1.

18 MS. ROBERTS: Thank you.

19 HEARING OFFICER HANSTED: Okay.

20 MS. ROBERTS: This site was mentioned as  
21 an under-performing site and that utilization may have  
22 been dropping overall. The volume statistics provided in  
23 the CON on page 99 for the historic utilization, it  
24 seems, for the non-occupational health volume, it

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1 increased in volume from FY 2013 to '14 to '15, and,  
2 overall, actually, the total volume actually did also  
3 increase in those three fiscal years, so could you speak,  
4 as we did in the last CON, as to the decision that this  
5 indicates under performance and why, besides the fact  
6 that this site might not have some of the amenities, what  
7 other reasons came into why Branford?

8 MS. PETTINE: If you look at 2012, there  
9 was a significant dip into 2013, and we have yet to  
10 regain the volume from the drop in 2012.

11 Also, as previously stated in the occ  
12 health, we look at benchmarks for individual providers,  
13 and, once again, the benchmark for treating patients in  
14 Branford is not as high as in many of our other locations  
15 per therapist.

16 MR. TARUTIS: You're spot on there.  
17 That's exactly right, I mean, with the decline in occ  
18 health, and I believe the majority of that is from the  
19 New Haven area, as well, coming over into that site, so  
20 if occ health medicine moves, you know, it really doesn't  
21 make a lot of sense for the patient to remain there with  
22 occ health rehab service without that service there.

23 MS. ROBERTS: What consideration might  
24 have been given to enhancing the Branford site to include

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1 some of the things that may be lacking that the other  
2 sites have?

3 MR. TARUTIS: Well I think square footage  
4 is always an issue and once they're available to enhance,  
5 so, to look to grow a site, I think we have to look at  
6 initially the footprint we're in.

7 I don't believe Branford was conducive to  
8 really managing that well there. We don't own the  
9 building. We lease the space.

10 MS. ROBERTS: My next question sort of  
11 ties together the two CONs in just an area that seemed to  
12 be a little bit confusing as we're looking at both  
13 together.

14 Obviously, both CONs have occupational  
15 medicine ties. In terms of the Branford location, it  
16 states that, in this CON, 40 percent of the patients use  
17 that site for occupational rehab or occupational medicine  
18 patients, and that services include physical therapy,  
19 physical demand screenings, work conditioning, functional  
20 capacity rehab, evals.

21 In the other CON, the occupational  
22 medicine CON, it says that those services include  
23 treatment and follow-up for injuries received on the job,  
24 Worker's Comp, case management and the like.

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1                   We just wanted to make sure that we had a  
2 confirmation for the record that any of the volumes that  
3 were being stated in the two CONs and, also, the revenues  
4 and expenses related to those volumes don't in any way  
5 overlap.

6                   For example, when -- this is for the  
7 Branford site. When we see physical therapy in the  
8 outpatient rehab side, physical therapy provided for the  
9 occupational medicine patient, that doesn't overlap in  
10 any way with what we see as treatment and follow-up for  
11 injuries received on the job in the other CON.

12                   MS. PETTINE: No. It does not overlap.  
13 They're separate.

14                   MS. ROBERTS: There's complete separation?

15                   MS. PETTINE: We track them separately.  
16 We track by visit type, and we track by rehab visit type,  
17 we track by occ health visit type, so they are entirely  
18 separate.

19                   MS. ROBERTS: And that translates to the  
20 two sets of financials that we saw, in terms of the  
21 revenue and expenses?

22                   MS. PETTINE: Yes, it does.

23                   MS. ROBERTS: Is the staffing the same?  
24 Is it the same FTEs?

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1 MS. PETTINE: No. No, we have rehab staff  
2 that are included in the rehab CON, and we have  
3 occupational health staff that are in the occ health CON.  
4 Our front desk staff do overlap, but they are  
5 occupational health employees, and they do have positions  
6 in our other offices.

7 MS. ROBERTS: Okay.

8 MS. PETTINE: So they will be transitioned  
9 to our other offices.

10 MS. ROBERTS: Thank you. That helps.

11 HEARING OFFICER HANSTED: Anything else?  
12 No? Okay. All right, that concludes OHCA's questions on  
13 this docket. At this point, we'll take a short break.

