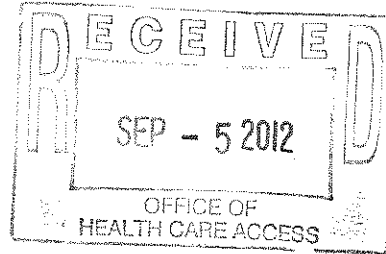


S.B.D.I. Holding, LLC

300 Seaside Avenue, Milford, Connecticut 06460

August 31, 2012

Office of Health Care Access
410 Capital Avenue
MS#13HCA
P.O. Box 340308
Hartford, CT 06134



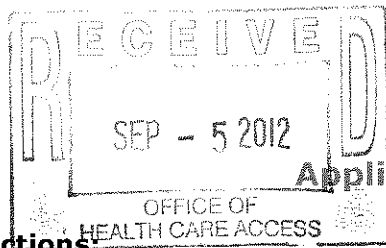
To Whom it May Concern,

Please find enclosed the check for the C.O.N. intended for the transfer of ownership of a CT Scanner from Radiology Associates of Middletown to SBDI Holding. The check was sent in error before the 20 days had lapsed since the appearance of the legal noticed in the New Haven Register. The C.O.N. application remained on site with OCHA.

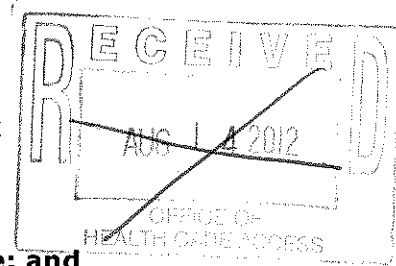
Respectfully,

A handwritten signature in cursive script that reads "Debra Mauriello".

Debra Mauriello
Director, Diagnostic Imaging
Milford Hospital
300 Seaside Avenue
Milford, CT 06460
203-876-4241
debi.mauriello@milfordhospital.org



Application 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 the CON application filing fee in the form of a certified, cashier or business check made out to the "Treasurer State of Connecticut" in the amount of \$500.

For OHCA Use Only:

Docket No.: 12-31784-CON Check No.: 285 285
 OHCA Verified by: [Signature] Date: 9/5/12

- 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) 428-7053, at the time of the publication)

- Attached is a paginated hard copy of the CON application including a completed affidavit, signed and notarized by the appropriate individuals.

- Attached are completed Financial Attachments I and II.

- Submission includes one (1) original and four (4) hard copies with each set placed in 3-ring binders.

Note: A CON application may be filed with OHCA electronically through email, if the total number of pages submitted is 50 pages or less. In this case, the CON Application must be emailed to ohca@ct.gov.

Important: For CON applications (less than 50 pages) filed electronically through email, the signed affidavit and the check in the amount of \$500 must be delivered to OHCA in hardcopy.

- 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 documents in MS Word and MS Excel as appropriate.

AFFIDAVIT

Applicant: S.B.D.I. Holding, LLC

Project Title: Change of Ownership - CT Scanner

I, Joseph Pelaccia, Manger
(Individual's Name) (Position Title - CEO or CFO)

of SBDI Holding, LLC being duly sworn, depose and state that
(Hospital or Facility Name)

SBDI Holding, LLC's information submitted in this Certificate of
(Hospital or Facility Name)

Need Application is accurate and correct to the best of my knowledge.

Joseph Pelaccia
Signature

8-8-2012
Date

Subscribed and sworn to before me on August 8, 2012

Rosa Diaz

Notary Public/Commissioner of Superior Court

My commission expires: 3/31/2015

AFFIDAVIT

Applicant: S.B.D.I. Holding, LLC

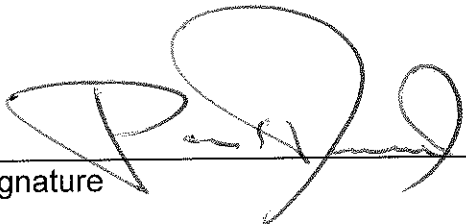
Project Title: Change of ownership - CT Scanner

I, Paul Davis MD, manager
(Individual's Name) (Position Title - CEO or CFO)

of SBDI Holding LLC being duly sworn, depose and state that
(Hospital or Facility Name)

SBDI Holding, LLC's information submitted in this Certificate of
(Hospital or Facility Name)

Need Application is accurate and correct to the best of my knowledge.


Signature

8-8-2012
Date

Subscribed and sworn to before me on August 8, 2012

Asa Davis

Notary Public/Commissioner of Superior Court

My commission expires: 3/31/2015

FORECLOSURES

LEGAL NOTICE FORECLOSURE AUCTION SALE

Docket No.:
NNH-CV-11-6020281-S
Case Name:
City of New Haven
vs.
Three Seventy Three
Blatchley 2003 Inc. et al.
Property Address:
373-375 Blatchley Avenue
New Haven, CT
Property Type:
Multi-family apartments
Date of Sale:
August 18, 2012
at 12:00 pm
Committee Name:
Brian C. Fournier, Esq.
Phone Number:
(203) 389-9500
See Foreclosure
Sales at

LEGAL NOTICE FORECLOSURE AUCTION SALE

CASE NAME:
THE BANK OF NEW YORK
MELLON TRUST
COMPANY
vs.
NATIONAL ASSOCIATION
MICHAEL A. RIVERA,
ET AL
DOCKET #
CV-11-6017581 S
PROPERTY
ADDRESS:
90 Cloudland Road
North Haven, CT
PROPERTY TYPE:
RESIDENTIAL

LEGAL NOTICE FORECLOSURE AUCTION SALE

DOCKET NO.:
NNH CV 11 6017986 S
CASE NAME:
COUNTRY LUMBER, INC.
vs.
IGOR URSINI, ET AL
PROPERTY ADDRESS:
766 GAYLORD
MOUNTAIN ROAD,
HAMDEN, CT
PROPERTY TYPE:
VACANT LAND
DATE OF SALE:
AUGUST 18, 2012
COMMITTEE NAME:
JONATHAN J. EINHORN
PHONE NUMBER:
203-777-3777
See Foreclosure
Sales at
www.jud.ct.gov

LEGAL NOTICE FORECLOSURE AUCTION SALE

Docket No.:
NNH CV-11-6023527S
Case Name:
U.S. BANK NATIONAL
ASSOCIATION
AS TRUSTEE
vs.
JULIA M. BONTATIBUS,
ET AL
Property Address:
8 CLARENDON ST.
BRANFORD, CT
Property Type:
RESIDENTIAL
Date of Sale:
AUGUST 18, 2012
at 12:00, NOON
Committee Name:
JASON G.
DEGENARO, ESQ.
Committee
Phone Number:

LEGALS

LIQUOR PERMIT

Notice of Application
This is to give notice that I,
EL-ALWANI RAZAN
2340 NORTH AVE
BRIDGEPORT, CT
06604-2315
have filed an application
placarded 8/13/2012 with
the Department of Consu-
mer Protection for a GRO-
CERY BEER PERMIT for
the sale of alcoholic liquor
on the premises at 1064
DIXWELL AVE HAMDEN
CT 06514-4912 The busi-
ness will be owned by: WA-
SIM MART LLC Objections
must be filed by: 09/24/12

EL-ALWANI RAZAN

LEGALS

CITY OF NEW HAVEN - BID NOTICE

Sealed bids, to purchase
the following, will be ac-
cepted by the Bureau of
Purchases, Room 301, 200
Orange Street, New Haven,
CT 06510 until 3:00 P.M.,
local time, on the date
shown, at which time they
will be publicly opened and
read. Bid forms are avail-
able online at
www.cityofnewhaven.com/purchasing.

Grocery 21150 BOE
August 22, 2012

2509645

LEGALS

LEGAL NOTICE

SBDI Holding, LLC is apply-
ing for a certificate of need
pursuant to CT state stat-
utes 19a-638, at 687 Camp-
bell Ave, West Haven, CT.
Applicant proposes a trans-
fer of ownership of an exist-
ing CT Scanner. Total capi-
tal expenditure is \$10,000.

CALL 203-777-3278 or
(TOLL FREE) 1-877-872-3278
TO PLACE
YOUR
CLASSIFIED AD

NEED A CAR?
SHOP THE CLASSIFIEDS!

LEGALS

CALL EARLY, CALL LATE! CLASSIFIED IS OPEN

8AM - 5:30 PM
MON. - FRI.
Or email to:
CLASSIFIEDADS
@NHREGISTER.COM

**Carpenters,
Painters,
Landscapers**
Place your ad in our Business
Card Section or our Service Di-
rectory. Our readers will call
you! They trust our advertisers
to do the job right! Give us a
call today!

LEGALS

LEGAL NOTICE

Solicitation of Proposals — Modernization Consulting
& Grant Administration Services

The Hamden Housing Authority is soliciting proposals for modernization and grant administration consulting services. Services include technical services required to administer all aspects of its Modernization Programs.

This may include Section 3, Fair Housing, Equal Opportunity, Davis-Bacon Wage Rate Monitoring, and periodic construction inspections.

Program design and specifications are not included as part of this Request for Proposal. All activities will be performed in strict accordance with all guidelines and requirements established by the U.S. Department of Housing and Urban Development (H.U.D.) and the Department of Economic and Community Development (DECD) as they may apply. Procurement and contract award are subject to all applicable Federal, State, and local laws/regulations. Request for Proposal documents may be obtained at the offices of the Hamden Housing Authority, 51 Worth Avenue, Hamden, CT 06518. Proposals are due not later than 11:00 a.m. on Friday, August 31, 2012.

AN AFFIRMATIVE ACTION / EQUAL EMPLOYMENT
OPPORTUNITY EMPLOYER
MBE's, WBE's, SBE's and SECTION 3
DESIGNATED ENTERPRISES
ARE ENCOURAGED TO SUBMIT

2509548

INVITATION TO BID

Persons qualified to perform required services in a timely manner (25 Points).
2. Evaluation of staff personnel (25 Points).
3. Experience - DECD programs and/or CHFA Programs (25 Points).
4. Other relative experience (15 Points).
5. Overall response to RFQ (10 Points).

All interested firms shall submit proposals to:

Hazelann Cook
Executive Director
Housing Authority of the Town of Hamden
51 Worth Avenue
Hamden, CT 06518

by 11:00 a.m. on or before Wednesday, August 29, 2012.

Further information may be obtained by calling the Housing Authority at (203) 248-9036 X 100.

AN AFFIRMATIVE ACTION /
EQUAL OPPORTUNITY EMPLOYER

2509544

LEGALS

Request For Quotation #02-1213

The State of Connecticut Judicial Branch invites licensed contractors to submit quotations to provide AHU Replacement and Control Upgrades at a Judicial location in Hartford, CT.

A Mandatory Pre-Bid Conference will be held on August 22, 2012 at 10:00 a.m. Complete details are available in the bid documents.

Sealed quotations must be received by September 11, 2012 no later than 11:30 a.m. Immediately thereafter all quotations will be publicly opened and prices read aloud.

ONLY VENDORS CURRENTLY REGISTERED UNDER THE STATE'S SMALL BUSINESS SET-ASIDE PROGRAM ARE ELIGIBLE TO BID.

Bid package with specifications for this project may be accessed from the web site below, however drawings which are part of the bid package cannot be downloaded. A complete set of documents may be picked up at Purchasing Services at: 90 Washington St., 4th Floor, Hartford, CT or call (860) 706-5200 to request by mail.

PLEASE CHECK THE JUDICIAL WEB SITE AT:

www.jud.ct.gov/external/news/busopp/Default.html

JUDICIAL BRANCH
PURCHASING SERVICES
90 WASHINGTON STREET
HARTFORD, CT 06106

An Equal Opportunity/Affirmative Action Employer

LEGALS

Notice of Tentative L...
Structures, Dredging & Fill
Applicant: Wieland Family-Joshua Point, LLC
Application No. 201202405-TS
Town: Guilford

The Department of Energy and Environmental Protection, ("DEEP") hereby gives notice that a tentative determination has been reached to approve the following application submitted under Section 22a-361 of the Connecticut General Statutes ("CGS") for a permit to conduct work waterward of the high tide line in tidal, coastal or navigable waters of the state for recreational boating access. The Commissioner also gives notice that a hearing may be held on this application if the Commissioner determines that the public interest will best be served thereby.

Applicant's Name and Address: Wieland Family-Joshua Point, LLC, 225 Joshua Point Road, Guilford, CT 06437

Contact Name and Phone No.: David Provencher, Coastline Consulting & Development, LLC, 5-B Old Post Road, Madison, CT 06443

Site Location: 250 Joshua Point Road

PROPOSED ACTIVITY
The proposed activity includes the following and will affect coastal resources: install a shared dock.

INFORMATION REQUESTS/PUBLIC COMMENT
Interested persons may obtain a copy of the application from the above contacts, or by sending a request for an electronic copy to DEEP at Tonia.Selmeski@ct.gov. The application is available for inspection at the DEEP Office of Long Island Sound Programs, 79 Elm Street, Hartford, from 8:30 - 4:30 Monday through Friday. Additional surveys, plans or other materials may be available with the original application file at DEEP. All interested parties are invited to express their views on the tentative determination concerning this application. Written comments on the application should be directed to Tonia L. Selmeski, DEEP Office of Long Island Sound Programs, 79 Elm Street, Hartford, CT 06106-5127, no later than September 8, 2012. Comments regarding this application may be submitted via electronic mail to: Tonia.Selmeski@ct.gov.

Date: August 9, 2012
Approved By:
Brian P. Thompson, Director

ADA PUBLICATION STATEMENT
The Connecticut Department of Energy and Environmental Protection is an Affirmative Action and Equal Opportunity Employer that is committed to the requirements of the Americans With Disabilities Act. To request an accommodation call 860-424-3194, or deep.hrpnd@ct.gov. 2509564

LEGAL NOTICE

SBDI Holding, LLC is applying for a certificate of need pursuant to CT state statutes 19a-638, at 687 Campbell Ave. West Haven, CT. Applicant proposes a transfer of ownership of an existing CT Scanner. Total capital expenditure is \$10,000.

LEGAL NOTICE

In accordance with the provisions of State law, there being due and unpaid charges for which the undersigned is entitled to satisfy an owner and/or hereinafter described and stored at the Uncle Bob's Self Storage location(s) listed below. And, due notice having been given to

LEGALS

NOTICE OF TENTATIVE DETERMINATION INTENT TO RENEW A NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM PERMIT FOR THE FOLLOWING DISCHARGES INTO THE WATERS OF THE STATE OF CONNECTICUT

The Commissioner of the Department of Energy and Environmental Protection hereby gives notice of a tentative determination to renew for two years without modification the General Permit for the Discharge of Stormwater from Small Municipal Separate Storm Sewer Systems under section 22a-430b of the Connecticut General Statutes for discharges of stormwater from municipal separate storm sewer systems into the waters of the state.

Application No.: n/a
Applicant's Name and Address: n/a
Contact Name and Phone No.: n/a
Type of Permit: General Permit for the Discharge of Stormwater from Small Municipal Separate Storm Sewer Systems

Type of Facility: n/a
Facility Location: 113 municipalities, listed in Appendix A of the permit

PROPOSED ACTIVITY/FACILITY

The proposed permit would continue to authorize the discharge of stormwater from 113 municipal separate storm sewer systems. The discharges will occur statewide, to a wide variety of receiving water bodies.

COMMISSIONER'S FINDINGS

In accordance with applicable federal and state law, the Commissioner has made a tentative determination that continuance of the existing discharge would not cause pollution of the waters of the state and the Commissioner proposes to issue a permit for these discharges.

The proposed permit, if issued by the Commissioner, will require periodic monitoring to demonstrate that the discharge will not cause pollution.

Registrants are advised that they must continue to operate under the terms and conditions set forth in the General Permit for the Discharge of Stormwater from Small Municipal Separate Storm Sewer Systems, initially issued on January 9, 2004. This includes the submission on an annual basis of Annual Reports with the fee (\$187.50) and stormwater sampling results. Registrants must maintain and update their Stormwater Management Plans as specified in the general permit and complete implementation of all elements of that general permit.

The Commissioner of Energy and Environmental Protection is authorized to approve or deny such permits pursuant to section 402(b) of the Federal Water Pollution Control Act, as amended, 33 USC 1251, et. seq. and section 22a-430 of the Connecticut General Statutes and the Water Discharge Permit Regulations (section 22a-430-3 and 4 of the Regulations of Connecticut State Agencies).

REGULATORY CONDITIONS

Type of Treatment: No treatment is required. Best management practices are required as part of proposed permit's required six Minimum

LEGALS

Notice of Tentative Determination to Approve Structures, Dredging & Fill Applicant: Richard & Darylle Connelly Application No. 201203952-DL Town: Westbrook

The Department of Energy and Environmental Protection ("DEEP") hereby gives notice that a tentative determination has been reached to approve the following application submitted under Section 22a-361 of the Connecticut General Statutes ("CGS") for a permit to conduct work waterward of the high tide line in tidal, coastal or navigable waters of the state for recreational access and flood and erosion control. The Commissioner also gives notice that a hearing may be held on this application if the Commissioner determines that the public interest will best be served thereby.

