

Greer, Leslie

From: Martone, Kim
Sent: Tuesday, February 16, 2016 2:38 PM
To: Hansted, Kevin
Cc: Greer, Leslie
Subject: FW: Modification Request
Attachments: 20160216141945122.pdf

From: Carannante, Vincenzo [<mailto:VCarannante@goodwin.com>]
Sent: Tuesday, February 16, 2016 2:36 PM
To: Martone, Kim
Subject: Modification Request

Hello Kim: Attached please find our modification request. In addition and as discussed earlier today, we will also mail/deliver to you the original affidavit.

Thank you,
Vin

Shipman & Goodwin LLP
C O U N S E L O R S A T L A W

Vincenzo Carannante
Partner
One Constitution Plaza
Hartford, CT 06103-1919

Tel (860) 251-5096
Fax (860) 251-5211
vcarrannante@goodwin.com
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 please consider the environment before printing this message



State of Connecticut Office of Health Care Access Form for Modification of a Previously Authorized Certificate of Need

All persons who are requesting a modification to a previously authorized Certificate of Need must complete this form. Completed forms should be submitted to the Director of the Office of Health Care Access, 410 Capitol Avenue, MS#13HCA, P.O. Box 340308, Hartford, Connecticut 06134-0308.

SECTION I. PETITIONER INFORMATION

If more than 2 Petitioners, please attach a separate sheet of paper and provide additional information in the format below:

	Petitioner	Petitioner
Full legal name	HHC Hartford Surgery Center, LLC	
Doing Business As	N/A	
Name of Parent Corporation	Hartford Hospital	
Mailing Address, if Post Office Box, include a street mailing address for Certified Mail	80 Seymour Street, Hartford CT 06106	
Petitioner type (e.g., P for profit and NP for Not for Profit)	Profit	
Name of Contact person, including title	Barbara A. Durdy Director, Strategic Planning	
Contact person's street mailing address	181 Patricia Genova Drive Newington, CT 06111	
Contact person's phone, fax and e-mail address	Phone: 860-972-4231 Fax: 860-972-4650 Email: barbara.durdy@hhchealth.org	

SECTION II. GENERAL PROPOSAL INFORMATION

a. Title of Previously Authorized Project and Associated Docket Number(s):

Title: Proposal to Establish an Orthopedic Ambulatory Surgical Center on the Hartford Hospital Campus

Docket Number: Docket Number: 13-31851-CON

b. Location of proposal (Town including street address): 80 Seymour Street, Hartford CT, 06106

c. Type of Modification Request:

Change in the Scope of the Authorized Certificate of Need Project

Extension of CON Expiration Date

Change in a CON Order Condition (*other than to extend expiration date*)

Other – Describe: _____

SECTION III. IF REQUESTING A CHANGE IN THE SCOPE OF AUTHORIZED PROJECT:

a. Provide a one page description of the requested change in the scope of a previously authorized Certificate of Need project and provide a detailed rationale for such change: Not Applicable.

SECTION IV. IF REQUESTING AN EXTENSION OF THE CON EXPIRATION DATE:

a. Certificate of Need expiration date per CON Final Decision: June 11, 2016

b. Requested revised CON expiration date: December 31, 2016

c. Rationale for increased time to fully complete and implement the authorized project: The severe winter/weather conditions in 2015 delayed the ground-breaking / construction process.

**SECTION V. IF REQUESTING A CHANGE IN A CON FINAL DECISION CONDITION
(other than extension of the CON expiration date)**

a. Identify the CON Condition that you are requesting to be revised or vacated.

We are requesting that condition # 5 be revised as described herein.

b. Provide the rationale for such requested change:

- General Background: Hartford Hospital (the "Hospital") is an 867 bed acute care hospital located in Hartford, CT and is a member of Hartford HealthCare, an integrated health care delivery system. Hartford Hospital provides primary, secondary, and tertiary acute care services to the Greater Hartford region. To advance the delivery of the highest quality orthopedic services, Hartford Hospital is currently constructing a new and world-class Bone & Joint Institute on its main campus in Hartford, Connecticut (the "Bone & Joint Institute"). As a component of the Bone & Joint Institute, HHC Hartford Surgery Center (which the Hospital is a 51% owner of) received OHCA approval for an ambulatory surgery center (the "ASC") for the Hospital's main campus. The Bone & Joint Institute, including the ASC, is scheduled to open in December of 2016.
- Modification Request/Rationale:
 - The Hospital currently has approval for forty-three (43) operating rooms or "ORs" on its main campus. Please see Exhibit 1.
 - In accordance with Docket Number: 13-31851-CON, the Hospital must remove from service four (4) of its main campus operating rooms upon the opening and commencement of operations by the ASC. This will leave the Hospital with thirty-nine (39) operating rooms upon the opening of the ASC, which is expected to occur in December of 2016.
 - Since 2013, the Hospital has experienced an 11.86% increase in surgical volumes. Please see Exhibit 2 attached hereto. Growth in surgical specialties including orthopedic, cardiovascular and complex neurosurgical cases has created and will continue to create the need for additional operating capacity at Hartford Hospital. In addition, the Hospital anticipates approximately 600 additional surgical cases as a result of the closure of Hartford Surgical Center located at Retreat Avenue in Hartford.
 - Currently, the Hospital's ORs are operating at approximately 78% capacity. Please see Exhibit 3. With the loss of four (4) operating rooms, the Hospital will not be able to accommodate its current and projected surgical volumes. Please see Exhibit 4 for past and projected surgical volumes (with and without the 3 additional operating rooms). In fact, if this Modification Request is not approved, the capacity and access issues will worsen to the point where access to surgical services will be unworkable. More specifically, operating room utilization that is greater than 80% is neither sustainable nor

manageable. At utilization rates above 80%, the Hospital will not have the ability and/or flexibility to accommodate not only patient and physician schedules but also the growing number of emergency transfer cases requiring surgery.