14 It's only about five after 5:00 at this  
15 point. I'd like to give members of the public a chance  
16 to get here from work, if they choose to give public  
17 comment, so we'll wait here until 6:00, and, at that  
18 time, we'll go back on the record, but, at this point,  
19 we'll go off the record. Thank you.

20 (Whereupon, the Applicant's direct  
21 testimony and OHCA's questions concluded.)

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## Greer, Leslie

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**From:** Greer, Leslie  
**Sent:** Tuesday, May 31, 2016 4:22 PM  
**To:** Jennifer Groves Fusco (jfusco@uks.com); 'nancy.rosenthal@ynhh.org'  
**Cc:** Roberts, Karen; Riggott, Kaila; Hansted, Kevin; Martone, Kim  
**Subject:** Yale-New Haven Hospital CON Decision  
**Attachments:** 32040\_201605311241.pdf

<b>Tracking:</b>	<b>Recipient</b>	<b>Delivery</b>	<b>Read</b>
	Jennifer Groves Fusco (jfusco@uks.com)		
	'nancy.rosenthal@ynhh.org'		
	Roberts, Karen	Delivered: 5/31/2016 4:23 PM	Read: 5/31/2016 4:23 PM
	Riggott, Kaila	Delivered: 5/31/2016 4:23 PM	
	Hansted, Kevin	Delivered: 5/31/2016 4:23 PM	
	Martone, Kim	Delivered: 5/31/2016 4:23 PM	

Attached is the final decision for Yale-New Haven Hospital's Certificate of Need application. Please note, the attached correspondence was also sent via fax on 5/27/16.

Leslie M. Greer  
Office of Health Care Access  
Connecticut Department of Public Health  
410 Capitol Avenue, MS#13HCA, Hartford, CT 06134  
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# STATE OF CONNECTICUT

## DEPARTMENT OF PUBLIC HEALTH

Raul Pino, M.D., M.P.H.  
Commissioner



Dannel P. Malloy  
Governor  
Nancy Wyman  
Lt. Governor

Office of Health Care Access

### Final Decision

**Applicant:** Yale-New Haven Hospital  
20 York Street, New Haven, CT 06510

**Docket Number:** 15-32040-CON

**Project Title:** Termination of Occupational Medicine and Wellness Services at Yale-New Haven Hospital's Locations in East Haven and Branford, Connecticut

**Project Description:** Yale-New Haven Hospital ("Hospital" or "Applicant") seeks authorization to terminate its occupational medicine and wellness services located at 317 Foxon Road in East Haven and 84 North Main Street in Branford at no capital expenditure.

**Procedural History:** The Hospital published notice of its intent to file a Certificate of Need ("CON") application in the *New Haven Register* (New Haven) on September 9, 10 and 11, 2015. On November 17, 2015, the Office of Health Care Access ("OHCA") received the CON application from the Hospital for the above-referenced project. OHCA deemed the application complete on February 17, 2016.

On March 8, 2016, OHCA issued an Order to consolidate this CON application with the Hospital's CON application pending under Docket Number 15-32041-CON, the proposed termination of the Hospital's outpatient rehabilitation services in Branford.

On March 18, 2016, the Hospital was notified of the date, time, and place of the consolidated public hearing. On March 21, 2016, a notice to the public announcing the hearing was published in the *New Haven Register*. Thereafter, pursuant to Connecticut General Statutes ("Conn. Gen. Stat.") § 19a-639a(e), a public hearing regarding the CON application was held on April 7, 2016.



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Attorney Kevin T. Hansted was designated as the hearing officer in this matter. The hearing was conducted in accordance with the provisions of the Uniform Administrative Procedure Act (Chapter 54 of the Conn. Gen. Stat.) and Conn. Gen. Stat. § 19a-639a(e). The public hearing record was closed on April 19, 2016. Deputy Commissioner Brancifort considered the entire record in this matter.