Applicant's Name and Address: Richard & Darylle Connelly, 15 Briarwood Drive, Guilford, CT 06437 Contact Name and Phone No.: Rob Shickel, P.O. Box 846, Essex, CT 06426, rshickel@aol.com, 860-767-2269

Subcontractor/Supplier/Contractor committed to the requirements of the Americans With Disabilities Act. To request an accommodation call 860-424-3194 or send an e-mail to deep.hrm@dct.gov. 2509421

Janitorial Services INVITATION TO BID

Quotations for janitorial services are being accepted by The Connecticut Housing Finance Authority for up to 3 years commencing September 3, 2012 at its office building located at 999 West

LEGALS

PUBLIC NOTICE

Notice of sales or other disposition pursuant to Connecticut State Statutes Section 42-106 to 42-169. Notice is hereby given that "PSORANGECO" will sell at PUBLIC AUCTION the personal property in the units to satisfy unpaid storage rentals of delinquent accounts. Sales to be paid in cash only at the time of sales. Contents to be removed off the premises the same day. Tenants may claim their merchandise up to the time of sales by paying their just debts and vacate.

Public Storage, Inc 77 Mill Plain Road #83 Danbury, CT 06811

Alissa Gerber unit 1178-boxes,bags,totes Randy Huinker unit 2050-boxes,bags,totes Scooty Whitaker unit 2147-boxes,bags,totes Joanne Caviness unit 2297-boxes,bags,totes

Sale to be held on August 21st 2012 at 10:00am

Public Storage, Inc 35 Hoyt Street Norwalk, CT 06851

Daine Roswess unit 1010-boxes,bags,totes Nicole Ferguson unit 1051-boxes,bags,totes Renex Alexis unit 1076-boxes,bags,totes James Robinson unit 1098-boxes,bags,totes Genevieve Gomes unit 3270-bedding,clothing,tools Thomas Palmer unit 3279-boxes,bags,totes Virgil Naveda unit 3283-box,bags,totes Stephanie Roberts unit 5571-boxes,bags,totes

Sale to be held on August 21st 2012 at 10:00am

Public Storage, Inc 1296 Kings Hwy Cutoff Fairfield, CT 06824

Jeff Evans unit A078-boxes,bags,furniture Jacqueline Smith-Wright unit A102-boxes,bags,totes Dorothy Davis unit B047-boxes,bags,totes William Jarett unit C024-boxes,bags,totes Sale to be held on August 21st 2012 10:00am

Public Storage, Inc 168 Bull Hill Lane West Haven, CT 06516

Matt Schoenherr unit 1065-boxes,bags,totes Perrill Murphy unit 2142-boxes,bags,totes Rhodric Randle unit 261-boxes,bags,totes Michael Stromman unit 3052-boxes,bags,totes Taurin Batts unit 3109-boxes,bags,totes Sylvia Sanchez unit 3144-bedding,clothing,furniture April Bowman unit 325-boxe,bags,totes Andre Herbert unit 513-boxes,bags,totes Angela Myers unit 602-boxes,bags,totes



LEGALS

NOTICE OF PUBLIC SALE OF PERSONAL PROPERTY

Notice is hereby given that the undersigned will sell, to satisfy lien of the owner, at public sale by competitive bidding on August 16, 2012 at 1:00 PM at the Extra Space Storage facility located at:

488 BOSTON POST RD. ORANGE, CT 06477 203-795-3759

The personal goods stored therein by the following may include, but are not limited to general household, furniture, boxes, clothes, and appliances.

#1073 Jeff Clark, Motorcycle, #1110 Kyle Searls, #3000 Charles Waters, #3011 Catherine Vergati, #3012 Edward Culligan, #3184 Sandy Bellino, #3221 Lori Frank, #3253 Suzan Skurchak

Purchases must be made with cash only and paid at the time of sales. All goods are sold as is and must be removed at the time of purchase. Extra Space Storage reserves the right to refuse any bid. Sale is subject to adjournment. 2508802

Edward Young c/o David A. Leff, Esq., Levy, Leff & DeFrank, P.C., 129 Church Street, Suite 712, New Haven, CT 06510 2507971

LEGAL NOTICE

SBDI Holding, LLC is applying for a certificate of need pursuant to CT state statutes 19a-638, at 687 Campbell Ave, West Haven, CT. Applicant proposes a transfer of ownership of an existing CT Scanner. Total capital expenditure is \$10,000.

LEGALS

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

NOTICE TO: Shywon Turner, whose last known residence was in the city of New Haven, Connecticut.

Pursuant to an order of Hon. John A. Keyes, Judge, a hearing will be held at New Haven Regional Children's Court, 873 State Street, New Haven, CT 06511 on August 22, 2012 at 1:15 AM on an application for Continued Temporary Custody Pending Removal of Guardian concerning a certain minor child born on September 7, 2010. The Court's decision will affect your interest, if any, as in said application 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 Judge, Frank J. Forgiore 2508835

The Town of Hamden reserves the right to accept or reject any bid. The deadline for bid opening is 11:00 A.M. at which time they will be opened.

T. Zemetis, Judge Tara Bartlett, Assistant Clerk Judicial District of New-Haven 7-11-2012

A True Copy ATTEST: Mark J. White State Marshal

LEGALS

TOWN OF HAMDEN

REQUEST FOR PROPOSAL #12-04

LAW ENFORCEMENT ACCREDITATION MANAGEMENT SUPPORT

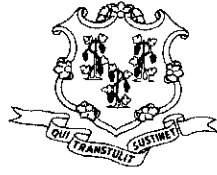
The Town of Hamden is publicly seeking proposals from qualified firms to provide law enforcement accreditation management support to the Hamden Department of Police Services.

It is the sole responsibility of the responder to see that the proposal is in the hands of the proper authority prior to the opening.

Sealed proposals (1 original and 4 copies) will be received at the Finance Office, Hamden Government Center, 2750 Dixwell Avenue, 3rd floor, to be held in the Purchasing lock box on or before August 24, 2012 at 11:00 A.M. at which time they will be opened.

The Town of Hamden reserves the right to accept or reject any bid. The deadline for bid opening is 11:00 A.M. at which time they will be opened.

2. ZONES R-10 AND R-12.5) - Petition of Thomas Collucci for a two lot re-subdivision on Map 53, Block 306, Parcel 45, of which Thomas Collucci



**State of Connecticut
Office of Health Care Access
Certificate of Need Application**

Instructions: Please complete all sections of the Certificate of Need (“CON”) application. If any section or question is not relevant to your project, a response of “Not Applicable” may be deemed an acceptable answer. If there is more than one applicant, identify the name and all contact information for each applicant. OHCA will assign a Docket Number to the CON application once the application is received by OHCA.

Docket Number:

Applicant: SBDI Holding, LLC

Contact Person: Debra Mauriello

Contact Person’s Title: Director, Diagnostic Imaging, Milford Hospital

**Contact Person’s
Address: 300 Seaside Ave. Milford, CT 06460**

**Contact Person’s
Phone Number: 203-876-4241**

**Contact Person’s
Fax Number: 203-876-4539**

**Contact Person’s
Email Address: debi.mauriello@milfordhospital.org**

Project Town: West Haven

Project Name: West Haven, CT Ownership Transfer

Statute Reference: Section 19a-638, C.G.S.

**Estimated Total
Capital Expenditure: \$10,000**

1. Project Description: Acquisition of Equipment

- a. Please provide a narrative detailing the proposal.
See Attachment A
- b. Provide letters that have been received in support of the proposal.
Please find attached.
- c. Provide the Manufacturer, Model, Number of slices/tesla strength of the proposed scanner (as appropriate to each piece of equipment).
Toshiba Asteion 4-Slice CT Scanner
- d. List each of the Applicant's sites and the imaging modalities and other services currently offered by location.
SBDI Holding d.b.a. Diagnostic Imaging of Milford = Digital Mammography, Ultrasound, Bone Density, X-Ray, Fluoroscopy and MRI
SBDI Holding d.b.a. Diagnostic Imaging of West Haven = Digital Mammography, Ultrasound and X-Ray

2. Clear Public Need

- a. Explain why there is a clear public need for the proposed equipment. Provide evidence that demonstrates this need.
See Attachment B
- b. Provide the utilization of existing health care facilities and health care services in the Applicant's service area.
See Attachment B
- c. Complete **Table 1** for each piece of equipment of the type proposed currently operated by the Applicant at each of the Applicant's sites.

Table 1: Existing Equipment Operated by the Applicant

Provider Name Street Address Town, Zip Code	Description of Service *	Hours/Days of Operation **	Utilization ***
+ Diagnostic Imaging of West Haven 687 Campbell Ave. West Haven, CT 06516	CT Scan 4-Slice	Mon-Fri. 8:30am to 5:00pm Sat. 8:30am to 12:00pm	631 (Jan. 2011 to Dec. 2011)
++ Diagnostic Imaging Of Milford 30 Commerce Park Milford, CT 06460	CT Scan 8-Slice	Mon-Fri. 8:00am to 5:00pm	1706 (Jan. 2011 to Dec. 2011)

+ Proposed Site
++ Current Site

* Include equipment strength (e.g. slices, tesla strength), whether the unit is open or closed (for MRI)
** Days of the week unit is operational, and start and end time for each day; and
*** Number of scans/exams performed on each unit for the most recent 12-month period (identify period).

- d. Provide the following regarding the proposal's location:
- i. The rationale for locating the proposed equipment at the proposed site;
The CT Scanner is currently located and operating in West Haven at an existing imaging center. We do not propose a change of location.
 - ii. The population to be served, including specific evidence such as incidence, prevalence, or other demographic data that demonstrates need;
The population to be scanned is the city of West Haven. Annual utilization values for CT Scan in the New England area are 173.77 scans per 1,000 people. As the sole CT Scanner in the city it has already proved itself a valuable community asset.
 - iii. How and where the proposed patient population is currently being served;
The existing CT Scanner located at 687Cambell Ave. West Haven, CT owned by Radiology Associates of Middletown is currently serving the population.
 - iv. All existing providers (name, address) of the proposed service in the towns listed above and in nearby towns;
**West Haven=No additional providers of CT
Orange=No CT Scan providers
Milford=Milford Hospital, 300 Seaside Ave. Milford, CT 06460 and Diagnostic Imaging of Milford, 30 Commerce Park, Milford, CT 06460
New Haven=Yale New Haven Hospital, New Haven, CT and St. Raphael Hospital, New Haven, CT**
 - v. The effect of the proposal on existing providers; and
None
 - vi. If the proposal involves a new site of service, identify the service area towns and the basis for their selection.
Not applicable
- e. Explain why the proposal will not result in an unnecessary duplication of existing or approved health care services.
The service already exists. We are only proposing a change of ownership.

3. Actual and Projected Volume

- a. Complete the following tables 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 proposed pieces of equipment (of the type proposed, at the proposed location only). In Table 2a, report the units of service by piece of equipment, and in Table 2b, report the units of service by type of exam (e.g. if specializing in orthopedic, neurosurgery, or if there are scans that can be performed on the proposed scanner that the Applicant is unable to perform on its existing scanners).

Table 2a: Historical, Current, and Projected Volume, by Equipment Unit

	Actual Volume (Last 3 Completed FYs)			CFY Volume*	Projected Volume (First 3 Full Operational FYs)**		
	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014	FY 2015
D.I. Milford	2790	2398	1706	625 (Jan.- May 2012)	1706	1706	1706
D.I.W.H	1081	913	631	245 (Jan.- May 2012)	631	631	631
Total	3871	3311	2337	2337	2337	2337	2337

* 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 six months, report actual volume and identify the period covered.

** 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.

*** Identify each scanner separately and add lines as necessary. Also break out inpatient/outpatient/ED volumes if applicable.

**** Fill in years. In a footnote, identify the period covered by the Applicant's FY (e.g. July 1-June 30, calendar year, etc.).

Note: Applicant's FY year is the calendar year, January to December. Numbers are based on patient exams.

Table 2b: Historical, Current, and Projected Volume, by Type of Scan/Exam

	Actual Volume (Last 3 Completed FYs)			CFY Volume*	Projected Volume (First 3 Full Operational FYs)**		
	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014	FY 2015
CT Scan Neuro Milford	485	456	429	177 (Jan.- May 2012)	429	429	429
CT Scan Body Milford	2114	1811	1111	395 (Jan. to May 2012)	1111	1111	1111
CT Scan Ortho Milford	65	45	59	16 (Jan.- May 2012)	59	59	59
CT Scan Misc. Milford	126	86	107	37 (Jan.- May 2012)	107	107	107
Total	2790	2398	1706	625	1706	1706	1706
CT Scan W.H. Neuro	190	149	137	74 (Jan.- May 2012)	137	137	137
CT Scan W.H. Body	881	756	482	168 (Jan.- May 2012)	482	482	482
CT Scan W. H. Ortho	9	8	11	3 (Jan.- May 2012)	11	11	1
CT Scan W.H. Misc.	1	0	1	0 (Jan.- May 2012)	1	1	1
Total	1081	913	631	245	631	631	631
Combined Total	3871	3311	2337	870	2337	2337	2337

* 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 six months, report actual volume and identify the period covered.

** 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.

*** Identify each type of scan/exam (e.g. orthopedic, neurosurgery or if there are scans/exams that can be performed on the proposed piece of equipment that the Applicant is unable to perform on its existing equipment) and add lines as necessary.

**** Fill in years. In a footnote, identify the period covered by the Applicant's FY (e.g. July 1-June 30, calendar year, etc.).

- b. Provide a breakdown, by town; of the volumes provided in Table 2a for the most recently completed full FY.

***Diagnostic Imaging of** 06484=21, 06614=32,
Milford: 06483=10, 06418=11, 06461=171, 06477=191,
06524=11, 06405=14, 06511=15, 06516=260, and 06460=792

***Diagnostic Imaging of West Haven:**
06516=354, 06477=36, 06517=6, 06401=3, 06413=3,
06519=18, 06460=15, 06461=15, 06418=3, 06457=3, 06471=3,
06511=12, 06512=12, 06513=12, 06492=3, 06524=3, 06614=3,
06515=12, 06473=9, 06484=9, 06770=3, 06840=3,
06525=9, 06405=6, 06514=6,

***NOTE: These numbers represent patients, not exams**

- c. Describe existing referral patterns in the area to be served by the proposal.
The imaging center is located on Campbell Avenue where there is a heavy concentration of private physician offices currently utilizing this CT service.
- d. Explain how the existing referral patterns will be affected by the proposal.
There will be no affect to referral patterns as this is an existing service with no expectations of change.
- e. Explain any increases and/or decreases in volume seen in the tables above.
The decrease in volume is due in part to the new combination CPT codes for an Abdomen and Pelvis CT Scan. Prior to 2011, statistically, an Abdomen and Pelvis CT Scan was counted as two separate exams. As of January 1, 2011, they are now statistically counted as one exam. As of January 1, 2012, a CTA of the Abdomen and Pelvis has also become a combination CPT code. These new combination codes contribute to a decrease of 432 less exams per year. Public awareness of Radiation exposure is also a contributing factor.
- f. Provide a detailed explanation of all assumptions used in the derivation/ calculation of the projected volume by scanner and scan type.
Volume is expected to remain consistent for the Diagnostic Imaging West Haven CT Scanner, as the growth for the city of West Haven population's has only seen a 1% increase since 2005. The city of Milford has experienced a 4% increase in population since 2005. With both a stable referral base from each town and the population remaining steady, each office will be able to maintain its current volume.
- g. Provide a copy of any articles, studies, or reports that support the need to acquire the proposed scanner, along with a brief explanation regarding the relevance of the selected articles.
See attached article labeled Exhibit A, as to reasons and support regarding decrease in CT volume.

4. Quality Measures

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

Paul Davis M.D.

Vito Errico M.D.

Eric Ragaza M.D.

Susan Marlatt M.D.

- b. Explain how the proposal contributes to the quality of health care delivery in the region.

The existing CT Scanner is the only imaging equipment of its kind serving the city of West Haven. If this service is not allowed to continue the citizens will have no alternative but to seek advanced imaging in Milford or New Haven. Many residents depend on public transportation for mobility and to travel outside of West Haven for a CT study will cause them an undue burden.

5. Organizational and Financial Information

- a. Identify the Applicant's ownership type(s) (e.g. Corporation, PC, LLC, etc.).

SBDI Holding, LLC

- b. Does the Applicant have non-profit status?

Yes (Provide documentation) No

- c. Provide a copy of the State of Connecticut, Department of Public Health license(s) currently held by the Applicant and indicate any additional licensure categories being sought in relation to the proposal.

Please see attached 5 c.

- d. Financial Statements

- i. If the Applicant is a Connecticut hospital: Pursuant to Section 19a-644, C.G.S., each hospital licensed by the Department of Public Health is required to file with OHCA copies of the hospital's audited financial statements. If the hospital has filed its most recently completed fiscal year audited financial statements, the hospital may reference that filing for this proposal.

- ii. If the Applicant is not a Connecticut hospital (other health care facilities): Audited financial statements for the most recently completed fiscal year. If audited financial statements do not exist, in lieu of audited financial statements, provide other financial documentation (e.g. unaudited balance sheet, statement of operations, tax return, or other set of books.)

**Please find attached FINANACIAL STATEMENTS,
December 31, 2011**

e. Submit a final version of all capital expenditures/costs as follows:

Table 3: Proposed Capital Expenditures/Costs

Medical Equipment Purchase	0
Imaging Equipment Purchase	\$10,000
Non-Medical Equipment Purchase	0
Land/Building Purchase *	0
Construction/Renovation **	0
Other Non-Construction (Specify)	0
Total Capital Expenditure (TCE)	\$10,000
Medical Equipment Lease (Fair Market Value) ***	\$
Imaging Equipment Lease (Fair Market Value) ***	
Non-Medical Equipment Lease (Fair Market Value) ***	
Fair Market Value of Space ***	
Total Capital Cost (TCC)	0
Total Project Cost (TCE + TCC)	\$10,000
Capitalized Financing Costs (Informational Purpose Only)	0
Total Capital Expenditure with Cap. Fin. Costs	\$10,000

* 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.

f. 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.