- Given the Hospital's recent and expected growth in surgical cases, the Hospital now requests that Condition # 5 be revised as follows in order to permit the Hospital to have a total of forty-two (42) operating rooms on its main campus.
 - Modification Request: We are requesting that it be revised as follows: "HHC shall provide written attestation, within ten (10) business days following the date of commencement of operations at HHC, that one existing operating room at Hartford Hospital's main campus in Hartford has been removed from service."

SECTION VI. OTHER

- a. **Submit a completed CON Modification Affidavit.** Please see attached.
- b. **Identify any other pertinent changes to the findings of facts upon which the original CON authorization was based as a result of this requested modification.**

Not applicable.

- c. **Identify what has been accomplished to date in terms of full project implementation.**

The Applicant commenced construction of the ASC and the new expected completion date is now December, 2016.

Exhibit 1

Facility Name	Facility ID	Facility Address	Number of Operating Rooms			Estimated Capacity for Proposal		****Current Utilization
			* Available	** Utilized	Not Utilized	****Equipped for Proposal	****Min	

Hartford Hospital	07-0025	80 Seymour Street, Hartford, CT 06102-5037	43	38	5	N/A		6,334
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*43rd OR Room Hybrid Room Core 16 (Projected to Open November 2016)

HB 410 Closed 285 SF
 HB 416 Closed 307 SF
 HB 461 Closed 353 SF
 Bliss 436 Closed 374 SF

**Rooms listed above are not in use related to undersized SF capacity for equipment utilized for more complexed cases. E.g. -CV, Neuro Spine, Joint cases.

***N/A this proposal does not any new surgical services
 ****FY2016 October 1, 2015-December 31, 2015

Exhibit Z

Service	FY13		FY14		FY15		FY16 thru Dec		FY17		FY18		FY19	
	Cases	Minutes	Cases	Minutes	Cases	Minutes	Cases	Minutes	Cases	Minutes	Cases	Minutes	Cases	Minutes
Access	509	68,345	667	86,173	670	83,777	173	21,714	688	90,449	697	91,627	707	92,925
Bariatric	445	67,569	424	61,481	460	65,979	135	20,061	460	79,056	460	79,056	480	79,056
CV	833	293,556	936	315,777	1,004	317,856	277	90,207	1,275	452,248	1,298	460,413	1,322	468,933
ENT	964	150,917	938	145,088	882	141,564	239	35,416	894	136,542	910	138,964	923	140,987
General	5,375	830,085	5,810	928,329	5,704	902,874	1,477	234,689	5,766	981,149	5,805	987,480	5,821	990,049
Gyn	2,283	312,287	2,442	340,271	2,411	337,376	658	84,875	2,973	403,644	3,021	409,489	3,021	409,489
Trauma	1,462	243,758	181	41,634	138	30,448	36	8,541	110	29,667	110	29,667	110	29,667
Joint	474	129,724	473	126,521	506	138,473	159	41,873	668	204,198	700	214,071	730	223,320
Neuro	190	33,427	203	40,518	174	34,134	45	8,257	174	35,061	174	35,061	174	35,061
OMF														
OP Podiatry														
Ophthalmology	1,327	134,840	1,290	130,093	1,490	141,659	410	36,449	1,592	142,588	1,598	143,122	1,599	143,211
Ortho	2,039	313,146	2,131	329,614	1,995	304,726	472	67,416	1,429	304,377	1,598	340,374	1,707	363,591
Pacer/AICD														
PV														
Plastic	1,666	318,238	1,742	328,526	1,069	214,360	434	59,015	1,120	269,408	1,140	274,256	1,161	279,362
Podiatry	1,685	252,984	1,676	240,194	1,726	245,096	136	10,068	1,678	235,798	1,686	236,910	1,694	238,022
Robo	787	66,039	454	35,037	446	32,927	224	48,797	436	44,599	436	44,599	436	44,599
Ortho Spine	1,126	334,374	1,134	336,024	1,006	292,588	267	76,613	1,062	338,073	1,067	339,903	1,072	341,733
Neuro Spine	1,058	236,929	1,005	216,629	1,083	238,752	249	56,178	289	89,590	309	95,790	323	100,130
Structural Heart														
Thoracic	55	16,067	71	20,012	98	24,565	37	8,541	868	205,180	893	211,430	920	218,000
Urology	370	76,790	464	85,225	502	89,309	137	24,164	610	126,961	620	129,002	630	131,043
Total	27,648	3,879,075	24,111	4,119,604	24,072	4,055,367	6,334	1,052,063	25,322	4,790,825	25,596	4,932,650	26,483	5,029,543

- 1) Spine Surgery will separate into Neuro Spine & Ortho Spine in October 2016
- 2) FY2016 time period is October-December 2015
- 3) Fiscal Year ("FY") 2016 (annualized volume) equals 25,336. This is an 11.86% increase over FY 2013. Cases & Minutes represent all activity 24/7

Exhibit 3

All Cases FY2013-FY2016 (FY2016 October-December)				
	FY2013	FY2014	FY2015	FY2016 Oct-Dec
Total number of cases performed	22,648	24,111	24,072	6,334
Annual increase in surgical cases performed	269	1,463	-39	*1264
Number of operating rooms	38	38	38	38
Avg. annual number of surgical cases per room	596	635	633	167
Total number of surgical case hours	64,651	68,660	67,589	17,534

*Annual increase in surgical cases performed FY2016 October 1,2015-December 31, 2015 is annualized.