## **Findings of Fact and Conclusions of Law**

1. Yale-New Haven Hospital (“Hospital” or “Applicant”) is a 1,541 bed (including bassinets) non-profit, acute care teaching hospital with two integrated campuses located in New Haven, Connecticut. The Hospital is a corporate member of Yale-New Haven Health Services Corporation (“YNHHS”). Ex. A, pp. 5, 17, 53 55; Ex. J, p. 126
2. The Hospital currently provides occupational medicine and wellness services at the following locations: 317 Foxon Road, East Haven; 84 North Main Street, Branford; 175 Sherman Avenue, New Haven; and 2080 Whitney Avenue, Hamden. All four locations are operated as outpatient departments of the Hospital with services provided by the Northeast Medical Group, YNHHS’s affiliated medical foundation, and Hospital physicians/staff. Ex. A, pp. 17, 18
3. The Hospital proposes to terminate occupational medicine and wellness (“occupational health”) services in East Haven and Branford and consolidate patients from these locations to the Hospital’s occupational health locations in New Haven and Hamden. Ex. A, p. 17
4. The proposal is the result of the Hospital’s assessment of its occupational health locations, which identified potential service improvement opportunities and cost savings. The Hospital determined that there is duplication of services among its occupational health service locations and available capacity at all of its occupational health locations. Ex. A, p. 16; Ex. D, p.108
5. The Hospital decided to close the Branford and East Haven facilities and to leave New Haven and Hamden open, in part because many of the occupational health patients work and live in and around New Haven and, whether these individuals choose to access services from work or from home, the facilities in New Haven and Hamden provide better access than facilities on the shoreline. Testimony of Amit Rastogi, M.D. Interim Chief Executive Officer of Northeast Medical Group, Public Hearing Transcript, p. 8
6. Occupational health services include: treatment and follow-up care for injuries received on the job, workers’ compensation case management, pre-employment physicals, drug testing, Connecticut Department of Transportation examination certifications, fitness for duty assessments, return to work assessments, as well as various health screening services. Ex. A, pp. 17 & 18
7. The Hospital’s occupational health services are available exclusively for employees of companies and municipalities that make arrangements with the Hospital for this type of care. These services are not available to the general public. As a result, payers for the Hospital’s occupational health services are limited primarily to the companies/municipalities under arrangement with the Hospital and workers’ compensation. Ex. A, pp. 16, 18

8. The occupational health service line was started as an employee health program for the Hospital's employees and still remains the core business as 86 percent of the business for occupational medicine involves YNHHS employees in the New Haven territory which includes the towns of New Haven, Branford, East Haven and Hamden. Testimony of Ms. Jodie Boldrighini, Director of Occupational and Employee Population Health Solutions, Yale –New Haven Hospital, Public Hearing Transcript, pp. 11, 15
9. The major employers the Hospital provides occupational medicine services to include: United Illuminating, Orange; Gaylord Hospital, Wallingford; Honeywell, North Branford; Alcoa, Branford; The Regional Water Authority, New Haven; and Connecticut Transit in Hamden and Stamford. Testimony of Ms. Linda Pettine, Associate Director, Yale-New Haven Health, Occupational Medicine and Wellness Services, Public Hearing Transcript, p. 17, 18
10. With this proposal, the Hospital plans to accomplish the following: the removal from the market of two occupational health locations that are underutilized in an area where similar providers have excess capacity; the continued access for patients to occupational health care at the two remaining Hospital locations, which are located closer to their workplaces and homes; and the discontinuation of duplicative services in East Haven and Branford, which will lower overall costs to the Hospital and the health care system. Ex. A, p. 23
11. Neither Medicare nor Medicaid provides reimbursement for the Hospital's occupational health services. These pricing arrangements are non-exclusive, and employers can also make arrangements with non-Hospital providers and offer their employees a choice for occupational healthcare. Ex. A, p. 18
12. The East Haven services are part of an outpatient facility operated by the Hospital that includes an urgent care center. OHCA authorized a CON for the termination of this urgent care center under Docket Number 15-32011-CON. The occupational health services operate Monday through Friday from 9:00 a.m. to 4:00 p.m. The Branford services operate Monday through Friday from 8:30 a.m. to 5:00 p.m. Ex. A, pp. 17, 36, 45; Ex. J, p. 120
13. The Hospital will continue to offer occupational health services at its alternate locations noted below, which will have the capacity to absorb any displaced patients from the East Haven and Branford locations. As a result of this proposed termination, the days and hours of the New Haven and Hamden locations may be expanded based on patient demand.