\$10,000 provided by the proposed owner, S.B.D.I. Holding

g. Demonstrate how this proposal will affect the financial strength of the state's health care system.

There will be no affect on the state's healthcare system as this is an existing service.

6. Patient Population Mix: Current and Projected

a. Provide the current and projected patient population mix (based on the number of patients, not based on revenue) with the CON proposal for the proposed program.

Table 4: Patient Population Mix

	Current** FY 2012	Year 1 FY 2013	Year 2 FY 2014	Year 3 FY 2015
Medicare*	33.86%	33.86%	33.86%	33.86%

Medicaid*	9.79%	9.7%	9.7%	9.7%
CHAMPUS & TriCare	0	0	0	0
Total Government	43.65%	43.65%	43.65%	43.65%
Commercial Insurers*	54.62%	54.62%	54.62%	54.62%
Uninsured	0	0	0	0
Workers Compensation	1.63%	1.63%	1.63%	1.63%
Total Non-Government	56.25%	56.25%	56.25%	56.25%
Total Payer Mix	99.9%	99.9%	99.9%	99.9%

* Includes managed care activity.

** New programs may leave the "current" column blank.

*** Fill in years. Ensure the period covered by this table corresponds to the period covered in the projections provided.

- b. Provide the basis for/assumptions used to project the patient population mix.
The CT service being purchased is an established entity with a stable population. There is no anticipated change in the population mix.

7. Financial Attachments I & II

- a. Provide a summary of revenue, expense, and volume statistics, without the CON project, incremental to the CON project, and with the CON project. **Complete Financial Attachment I.** (Note that the actual results for the fiscal year reported in the first column must agree with the Applicant's audited financial statements.) The projections must include the first three full fiscal years of the project.
Please see attached spreadsheet
- b. Provide a three-year projection of incremental revenue, expense, and volume statistics attributable to the proposal by payer. **Complete Financial Attachment II.** The projections must include the first three full fiscal years of the project.
Please see attached spreadsheet
- c. Provide the assumptions utilized in developing **both Financial Attachments I and II** (e.g., full-time equivalents, volume statistics, other expenses, revenue and expense % increases, project commencement of operation date, etc.).
Please find attached, 7c Assumptions for Projected Financial Statements
- d. Provide documentation or the basis to support the proposed rates for each of the FYs as reported in Financial Attachment II. Provide a copy of the rate schedule for the proposed service(s).
Please find attached, CT Scans West Haven document
- e. Provide the minimum number of units required to show an incremental gain from operations for each fiscal year.
2012 = 461 units, 2013 = 468 units, 2014 = 476 units

- f. Explain any projected incremental losses from operations contained in the financial projections that result from the implementation and operation of the CON proposal.

No incremental losses anticipated

- g. Describe how this proposal is cost effective.

The incremental revenue, while small, helps support other needed services necessary for the community such as general x-ray services and mammography.

Attachment A

1. Project Description: Acquisition of Equipment

a. S.B.D.I. Holding, LLC is a taxable corporation owned equally by Seabridge Corp. and Diagnostic Imaging of Milford. Seabridge Corp. is a taxable entity affiliated with Milford Hospital, Inc. Diagnostic Imaging of Milford is a physician owned radiology group. Seabridge, Corp. and Diagnostic Imaging of Milford operate S.B.D.I. Holding, LLC, which in turn purchases the equipment for Diagnostic Imaging of Milford, an existing imaging center at 30 Commerce Park in Milford, Connecticut. The imaging center provides services including mammography (MQSA certified), bone density, plain radiography, fluoroscopy, ultrasound, CT Scan and MRI. Diagnostic Imaging of Milford is under exclusive contract with Milford Hospital for imaging services. Diagnostic Imaging of Milford recently acquired a freestanding radiology office in West Haven, Connecticut. At the West Haven office, Diagnostic Imaging of Milford currently provides plain radiography, ultrasound and mammography (MQSA certified). Radiologic Associates of Middletown still provide CT Scan services at this location.

The service being requested is a transfer of ownership of an existing ACR certified CT Scanner from Radiologic Associates of Middletown to S.B.D.I. Holding, LLC. When Radiologic Associates of Middletown introduced the CT Scan service, a C.O.N. was not required.

The proposed population to be served is West Haven, CT, a city with approximately 60,000 people. This is the only CT Scanner located in town. We anticipate continuing the same needed services the prior radiology group provided. If a C.O.N. is not granted, CT Scan service will be discontinued.

Attachment B

2. Clear Public Need

a. West Haven Connecticut is a city with a population of 60,000 people. The CT Scanner currently being utilized is the only free standing unit in the city of West Haven. A large portion of the population currently uses this imaging service and continuing this needed service will improve the healthcare of the patients from West Haven. As this is already a popular service being offered to the community and without being able to continue this needed service patients will be unable to obtain this service in West Haven. For many patients in this community transportation is a hardship and having a local provider on a major bus route is a great benefit.

b. The proposed service area is the city of West Haven and portions of Orange bordering the city line. Imaging facilities currently operating in West Haven are Temple Radiology and Diagnostic Imaging of West Haven, the proposed site of the CT Scanner. Temple Radiology is a Yale affiliate offering Ultrasound, X-Ray, Mammography and Bone Density. The utilization of these services by the West Haven population is unknown. Advanced Radiology operates an MRI only facility in Orange with unpublished utilization rates. The sole CT Scanner in West Haven resides at Diagnostic Imaging of West Haven, currently operated by Radiology Associates of Middletown. This is the CT Scanner being proposed for ownership change.

EXHIBIT A

CT's growth rate slows, but users remain optimistic

By James Brice, AuntMinnie.com contributing writer

June 5, 2012 -- The growth rate for CT procedure volume has slowed markedly from the double-digit pace of a decade ago, but use of the modality is still growing, and CT users are generally optimistic, according to a new market research report from IMV Medical Information Division.

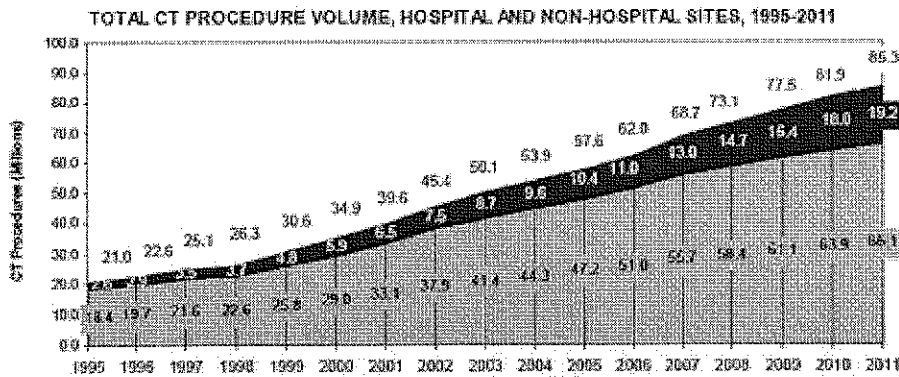
IMV's 2012 CT Market Outlook Report found that those who are managing the operation of CT service in the U.S. are generally optimistic about its short-term financial prospects. The report also documents the rapid shift of CT services from within hospitals to outpatient facilities controlled by either hospitals or integrated delivery networks.

The report, the 11th in a series on CT from IMV since 1993, estimates that 85.3 million CT procedures were performed by U.S. hospital and nonhospital services in 2011. Overall utilization rose 4% compared to the previous year. The report's findings were based on responses from 405 radiology and CT administrators to a Web-based questionnaire and selected phone surveys. Responses were projected to a universe of 8,465 hospital and nonhospital locations to generate national statistics.

The findings reflect a general deceleration of the growth rate in CT procedure volume since the peak a decade ago, when CT growth rates hit 13% or higher, noted Lorna Young, senior director of market research at IMV. The growth rate slowed incrementally to about 8% between 2005 and 2007 and to about 6% between 2008 and 2010 before reaching its current level, she said.

The report attributed last year's 4% growth to a 3.5% increase in the number of CT sites from the previous year.

The average volume of CT procedures per site for all CT sites was essentially flat between 2010 and 2011, at an average annual growth rate of 0.6%, from 10,010 exams per site in 2010 to 10,075 in 2011. The average number of CT procedures at imaging centers owned by hospitals or integrated delivery networks (IDNs) grew 36%, from 7,270 to 9,905 procedures per site, whereas growth rates at other types of sites ranged from a negative 1% (for 200- to 399-bed hospitals) to a positive 9% (for hospitals with 400 or more beds).



Purple = hospitals; dark grey = nonhospitals.

The spike in IDN-related growth stems from strategic moves to shift CT out of hospitals to hospital-owned outpatient sites that receive relatively higher reimbursement rates than freestanding imaging centers, and to place those units conveniently near physician offices to promote practitioner loyalty, Young said.

The CT growth rates for individual facilities may be only slightly positive, but the increases are still large enough to offset payment rate reductions in 2011, she said. CT providers were affected by Medicare's decision to deepen the discounts for CT of contiguous anatomy imaged in a single session. Many private payors adopted the same policy last year.

Still, more than half of respondents (58%) estimated that their procedure volumes will grow this year, though 44% felt reimbursement levels would decrease. Regarding the resulting impact on CT revenues, 20% felt revenues would decrease, 45% felt revenues would be comparable to 2011 levels, and 30% felt their CT revenues would increase. The remaining 5% were undecided.

By a small margin, radiation safety topped the list of priorities that respondents said would affect their department's missions in the next year. The desire to satisfy referring physician needs, improve workflow and productivity, and manage staffing levels to meet patient volume and scheduling needs were listed as high priorities.

"People are looking for good value," Young said.

This desire is reflected in purchaser preference favoring either scanners with 64 or more slices or more economical 16-slice CT technology. About two of every three respondents who plan to buy a new scanner said they probably will buy a system with at least 64-slice capability, but interest in 16-slice scanners remains strong.

Sixty-four-slice CT was originally marketed for cardiovascular applications, Young noted. But users have come to appreciate the productivity implications of its high acquisition speeds. The scanners have also earned a reputation for high image quality. Most of the industry's most sophisticated features aimed at radiation reduction are available on premium 64-slice platforms, she said.

After nearly a decade of use, 16-slice CT still serves as an economical option deemed adequate for many routine clinical applications, Young said.

According to the report, pelvic and abdominal procedures constituted 24% of all CT procedures in 2011. Brain studies accounted for 20%, followed by chest (16%), head and neck (10%), CT angiography (10%), and spine (7%).

Studies involving CT guidance or imaging of the lower or upper extremities each accounted for between 2% and 4% of the total. The remaining 3% included cardiac imaging, whole-body screenings, and virtual colonoscopy (also known as CT colonography or CTC).

According to previous IMV CT reports, pediatric CT has represented 9% to 11% of the modality's total annual volume since 2006. The current survey established that nine of 10 CT services will accept infants, children, and adolescents for imaging. However, only two of every 100 services that examine young patients generate more than 25% of their total CT volume from pediatric referrals.

Disclosure notice: AuntMinnie.com is owned by IMV, Ltd.

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Last Updated bc 6/5/2012 11:21:38 AM

CURRICULUM VITAE

PAUL S. DAVIS, M.D., FASA

HOME ADDRESS

16 Richard Sweet Drive
Woodbridge, CT 06525
Tel: (203) 393-0124

OFFICE ADDRESS

Diagnostic Imaging of Milford, PC
30 Commerce Park
Milford, CT 06460
Tel: (203) 878-2341

PERSONAL INFORMATION

Date of Birth: October 27, 1958
Place of Birth: Oceanside, New York
Marital Status: Married

EDUCATION

1980-1984

State University of New York
Upstate Medical Center, Syracuse, New York
Degree: M.D.

1976-1980

University of Colorado, Boulder, Co.
Honors: Phi Beta Kappa
Degree: BA Biology

POST GRADUATE TRAINING

1989-1990

Fellowship, Cardiovascular/Interventional Radiology
with training in Biliary Lithotripsy
Yale New Haven Hospital, New Haven, CT

1988

Radiologic-Pathologic Correlation Armed Forces Institute
of Pathology, Washington, DC

1985-1989

Residency in Diagnostic Radiology
Thomas Jefferson University Hospital, Philadelphia, PA

1984-1985

Internship in General Surgery
George Washington University Hospital, Washington, DC

MEDICAL LICENSURE

1985 Pennsylvania MD – 034757-E (inactive)

1988 Connecticut MD – 029836

BOARD CERTIFICATION

1989 American Board of Radiology
1985 National Board of Medical Examiners #299576
1996 CAQ Interventional Radiology

MEDICAL SOCIETIES

2007

Elected Fellow-American Society of Angiology

1990

Milford Medical Society
Connecticut Angiography Society
Connecticut State Medical Society
New Haven County Medical Society

1989

Society of Cardiovascular and Interventional Radiology

1986

American Roentgen Ray Society

1985

Radiologic Society of North America

APPOINTMENTS

2000

Chairman Department of Radiology, Milford Hospital, CT

2000-2002

Milford Hospital President of Medical Staff

1999-2000

Milford Hospital Vice President of Medical Staff

1997-1998

Milford Hospital Secretary of Medical Staff

1990-

Attending Radiologist, Milford Hospital, Milford, CT

1989-1990

Instructor of Diagnostic Radiology, Yale University School of
Medicine, Diagnostic Radiology, New Haven, CT

1987-1988

Chief Resident, Department of Radiology

Thomas Jefferson University Hospital, Philadelphia, PA

1979-1980

Teaching Assistant, Department of Molecular, Cellular
and Developmental Biology
University of Colorado, Boulder, CO

The American Board of Radiology

Organized through the cooperation of the American College of Radiology, the American Roentgen Ray Society, the American Radium Society, the Radiological Society of North America, the Section on Radiology of the American Medical Association, the American Society for Therapeutic Radiology and Oncology, and the Association of University Radiologists

Hereby certifies that

Paul Stuart Davis, M.D.

Has pursued an accepted course of graduate study and clinical work, has met certain standards and qualifications and has passed the examinations conducted under the authority of

The American Board of Radiology

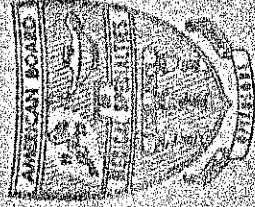
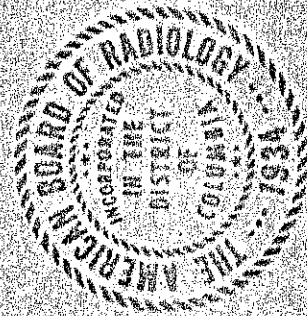
On this eighth day of June, 1939

Thereby demonstrating to the satisfaction of the Board that he is qualified to practice the specialty of

Diagnostic Radiology

Robert G. Parker
President

Frank H. Hollander, M.D.
Secretary



Eric A. Ragaza, M.D.

Department of Diagnostic Radiology
 Yale University School of Medicine
 333 Cedar Street
 New Haven, CT 06520-8042
 o: (203) 785-7361
 eric.ragaza@yale.edu

7 Lees Lane
 Westport, CT 06880
 erag1@yahoo.com
 c: (203) 982-7774
 h: (203) 227-2528

Professional Experience

Staff Radiologist	Diagnostic Imaging of Milford Milford, CT	Dec 2004
Clinical Assistant Professor	Diagnostic Radiology Sections of Body Imaging and Emergency Radiology Yale Univ. School of Medicine New Haven, CT	July 2002 – Nov. 2004
Medical Director	General Ultrasound School Yale-New Haven Hospital New Haven, CT	May 2003 – Nov. 2004

Education and Training

Residency	Diagnostic Radiology Yale Univ. School of Medicine New Haven, CT	July 1998 – June 2002
Internship	Lenox Hill Hospital New York, NY	July 1997 – June 1998
Medical School	NYU School of Medicine New York, NY Doctor of Medicine	August 1993 – May 1997
Undergraduate	Yale University New Haven, CT Bachelor of Arts, Psychology With Distinction in the Major	August 1988 – May 1992

Licensure

Connecticut State Medical License

Certification

Board Certified, American Board of Radiology, 2002

Awards

First Place, 2001 Yale Residents' Unknown Cases Prize

Teaching and Clinical Duties

Diagnostic Radiologist, Melanoma Unit, Yale Cancer Center (weekly tumor board)

Yale Emergency Medicine Radiology Lecture Series, July 2002, Thoracic Emergency Radiology

Yale Physician Associate Diagnostic Imaging Lecture Series, 2001-2
Resident conferences, including case conferences and lectures

References available upon request

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 American College of Radiology, the American Roentgen Ray Society,
 the American Radium Society, the Radiological Society of North America,
 the Section on Radiology of the American Medical Association,
 the American Society for Therapeutic Radiology and Oncology, the Association of
 University Radiologists, and American Association of Physicians in Medicine

Hereby certifies that

Eric Alan Ruzza, MD

Has pursued an accepted course of graduate study
 and clinical work, has met certain standards and qualifications and
 has passed the examinations conducted under the authority of

The American Board of Radiology

On this twelfth day of June, 2002

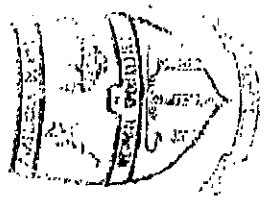
Thereby demonstrating to the satisfaction of the Board
 that he is qualified to practice the specialty of

Diagnostic Radiology



P.R. Harte, MD
 President

Shaw A. Spick, MD
 Secretary-Treasurer



Certificate No. 49177

Valid through 2012

60 Red Barn Rd.
Trumbull, CT 06611
Work – 203-878-2341
Home – 203-445-8905

Vito Errico, MD.