Block Cases FY2013-FY2016 October-December				
	FY2013	FY2014	FY2015	FY2016 Oct-Dec
Total number of cases performed	20,408	21,594	21,684	5,596
Annual increase in surgical cases performed	242	1,186	90	*700
Number of operating rooms	38	38	38	38
Avg. annual number of surgical cases per room	537	568	571	147
Total number of surgical case hours	58,168	62,011	61,390	15,484
Number of hours available per year	74,891	80,847	79,576	19,894
Capacity / Percentage of Total Hours Utilized	78%	77%	77%	78%

*Annual increase in surgical cases performed FY2016 October 1,2015-December 31, 2015 is annualized.

Exhibit 4

Hartford Hospital
Projected Operation Room Capacity
FY 2017 through FY 2019

Operating Room Utilization Projected with 42 ORs			
	Minutes Utilized	Minutes Available	% Utilized
FY 2017	4,311,743	5,444,480	79%
FY 2018	4,439,385	5,436,320	82%
FY 2019	4,535,679	5,440,400	83%

Operating Room Utilization Projected with 39 ORs			
	Minutes Utilized	Minutes Available	% Utilized
FY 2017	4,311,743	5,054,481	85%
FY 2018	4,439,385	5,046,321	88%
FY 2019	4,535,679	5,050,401	90%

CON MODIFICATION AFFIDAVIT

Applicant: HHC Hartford Surgery Center, LLC

Project Title: The Establishment of an Orthopedic Ambulatory Surgical Center on the Hartford Hospital Campus.

I, Stuart Markowitz, President and CEO of Hartford Hospital and representative member of HHC Hartford Surgery Center, LLC, being duly sworn, depose and state that the information provided in this CON Modification form is true and accurate to the best of my knowledge.

Stuart Markowitz
Signature

2-15-16
Date

Subscribed and sworn to before me on February 15, 2016

Martha Santilli
Notary Public/Commissioner of Superior Court

MARTHA SANTILLI
NOTARY PUBLIC OF CONNECTICUT
My Commission Expires 5/31/2019

My commission expires:

Greer, Leslie

From: Hansted, Kevin
Sent: Wednesday, February 17, 2016 9:43 AM
To: Jennifer Groves Fusco (jfusco@uks.com)
Cc: 'vcarannante@goodwin.com'; Greer, Leslie
Subject: Modification Request 16-31851-MDF
Attachments: 16-31851-MDF.pdf

Good morning Attorney Fusco,

Pursuant to Conn. Gen. Stat. § 4-181a(4)(b), attached is a notice regarding a modification request received by HHC Hartford Surgery Center, LLC. Your clients in the original matter were Connecticut Surgery Center, LP and Hartford Surgery Center, LLC. Please let me know if you have any questions.

Thank you,

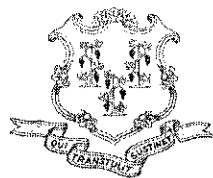
Kevin T. Hansted
Staff Attorney
Department of Public Health
Office of Health Care Access
410 Capitol Ave., MS #13HCA
P.O. Box 340308
Hartford, CT 06134
Phone: 860-418-7044
Email: kevin.hansted@ct.gov



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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

February 17, 2016

Jennifer Groves Fusco, Esq.
Principal
Updike, Kelly & Spellacy, P.C.
One Century Tower
265 Church Street
New Haven, CT 06510

RE: Docket Number 16-31851-MDF: A Request for Modification of the Certificate of Need authorized under Docket Number 13-31851-CON HHC Hartford Surgery Center, LLC

Dear Attorney Fusco:

On February 16, 2016, OHCA received a request for a modification from HHC Hartford Surgery Center, LLC ("HHC"). The request is to modify Condition Number 5 of the Agreed Settlement issued by OHCA under Docket Number 13-31851-CON and extend the expiration date of the CON to December 31, 2016. A copy of the complete modification request can be found on OHCA's website.

This letter is to inform you that OHCA is considering taking action upon the request for modification. If you would like to submit any comments regarding this matter, please do so in writing to OHCA by 4:30 PM on Friday, March 11, 2016.

Sincerely,


Kevin T. Hansted

CC: Vincenzo Carannante, Esq., Shipman & Goodwin LLP



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

Affirmative Action/Equal Opportunity Employer



SHIPMAN & GOODWIN LLP®

COUNSELORS AT LAW

Vincenzo Carannante
Phone: (860) 251-5096
Fax: (860) 251-5311
vcarannante@goodwin.com
Admitted in Massachusetts, Connecticut and Rhode Island



February 17, 2016

VIA FEDERAL EXPRESS

Kimberly R. Martone
Director of Operations
Office of Health Care Access
Department of Public Health
410 Capitol Avenue, MS#13 CMN
Hartford, CT 06134

Re: **HHC Hartford Surgery Center, LLC**

Dear Ms. Martone:

As discussed, enclosed please find the original Affidavit in relation to this Modification request.