**TABLE 1**  
**ALTERNATIVE HOSPITAL OCCUPATIONAL MEDICINE & WELLNESS SERVICE LOCATIONS**

<b>Locations</b>	<b>Days/Hours of Operation</b>	<b>Visits in FY 2014</b>	<b>Distance from East Haven location in Miles</b>	<b>Distance from Branford location in Miles</b>
New Haven	Monday - Friday (8:00 a.m. to 5:00 p.m.)	15,500	7.8	8.1
Hamden	Monday – Friday (8:30 a.m. to 5:00 p.m.)	7,500	7.4	11.8

Ex. A, pp. 16, 19, 45; Ex. D, p. 109

14. There are 13 alternative provider locations not affiliated with the Hospital, as illustrated in Table 2 below. These area providers of occupational health services will be available to accommodate any employer/patients who choose not to use the remaining Hospital locations for these services.

**TABLE 2  
ALTERNATIVE NON-HOSPITAL OCCUPATIONAL MEDICINE & WELLNESS SERVICE LOCATIONS**

Program Name	Town	Distance in Miles from East Haven	Distance in Miles from Branford
ASAP Urgent Care	North Haven	6.5	10.1
ASAP Urgent Care	Hamden	8.0	11.5
203 - Urgent Care	North Haven	4.6	8.6
203 - Urgent Care	Orange	10.4	11.0
203 - Urgent Care	West Haven	8.7	9.3
203 - Urgent Care	Hamden	7.2	10.8
Express Care Urgent Care	Hamden	7.3	10.4
Concentra Urgent Care	New Haven	4.0	7.9
Stony Creek Urgent Care	Branford	6.1	3.1
Stony Creek Urgent Care	Orange	11.0	11.6
CVS Minute Clinic	North Haven	6.9	10.5
CVS Minute Clinic	Hamden	7.8	11.4
CVS Minute Clinic	Guilford	9.3	8.0

Ex. A, pp. 21, 45; Ex. D, p. 109

15. Table 3 illustrates that approximately 71 percent of the patients who received services at the East Haven location in fiscal year ("FY") 2015 were from the towns of New Haven, East Haven, West Haven, North Branford, Branford and Hamden.

**TABLE 3  
EAST HAVEN SERVICE LOCATION  
SERVICE AREA TOWNS, FY 2015**

Town	Percentage Utilization by Town
New Haven	22.50%
East Haven	22.50%
West Haven	9.48%
North Branford	6.32%
Branford	5.54%
Hamden	4.54%
<b>Total %</b>	<b>70.88%</b>

Ex. D, p. 107

16. Table 4 illustrates that approximately 71 percent of the patients who received services at the Branford location in FY 2015 were from the towns of Branford, New Haven, East Haven, Guilford, North Branford, West Haven, Madison, and Hamden.

**TABLE 4  
BRANFORD LOCATION  
SERVICE AREA TOWNS, FY 2015**

Town	Percentage Utilization by Town
Branford	17.77%
New Haven	12.16%
East Haven	11.61%
Guilford	8.76%
North Branford	7.10%
West Haven	5.44%
Madison	4.08%
Hamden	3.63%
<b>Total %</b>	<b>70.55%</b>

Ex. D, p. 108

17. Table 5 shows each service locations' actual occupational health service volumes for FYs 2013 through 2015 and the percentage change between fiscal years.

**TABLE 5  
EAST HAVEN & BRANFORD SERVICE LOCATIONS  
ACTUAL UTILIZATION (VISITS)  
FISCAL YEARS 2013-2015**

Occupational Medicine & Wellness Services	FY 2013	FY 2014	Percentage Change FY13-14	FY 2015	Percentage Change FY14-15
East Haven Visits	1,477	2,382	61.3%	2,311	(3.0%)
Branford Visits	4,252	5,087	19.6%	5,420	6.6%

Note:\* Each location is open approximately 260 days a year.

Ex. A, p. 32; Ex. D, p. 105

18. The Hospital estimates that the increase in volume that occurred at the Branford location may be due in part to a shift of some YNHHS employees using the occupational health services to the Branford location and that YNHHS can control where its employees receive the occupational health services. Testimony of Jodie Boldrighini, Director of Occupational and Employee Population Health Solutions, Yale-New Haven Hospital, Public Hearing Transcript, p. 24

19. Many of the employers who utilize the occupational health services in East Haven and Branford are located in other towns and cities. The largest numbers of companies using each site are located in New Haven. For the East Haven location, 16 percent of the visits originate from companies located in East Haven, as compared to 29 percent from New Haven companies. For the Branford location, 21 percent of visits originate from companies located in Branford as compared to 29 percent from New Haven companies. At both locations, the Hospital itself is the highest utilizer in terms of occupational health visits. Ex. A, pp. 18, 19, 33

20. Tables 6A and 6B below illustrate how each service locations revenues are not keeping pace with their respective expenses for FYs 2013 through 2015, resulting in operating losses in the last three years for the East Haven service location and operating losses in the last two fiscal years for the Branford service location.