Education	M.D State University of New York at Stony Brook	May 1992
	B.S. New York University, New York, New York	June 1988
Honors and Awards	Dean's List – New York University	1984-1988
	NYU Trustees Scholar	1984-1988
	Carpenter's Welfare Trust Fund Scholar	1984-1988
	Mt. St. Michael Academy – Valedictorian	June 1984
Professional	Diagnostic Imaging of Milford, P.C.	July 2000-Present
	Brown University, R.I	
	Attending Radiologist	July 1999-June 2000
	Neurology Fellow	Yale-New Haven Hospital 7/97-6/99
	Radiology Resident	Stony Brook University Hospital 7/93-6/97
Internship	New Rochelle Hospital, New York 7/92-6/93	
Professional Memberships	American Board of Radiology Board Certified Radiologist	June 1997
	American Roentgen Ray Society	1993-Present
	Suffolk County Medical Society	1996-Present
	Radiological Society of North America	1993-Present
Research and Publications	Association of Hepatitis B virus with Hepatocellular Carcinoma. Albert Einstein College of Medicine, Assisted Dr. Robert Burke, June 1985-November 1987.	
	Clinical Trials in Sestamibi, Parathyroid Imaging, Stony Brook University Medical Center, Department Of Nuclear Medicine, September 1995-Present.	
	Epidural Venous Varices Mimicking Intervertebral Disc Disease, R. Peyster, V. Errico, S. Reddy, Abstract accepted to the ANSR, Toronto, 1997.	
	Imaging of hydroxyapatite with Computed Tomography and Magnetic Resonance Imaging. Abstract accepted to the Society of Head and Neck Imaging. Arizona, April 1998.	

Research and Publicatons (continued) –

Diffusion Weighted MR Changes Seen in Nonatherosclerotic Thromboembolus Disease. Abstract submitted April 14, 1998 to the Radiologic Society of North America. V. Errico, R. Fulbright.

State of the Art in Stroke Imaging talk given at the New England Chapter of the Association of Vascular Intervention Radiographers (NECAVIR), March 28, 1998.

References

Dr. Gordon Sze, Chief of Neuroradiology, Yale-New Haven Hospital, 203-785-5102

Dr. Daniel Huddle, Interventional Neuroradiologist, Yale-New Haven Hospital, 203-785-5102

Dr. Paul Davis, Radiologist, Milford Hospital, 203-876-4252

Dr. Robert Peyster, Neuroradiologist, Stony Brook University Hospital, 516-444-3580

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the American Radium Society, the Radiological Society of North America,
the Section on Radiology of the American Medical Association,
the American Society for Therapeutic Radiology and Oncology, the Association of
University Radiologists, and American Association of Physicians in Medicine*

Hereby certifies that

Vito Errico, M.D.

*Has pursued an accepted course of graduate study
and clinical work, has met certain standards and qualifications and
has passed the examinations conducted under the authority of
The American Board of Radiology*

On this eleventh day of June, 1987

*Thereby demonstrating to the satisfaction of the Board
that he is qualified to practice the specialty of*

Diagnostic Radiology



James S. Anderson, MD *Robert R. Henry, MD* *H. Paul Clegg, M.D.*
President Secretary-Treasurer Executive Director

SUSAN W. MARLATT, M.D.

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Diagnostic Imaging of Milford
2044 Bridgeport Ave.
Milford, CT 06460
(203) 876-4242

EMPLOYMENT

Staff Radiologist, 1993-present.
Milford Hospital and outpatient office practice.
Responsible for all modalities, except angiography,
but including MRI and nuclear cardiology. Also
responsible for drainage procedures, biopsies, and
needle localizations.

Assistant Professor of Radiology, 1992-1993.
University of Connecticut Medical Center/John
Dempsey Hospital. Covered all modalities, except
angiography and nuclear medicine, with special
emphasis in mammography and pediatric
radiology. Also involved with resident and medical
student teaching and technologist continuing
education.

**POST-GRADUATE
TRAINING**

Resident, 1988-1992.
Diagnostic Radiology and Nuclear Medicine.
Hospital of St. Raphael, New Haven, Conn.

Flexible internship, 1987-1988.
Hospital of St. Raphael, New Haven, Conn.

EDUCATION

*M.D., Medical College of Georgia,
Augusta, Ga., 1987.*

*B.S. Pharm., University of Georgia,
Athens, Ga., 1983.*

CERTIFICATION

American Board of Radiology, 1992.
National Board of Medical Examiners, 1988.
Georgia State Board of Pharmacy, 1983.

LICENSURE

Connecticut.

PUBLICATIONS/
HONORS

- Marlatt, S.W., Caride, V.J., Prokop, E.K.; "Incidental Demonstration of Pericardial Fistula During Hepatobiliary Scintigraphy," *The Journal of Nuclear Medicine*, 199;32:518-520.
- Chief Radiology Resident, 1991-1992. Hospital of St. Raphael.
- Quality Control Committee Member, Department of Radiology, John Dempsey Hospital, 1992-1993.

PROFESSIONAL
SOCIETIES

- American College of Radiology
- Connecticut Radiologic Society
- Connecticut State Medical Society
- New Haven County Medical Society

CONFERENCES/
MEETINGS

- Breast Imaging Seminar, Memorial Sloan-Kettering Cancer Center, New York, N.Y., Oct., 1993.
- Intense MRI Neuro Weekend Review, Cincinnati, Ohio, Jan. 1993.
- Emory University Symposium on MusculoSkeletal Radiology, Atlanta, Ga., 1992.
- Annual Yale Sports Medicine Seminar, New Haven, Conn., August 1992.
- RSNA, Chicago, Ill., Dec. 1991.
- Radiologic/Pathologic course at Armed Forces Institute of Pathology, Washington, D.C., Oct.-Nov. 1989.

The American Board of Radiology

Organized through the cooperation of the
American College of Radiology, the American Roentgen Ray Society,
the American Radium Society, the Radiological Society of North America,
the Section on Radiology of the American Medical Association,
the American Society for Therapeutic Radiology and Oncology, the Association of
University Radiologists, and American Association of Physicists in Medicine
Hereby certifies that

Susan Whatley Marlatt, M.D.

Has pursued an accepted course of graduate study
and clinical work, has met certain standards and qualifications and
has passed the examinations conducted under the authority of
The American Board of Radiology

On this fourth day of June, 1992

Thereby demonstrating to the satisfaction of the Board
that she is qualified to practice the specialty of
Diagnostic Radiology



James J. Manning, M.D.
President

Douglas Maynard, M.D.
Secretary-Treasurer

Ernest R. Kuhlendorf, M.D.
Executive Director



0008652 FP **PRSR T3 0 1364 08626
PAUL S. DAVIS, MD
16 RICHARD SWEET DRIVE
WOODBIDGE CT 06525

Dear Licensed/Certified Professional,
Attached you will find your validated license/certification for the coming year. Should you have any questions about your license/certificate renewal, please do not hesitate to write or call:

Department of Public Health (860) 509-7603
P.O. Box 340308
M.S.#12MQA http://www.dph.state.ct.us
Hartford, CT 06134-0308

Sincerely,

Jewel Mullen
JEWEL MULLEN, MD, MPH, MPA, COMMISSIONER
DEPARTMENT OF PUBLIC HEALTH

INSTRUCTIONS:

1. Detach and sign each of the cards on this form.
2. Display the large card in a prominent place in your office or place of business.
3. The wallet card is for you to carry on your person. If you do not wish to carry the wallet card, place it in a secure place.
4. The employer's copy is for persons who must demonstrate current licensure/certification in order to receive employment or privileges. The employer's card is to be presented to the employer and kept by them as a part of your personnel file. Only one copy of this card can be supplied to you.

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
PURSUANT TO THE PROVISIONS OF THE GENERAL STATUTES OF CONNECTICUT
THE INDIVIDUAL NAMED BELOW IS LICENSSED
BY THIS DEPARTMENT AS A
PHYSICIAN / SURGEON

PAUL S. DAVIS, MD

VALIDATION NO. 03-297374
CURRENT THROUGH 10/31/12
LICENSE NO. 029836

Paul S. Davis
SIGNATURE
PAUL S. DAVIS, MD
COMMISSIONER

EMPLOYER'S COPY
STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH

VALIDATION NO. 03-297374
CURRENT THROUGH 10/31/12
LICENSE NO. 029836
PROFESSION PHYSICIAN/SURGEON

NAME PAUL S. DAVIS, MD

Jewel Mullen
SIGNATURE
JEWEL MULLEN, MD, MPH, MPA
COMMISSIONER

EMPLOYER'S COPY

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH

NAME

ERIC A. RAGAZA MD

VALIDATION NO.

03-300266

LICENSE NO.

039879

CURRENT THROUGH

08/31/12

PROFESSION

PHYSICIAN/SURGEON

[Signature]

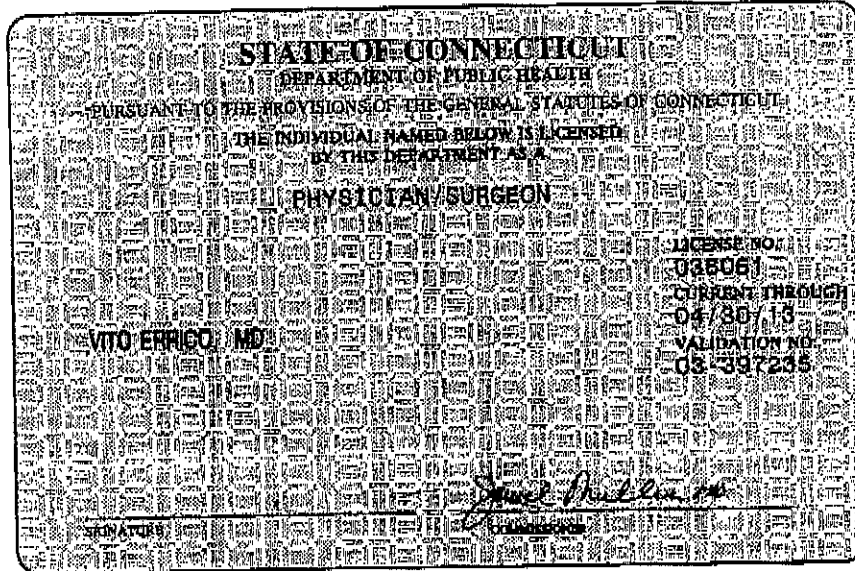
[Signature]

COMMISSIONER

INSTRUCTIONS:

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- 3. The wallet card is for you to carry on your person. If you do not wish to carry the wallet card, place it in a secure place.

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0065107 FP **PRSRT T5 0 1264 06405
 SUSAN W. MARLATT, MD
 32 MONTGOMERY PARKWAY
 BRANFORD CT 06405

Your license/certificate renewal please do not hesitate
 write or call
 Department of Public Health (860) 509-7603
 P O Box 340308
 MS #12MQA
 Hartford, CT 06134-0308
 http://www.dph.state.ct.us

Sincerely,
Jewel Muller
 JEWEL MULLEN, MD, MPH, MPA, COMMISSIONER
 DEPARTMENT OF PUBLIC HEALTH

INSTRUCTIONS:

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STATE OF CONNECTICUT
 DEPARTMENT OF PUBLIC HEALTH

PURSUANT TO THE PROVISIONS OF THE GENERAL STATUTES OF CONNECTICUT
 THE INDIVIDUAL NAMED BELOW IS LICENSED
 BY THIS DEPARTMENT AS A
 PHYSICIAN/SURGEON

SUSAN W. MARLATT, MD

LICENSE NO. 030466
 CURRENT THROUGH 09/30/12
 VALIDATION NO. 03-279140

Jewel Muller
 COMMISSIONER

SIGNATURE

EMPLOYER'S COPY

STATE OF CONNECTICUT
 DEPARTMENT OF PUBLIC HEALTH

VALIDATION NO. 03-279140
 NAME SUSAN W. MARLATT, MD
 LICENSE NO. 030466
 CURRENT THROUGH 09/30/12
 PROFESSION PHYSICIAN/SURGEON

Jewel Muller
 COMMISSIONER

SIGNATURE

WALLET CARD

STATE OF CONNECTICUT
 DEPARTMENT OF PUBLIC HEALTH

VALIDATION NO. 03-279140
 NAME SUSAN W. MARLATT, MD
 LICENSE NO. 030466
 CURRENT THROUGH 09/30/12
 PROFESSION PHYSICIAN/SURGEON

Jewel Muller
 COMMISSIONER

SIGNATURE

S B D I HOLDING, LLC

TABLE OF CONTENTS

Independent Accountants' Compilation Report	Page 2
Financial Statements:	
Statements of Assets, Liabilities and Members' Equity - Income Tax Basis	3
Statements of Revenues and Expenses - Income Tax Basis	4
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BAILEY, MOORE, GLAZER, SCHAEFER & PROTO, LLP

CERTIFIED PUBLIC ACCOUNTANTS

16 LUNAR DRIVE,
WOODBRIDGE, CT 06525
203 397 7700
FAX 203 397 7717

INDEPENDENT ACCOUNTANTS' COMPILATION REPORT

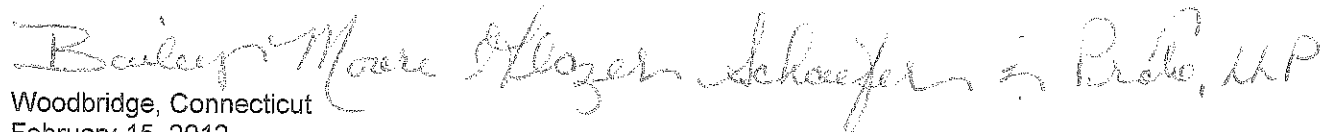
To The Members
S B D I Holding, LLC
Milford, Connecticut

We have compiled the accompanying statements of assets, liabilities and members' equity-income tax basis of SBDI Holding, LLC as of December 31, 2011 and 2010 and the related statements of revenues and expenses-income tax basis and changes in members' equity-income tax basis for the years then ended. We have not audited or reviewed the accompanying financial statements and, accordingly, do not express an opinion or provide any assurance about whether the financial statements are in accordance with the income tax basis of accounting.

Management is responsible for the preparation and fair presentation of the financial statements in accordance with the income tax basis of accounting and for designing, implementing, and maintaining internal control relevant to the preparation and fair presentation of the financial statements.

Our responsibility is to conduct the compilations in accordance with Statements on Standards for Accounting and Review Services issued by the American Institute of Certified Public Accountants. The objective of a compilation is to assist management in presenting financial information in the form of financial statements without undertaking to obtain or provide any assurance that there are no material modifications that should be made to the financial statements.

Management has elected to omit substantially all of the disclosures ordinarily included in financial statements prepared in accordance with the income tax basis of accounting. If the omitted disclosures were included in the financial statements, they might influence the user's conclusions about the Company's assets, liabilities, members' equity, revenues, and expenses. Accordingly, the financial statements are not designed for those who are not informed about such matters.


Woodbridge, Connecticut
February 15, 2012

S B D I HOLDING, LLC

STATEMENTS OF ASSETS, LIABILITIES AND MEMBERS' EQUITY -

INCOME TAX BASIS

	December 31,	
	<u>2011</u>	<u>2010</u>
<u>ASSETS:</u>		
<u>Current Assets:</u>		
Cash	\$ 304,096	\$ 265,505
Deposit on equipment	85,000	-
Total current assets	<u>389,096</u>	<u>265,505</u>
<u>Equipment</u>	2,049,076	1,953,574
Less accumulated depreciation	<u>1,432,874</u>	<u>1,004,658</u>
Equipment - net	<u>616,202</u>	<u>948,916</u>
 Total	 <u>\$ 1,005,298</u>	 <u>\$ 1,214,421</u>
 <u>LIABILITIES AND MEMBERS' EQUITY:</u>		
<u>Current Liabilities:</u>		
Sales tax payable	\$ 3,005	\$ 2,638
 <u>Members' Equity</u>	 <u>1,002,293</u>	 <u>1,211,783</u>
 Total	 <u>\$ 1,005,298</u>	 <u>\$ 1,214,421</u>

See independent accountants' compilation report.

S B D I HOLDING, LLC

STATEMENTS OF REVENUES AND EXPENSES -

INCOME TAX BASIS

	Years Ended December 31,	
	<u>2011</u>	<u>2010</u>
<u>Revenues:</u>		
Equipment rental	\$ 551,490	\$ 414,362
<u>Expenses:</u>		
Depreciation	428,216	309,916
Accounting	4,000	4,000
Legal	675	-
State taxes	250	250
Miscellaneous	20	20
Total expenses	<u>433,161</u>	<u>314,186</u>
<u>Operating Income</u>	118,329	100,176
<u>Other Income</u>	<u>2,181</u>	<u>1,137</u>
<u>Net Income</u>	<u>\$ 120,510</u>	<u>\$ 101,313</u>

See independent accountants' compilation report.

S B D I HOLDING, LLC

STATEMENT OF CHANGES IN MEMBERS' EQUITY - INCOME TAX BASIS

YEARS ENDED DECEMBER 31, 2011 AND 2010

	<u>Diagnostic Imaging of Milford, P.C.</u>	<u>Seabridge Corporation</u>	<u>Total</u>
<u>Members' Equity - January 1, 2010</u>	\$ 275,235	\$ 275,235	\$ 550,470
<u>Capital Contributions - 2010</u>	280,000	280,000	560,000
<u>Net Income - 2010</u>	<u>50,656</u>	<u>50,657</u>	<u>101,313</u>
<u>Members' Equity - December 31, 2010</u>	605,891	605,892	1,211,783
<u>Net Income - 2011</u>	60,255	60,255	120,510
<u>Capital Distributions - 2011</u>	<u>(165,000)</u>	<u>(165,000)</u>	<u>(330,000)</u>
<u>Members' Equity - December 31, 2011</u>	<u>\$ 501,146</u>	<u>\$ 501,147</u>	<u>\$ 1,002,293</u>

See independent accountants' compilation report.