Sincerely,


Vincenzo Carannante

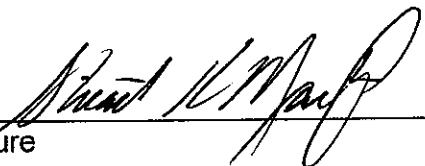
VZC:tlb
Enc.

CON MODIFICATION AFFIDAVIT

Applicant: HHC Hartford Surgery Center, LLC

Project Title: The Establishment of an Orthopedic Ambulatory Surgical Center on the Hartford Hospital Campus.

I, Stuart Markowitz, President and CEO of Hartford Hospital and representative member of HHC Hartford Surgery Center, LLC, being duly sworn, depose and state that the information provided in this CON Modification form is true and accurate to the best of my knowledge.

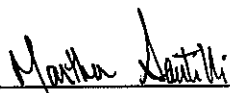


Signature

2-15-16

Date

Subscribed and sworn to before me on February 15, 2016



Notary Public/Commissioner of Superior Court

MARTHA SANTILLI
NOTARY PUBLIC OF CONNECTICUT
My Commission Expires 5/31/2019

My commission expires:



**State of Connecticut
Office of Health Care Access
Form for Modification of a Previously
Authorized Certificate of Need**

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SECTION I. PETITIONER INFORMATION

If more than 2 Petitioners, please attach a separate sheet of paper and provide additional information in the format below:

	Petitioner	Petitioner
Full legal name	HHC Hartford Surgery Center, LLC	
Doing Business As	N/A	
Name of Parent Corporation	Hartford Hospital	
Mailing Address, if Post Office Box, include a street mailing address for Certified Mail	80 Seymour Street, Hartford CT 06106	
Petitioner type (e.g., P for profit and NP for Not for Profit)	Profit	
Name of Contact person, including title	Barbara A. Durdy Director, Strategic Planning	
Contact person's street mailing address	181 Patricia Genova Drive Newington, CT 06111	
Contact person's phone, fax and e-mail address	Phone: 860-972-4231 Fax: 860-972-4650 Email: barbara.durdy@hhchealth.org	

SECTION II. GENERAL PROPOSAL INFORMATION

a. Title of Previously Authorized Project and Associated Docket Number(s):

Title: Proposal to Establish an Orthopedic Ambulatory Surgical Center on the Hartford Hospital Campus

Docket Number: Docket Number: 13-31851-CON

b. Location of proposal (Town including street address): 80 Seymour Street, Hartford CT, 06106

c. Type of Modification Request:

Change in the Scope of the Authorized Certificate of Need Project

Extension of CON Expiration Date

Change in a CON Order Condition (*other than to extend expiration date*)

Other – Describe: _____

SECTION III. IF REQUESTING A CHANGE IN THE SCOPE OF AUTHORIZED PROJECT:

a. Provide a one page description of the requested change in the scope of a previously authorized Certificate of Need project and provide a detailed rationale for such change: Not Applicable.

SECTION IV. IF REQUESTING AN EXTENSION OF THE CON EXPIRATION DATE:

a. Certificate of Need expiration date per CON Final Decision: June 11, 2016

b. Requested revised CON expiration date: December 31, 2016

c. Rationale for increased time to fully complete and implement the authorized project: The severe winter/weather conditions in 2015 delayed the ground-breaking / construction process.

**SECTION V. IF REQUESTING A CHANGE IN A CON FINAL DECISION CONDITION
(other than extension of the CON expiration date)**

a. Identify the CON Condition that you are requesting to be revised or vacated.

We are requesting that condition # 5 be revised as described herein.

b. Provide the rationale for such requested change:

- General Background: Hartford Hospital (the "Hospital") is an 867 bed acute care hospital located in Hartford, CT and is a member of Hartford HealthCare, an integrated health care delivery system. Hartford Hospital provides primary, secondary, and tertiary acute care services to the Greater Hartford region. To advance the delivery of the highest quality orthopedic services, Hartford Hospital is currently constructing a new and world-class Bone & Joint Institute on its main campus in Hartford, Connecticut (the "Bone & Joint Institute"). As a component of the Bone & Joint Institute, HHC Hartford Surgery Center (which the Hospital is a 51% owner of) received OHCA approval for an ambulatory surgery center (the "ASC") for the Hospital's main campus. The Bone & Joint Institute, including the ASC, is scheduled to open in December of 2016.
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- Given the Hospital's recent and expected growth in surgical cases, the Hospital now requests that Condition # 5 be revised as follows in order to permit the Hospital to have a total of forty-two (42) operating rooms on its main campus.
 - Modification Request: We are requesting that it be revised as follows: "HHC shall provide written attestation, within ten (10) business days following the date of commencement of operations at HHC, that one existing operating room at Hartford Hospital's main campus in Hartford has been removed from service."

SECTION VI. OTHER

- a. **Submit a completed CON Modification Affidavit. Please see attached.**
- b. **Identify any other pertinent changes to the findings of facts upon which the original CON authorization was based as a result of this requested modification.**

Not applicable.
- c. **Identify what has been accomplished to date in terms of full project implementation.**

The Applicant commenced construction of the ASC and the new expected completion date is now December, 2016.