**TABLE 6A  
EAST HAVEN LOCATION  
ACTUAL REVENUES AND EXPENSES  
FISCAL YEARS 2013-2015**

Description	FY 2013	FY 2014	% change FY13-14	FY 2015	% change FY14-15
Revenue from Operations	\$129,500	\$204,700	58.1%	\$205,300	0.3%
Total Operating Expenses	\$408,400	\$301,400	(26.2%)	\$335,100	11.2%
Gain/(Loss) from Operations	(\$278,900)	(\$96,700)	Decreasing Loss of 65.3%	(\$129,800)	Increasing Loss of 34.2%

Ex. D, p. 117

**TABLE 6B  
BRANFORD LOCATION  
ACTUAL REVENUES AND EXPENSES  
FISCAL YEARS 2013-2015**

Description	FY 2013	FY 2014	% change FY13-14	FY 2015	% change FY14-15
Revenue from Operations	\$592,800	\$574,200	(3.1%)	\$582,400	1.4%
Total Operating Expenses	\$503,600	\$615,300	22.2%	\$614,300	(0.2%)
Gain/(Loss) from Operations	\$89,200	(\$41,100)	Loss of 146.1%	(\$31,900)	Decreasing Loss of 22.4%

Ex. D, p. 116

21. The Hospital projects overall gains in operations in each of the first three fiscal years, FY 2016 through FY 2018, following the proposed service location terminations.

**TABLE 7  
HOSPITAL'S PROJECTED REVENUES AND EXPENSES  
FISCAL YEARS 2016-2018**

(Amounts below are reported in the Thousands)

Description	FY 2016	FY 2017	FY 2018
Revenue from Operations	\$2,465,057	\$2,515,088	\$2,565,069
Total Operating Expenses	\$2,375,912	\$2,424,130	\$2,472,301
Gain/(Loss) from Operations	\$89,144	\$90,958	\$92,767

Ex. A, p. 101

22. The FY 2015 payer mix for both the East Haven and Branford service locations are illustrated in Table 8.

**TABLE 8  
CURRENT PAYER MIX FOR EACH LOCATION  
FISCAL YEAR 2015**

Payer	East Haven FY 2015		Payer	Branford FY 2015	
	Visits	%		Visits	%
Medicare	0	0%	Medicare	0	0%
Medicaid	0	0%	Medicaid	0	0%
CHAMPUS & TriCare	0	0%	CHAMPUS & TriCare	0	0%
<b>Total Government</b>	<b>0</b>	<b>0%</b>	<b>Total Government</b>	<b>0</b>	<b>0%</b>
Commercial Insurers	0	0%	Commercial Insurers	0	0%
Uninsured	0	0%	Uninsured	0	0%
Workers Compensation	1,002	43%	Workers Compensation	1,585	29%
Other: company; municipality; & self-pay	1,309	57%	Other: company; municipality; & self-pay	3,835	71%
<b>Total Non-Government</b>	<b>2,311</b>	<b>100%</b>	<b>Total Non-Government</b>	<b>5,420</b>	<b>100%</b>
<b>Total Payer Mix</b>	<b>2,311</b>	<b>100%</b>	<b>Total Payer Mix</b>	<b>5,420</b>	<b>100%</b>

Ex. A, p. 41

23. There are no capital expenditures associated with termination of occupational health care services at the East Haven and Branford service locations. Ex. A, pp. 30, 39
24. The occupational health staff at the East Haven and Branford service locations will be redeployed to the New Haven and Hamden service locations once the East Haven and Branford sites have been closed. Ex. D, p. 109
25. The Hospital will work with employers to ensure seamless care for patients. The Hospital has notified some of its larger employers that it intends to close the East Haven and Branford location, subject to regulatory approval. All employers will be given formal notice that regulatory approval has been obtained. This notice will include dates on which the East Haven and Branford locations will be closing. At least 30-days' notice will be given to all employers. Ex. A, p. 20
26. OHCA is currently in the process of establishing its policies and standards as regulations. Therefore, OHCA has not made any findings as to this proposal's relationship to any regulations not yet adopted by OHCA. (Conn. Gen. Stat. § 19a-639(a)(1))