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

Total Facility:	FY11	FY12	FY12	FY12	FY13	FY13	FY13	FY14	FY14	FY14
Description	Actual Results	Projected W/out CON	Projected Incremental	Projected With CON	Projected W/out CON	Projected Incremental	Projected With CON	Projected W/out CON	Projected Incremental	Projected With CON
NET PATIENT REVENUE										
Non-Government	\$3,062,448	\$3,062,448	\$164,365	\$3,226,813	\$3,062,448	\$164,365	\$3,226,813	\$3,062,448	\$164,365	\$3,226,813
Medicare	\$931,318	\$931,318	\$65,912	\$997,230	\$931,318	\$65,912	\$997,230	\$931,318	\$65,912	\$997,230
Medicaid and Other Medical Assistance	\$67,132	\$67,132	\$12,524	\$79,656	\$67,132	\$12,524	\$79,656	\$67,132	\$12,524	\$79,656
Other Government	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Total Net Patient Patient Revenue	\$4,060,898	\$4,060,898	\$242,801	\$4,303,699	\$4,060,898	\$242,801	\$4,303,699	\$4,060,898	\$242,801	\$4,303,699
Other Operating Revenue										
Revenue from Operations	\$4,060,898	\$4,060,898	\$242,801	\$4,303,699	\$4,060,898	\$242,801	\$4,303,699	\$4,060,898	\$242,801	\$4,303,699
OPERATING EXPENSES										
Salaries and Fringe Benefits	\$1,893,306	\$1,931,172	\$106,200	\$2,037,372	\$1,969,796	\$108,324	\$2,078,120	\$2,009,191	\$110,490	\$2,119,681
Professional / Contracted Services				\$0			\$0			\$0
Supplies and Drugs	\$59,074	\$59,665	\$2,400	\$62,065	\$60,261	\$2,496	\$62,757	\$60,864	\$2,521	\$63,385
Bad Debts				\$0			\$0			\$0
Other Operating Expense	\$1,282,091	\$1,294,912	\$66,876	\$1,361,788	\$1,307,861	\$67,339	\$1,375,200	\$1,320,940	\$68,012	\$1,388,952
Subtotal	\$3,234,471	\$3,285,749	\$175,476	\$3,461,225	\$3,337,918	\$178,159	\$3,516,077	\$3,390,995	\$181,023	\$3,572,018
Depreciation/Amortization	\$12,381	\$12,381	\$2,000	\$14,381	\$12,381	\$2,000	\$14,381	\$12,381	\$2,000	\$14,381
Interest Expense	\$48,641	\$48,641		\$48,641	\$48,641		\$48,641	\$48,641		\$48,641
Lease Expense	\$585,946	\$585,946		\$585,946	\$585,946		\$585,946	\$585,946		\$585,946
Total Operating Expenses	\$3,881,439	\$3,932,717	\$177,476	\$4,110,193	\$3,984,886	\$180,159	\$4,165,045	\$4,037,963	\$183,023	\$4,220,986
Income (Loss) from Operations	\$179,459	\$128,181	\$65,325	\$193,506	\$76,012	\$62,642	\$138,654	\$22,935	\$59,778	\$82,713
Non-Operating Income				\$0			\$0			\$0
Income before provision for income taxes	\$179,459	\$128,181	\$65,325	\$193,506	\$76,012	\$62,642	\$138,654	\$22,935	\$59,778	\$82,713

Provision for income taxes										
Net Income	<u>\$179,459</u>	<u>\$128,181</u>	<u>\$65,325</u>	<u>\$193,506</u>	<u>\$76,012</u>	<u>\$62,642</u>	<u>\$138,654</u>	<u>\$22,935</u>	<u>\$59,778</u>	<u>\$82,713</u>
Retained earnings, beginning of year		<u>\$179,459</u>	<u>\$179,459</u>	<u>\$179,459</u>	<u>\$307,640</u>	<u>\$244,784</u>	<u>\$372,965</u>	<u>\$383,652</u>	<u>\$307,426</u>	<u>\$511,619</u>
Retained earnings, end of year	<u>\$179,459</u>	<u>\$307,640</u>	<u>\$244,784</u>	<u>\$372,965</u>	<u>\$383,652</u>	<u>\$307,426</u>	<u>\$511,619</u>	<u>\$406,587</u>	<u>\$367,204</u>	<u>\$594,332</u>
FTEs	22	22	1	23	22	1	23	22	1	23

***Volume Statistics:**

Provide projected inpatient and/or outpatient statistics for any new services and provide actual and projected inpatient and/or outpatient statistics for any existing services which will change due to the proposal.

12.C(ii). Please provide three years of projections of incremental revenue, expense and volume statistics attributable to the proposal in the following reporting format:

Type of Service Description Imaging
 Type of Unit Description: Ct Scans
 # of Months in Operation 12

2012 FY Projected Incremental Total Incremental Expenses:	(1) \$177,476	(2) Rate	(3) Units	(4) Gross Revenue Col. 2 * Col. 3	(5) Allowances/ Deductions	(6) Charity Care	(7) Bad Debt	(8) Net Revenue Col.4 - Col.5 -Col.6 - Col.7	(9) Operating Expenses Col. 1 Total * Col. 4 / Col. 4 Total	(10) Gain/(Loss) from Operations Col. 8 - Col. 9
Total Facility by Payer Category:										
Medicare		\$1,036	214	\$221,704	\$155,792			\$65,912	\$60,190	\$5,722
Medicaid		\$1,036	62	\$64,232	\$51,708			\$12,524	\$17,438	(\$4,914)
CHAMPUS/TriCare		\$1,036	0	\$0				\$0	\$0	\$0
Total Governmental			276	\$285,936	\$207,500	\$0	\$0	\$78,436	\$77,628	\$808
Commercial Insurers		\$1,036	355	\$367,780	\$203,415			\$164,365	\$99,848	\$64,517
Uninsured		\$1,036	0	\$0				\$0	\$0	\$0
Total NonGovernment		\$1,036	355	\$367,780	\$203,415	\$0	\$0	\$164,365	\$99,848	\$64,517
Total All Payers		\$1,036	631	\$653,716	\$410,915	\$0	\$0	\$242,801	\$177,476	\$65,325

12.C(ii). Please provide three years of projections of incremental revenue, expense and volume statistics attributable to the proposal in the following reporting format:

Type of Service Description: Imaging
 Type of Unit Description: Ct Scans
 # of Months in Operation: 12

2013	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
FY Projected Incremental		Rate	Units	Gross Revenue	Allowances/ Deductions	Charity Care	Bad Debt	Net Revenue	Operating Expenses	Gain/(Loss) from Operations
Total Incremental Expenses:	<u>\$180,159</u>			Col. 2 * Col. 3				Col. 4 - Col. 5 -Col. 6 - Col. 7	Col. 1 Total * Col. 4 / Col. 4 Total	Col. 8 - Col. 9
Total Facility by Payer Category:										
Medicare		\$1,036	214	\$221,704	\$155,792			\$65,912	\$61,100	\$4,812
Medicaid		\$1,036	62	\$64,232	\$51,708			\$12,524	\$17,702	(\$5,178)
CHAMPUS/TriCare		\$1,036	0	\$0				\$0	\$0	\$0
Total Governmental			276	\$285,936	\$207,500	\$0	\$0	\$78,436	\$78,802	(\$366)
Commercial Insurers		\$1,036	355	\$367,780	\$203,415			\$164,365	\$101,357	\$63,008
Uninsured		\$1,036	0	\$0				\$0	\$0	\$0
Total NonGovernment		\$1,036	355	\$367,780	\$203,415	\$0	\$0	\$164,365	\$101,357	\$63,008
Total All Payers		<u>\$1,036</u>	631	\$653,716	\$410,915	\$0	\$0	\$242,801	\$180,159	\$62,642

12.C(ii). Please provide three years of projections of incremental revenue, expense and volume statistics attributable to the proposal in the following reporting format:

Type of Service Description Imaging
 Type of Unit Description: Ct Scans
 # of Months in Operation 12

2014 FY Projected Incremental Total Incremental Expenses:	(1) \$183,023	(2) Rate	(3) Units	(4) Gross Revenue Col. 2 * Col. 3	(5) Allowances/ Deductions	(6) Charity Care	(7) Bad Debt	(8) Net Revenue Col.4 - Col.5 -Col.6 - Col.7	(9) Operating Expenses Col. 1 Total * Col. 4 / Col. 4 Total	(10) Gain/(Loss) from Operations Col. 8 - Col. 9
Total Facility by Payer Category:										
Medicare		\$1,036	214	\$221,704	\$155,792			\$65,912	\$62,071	\$3,841
Medicaid		\$1,036	62	\$64,232	\$51,708			\$12,524	\$17,983	(\$5,459)
CHAMPUS/TriCare		\$1,036	0	\$0				\$0	\$0	\$0
Total Governmental			276	\$285,936	\$207,500	\$0	\$0	\$78,436	\$80,054	(\$1,618)
Commercial Insurers		\$1,036	355	\$367,780	\$203,415			\$164,365	\$102,969	\$61,396
Uninsured		\$1,036	0	\$0				\$0	\$0	\$0
Total NonGovernment		\$1,036	355	\$367,780	\$203,415	\$0	\$0	\$164,365	\$102,969	\$61,396
Total All Payers		\$1,036	631	\$653,716	\$410,915	\$0	\$0	\$242,801	\$183,023	\$59,778

7 c. Assumptions for Projected Financial Statements:

Revenue :
without project Determined using historical experience with 0% annual increase in government rates and non-government rates.

with project Determined using historical experiences applied to projected volumes.

Volume:
without project Assumption is based on 0% increase per year.

with project Assumption is based on 0% increase per year.

Salaries:
without project Based on 2% increase each year.

with project Based on 2% increase each year.

Supplies and Drugs:
without project Based on 1% increase per year.

with project Based on 1% increase per year.

Other operating:
without project Based on 1% increase per year.

with project Based on 1% increase per year.

Depreciation:
without project Based on historical annual spending

with project Based on historical annual spending

Interest:
without project Based on current interest

with project Based on historical annual spending

Leases:
without project Based on current leases and assumed replacements

with project Based on current leases and assumed replacements

FTEs
without project Includes annual increase in variable staffing to support operations.

with project Incremental staffing increases per year to support incremental volume.

CT Scans - West Haven

Gross billing 1,036.00

Average reimbursement:

Commercial 463.00

Medicare 308.00

Medicaid 202.00

Projected studies 631

Projected breakdown:

Commercial 355

Medicare 214

Medicaid 62

631

Projected annual gross income:

	<u>Units</u>	<u>gross billing</u>	<u>total</u>
Commercial	355	1,036.00	367,780.00
Medicare	214	1,036.00	221,704.00
Medicaid	62	1,036.00	64,232.00
	<u>631</u>		<u>653,716.00</u>

Projected annual net income:

	<u>Units</u>	<u>reimb.</u>	<u>total</u>
Commercial	355	463.00	164,365.00
Medicare	214	308.00	65,912.00
Medicaid	62	202.00	12,524.00
	<u>631</u>		<u>242,801.00</u>

WEST HAVEN MEDICAL GROUP, LLC

KUMU A. FERNANDO, M.D. - Adult Gen. Practice & Family Medicine
BENEDICT LUCKY FERNANDO, M.D. - Internal Medicine
LYNNE HILLIS, M.D. - Internal Medicine
MARK J. DRABINSKI, M.D. - Internal Medicine
JOSEPH A. BALSAMO, M.D. - Internal Medicine
ANU WALALIYADDA, M.D. - Internal Medicine
ADEDAYO ADETOLA, M.D. - Internal Medicine
HORATIU BALAS, M.D. - Internal Medicine

MARIANNE VAHEY, M.D. - Internal Medicine
G. ANURA DeSILVA, M.D. - Internal Medicine
HAFSA NAWAZ, M.D. - Internal Medicine
ABISOLA AFOLALU, M.D. - Internal Medicine
HATIM CHHATRIWALA, M.D. - Internal Medicine
M. GANESAN, M.D. - Internal Medicine
THELMA V. BATIANCILA, M.D. - Internal Medicine
LAZAROS LAZARIDES, M.D. - Internal Medicine

June 4, 2012

To Whom It May Concern:

Diagnostic Imaging of Milford and Milford Hospital are petitioning through S.B.D.I. for a certificate of need to continue performing CT scans at their office known as Diagnostic Imaging of West Haven, 687 Campbell Avenue, Suite 1, West Haven, Connecticut.

This letter is in support of this petition to transfer ownership of the CT scanner from Radiological Associates of Middletown to S.B.D.I. CT scan procedures have been performed at the above-mentioned location (formerly known as West Haven Radiology) for many years, and it is important we continue to partake in this service.

There are no other facilities within our town limits that offer this service, which is much needed for proper diagnostic reasons. We would like to continue to refer our patients to this facility for their CT scans.

Yours truly,



Benedict L. Fernando, M.D.

WEST HAVEN MEDICAL GROUP, LLC

KUMU A. FERNANDO, M.D. - Adult Gen. Practice & Family Medicine
BENEDICT LUCKY FERNANDO, M.D. - Internal Medicine
LYNNE HILLIS, M.D. - Internal Medicine
MARK J. DRABINSKI, M.D. - Internal Medicine
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ANU WALALIYADDA, M.D. - Internal Medicine
ADEDAYO ADETOLA, M.D. - Internal Medicine
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HAFSA NAWAZ, M.D. - Internal Medicine
ABISOLA AFOLALU, M.D. - Internal Medicine
HATIM CHHATRIWALA, M.D. - Internal Medicine
M. GANESAN, M.D. - Internal Medicine
THELMA V. BATIANCILA, M.D. - Internal Medicine
LAZAROS LAZARIDES, M.D. - Internal Medicine

June 4, 2012

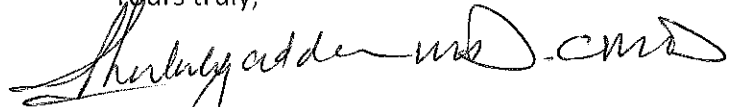
To Whom It May Concern:

Diagnostic Imaging of Milford and Milford Hospital are petitioning through S.B.D.I. for a certificate of need to continue performing CT scans at their office known as Diagnostic Imaging of West Haven, 687 Campbell Avenue, Suite 1, West Haven, Connecticut.

This letter is in support of this petition to transfer ownership of the CT scanner from Radiological Associates of Middletown to S.B.D.I. CT scan procedures have been performed at the above-mentioned location (formerly known as West Haven Radiology) for many years, and it is important we continue to partake in this service.

There are no other facilities within our town limits that offer this service, which is much needed for proper diagnostic reasons. We would like to continue to refer our patients to this facility for their CT scans.

Yours truly,



Anuruddha Walaliyadda, M.D.

INTERNAL MEDICINE OF WEST HAVEN, LLC.

**DR. SREEDHAR GOTTIPARTHY,
CAMPBELL PLAZA
764 CAMPBELL AVE. SUITE E
WEST HAVEN, CT 06516
OFFICE (203) 931-0034
FAX (203) 931-8225**

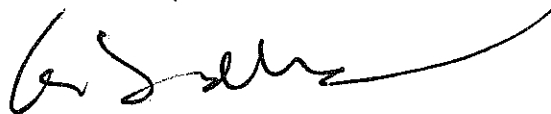
D/6-5-2012

Diagnostic Imaging of Milford and Milford Hospital are petitioning through S.B.D.I. for a certificate of need to continue performing CT scans at their office known as Diagnostic Imaging of West Haven, 687 Campbell Avenue, Suite 1, West Haven, Connecticut.

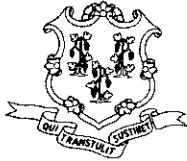
This letter is in support of this petition to transfer ownership of the CT scanner from Radiological Associates of Middletown to S.B.D.I. CT scan procedures have been performed at the above-mentioned location (formerly known as West Haven Radiology) for many years, and it is important we continue to partake in this service.

There are no other facilities within our town limits that offer this service, which is much needed for proper diagnostic reasons. We would like to continue to refer our patients to this facility for their CT scans.

Yours truly,



Sreedhar Gottiparthi, M.D.



STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
Office of Health Care Access

October 4, 2012

VIA FAX ONLY

Debra Mauriello
Director, Diagnostic Imaging
Milford Hospital
300 Seaside Avenue
Milford, CT 06460

RE: Certificate of Need Application; Docket Number: 12-31784-CON
SBDI Holding, LLC d/b/a Diagnostic Imaging of West Haven proposes to acquire an existing Computed Tomography ("CT") Scanner in West Haven

Dear Ms. Mauriello:

On September 5, 2012, the Office of Health Care Access ("OHCA") received your initial Certificate of Need ("CON") application filing on behalf of SBDI Holding, LLC ("Applicant") for the transfer of ownership of an existing CT scanner from Radiologic Associates of Middletown ("RAM") to SBDI Holding, LLC, with an associated total capital expenditure of \$10,000.

OHCA has reviewed the CON application and requests the following additional information pursuant to General Statutes §19a-638a(8):

Project Description

1. Provide SBDI Holding, LLC's legal chart of organization that reflects the current relationship with the different entities and with RAM.
2. Provide a copy of the finalized or draft sales/transaction agreement between the parties (i.e. Applicant and RAM) including all exhibits and attachments.
3. The CT scanner at 687 Campbell Avenue, West Haven, is a Toshiba Asteion 4-Slice CT scanner. Please address the following:
 - a. How old is the scanner in years and months?
 - b. When was the CT scanner purchased?
 - c. From where was the CT scanner originally purchased?
 - d. What was the CT scanner's purchase price?
 - e. Provide evidence that RAM did not need a CON for the CT scanner.