Exhibit 1

Facility Name	Facility ID	Facility Address	Number of Operating Rooms			Estimated Capacity for Proposal		****Current Utilization
			* Available	** Utilized	Not Utilized	*** Equipped for Proposal	***Min	

Hartford Hospital	07-0025	80 Seymour Street, Hartford, CT 06102-5037	43	38	5	N/A	6,334
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***N/A this proposal does not any new surgical services
 ****FY2016 October 1, 2015-December 31, 2015

Exhibit 2

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	Cases	Minutes	Cases	Minutes	Cases	Minutes	Cases	Minutes	Cases	Minutes	Cases	Minutes	Cases	Minutes
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OMF	190	33,427	203	40,518	174	34,134	45	8,257	174	35,061	174	35,061	174	35,061
OP Podiatry			363	32,944	272	24,571	95	7,940	1,592	142,588	1,598	143,122	1,599	143,211
Ophthalmology	1,327	134,840	1,290	130,093	1,490	141,659	410	36,449	1,429	304,377	1,598	340,374	1,707	363,591
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Pacer/AICD					248	28,254	55	5,926	250	33,235	251	33,384	252	33,533
PV	1,666	318,238	1,742	328,526	1,069	214,360	434	59,015	1,120	269,408	1,140	274,256	1,161	279,362
Plastic	1,685	252,984	1,676	240,194	1,726	245,096	136	10,068	1,678	235,798	1,686	236,910	1,694	238,022
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Robo	1,126	334,374	1,134	336,024	1,006	292,588	267	76,613	1,062	338,073	1,067	339,903	1,072	341,733
Ortho Spine	1,058	236,929	1,005	216,629	1,083	238,752	249	56,178	289	89,590	309	95,790	323	100,130
Neuro Spine			71	20,012	98	24,565	37	8,541	868	205,180	893	211,430	920	218,000
Structural Heart	55	16,067			489	89,119	156	29,681	130	33,930	150	39,150	150	39,150
Thoracic			464	85,225	502	89,309	137	24,164	610	126,961	620	129,002	630	131,043
Urology	370	76,790							532	96,108	538	96,972	544	97,856
Total	22,648	3,879,075	24,111	4,119,604	24,072	4,055,367	6,334	1,052,063	25,572	4,130,825	25,936	4,937,550	26,483	5,039,643

- 1) Spine Surgery will separate into Neuro Spine & Ortho Spine in October 2016
- 2) FY2016 time period is October-December 2015
- 3) Fiscal Year ("FY") 2016 (annualized volume) equals 25,336. This is an 11.86% increase over FY 2013.

Cases & Minutes represent all activity 24/7

Exhibit 3

All Cases FY2013-FY2016 (FY2016 October-December)				
	FY2013	FY2014	FY2015	FY2016 Oct-Dec
Total number of cases performed	22,648	24,111	24,072	6,334
Annual increase in surgical cases performed	269	1,463	-39	*1264
Number of operating rooms	38	38	38	38
Avg. annual number of surgical cases per room	596	635	633	167
Total number of surgical case hours	64,651	68,660	67,589	17,534

*Annual increase in surgical cases performed FY2016 October 1,2015-December 31, 2015 is annualized.

Block Cases FY2013-FY2016 October-December				
	FY2013	FY2014	FY2015	FY2016 Oct-Dec
Total number of cases performed	20,408	21,594	21,684	5,596
Annual increase in surgical cases performed	242	1,186	90	*700
Number of operating rooms	38	38	38	38
Avg. annual number of surgical cases per room	537	568	571	147
Total number of surgical case hours	58,168	62,011	61,390	15,484
Number of hours available per year	74,891	80,847	79,576	19,894
Capacity / Percentage of Total Hours Utilized	78%	77%	77%	78%

*Annual increase in surgical cases performed FY2016 October 1,2015-December 31, 2015 is annualized.

Exhibit 4

Hartford Hospital
Projected Operation Room Capacity
FY 2017 through FY 2019

Operating Room Utilization Projected with 42 ORs			
	Minutes Utilized	Minutes Available	% Utilized
FY 2017	4,311,743	5,444,480	79%
FY 2018	4,439,385	5,436,320	82%
FY 2019	4,535,679	5,440,400	83%

Operating Room Utilization Projected with 39 ORs			
	Minutes Utilized	Minutes Available	% Utilized
FY 2017	4,311,743	5,054,481	85%
FY 2018	4,439,385	5,046,321	88%
FY 2019	4,535,679	5,050,401	90%

Greer, Leslie

From: Hansted, Kevin
Sent: Friday, March 11, 2016 9:58 AM
To: Greer, Leslie
Cc: Martone, Kim
Subject: FW: Modification Request 16-31851-MDF
Attachments: CON letter.pdf

Leslie, please add this to the record.

Thank you,

Kevin T. Hansted
Staff Attorney
Department of Public Health
Office of Health Care Access
410 Capitol Ave., MS #13HCA
P.O. Box 340308
Hartford, CT 06134
Phone: 860-418-7044
Email: kevin.hansted@ct.gov



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From: Jennifer Groves Fusco [<mailto:jfusco@uks.com>]
Sent: Friday, March 11, 2016 9:53 AM
To: Hansted, Kevin <Kevin.Hansted@ct.gov>
Cc: Doroni, Debra (Debra.Doroni@scasurgery.com) <Debra.Doroni@scasurgery.com>
Subject: RE: Modification Request 16-31851-MDF

Good morning, Kevin.