27. The CON application is consistent with the Statewide Health Care Facilities and Services Plan. (Conn. Gen. Stat. § 19a-639(a)(2))
28. The Hospital has established that there is a clear public need for its proposal. (Conn. Gen. Stat. § 19a-639(a)(3))
29. The Hospital has satisfactorily demonstrated that its proposal is financially feasible. (Conn. Gen. Stat. § 19a-639(a)(4))
30. The Hospital has satisfactorily demonstrated that access to services, cost effectiveness and the quality of health care delivery will be maintained. (Conn. Gen. Stat. § 19a-639(a)(5))
31. The Hospital has shown that there will be no adverse change in the provision of health care services to the relevant populations and payer mix, including Medicaid patients and indigent persons. (Conn. Gen. Stat. § 19a-639(a)(6))
32. The Hospital has satisfactorily identified the population to be affected by this proposal. (Conn. Gen. Stat. § 19a-639(a)(7))
33. The Hospital has sufficiently demonstrated that there are other providers in the area being utilized by the public and that these providers can continue to be utilized by the public. (Conn. Gen. Stat. § 19a-639(a)(8))
34. The Hospital has satisfactorily demonstrated that the proposal will not result in an unnecessary duplication of existing services in the area. (Conn. Gen. Stat. § 19a-639(a)(9))
35. The Hospital has satisfactorily demonstrated that access to services for Medicaid recipients and indigent persons will be unaffected by the proposal. (Conn. Gen. Stat. § 19a-639(a)(10))
36. The Hospital has satisfactorily demonstrated that the proposal will not negatively impact the diversity of health care providers and patient choice in the geographic region. (Conn. Gen. Stat. § 19a-639(a)(11))
37. The Hospital has satisfactorily demonstrated that its proposal will not result in any consolidation that would affect health care costs or accessibility to care. (Conn. Gen. Stat. § 19a-639(a)(12))

## Discussion

CON applications are decided on a case by case basis and do not lend themselves to general applicability due to the uniqueness of the facts in each case. In rendering its decision, OHCA considers the factors set forth in Conn. Gen. Stat. § 19a-639(a). The Hospital bears the burden of proof in this matter by a preponderance of the evidence. *Jones v. Connecticut Medical Examining Board*, 309 Conn. 727 (2013).

Yale-New Haven Hospital (“Hospital”) is a non-profit acute care teaching hospital located in New Haven, Connecticut and is a corporate member of Yale-New Haven Health Services Corporation (“YNHHS”). *FF1* The Hospital currently provides occupational medicine and wellness services at the following locations: 317 Foxon Road, East Haven; 84 North Main Street, Branford; 175 Sherman Avenue, New Haven; and 2080 Whitney Avenue, Hamden. All four locations are operated as outpatient departments of the Hospital. *FF2* Occupational medicine and wellness services include: treatment and follow-up care for injuries received on the job, workers’ compensation case management, pre-employment physicals, drug testing, Connecticut Department of Transportation examination certifications, fitness for duty assessments, return to work assessments, as well as various health screening services. *FF6*

The Hospital proposes to terminate its occupational medicine and wellness services in East Haven and Branford and consolidate patients from these locations to the Hospital’s occupational health locations in New Haven and Hamden. *FF3* The proposal is the result of the Hospital’s assessment of its occupational health locations, which identified potential service improvement opportunities and cost savings. The Hospital determined that there is duplication of services among its occupational health service locations and available capacity at all of its occupational health locations, which resulted in its proposal to close the East Haven and Branford sites. *FF4*

The Hospital’s occupational medicine and wellness services are available exclusively for employees of companies and municipalities that make arrangements with the Hospital for this type of care. These services are not available to the general public. As a result, payers for Hospital occupational health services are limited primarily to the companies/municipalities under arrangement with the Hospital and workers’ compensation. *FF7* The Hospital’s occupational health service line at its various locations, primarily serve Yale system employees. *FF8*