An Equal Opportunity Employer

410 Capitol Ave., MS#13HCA, P.O.Box 340308, Hartford, CT 06134-0308
Telephone: (860) 418-7001 Toll-Free: 1-800-797-9688
Fax: (860) 418-7053

- f. How long a period of time has the scanner been in operation?
- g. What is the general condition of the scanner?
- h. Describe the scanner's record in terms of downtime and repairs.
- i. Has the scanner received any hardware or software updates? If so, explain any and all updates and modifications made to the scanner.

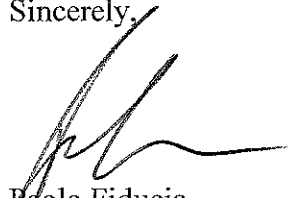
Clear Public Need

4. Please explain in detail how Diagnostic Imaging of West Haven determined the clear public need for the acquisition of the proposed CT scanner.
5. On page 4 of the application the Applicant states that annual utilization values for CT scan in the New England area are 173.77 scans per 1,000 people. Please provide evidence to support the above statement and explain the relevance of this statement.
6. On page 4 of the application the Applicant states that as the sole CT scanner in the city it has already proved itself a valuable community asset. Please explain how the above statement is accurate.
7. Please revise Table 2a and Table 2b, by addressing the following item:
 - a. Revise each line of the scan volumes presented in the "CFY 2012" column, updating CT volumes for the most recently completed month. Identify the number of months represented in the "CFY 2012" column.
8. Table 2a and Table 2b show a decrease in the number of CT scans performed for Diagnostic Imaging of West Haven for FY 2009 thru FY 2011, other than the change in CPT codes what other factors have contributed to the decrease in the number of CT scans.
9. Provide a breakdown, by town and not by zip code, of the volumes provided in Table 2a for the CFY 2012.
10. The Applicant states that existing referrals to Diagnostic Imaging of West Haven are generated by local private physicians. Please identify the towns and the specialty from which the existing referrals originate.
11. Please explain how a 4-Slice CT scanner is beneficial to the population being served.

In responding to the questions contained in this letter, please repeat each question before providing your response. **Paginate and date** your response (i.e., each page in its entirety). Information filed after the initial CON application submission (i.e. completeness response letter, pre-file testimony, late file submissions and the like) must be numbered sequentially from the Applicant's document preceding it. Please reference "Docket Number: 12-31784-CON." Submit one (1) original and five (5) hard copies of your response. In addition, please submit a scanned copy of your response including all attachments on CD in an Adobe format (.pdf) and in an MS Word format.

If you have any questions concerning this letter, please feel free to contact me at (860) 418-7001.

Sincerely,

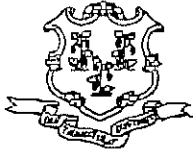
A handwritten signature in black ink, appearing to read 'Paolo Fiducia', with a long horizontal flourish extending to the right.

Paolo Fiducia
Associate Health Care Analyst

*** TX REPORT ***

TRANSMISSION OK

TX/RX NO 3081
RECIPIENT ADDRESS 912038764539
DESTINATION ID
ST. TIME 10/04 14:58
TIME USE 00'39
PAGES SENT 4
RESULT OK



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

FAX SHEET

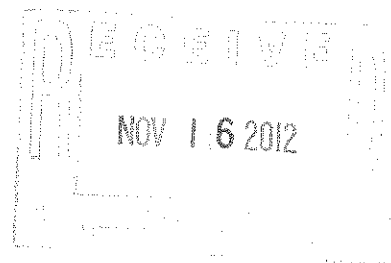
TO: DEBRA MAURIELLO
FAX: 203 876 4539
AGENCY: SBDI HOLDING, INC.
FROM: PAOLO FIDUCIA
DATE: 10/4/12 TIME: 3 PM
NUMBER OF PAGES: 4
(including transmittal sheet)

Comments: 12-31784-CON
COMPLETENESS LETTER

PLEASE PHONE IF THERE ARE ANY TRANSMISSION PROBLEMS.

11/14/2012

Paolo Fiducia
Associate Health Care Analyst
State of Connecticut
Department of Public Health
Office of Health Care Access
410 Capital Avenue MS#13HCA
PO Box 340308
Hartford, CT 06134-0308



RE: Certificate of Need Application; Docket Number: 12-31784-CON
SBDI Holding, LLC d/b/a Diagnostic Imaging of West Haven proposes a transfer
of ownership by acquiring an existing Computed Tomography (CT) Scanner in
West Haven, CT from Radiologic Associates of Middletown.

Dear Mr. Fiducia,

On behalf of S.B.D.I. Holding, LLC enclosed please find the additional information you
requested in your letter dated October 4, 2012.

As requested, I have included one original and five hard copies of the additionally
requested information as well as a CD containing the Certificate of Need in an Adobe
format (PDF) and a MS Word format.

Please do not hesitate to contact me at 203-876-4241 if you have any questions.

Sincerely,

Debra Mauriello
Director, Diagnostic Imaging
Milford Hospital
300 Seaside Avenue
Milford, CT 06460

Project Description

1. Provide SBDI Holding, LLC's legal chart of organization that reflects the current relationship with the different entities and with RAM. = **Please see attachment A**
2. Provide a copy of the finalized or draft sales/transaction agreement between the parties (i.e. Applicant and RAM) including all exhibits and attachments. = **Please see attachment B for the Bill of Sale and attachment C for Asset Agreement**
3. The CT Scanner at 687 Campbell Avenue, West Haven is a Toshiba Asterion 4-Slice CT Scanner. Please address the following:
 - a. How old is the scanner in years and months? = **8 years and 3 months**
 - b. When was the CT Scanner purchased? = **July 20, 2004**
 - c. From where was the CT Scanner originally purchased? = **Directly from Toshiba**
 - d. What was the CT Scanner's purchase price? = **\$389,500**
 - e. Provide evidence that RAM did not need a CON for the CT Scanner = *Sec. 19-73m transferred to Sec. 19a-155 in 1983; P.A. 83-215 exempted ambulatory services established and conducted by a health maintenance organization from certificate of need review, changed the threshold for review of capital expenditures from limits set by the Secretary of Health and Human Services to \$600,000 and to \$400,000 for the acquisition of major medical equipment, provided for a 15-day extension of the 90-day review period if additional information is requested by the commissioner or a motion to approve, modify or deny a request results in a tie vote and authorized the adoption of regulations to establish a schedule for the submission of similar requests; Sec. 19a-639. (Formerly Sec. 19a-155)* Taken from the Connecticut General Statutes as related to OHCA. At the time of RAM's purchase, the capital expenditure for a CON was \$400,000. The elimination of all capital expenditure thresholds didn't take place till 2010. RAM's cost for the CT Scanner was under the threshold at \$389,500 in 2004.
 - f. How long a period of time has the scanner been in operation? = **8 years and 3 months**
 - g. What is the general condition of the scanner? = **Excellent**
 - h. Describe the scanner's record in terms of downtime and repairs. = **Preventative Maintenance performed on a monthly basis and is at 100% compliance. The uptime during the warranty period was 99.75% and the uptime at the time of the warranty's end to current is 99.26%. The tube was replaced once on 10-2-08. The last service call was on 2-21-12.**
 - i. Has the scanner received any hardware or software updates? If so, explain any and all updates and modifications made to the scanner. = **The scanner was updated with the latest version of software, V2.05ER001. Please see attachment E**

Clear Public Need

4. Please explain in detail how Diagnostic Imaging of West Haven determined the clear public need for the acquisition of the proposed CT Scanner. = **A positive response to an informal survey (please refer to attachment D) of the referring physicians in the surrounding area (as evidenced by the letters of support previously submitted with the original CON application) demonstrates the need. This CT Scan service is supported entirely by referring physicians, as they know their patients needs best. As stated in the original application, Diagnostic Imaging of West Haven is on a major bus route. According to the New Haven Transit Authority, the New Haven and surrounding areas (this includes the city of West Haven) 23,557 people ride the bus daily. A bus stop is located directly in front of Diagnostic Imaging, 687 Campbell Avenue and one directly across the street. One block down will bring you to a bus stop for the J-Line, which in turn brings you to the New Haven Train Station. According to the U.S. Census Bureau (2010 report, most current), 27,102 people in the city of West Haven commute to work each day, 979 of them ride the bus. For many patients in the community not having this service provided locally, could prove to be a hardship. Also, according to the U.S. Census Bureau, the average commute time for the population of West Haven is 23.2 minutes. These statistics express the desire of the people of West Haven to have access to healthcare services close to home. The CT service currently provide by RAM has been well established since 2004. To discontinue this service would be an injustice to the community of West Haven as CT Scan is an expected clinical application in an imaging facility such as Diagnostic Imaging of West Haven. As there are currently no other CT Scanners in town, patients within the area would have to travel out of the region to have these studies performed or forego the test altogether, which is less than optimum patient care.**
5. On page 4 of the application the Applicant states that the annual utilization values for CT Scan in New England are 173.77 scans per 1,000 people. Please provide evidence to support the above statement and explain the relevance of this statement. = **This statistic is the utilization rate for outpatient CT Scans in the New England area taken from the Radiology Business Journal, (Imaging Market File) Feb/Mar 2012 issue, from the article titled, "Regional Variations in Utilizations and Reimbursements." The regions are defined by the AHRA. Connecticut is included in the New England region. There was an increase in utilization in CT Scans in the New England region from 2010 to 2011 by 0.66% proving the need for the current CT service to remain in place.**
6. On page 4 of the application the Applicant states that as the sole CT scanner in the city it has already proved itself a valuable community asset. Please explain how the above statement is accurate. = **First, a search of the internet, yellow pages**

and a familiarity of imaging facilities reveals no other CT Scanner in the area. Second, as referenced in the answer to question 4, Diagnostic Imaging of West Haven is readily accessible by public transportation with a bus stop directly in front of the facility. Diagnostic Imaging of West Haven accepts all manner of payment regardless of the ability to pay.

7. Please revise Table 2a and Table 2b, by addressing the following item:
 - a. Revise each line of the scan volumes in the "CFY 2012" column, updating CT volumes for the most recently completed month. Identify the number of months represented in the "CFY 2012" column.

Table 2a: Historical, Current, and Projected Volume, by Equipment Unit

	Actual Volume (Last 3 Completed FYs)			CFY Volume*	Projected Volume (First 3 Full Operational FYs)**		
	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014	FY 2015
D.I. Milford	2790	2398	1706	1198 (Jan.- Sept. 2012)	1597	1597	1597
D.I.W.H	1081	913	631	446 (Jan- Sept. 2012)	596	596	596
Total	3871	3311	2337	1644	2193	2193	2193

Note: Applicant's FY year is the calendar year, January to December. Numbers are based on patient exams.

Table 2b: Historical, Current, and Projected Volume, by Type of Scan/Exam

	Actual Volume (Last 3 Completed FYs)			CFY Volume*	Projected Volume (First 3 Full Operational FYs)**		
	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014	FY 2015
CT Scan Neuro Milford	485	456	429	308 (Jan.- Sept. 2012)	410	410	410
CT Scan Body Milford	2114	1811	1111	818 (Jan. to Sept. 2012)	1091	1091	1091
CT Scan Ortho Milford	65	45	59	36 (Jan.- Sept. 2012)	48	48	48
CT Scan Misc. Milford	126	86	107	36 (Jan.- Sept. 2012)	48	48	48
Total	2790	2398	1706	1198	1597	1597	1597
CT Scan W.H. Neuro	190	149	137	110 (Jan.- Sept. 2012)	146	146	146
CT Scan W.H. Body	881	756	482	332 (Jan.- Sept. 2012)	443	443	443
CT Scan W. H. Ortho	9	8	11	4 (Jan.- Sept. 2012)	6	6	6
CT Scan W.H. Misc.	1	0	1	0 (Jan.- Sept. 2012)	1	1	1
Total	1081	913	631	446	596	596	596
Combined Total	3871	3311	2337	1644	2193	2193	2193

8. Table 2a and Table 2b show a decrease in the number of CT scans performed for Diagnostic Imaging of West Haven for FY 2009 through FY 2011, other than the changes in CPT codes what other factors have contributed to the decrease in the number of CT scans? = **Diagnostic Imaging of West Haven was not in control of this facility during those time periods. A radiology group that is located out of the immediate area oversaw the facility. As we possess no concrete evidence for the decline in volume, any reason would be speculative on the part of Diagnostic Imaging of West Haven.**

9. Provide a breakdown, by town and not by zip code, of the volumes provided in table 2a for the CFY 2012.

DIM Milford		DIM West Haven	
Town	# Referrals	Town	# Referrals
Bethany	1	West Haven	338
Seymour	8	Orange	38
Derby	5	New Haven	24
Branford	2	Milford	5
New Haven	29	North Haven	2
Stratford	19	Shelton	1
Woodbridge	10	Woodbridge	5
Ansonia	11	Branford	4
Milford	646	Hamden	4
Orange	132	Ansonia	1
West Haven	234	Prospect	1
Bristol	1	North Branford	2
North Granby	1	Wallingford	1
Bozrah	1	Bethany	1
Cromwell	2	Naugatuck	1
Cheshire	1	Cheshire	1
Madison	1	Oxford	1
Guilford	3	Florida	1
North Haven	6	Derby	15
Oxford	3		
Shelton	24		
Wallingford	4		
Bridgeport	11		
Naugatuck	4		
Fairfield	5		
Westport	2		
Wilton	2		
Misc.	30		
Total	1198	Total	446

10. The applicant states that existing referrals to Diagnostic Imaging of West Haven are generated by local private physicians. Please identify the towns and the specialty from which the existing referrals originate. =

Referring Physician	SPECIALTY	TOWN (S)		
ADETOLA, ADEDAYO	Internal Medicine	West Haven		
AFOLALU, ABISOLA O	Internal Medicine	West Haven		
ATLAS, STEPHEN	Internal Medicine	West Haven		
BALAS, HORATIU	Internal Medicine	West Haven		
BALF, DRAGOS	Internal Medicine/Cardiology	New Haven		

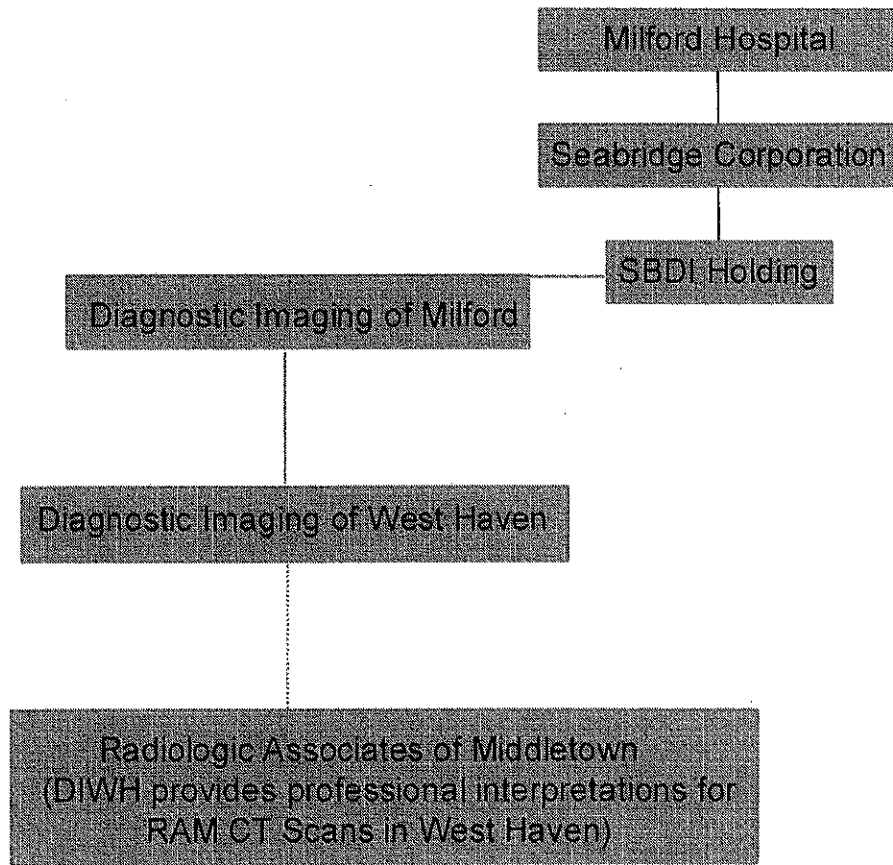
BALSAMO, JOSEPH	Internal Medicine	West Haven		
BARAJAS, DENISE	Surgery	New Haven		
BLUM, RICHARD	Orthopedics	Milford		
BRAMMER, ROBIN	Internal Medicine	Milford		
BREIER, RICHARD	Internal Medicine	New Haven		
BRINES, PATRICIA	OB/GYN	Milford	New Haven	
CALANDRO, COURTNEY, P.A.	Gastroenterology	Milford		
CARPINELLI, ERIN, A.P.R.N.	Internal Medicine	New Haven		
CHANDLER, JOHN P	Cardiology/Internal Medicine	New Haven	Milford	Hamden
CHANG, SUE	Nephrology	New Haven	Milford	
CHHATRIWALA, HATIM F	Internal Medicine	West Haven	Milford	
CHOU, LUCIA	Internal Medicine	Stratford		
CHUSTECKA, MARGARET	Internal Medicine	Hamden		
CIUBOTARU, CORNELIA R	Rheumatology	Hamden	Milford	
CLARKE, PAUL	Internal Medicine	West Haven	Orange	
COVEY, AARON SAUL	Orthopedics	New Haven		
DEAN, RICHARD	Urology	West Haven	Hamden	
DEANGELO, ANITA, A.P.R.N.	Osteoporosis/Arthritis	Hamden		
DESILVA, GARUMUNI	Internal Medicine	West Haven		
DEVITO, RALPH J	Urology	West Haven	New Haven	
DHINDSA, SUMEET	Internal Medicine	Hamden		
DIANA, RICHARD	Orthopedics	Guilford	Branford	
DRABINSKI, MARK J	Internal Medicine	West Haven		
DUFOUR, KAREN	Internal Medicine/Gastroenterology	Orange		
ESPOSITO, DAVID	Vascular/Thoracic Surgery	Milford		
ETKIN, THOMAS	Pediatrics	West Haven		
FAHMI, NASIHA	Internal Medicine	Orange		
FERNANDO, BENEDICT	Internal Medicine	West Haven		
FERNANDO, KUMU	Internal Medicine	West Haven		
FIGUEROA, AWILDA	Chiropractics	West Haven	Orange	
GALANTE, LORENZO	Internal Medicine	North Haven		
GARG, KABUL	Cardiology/Internal Medicine	New Haven		
GERRITZ, SARAH S.	Internal Medicine	Guilford		
GOLDNER, STEPHEN	Internal Medicine	Milford		
GORDON, SONIA	Rheumatology	Hamden		
GOTTIPARTHY, SREEDHAR	Internal Medicine	West Haven	Hamden	
GRIFFITH, ELVIN	Internal Medicine	West Haven		
HASS, DAVID	Gastroenterology	Milford	Hamden	