Please see attached response on behalf of CSC/HSC and their parent corporation, Surgical Care Affiliates. Let me know if you have any questions.

Thanks and have a nice weekend.

Jen

From: Hansted, Kevin [<mailto:Kevin.Hansted@ct.gov>]
Sent: Wednesday, February 17, 2016 9:43 AM
To: Jennifer Groves Fusco
Cc: 'vcarannante@goodwin.com'; Greer, Leslie
Subject: Modification Request 16-31851-MDF

Good morning Attorney Fusco,

Pursuant to Conn. Gen. Stat. § 4-181a(4)(b), attached is a notice regarding a modification request received by HHC Hartford Surgery Center, LLC. Your clients in the original matter were Connecticut Surgery Center, LP and Hartford Surgery Center, LLC. Please let me know if you have any questions.

Thank you,

Kevin T. Hansted
Staff Attorney
Department of Public Health
Office of Health Care Access
410 Capitol Ave., MS #13HCA
P.O. Box 340308
Hartford, CT 06134
Phone: 860-418-7044
Email: kevin.hansted@ct.gov



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Jennifer Groves Fusco
(t) 203.786.8316
(f) 203.772.2037
jfusco@uks.com

March 11, 2016

VIA REGULAR & ELECTRONIC MAIL

Kevin T. Hansted, Staff Attorney
Office of Health Care Access
410 Capital Avenue, MS #13HCA
P. O. Box 340308
Hartford, CT 06106

Re: Docket No. 16-31851-MDF: A Request for Modification of the Certificate of Need
authorized under Docket NO. 13-31851-CON
HHC Hartford Surgery Center, LLC

Dear Attorney Hansted,

This office represents Surgical Care Affiliates, LLC (“SCA”), the owner of Connecticut Surgery Center and the former Hartford Surgery Center. We are in receipt of your February 17, 2016 letter regarding HHC Hartford Surgery Center, LLC’s (“HHC”) request to modify the Agreed Settlement in Docket No. 13-31851-CON. Thank you for the opportunity to provide comments on HHC’s proposal.

SCA has no objection to HHC’s request to extend the CON expiration deadline through December of 2016. SCA does, however, have concerns about Hartford Hospital’s proposal to add three operating rooms on its main campus. Specifically, SCA questions whether a request to modify an Agreed Settlement between OHCA and HHC to establish an outpatient joint-venture ASC is the appropriate procedural vehicle by which to authorize (or not) additional OR capacity at Hartford Hospital.

SCA urges OHCA to consider whether Hartford Hospital’s claims regarding utilization and capacity are “changed conditions” relative to the HHC CON proceeding under Docket No. 13-3185-CON sufficient to justify a modification, or if this proposal is more appropriately addressed through filing of a CON application. Hartford Hospital filed a CON application for the addition of these operating rooms on March 8, 2016. The CON process, which is already underway, will allow OHCA to undertake a more in-depth analysis of the data and need presented, which are not clear or complete.

Kevin T. Hansted
March 11, 2016
Page 2

Thank you for your consideration.

Very Truly Yours,



Jennifer G. Fusco

cc: Debra Daroni
Vincenzo Carannante, Esq.

Greer, Leslie

From: Hansted, Kevin
Sent: Monday, March 21, 2016 6:54 AM
To: Greer, Leslie
Subject: Fw: Modification Request 16-31851-MDF
Attachments: DPH Ltr.pdf

Leslie, please add to the record.

Kevin T. Hansted
Staff Attorney
Department of Public Health
Office of Health Care Access
410 Capitol Ave., MS #13HCA
P.O. Box 340308
Hartford, CT 06134
Phone: 860-418-7044

From: Carannante, Vincenzo <VCarannante@goodwin.com>
Sent: Friday, March 18, 2016 3:29 PM
To: Hansted, Kevin
Cc: Jennifer Groves Fusco (jfusco@uks.com)
Subject: RE: Modification Request 16-31851-MDF

Hi Kevin: Please see the attached document for our response. Please let me know if you have any questions or need anything else.

Vin

Shipman & Goodwin LLP
C O U N S E L O R S A T L A W

Vincenzo Carannante
Partner
One Constitution Plaza
Hartford, CT 06103-1919

Tel (860) 251-5096
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vcarannante@goodwin.com
www.shipmangoodwin.com

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From: Hansted, Kevin [mailto:Kevin.Hansted@ct.gov]
Sent: Friday, March 11, 2016 11:35 AM
To: Carannante, Vincenzo
Cc: Jennifer Groves Fusco (jfusco@uks.com)
Subject: RE: Modification Request 16-31851-MDF

You are not required to respond but you may do so. If you wish to respond please do so on or before March 18, 2016.