Access to services will be maintained by the proposal, as alternative occupational medicine and wellness service providers and locations are available for patient choice. Within the Hospital network, the Hospital will continue to provide occupational health care services within its two existing locations in New Haven and Hamden. These locations each have the capacity to absorb any displaced patients from the East Haven and Branford service locations. If need arises, the days and hours of the New Haven and Hamden service locations may be expanded based on patient demand. *FF13* Further, there are 13 occupational health providers not affiliated with the Hospital and offering similar services to the East Haven and Branford service locations. All are located within 12 miles from either the East Haven or Branford locations. *FF14* Therefore, the Hospital has satisfactorily demonstrated that the closing of its occupational medicine and wellness service locations in East Haven and Branford will not result in a reduction in the access to occupational health care services available to employers and patients in this area.

Neither Medicare nor Medicaid provides reimbursement for the Hospital's occupational health services. These pricing arrangements are non-exclusive, meaning employers can make arrangements with non-Hospital providers as well and offer their employees a choice for occupational healthcare. *FF11*

There is no capital expenditure associated with terminating the East Haven and Branford service locations. *FF23* The Hospital experienced a loss from operations for both locations for the last two full fiscal years. *FF20* The Hospital projects overall gains from operations in each of the first three years following the proposed termination. *FF21* Therefore, the Hospital has demonstrated that the proposal is financially feasible.

Based upon the foregoing, the Hospital has satisfactorily demonstrated that access to occupational medicine and wellness services for employers and patients of the East Haven and Branford areas in need of such services will be maintained despite the proposed closure of the Hospital's East Haven and Branford service locations. Further, the majority of other non-Hospital occupational health care locations in the area will be available to offer their services to area employers and patients. The Hospital has demonstrated that the proposal is consistent with the Statewide Health Care Facilities and Services Plan by reducing unnecessary duplication of services.

## Order

Based upon the foregoing Findings and Discussion, the Certificate of Need application of Yale-New Haven Hospital for the termination of its occupational medicine and wellness services at 317 Foxon Road in East Haven and at 84 North Main Street in Branford is hereby **APPROVED**.

All of the foregoing constitutes the final order of the Office of Health Care Access in this matter.

By Order of the  
Department of Public Health  
Office of Health Care Access

May 27, 2016  
Date

Janet M. Brandifort  
Janet M. Brandifort, MPH, RRT  
Deputy Commissioner

\* \* \* COMMUNICATION RESULT REPORT ( MAY. 27. 2016 1:39PM ) \* \* \*

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**STATE OF CONNECTICUT  
 DEPARTMENT OF PUBLIC HEALTH  
 OFFICE OF HEALTH CARE ACCESS**

**FAX SHEET**

<b>TO:</b>	JENNIFER GROVES FUSCO, ESQ OF UPDIKE, KELLY & SPELLACY AND NANCY ROSENTHAL OF YALE NEW HAVEN HEALTH SYSTEM		
<b>FAX:</b>	203-772-2037 AND 203-863-4736		
<b>FROM:</b>	KAREN ROBERTS, DEPARTMENT OF PUBLIC HEALTH, OFFICE OF HEALTH CARE ACCESS		
<b>DATE:</b>	5/27/2016	<b>TIME:</b>	1:45 PM
<b>NUMBER OF PAGES:</b>	12		

*(including transmittal sheet)*

**Comments:** Please find attached a signed Final Decision for the Yale-New Haven Hospital Certificate of Need (CON) application under Docket # 15-32040-CON, the termination of occupational medicine and wellness services in East Haven and Branford. This decision is being faxed today, May 27, 2016 but will also be emailed to both of you on Tuesday, May 31, 2016.

*Karen Roberts*  
 Principal Health Care Analyst  
 Office of Health Care Access  
 Connecticut Department of Public Health  
 410 Capitol Avenue, MS #13HCA, P.O. Box 340308, Hartford, CT 06134-0308  
 P: (860) 418-7041 / F: (860) 418-7053 / E: karen.roberts@ct.gov



**PLEASE PHONE IF THERE ARE ANY TRANSMISSION PROBLEMS.**

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**STATE OF CONNECTICUT  
 DEPARTMENT OF PUBLIC HEALTH  
 OFFICE OF HEALTH CARE ACCESS**

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