HILLIS, LYNNE	Internal Medicine	New Haven		
HONIG, JAIMY	Internal Medicine	Branford		
HUTCHINSON, GORDON	Rheumatology	New Haven	Branford	
IMEVBORE, MICHAEL	Pulmonologist	New Haven		
KARKANITSA, LEONID	Internal Medicine	Hamden	Trumbull	
KNOLL, LAURENCE	Internal Medicine	West Haven		
KOUROUNISDOHR, KAY	OB/GYN	Milford		
KUMAR, BABU	Internal Medicine	Hamden		
LAZARIDES, LAZAROS	Internal Medicine	West Haven	New Haven	
LOCKHART, ROBERTA	Pediatrics	Milford		
LU, ZHAO	Hematology/Oncology	West Haven	Milford	
LYNCH, CHRISTOPHER	Orthopedics	New Haven	Milford	
MAPAS-DIMAYA, ANN	Geriatrics	New Haven		
MARER, M VERONICA	Nephrology	Woodbridge		
MARTIN, THOMAS	Urology	West Haven	New Haven	
MARTIN, VICTOR	Rheumatology	West Haven	Milford	
MCCALLUM, JOHN	Orthopedics	Hamden	Branford	
MELAMED, SCOTT	Podiatry	New Haven	Milford	
MELCHINGER, DAVID	Internal Medicine	New Haven		
MILANO, ANTHONY J	Chiropractics	West Haven		
MONTI, DAVID	Orthopedics	Wallingford		
NAPOLITANO, GUIDO	Internal Medicine	Trumbull		
NARDECCHIA, ANTHONY	Chiropractics	West Haven		
NASCIMENTO, JOAO	Rheumatology	Bridgeport		
NAWAZ, HAFSA	Internal Medicine	West Haven		
NWOKOLO NWANGWU, CHIOMA	Internal Medicine	West Haven		
OBRIEN, JOHN W	Physiatrist	West Haven		
OLIVER, GARTH	Internal Medicine	West Haven		
PARMELEE, DAVID, D.O.	Internal Medicine	Guilford		
PERERA, CHANNA	Internal Medicine	West Haven		
RAMADON-UNGER, NATALIE	PA	Orange		
RASCATI, SHEREE	PA	New Haven		
RHEE, MARIA	OB/GYN	Hamden		
RHEE, RICHARD S	Internal Medicine	Branford		
RIGNEY, BRIAN F	OB/GYN	New Haven		
RODRIGUES, ALLAN	Pulmonologist	West Haven	New Haven	
ROGOL, PETER R	Pulmonologist	New Haven	Milford	
ROSNER, WILLIAM	Internal Medicine	West Haven		

SCHREIBER, WILLIAM	Geriatric Medicine	Woodbridge		
SELTZER, ARTHUR	Cardiology	New Haven	Orange	
TOPRAN, ERNEST	OB/GYN	New Haven		
TOUMANIAN, KARINE	Internal Medicine	Stratford		
VAHEY, MARIANNE	Internal Medicine	West Haven		
VIDA MASTO, PAULA	APRN	West Haven		
WALALIYADDA, ANURUDDHA	Internal Medicine	West Haven		
YIM, ANDREW	Internal Medicine	New Haven		

11. Please explain how a 4-Slice CT Scanner is beneficial to the population being served. = **The Toshiba Asteion 4-Slice CT Scanner meets the ACR guidelines for performing CT scans and has, in fact, been accredited by the American College of Radiology. A 4-slice scanner is more than adequate for performing standard single slice CT scans. For more advanced imaging such as, CT Colonoscopy and CT Cardiac imaging, a 64-slice scanner is optimal. Diagnostic Imaging of West Haven would not offer these services at this location.**

Attachment A



S.B.D.I. Holding Organizational Chart

Attachment B**BILL OF SALE**

KNOW ALL MEN BY THESE PRESENTS, that **RADIOLOGIC ASSOCIATES OF MIDDLETOWN, P.C.**, a Connecticut professional services corporation having a principal business address at 330 South Main Street, Middletown, P.O. Box 931 Connecticut 06457 ("Seller"), for valuable consideration received to its full satisfaction of **DIAGNOSTIC IMAGING OF MILFORD, P.C.**, a Connecticut professional services corporation having a principal business address at 30 Commerce Park, Suite 102, Milford, Connecticut 06460 ("Purchaser") and in accordance with the terms and conditions and in accordance with the representations of the parties set forth in that certain Asset Purchase and Sale Agreement of even date herewith by and between Seller and Purchaser (the "Purchase Agreement"), does hereby bargain, sell, transfer and convey unto the Purchaser all of Seller's right, title and interest in and to all of the Subject Assets, as defined in the Purchase Agreement.

Seller covenants that Seller will, from time to time hereafter, at the request of Purchaser, make and deliver to Purchaser such other instruments and documents and take such further actions as may be reasonably required to vest and confirm in Purchaser the ownership of the Subject Assets.

In the event of a conflict between the terms of this Bill of Sale and terms of the Purchase Agreement, the terms of the Purchase Agreement shall govern.

IN WITNESS WHEREOF, the Seller has caused this instrument to be executed as of this day of, 2012.

By: Michael Crain, M.D., its President and CEO _____

Radiologic Associates of Middletown P.C.

Attachment C**ASSET PURCHASE AND SALE AGREEMENT**

THIS AGREEMENT (the "**Agreement**"), made this ____ day of, 2012, by and between:

RADIOLOGIC ASSOCIATES OF MIDDLETOWN, P.C., d/b/a RAM Radiology, a Connecticut professional services corporation having a principal place of business at 330 South Main Street, Middletown, P.O. Box 931 Connecticut 06457 ("**Seller**"); and

DIAGNOSTIC IMAGING OF MILFORD, P.C. a Connecticut professional services corporation having a principal place of business at 30 Commerce Park, Suite 102, Milford, Connecticut 06460 ("**Purchaser**").

WITNESSETH:

WHEREAS, Seller owns certain assets associated with its operation of a diagnostic radiology office known as "West Haven Radiology" (the "**Practice**") and located at 687 Campbell Avenue, West Haven, Connecticut 06516 (the "**Premises**"); and

WHEREAS, Seller desires to sell, and Purchaser desires to purchase, certain of the assets associated with the Practice;

NOW, THEREFORE, in consideration of the premises and the mutual covenants herein contained, and for other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the parties hereby agree as follows:

1. Purchase and Sale of Assets.
 - (a) Subject Assets. Subject to the terms and conditions specified herein, and based upon the representations, warranties, covenants and agreements of the parties set forth herein, Seller agrees to sell, transfer, assign, convey and deliver to Purchaser and Purchaser agrees to purchase, accept and acquire from Seller, all of the following properties and assets of the Seller related to the Practice and located at the Premises (collectively, the "**Subject Assets**"):

- (i) Certain radiology and other medical equipment located at the Premises (collectively, the "**Medical Equipment**"), as more fully described on *Schedule 1(a)(i)* attached hereto;

1

- (ii) All computer hardware, telephone systems and all office furniture and non- imaging equipment ("**Non-Medical Equipment**") owned by Seller and used in connection with the Practice at the Premises, as more fully described on *Schedule 1(a)(ii)* attached hereto;

- (iii) All of Seller's rights under any warranties with respect to the Fixed Assets if and to the extent that the same are freely assignable. A

- (iv) The telephone and fax numbers of Seller at the Premises and the name "West Haven Radiology"; and

- (v) All patient medical records and reports, including, without limitation, archived films and digital data with respect to diagnostic imaging performed on behalf of patients of the Practice at the Premises (the "**Medical Records**"). A

- (b) Assignment by Purchaser to SBDI. Purchaser anticipates that immediately prior to the Closing it shall assign its rights to purchase the Medical Equipment under this Agreement (to SBDI Holdings Corp., a joint venture between Purchaser and Seabridge Corporation, a for-profit affiliate of Milford Hospital; after which assignment SBDI will lease back to Purchaser all of the Medical Equipment for its fair market rental value (the "**SBDI Equipment Lease**"); provided such assignment shall not otherwise modify the rights or obligations of the parties under this Agreement.

2. Excluded Assets.

- (a) Seller is not selling and Purchaser is not purchasing any of Seller's right, title or interest in those assets in listed on *Schedule 2(a)*, all of which shall be retained by Seller.
- (b) Additionally, the purchase contemplated herein does not include that certain item of radiological equipment more fully described on *Schedule 2(b)* attached hereto (the "**CT Scanner**"), which shall remain at the Premises and be owned and operated by Seller, subject to the Option, as defined and more fully described Section 9(b) below.

3. Assumption of Certain Liabilities. Subject to the further terms set forth in Section 9(a), 9(b) and 9(i) below, Purchaser shall assume all of the obligations and liabilities of Seller for and in connection with the maintenance and retention of the Medical Records to the extent that the same accrue and arise on or after the Closing Date (the "**Assumed Liabilities**");
4. Excluded Liabilities. Seller and Purchaser expressly recognize, agree and confirm that, except for the Assumed Liabilities listed above, and as set forth in Section 9(a) below, by virtue of this Agreement or otherwise, Seller is not transferring and Purchaser is not acquiring, assuming or otherwise in any manner becoming responsible for, any liabilities, debts, commitments or other obligations of Seller or the Practice, whether absolute or contingent, due or unmatured, direct or indirect, or of any other kind whatsoever (the "**Excluded Liabilities**"). Seller shall discharge all Excluded Liabilities in the ordinary course of business prior to or after the Closing.
5. Lease. It is a condition of Purchaser's willingness to enter into and consummate the transactions described herein that Purchaser be successful in negotiating and entering into a lease of the Premises where the Practice is located with Campbell Commons, LLC, the landlord of the Premises (the "**Lease**"). Purchaser shall use its best effort to finalize and enter into the Lease on or before March 1, 2012.
6. Purchase Price
 - (a) Amount. The total purchase price (the "**Purchase Price**") for the Subject Assets shall be Two Hundred Forty Thousand Dollars (\$240,000.00), plus the performance by Purchaser of the Assumed Liabilities.
 - (b) Payment. The Purchase Price shall be payable at the Closing by certified check or wire transfer of immediately available funds to an account to be designated by Seller.
 - (c) Allocation. Purchaser and Seller mutually agree that the Purchase Price shall be allocated in accordance with **Schedule 5(d)** attached hereto.
 - (d) Reasonable Compensation. The Purchase Price payable hereunder by Purchaser to Seller has been determined by the parties through good faith, arm's length bargaining. No amount paid hereunder is intended to be or shall be construed as an inducement or payment for referral of or recommending referral of patient to Purchaser (or its Affiliates) by Seller or its shareholders or other affiliated physicians. In addition, the amount paid hereunder does not include any discount, rebate, kickback or other reduction in charge. The sole purpose of the payment to Seller hereunder

is to pay fair market value for the Subject Assets sold by the Seller to Purchaser hereunder.

7. Conditions Precedent to Closing. The obligations of each of Seller and Purchaser hereunder are subject to the satisfaction of the following conditions at or before the Closing:
- (a) Purchaser shall have entered into the Lease.
 - (b) All of the terms and conditions of this Agreement to be complied with and performed by each party at or before the Closing shall have been complied with and performed, and the representations and warranties made by such party in this Agreement shall be true, correct and complete at and as of the date hereof and at and as of the Closing Date with the same force and effect as though such representations and warranties have been made at and as of the Closing Date.
 - (c) Each of the parties shall have executed and delivered to the other any and all documents and instruments (the "Transaction Documents" that are necessary or desirable for the consummation of the transactions contemplated hereunder (the "Transaction")).
8. Closing.
- (a) The closing of the transactions contemplated hereby (the "Closing") shall take place on or about March 1, 2012 unless such later date shall be extended pursuant to the mutual written agreement of Purchaser and Seller (the "Closing Date"). In connection therewith, Seller shall not unreasonably refuse to extend the Closing until April 1, 2012.
 - (b) The Closing shall occur at the offices of Purchaser's counsel, Brenner, Saltzman & Wallman LLP, 271 Whitney Avenue, New Haven, Connecticut or at such other location as the parties shall agree, and shall become effective as of the opening of business on the Closing Date.
9. Other Covenants and Agreements
- (a) Mammography Equipment.
 - (i) The parties acknowledge that the Subject Assets include, without limitation, that certain Hologic Selenia Digital Mammography System ("Mammo System") which is currently leased by Seller

pursuant to a capital lease a copy of which is attached hereto as Schedule 9(a)(i) and made a part hereof (the "Mammo Lease").

- (ii) The parties shall cooperate to determine if the Mammo Lease is assignable by Seller to Purchaser, and if Purchaser determines, in its sole discretion, that the Mammo Lease is assignable and that it is advisable to assume the Mammo Lease, then the Mammo System shall not be sold hereunder but shall be assigned by Seller to Purchaser at Closing, and the Purchase Price otherwise payable hereunder shall be reduced by an amount which is equal to the total remaining payments owing by Seller under the Mammo Lease on and as of the Closing Date.
- (iii) If the Mammo Lease is not assignable and/or is not assumed by Purchaser, Seller shall obtain good and marketable title to the Mammo System prior to the Closing and shall transfer title to the Mammo System to Purchaser at the Closing free and clear of any liens, encumbrances or claims of any kind whatsoever.
- (iv) Seller shall obtain good and marketable title to the Mammo System prior to the Closing and shall transfer title to the Mammo System to Purchaser at the Closing free and clear of any liens, encumbrances or claims of any kind whatsoever.

(b) CT Scanner. Seller shall continue to own and operate the CT Scanner at the Premises from the Closing Date until the earlier of (x) the sale and transfer thereof to DIM, and (y) March 1, 2013 (the "**Interim Period**"). In connection therewith:

- (i) At the Closing Seller shall enter into a Services Agreement ("**Services Agreement**") with Purchaser pursuant to which Purchaser shall provide management services, a radiation technologist, and professional supervision and interpretation of the CT Scans on behalf of Seller at the Premises during the Interim Period. The form of the Services Agreement is attached hereto as Exhibit A. Seller shall also have the right to use and occupy the office space where the CT Scanner is now located pursuant to a Space License Agreement the form of which is attached hereto as Exhibit B ("**Space License Agreement**").
- (ii) Seller hereby grants to Purchaser an option to purchase the CT Scanner (the "**Option**"). At the Closing, Purchaser shall pay to Seller the sum of \$10,000 for the Option described herein (the "**Option Payment**").
- (iii) Purchaser agrees to purchase the CT Scanner from Seller if and at such time as Purchaser, or its designee, is granted a Certificate of Need ("CON") from the State of Connecticut's Department of Public Health,

Office of Health Care Access ("OHCA"). Purchaser shall use commercially reasonable efforts to file an application for the CON with OHCA on or before April 1, 2012 and shall thereafter diligently prosecute such CON application following the Closing. Seller shall cooperate with Purchaser in connection with the CON application as may be reasonably requested or required by OHCA.

- (iv) Within thirty (30) days of obtaining a CON with respect to the CT Scanner. Purchaser, or its designee, shall purchase the CT Scanner from Seller for \$10,000, with payment to be made by application of the Option Payment.
 - (v) In the event that Purchaser is not successful in obtaining the CON by March 1, 2013, Seller shall retain the Option Payment and Purchaser shall arrange at its expense for the removal (in consultation with Seller) of the CT Scanner and any repair of the Premises resulting from such removal. Seller shall use (unless otherwise agreed by Purchaser) commercially reasonable efforts to sell and otherwise dispose of the CT Scanner, and Purchaser shall have no further rights in connection therewith. The proceeds received by Seller from the sale and disposition of the CT Scanner shall first be used to reimburse Seller for or otherwise pay for any and all costs of sale or disposition with any remaining amounts to be paid to Purchaser.
- (c) Non-Competition. For a period of three (3) years from and after the Closing Date, except for its operation of the CT Scanner at the Premises as contemplated in Section 9(b) above, Seller shall not own or operate a diagnostic radiology office or aid or assist any other party to do the same, directly or indirectly, in any manner whatsoever, or otherwise compete with Purchaser in the field of diagnostic radiology in the Towns of West Haven, Orange, Woodbridge Milford, Ansonia or Derby, Connecticut.
- (d) Accounts Receivable.
- (i) Seller shall be entitled to retain, and shall be entirely responsible for the collection of its accounts receivable relating to services provided at the Premises prior to the Closing Date (the "Seller Accounts Receivable"); provided, however, that Purchaser shall promptly remit to Seller 100% of any and all payments received by Purchaser which are specifically designated for application against a Seller Account Receivable relating to services performed prior to the Closing Date.