Thank you,

Kevin T. Hansted
Staff Attorney
Department of Public Health
Office of Health Care Access
410 Capitol Ave., MS #13HCA

P.O. Box 340308
Hartford, CT 06134
Phone: 860-418-7044
Email: kevin.hansted@ct.gov



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From: Carannante, Vincenzo [<mailto:VCarannante@goodwin.com>]
Sent: Friday, March 11, 2016 11:33 AM
To: Hansted, Kevin <Kevin.Hansted@ct.gov>
Subject: RE: Modification Request 16-31851-MDF

No problem. Can we / would you like us to respond to this letter? If so, how long do we have to respond?
Thanks and let me know,
Vin

Shipman & Goodwin LLP
COUNSELORS AT LAW

Vincenzo Carannante
Partner
One Constitution Plaza
Hartford, CT 06103-1919

Tel (860) 251-5096
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From: Hansted, Kevin [<mailto:Kevin.Hansted@ct.gov>]
Sent: Friday, March 11, 2016 11:28 AM
To: Carannante, Vincenzo
Subject: FW: Modification Request 16-31851-MDF

Hi Vin,

Sorry about that. I thought it was attached.

Kevin T. Hansted
Staff Attorney
Department of Public Health
Office of Health Care Access
410 Capitol Ave., MS #13HCA
P.O. Box 340308
Hartford, CT 06134
Phone: 860-418-7044
Email: kevin.hansted@ct.gov



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Sent: Friday, March 11, 2016 9:53 AM
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Cc: Doroni, Debra (Debra.Doroni@scasurgery.com) <Debra.Doroni@scasurgery.com>
Subject: RE: Modification Request 16-31851-MDF

Good morning, Kevin.

Please see attached response on behalf of CSC/HSC and their parent corporation, Surgical Care Affiliates. Let me know if you have any questions.

Thanks and have a nice weekend.

Jen

From: Hansted, Kevin [<mailto:Kevin.Hansted@ct.gov>]
Sent: Wednesday, February 17, 2016 9:43 AM
To: Jennifer Groves Fusco
Cc: 'vcarannante@goodwin.com'; Greer, Leslie
Subject: Modification Request 16-31851-MDF

Good morning Attorney Fusco,

Pursuant to Conn. Gen. Stat. § 4-181a(4)(b), attached is a notice regarding a modification request received by HHC Hartford Surgery Center, LLC. Your clients in the original matter were Connecticut Surgery Center, LP and Hartford Surgery Center, LLC. Please let me know if you have any questions.

Thank you,

Kevin T. Hansted
Staff Attorney
Department of Public Health
Office of Health Care Access
410 Capitol Ave., MS #13HCA
P.O. Box 340308
Hartford, CT 06134
Phone: 860-418-7044
Email: kevin.hansted@ct.gov



Vincenzo Carannante
Phone: (860) 251-5096
Fax: (860) 251-5311
vcarannante@goodwin.com
Admitted in Massachusetts, Connecticut and Rhode Island

March 18, 2016

VIA ELECTRONIC MAIL

Kevin T. Hansted
Staff Attorney
Department of Public Health
Office of Health Care Access
Email: kevin.hansted@ct.gov

Re: Docket No. 16-31851-MDF: A Request for Modification of the Certificate of Need authorized under Docket No. 13-31851-CON

Dear Attorney Hansted,

Thank you for the opportunity to provide a response to the comments submitted by Attorney Fusco on behalf of her client, Surgical Care Affiliates, LLC (“SCA”), the parent company of the Connecticut Surgery Center and the Hartford Surgical Center.

SCA questioned whether a request to modify an Agreed Settlement between OHCA and HHC Hartford Surgery Center, LLC (“HHC”) (the “Agreed Settlement”) is the appropriate procedural vehicle to process HHC’s requests. For the following reasons, HHC believes its request for a modification (the “Modification”) is in accordance with applicable Connecticut law and the most appropriate procedural avenue to process its requests.

As you know, and pursuant to Section 4-181a(b) of the Connecticut General Statutes, OHCA may modify a final decision upon a showing of changed conditions. With respect to the final decision in the present matter (i.e. the Agreed Settlement between HHC and OHCA), two of the conditions/premises that OHCA’s final decision was based on were the surgical volumes and capacity at Hartford Hospital and the closure of four (4) operating rooms by/at Hartford Hospital. See the last paragraph on page 11 of 15 of the Agreed Settlement. More specifically, at the time the proposal/application was submitted in relation to Docket No. 13-31851-CON and at the time the parties agreed to the Agreed Settlement, Hartford Hospital believed that it could accommodate its then current and projected surgical volumes without the four (4) operating

rooms it agreed to close as part of the proposal and Agreed Settlement. Subsequent to the Agreed Settlement, however, Hartford Hospital has experienced an unforeseen and larger than expected increase in surgical volumes that would make the closure of four (4) of its operating rooms unworkable as further described in the Modification. One of the reasons for this growth was the unexpected closure of the Hartford Surgical Center as of January 1, 2016. For this reason alone, Hartford Hospital expects to absorb an additional 600 surgical cases. Furthermore, Hartford Hospital has experienced an overall increase in complex surgeries which requires more operating room time and, thus, further reduces Hartford Hospital's operating room capacity. While an increase in complex surgical cases was expected by Hartford Hospital, the rate at which such cases increased was unanticipated. Accordingly, HHC believes that it has provided OHCA with sufficient evidence of a changed condition and respectfully requests that OHCA approve the Modification.

SCA has also questioned whether HHC's Modification is the appropriate procedural vehicle "by which to authorize (or not) additional OR capacity at Hartford Hospital." First, Hartford HealthCare is an integrated delivery system and many of its CON applications involve and/or impact multiple facilities/providers within its health system. Second, the surgery center that was established pursuant to Docket No. 13-31851-CON is part of and on Hartford Hospital's main campus. Finally and most importantly, if Hartford Hospital's involvement in Docket No. 13-31851-CON was permitted previously by OHCA including, Hartford Hospital having to close four (4) of its operating rooms, it makes perfect procedural sense to permit a change in this CON condition via the modification of Docket No. 13-31851-CON, the very CON that was the impetus for Hartford Hospital's OR closures.

Finally, SCA states that the CON application process, as opposed to the modification request process, will allow OHCA to undertake a more in-depth analysis of HHC's request. We respectfully disagree with this statement. As you know and with respect to OHCA's analysis of HHC's Modification, OHCA is not restricted in any manner. For example, just as with a CON Application, OHCA may ask HHC for any additional information it deems necessary to process the Modification, which would allow OHCA to perform as in depth of an analysis as it wants to undertake.

Thank you for your consideration.

Sincerely,

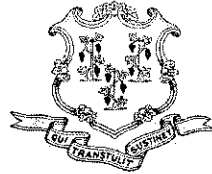

Vincenzo Carannante

Cc: Jennifer Groves Fusco (via e-mail at jfusco@uks.com)

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

State of Connecticut Department of Public Health Office of Health Care Access

Final Decision

Modification of a Previously Authorized Certificate of Need

Applicant: HHC Hartford Surgery Center, LLC
80 Seymour Street, Hartford, CT 06106

Docket Number: 16-31851-MDF

Project Description: Modification of Previous Certificate of Need
Authorization 13-31851-CON

Procedural History: On June 11, 2014, the Office of Health Care Access ("OHCA") granted a Certificate of Need ("CON") to HHC Hartford Surgery Center, LLC ("HHC") by way of an Agreed Settlement issued under Docket Number 13-31851-CON, for the establishment of an ambulatory surgery center to be located on the campus of Hartford Hospital.

On February 16, 2016, OHCA received a Request for Modification seeking to extend the CON expiration date to December 31, 2016 and revise condition #5. On February 17, 2016, OHCA notified the Intervenor, Connecticut Surgery Center, LP and Hartford Surgery Center, LLC, of the Applicants' Request for Modification and asked that comments be submitted to the office on or before March 11, 2016. The Intervenor, by way of a response dated March 11, 2016, did not dispute the Applicant's volumes or projections. Deputy Commissioner Brancifort has reviewed the entire record in this matter.



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410 Capitol Avenue, P.O. Box 340308
Hartford, Connecticut 06134-0308
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Affirmative Action/Equal Opportunity Employer

Findings of Fact

1. On June 11, 2014, OHCA granted a CON to HHC Hartford Surgery Center, LLC (“HHC”) for the establishment of an ambulatory surgery center to be located on the campus of Hartford Hospital.
2. The Applicant experienced severe weather related delays in construction of the new ambulatory surgery center.
3. Pursuant to condition #5 of the CON, based upon the projected volume of cases, HHC was required to remove four existing outpatient operating rooms at Hartford Hospital’s main campus upon the commencement of operations of the new ambulatory surgery center.
4. Since 2013, Hartford Hospital has experienced an 11.86% increase in surgical volume.
5. Hartford Hospital is projecting an increase of approximately 600 additional surgical cases as a result of the closure of Hartford Surgical Center.
6. Hartford Hospital’s operating rooms are operating at approximately 78% capacity.
7. The closure of four operating rooms at Hartford Hospital’s main campus will negatively impact access to services for the population served by Hartford Hospital.
8. The Applicant is requesting that condition #5 be changed to allow for the closure of one operating room at Hartford Hospital’s main campus.

Discussion

Connecticut General Statutes § 4-181a (b) provides in relevant part: “On a showing of changed conditions, the agency may reverse or modify the final decision, at any time, at the request of any person or on the agency’s own motion.” The Applicant is seeking to extend the CON expiration date to December 31, 2016 as a result of changed conditions related to construction delays caused by severe weather. Additionally, the closure of Hartford Surgical Center and unexpected increase in surgical volume represent changed conditions. The Applicant has sufficiently identified certain unforeseen conditions that warrant an extension of the CON expiration date and a revision to condition #5.

Order

Based upon the foregoing, the request to modify the CON issued under Docket Number 13-31851-CON to extend the expiration date and revise condition #5 is hereby **APPROVED**. The new expiration date is December 31, 2016 and condition #5 shall read as follows:

5. HHC shall provide written attestation, within ten (10) business days following the date of commencement of operations at HHC, that one existing outpatient operating room at Hartford Hospital's main campus in Hartford has been removed from service.

March 23, 2016
Date

Janet M. Brancifort
Janet M. Brancifort, MPH, RRT
Deputy Commissioner

* * * COMMUNICATION RESULT REPORT (MAR. 23. 2016 3:44PM) * * *

FAX HEADER:

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REASON FOR ERROR
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 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: BARBARA DURDY

FAX: 860 972-4650

AGENCY: HH HARTFORD SURGERY CENTER

FROM: OHCA

DATE: 3/23/16 **Time:** _____

NUMBER OF PAGES: _____
(including transmittal sheet)

Comments:
 Please see attached Modification decision.

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**