- (ii) Purchaser shall be entitled to receive, and shall be entirely responsible for the collection of its accounts receivable relating to services provided at the Premises from and after to the Closing Date (the "**Purchaser Accounts Receivable**"); provided, however, that Seller shall promptly remit to Purchaser 100% of any and all payments received by Seller which are specifically designated for application against a Purchaser Account Receivable relating to services performed from or after the Closing Date.

- (e) Confidentiality. Seller and Purchaser agree to keep the terms of this Agreement confidential and shall not disclose (other than to their attorneys, accountants and financial advisors) any information contained herein without the prior written consent of the other party. Any and all information supplied by the Purchaser or the Seller, or learned by either party about the other in the course of its due diligence investigation shall be held by such party in strict confidence and disclosed only to employees, agents or representatives of the parties and on a need to know basis.

- (f) Legal Costs. Each party will pay its own costs and expenses in connection with the negotiation, preparation, execution and delivery of this letter and the other documents contemplated hereby and the consummation of the transactions described herein.

- (g) Brokers. Neither Purchaser nor Seller has employed or used any broker in connection with this transaction.

- (h) Employees.
 - (i) Purchaser may, but is not obligated, to offer employment, from and after the Closing Date, to certain employees of the Seller at the Premises who have been specifically designated by Purchaser in writing as being required by them to conduct the business and operations of the New Practice after the Closing Date. Nothing set forth in this Section 9(h) shall require Purchaser to pay compensation to any employee that exceeds the fair market value of the services that such individual provides, nor shall any provision of this Section 9(h) obligate Purchaser to employ any such individual for any period of time or continue any term or condition of employment or any employment benefits or policies for any period of time after the Closing Date.

With respect to all of its employees who work for Seller at the Premises the Seller shall be and shall remain solely liable for all amounts, arising prior to the Closing Date, of (i) accrued paid time off expense, vacation, sick leave or other pay; (ii) employer

contributions accrued or committed under each pension, profit-sharing, medical, dental, life insurance or retirement plan or similar arrangement except those contributions accrued or committed that are not yet due which will be paid by the Seller and for which Purchaser shall be held harmless from liability by the Seller; (iii) any severance payments or other obligations arising under existing employment agreements or similar arrangements; and (iv) any other accrued benefits to which each employee of the Seller may be entitled. The Seller acknowledges and agrees that Purchaser assumes no obligation under any existing retirement or benefit plan of the Seller, that there shall be no merger of any retirement plan of the Seller with any existing retirement plan of

- (ii) Purchaser, that Purchaser shall not be deemed to be a successor operation or employer of the Seller for purposes of ERISA and the regulations there under, and that the Seller shall be responsible for any retirement plan benefits or other benefits or contributions up to the time of Closing for any employees or leased employees of the Seller who may become employed by Purchaser as of the Closing Date.

(j) Medical Records.

- (i) Seller shall allow Purchaser to place and maintain a server at Seller's data center in order to assure the ongoing transfer of digital data relating to the West Haven Office from Seller to Purchaser and shall cooperate fully with Purchaser to transfer such digital data on an ongoing basis.
- (ii) Following the closing Seller shall arrange and pay for the delivery of all radiographs relating to the West Haven medical records to a location in West Haven or Milford to be designated by Purchaser.

10. Deliveries at Closing.

- (a) Seller's Deliveries at Closing. At the Closing, the Seller shall deliver to Purchaser the following (which, together with this Agreement, shall be referred to as the "Transaction Documents"):
 - (i) Such bills of sale, assignments and other instruments of transfer as shall be necessary or appropriate to transfer to Purchaser all of Seller's right, title and interest in and unrestricted possession of the Subject Assets, duly executed, all in form satisfactory to Purchaser; and
 - (ii) The Services Agreement; and

- (iii) The Space License Agreement.
- (b) Purchaser's Deliveries at Closing. At the Closing, Purchaser shall deliver to Seller:
 - (i) The Purchase Price;
 - (ii) The Option Payment;
 - (iii) The Services Agreement;
 - (iv) The Space License Agreement; and
 - (v) Such instruments and documents, duly executed, all in form satisfactory to Purchaser, as shall be necessary or appropriate in order for Purchaser to purchase the Subject Assets and assume the Assumed Liabilities.

11. Representations, Warranties and Covenants of Seller. As an inducement to Purchaser to purchase the Subject Assets, Seller represents and warrants to Purchaser that as of the date hereof and as of the Closing Date:

- (a) Organization and Good Standing. Seller is a professional services corporation duly organized, validly existing and in good standing under the laws of the State of Connecticut, and has all requisite power and authority to own and operate and to carry on the Practice conducted by the Seller as the same has been represented to Purchaser pursuant hereto.
- (b) Authority to Execute and Perform Agreements. Seller has full power and authority to execute and deliver, and to perform its obligations under each of the Transaction Documents to which it is or shall become a party and to consummate the transactions contemplated thereby. This Agreement and each other Transaction Document to which Seller is or shall become a party has or shall be duly authorized, executed and delivered by Seller and does, or shall be upon execution and delivery hereof and thereof, legal, valid and binding obligations of Seller, fully enforceable in accordance with their respective terms.
- (c) Title to Assets. Except for those liens set forth on *Schedule 11(c)*, all of which shall be released prior to the Closing, Seller has good and marketable title to the Subject Assets, free and clear of any lien, charge or encumbrance of any kind or nature whatsoever, and has the full and unrestricted right and power to transfer title to and ownership of the Subject Assets to Purchaser in accordance with the terms hereof.

- (d) Tax Matters. All federal, state and local tax returns and tax reports, if any, required to be filed by the Seller for all periods prior to the Closing Date have been or will be filed by Seller with the appropriate governmental agencies, all such returns and reports have been prepared in good faith, and all amounts shown as owing thereon have been paid or provided for by adequate reserves.
 - (e) Employee Matters. Seller is in compliance with all applicable federal and state laws relating to its employees, including the provisions thereof relating to wages, hours, and the payment of social security and similar taxes and Seller has no knowledge of any liability for any arrears, wages or any such taxes or penalties for failure to comply with any of the foregoing.
 - (f) Litigation. There is no claim, suit, action, demand, inquiry, investigation or other proceeding (including, without limitation, any proceeding involving taxes, Seller's employees, environmental matters, Medicare or any other federal program in which Seller participate) pending or, to the best of Seller's knowledge, threatened against or relating to Seller, the Premises, the Practice, or the Subject Assets or the transactions contemplated by this Agreement.
 - (g) No Violation. Neither the execution and delivery of any of the Transaction Documents to which Seller is or shall become a party, nor the performance of any or all of Seller's obligations hereunder, will (i) to the best of Seller's knowledge, violate any law, rule, regulation, or statute of any governmental body or order, decree or judgment of any court, administrative body or governmental agency; or (ii) result in or constitute a default, breach or violation of any charter document of Purchaser or any agreement or contractual or other obligation to which the Seller is a party,.
 - (h) Consents. Except as specifically set forth herein, no consents, approvals, authorizations or orders of any third party or governmental authority are required of Seller in connection with the execution or consummation by Seller of this Agreement or any of the other Transaction Documents, or the transactions contemplated hereby or thereby.
 - (i) Compliance with Applicable Laws. The conduct of the Practice as conducted at the Premises and the ownership and operation of the Subject Assets by Seller do not violate any applicable laws, statutes, rules, ordinances or regulations. Seller has secured all licenses, permits, approvals, authorizations and consents necessary to permit (i) Seller to conduct the Practice at the Premises as heretofore conducted and (ii) the consummation of the transactions contemplated by this Agreement.
12. Representations, Warranties and Covenants of Purchaser. As an inducement to Seller to enter into the transactions contemplated hereby, Purchaser represents, warrants and covenants to Seller as of the Closing Date as follows:

- (a) Organization and Good Standing. Purchaser is a professional services corporation duly organized, validly existing and in good standing under the laws of the State of Connecticut, and has all requisite power and authority to own and operate and to carry on the business presently being conducted by the Seller, as the same has been represented to Purchaser pursuant hereto.

Authority to Execute and Perform Agreements. Purchaser has full power and authority to execute and deliver, and to perform its obligations under each of the Transaction Documents to which it is or shall become a party and

- (b) To consummate the transactions contemplated thereby. This Agreement and each other transaction Document to which Purchaser is or shall become a party, have been or shall be duly authorized, executed and delivered by Purchaser and are, or upon execution and delivery shall be, legal, valid and binding obligations of Purchaser, fully enforceable in accordance with their respective terms.
- (c) No Violation. Neither the execution and delivery of any of the Transaction Documents to which Purchaser is a party, nor the performance of any or all of Purchaser's obligations there under, will (i) to the best of Purchaser's knowledge, violate any law, rule, regulation, or statute of any governmental body or order, decree or judgment of any court, administrative body or governmental agency; or (ii) result in or constitute a default, breach or violation of any charter document of Purchaser or any agreement or contractual or other obligation to which the Purchaser is a party.
- (d) Consents. Except as specifically set forth herein, no consents, approvals, authorizations or orders of any third party or governmental authority are required of Purchaser in connection with the execution or consummation by Seller of this Agreement or any of the other Transaction Documents, or the transactions contemplated hereby or thereby.

13. Indemnification.

- (a) Seller's Indemnification. From and after the Closing Date, Seller shall be responsible for, and shall indemnify and hold Purchaser harmless from and against, any and all claims, damages losses, liabilities, cost and expenses (including legal, investigation, accounting and other fees and expenses) which Purchaser may incur in connection with or as a result of:
- (i) Any breach of any of Seller's representations, warranties, covenants or other obligations set forth in this Agreement or in any other Transaction Document;

- (ii) The failure of Seller to discharge any of its liabilities relating to the conduct of the Practice or the ownership and operation of the Subject Assets, other than the Assumed Liabilities; or
- (iii) Except as specifically provided in Sections 9(a) and (b) above, the conduct of the Practice or ownership and operation of the Subject Assets prior to the Closing Date.

(b) Purchaser's Indemnification. From and after the Effective Time, Purchaser shall be responsible for, and shall indemnify and hold Seller harmless from and against, any and all claims, damages losses, liabilities, cost and expenses (including legal, investigation, accounting and other fees and expenses) which Seller may incur in connection with or as a result of:

- (i) Any breach of any of Purchaser's representations, warranties, covenants or other obligations set forth in this Agreement or in any other Transaction Document;
- (ii) The failure of Purchaser to discharge any of the Assumed Obligations; or
- (iii) The conduct of the Practice or ownership and operation of the Subject Assets after the Closing Date.

14. Arbitration. Any disputes or controversies arising under or in connection with this Agreement shall be resolved by arbitration to be held in the City of New Haven, Connecticut, or such other municipality as shall be agreed to by the parties hereto, by one neutral arbitrator in accordance with the rules then prevailing of the American Arbitration Association. Judgment upon an award rendered by such arbitrator may be entered in any court of competent jurisdiction, and any such award shall be final and binding upon the parties hereto.

15. Miscellaneous.

- (a) Survival of Representations and Warranties. All representations and warranties made by the parties in this Agreement and in any Schedule or Exhibit attached hereto shall survive the execution hereof, the Closing and the consummation of the transactions contemplated hereby.
- (b) Notices. Any notices or other communications required or permitted hereunder shall be sufficiently given, if in writing and delivered by hand, or sent by certified mail, return receipt requested and postage-pre-paid, or by express overnight delivery service, addressed as follows:

If to Seller: Radiologic Associates of Middletown, P.C.
330 South Main Street, P.O. Box 931
Middletown, Connecticut 06457
Attn.: Michael Crain, M.D.

With a copy to: Updike, Kelly & Spellacy, P.C.
One Century Tower
265 Church Street
New Haven, Connecticut 06510
Attn: Jennifer L. Groves, Esq.

If to Purchaser Diagnostic Imaging of Milford, P.C.
30 Commerce Park, Suite 102
Milford, Connecticut 06460
Attn: Paul Davis, President

With a copy to: Brenner, Saltzman & Wallman LLP
271 Whitney Avenue
New Haven, Connecticut 06511
Attn.: Alice J. Mick, Esq.

- (c) Entire Agreement. This Agreement, together with the Schedules and Exhibits attached hereto, sets forth the entire understanding of the parties hereto concerning the subject matter hereof, and may be amended or modified only pursuant to a writing signed by each of the parties hereto.
- (d) Benefit of Agreement. This Agreement shall be binding upon and inure to the benefit of and be enforceable by the parties hereto, and their respective heirs, successors and assigns; provided, however, that this Agreement may not be assigned in whole or in part, either directly or indirectly, by either party hereto, without the prior written consent of the other party.
- (e) Enforceability. The invalidity or unenforceability of any one or more phrases, sentences, clauses or sections herein contained shall not affect the validity or enforceability of the remaining portions of this Agreement.
- (f) Governing Law. This Agreement shall be governed by and construed in accordance with the laws of the State of Connecticut applicable to contracts made and to be wholly performed within said State.
- (g) Waiver. Any party to this Agreement may, by written notice to the other party, waive any provision of this Agreement, the benefit of which runs to the party executing the waiver. The waiver by either party hereto of a breach of any provision of this Agreement shall not operate or be construed as a waiver of any subsequent same or different breach.

- (h) Further Assurances. Each of Purchaser and Seller shall, upon request of the other party, execute and deliver without any consideration, such additional instruments of transfer, assignment and further assurance or do or cause to be done such other things as are reasonably necessary or desirable to make effective the transfer of the Subject Assets and other agreements and transactions contemplated hereby.
- (i) Negative Legal Development. In the event that either party to this Agreement determines, in good faith, or receives general or specific notice from the Internal Revenue Service or any other Governmental Authority that all or any provision of this Agreement: (i) violate or fail to comply with any state or federal law, regulation, rule or administrative policy or would result in the prohibition of a referral under 42 U.S.C. § 1395nn, as amended; or (ii) jeopardize its participation in any federal or state health care program, the parties agree to undertake good faith negotiations to create and execute a modification that is as close as possible in terms, conditions and substance to this Agreement, but without the provision that causes the concern. If the parties are unable to renegotiate the terms of this Agreement on a mutually acceptable basis, any party may terminate this Agreement.
- (i) Counterparts. This Agreement may be executed in two or more counterparts, each of which shall be deemed an original, but all such counterparts shall together constitute one and the same instrument. Delivery of an executed signature page by electronic or facsimile transmission shall be as effective as delivery of a manually executed counterpart.

IN WITNESS WHEREOF, the parties hereto have executed and delivered this Agreement on and as of the day and year first above written.

RADIOLOGIC ASSOCIATES
OF MIDDLETOWN, P.C.

By: _____

Michael Crain, M.D., its CEO

DIAGNOSTIC IMAGING OF
MILFORD, P.C.

By: _____

Paul S. Davis, M.D., its President

SCHEDULE 1(a)(i)

Medical Equipment

Hologic Selenia Digital Mammography System Fuji Film Dry Pix 5000

Printer

PACscube CD Burner

Fuji Film FCR Carbon X CR Unit

X-ray Room with Table

GE Logic 7 Ultrasound Machine

SCHEDULE 1(a) (ii)

Non-Medical Equipment

Reception Area Side Tables

Wall Pictures

Wall Mirror

Reception Chairs

Medical Reception Staff Area RIS Computers

Norcom Phones

Insurance Card Scanners

Document Scanner

Wall Clock

HP Laser Jet 434mfp Copier/Fax machine

Wall Picture

Secretary Arm Chairs Black Side Chair

Misc. Office Supplies

Technologists Station

Side Table

RIS Computer

X-ray File Cabinet

View Box

Document Scanner

Sectra PACs Workstation HP Laser Jet 1320N

Printer Norcom Phone

Bulletin Boards

Kitchen Area

Norcom Wall Phone Refrigerator

Small Supply Cabinet Gray Fabric Bulletin Board

Toaster Oven

Microwave Oven

Time Clock

Large Coat Rack

Kitchen Table with 5 Chairs assorted kitchen supplies

Mammography Room

Side Chair Storage Cabinets

Small Wall Pictures

Coat Rack

Small Mirror Patient Gown Bin

Trash Holder Wall Phone

Dedicated Sanyo Air Conditioner
Lead Apron Holder
Lead Aprons

Hallway

Blank CDs
Blank DVDs
Small Trash Holder
Wall Mirror (dressing room 1)
Large Storage Cabinet
Wall Mirror & Coat Rack (dressing room 2)
14 x 17 Cassettes & Screens
10 x 12 Cassettes & Screens
8 x 10 Cassettes & Screens
15 x 18 Grid

Radiography Room

Cassette Holder Pig-o-stat
16 x 24 sponges Long Angle Sponge Hand Oblique Sponge
Full Body Lead Apron
Breast Shield Apron
Waist Shields Gonadal Shields Standing Shield

Step Stool IV Pole
Rolling Stool Coat Rack Wall Phone Standing Lamp
Patient Gown Bin
Trash Bin Side Chairs

CT Room

CT Phantoms
Side Chair
Wall Picture
Rolling Supply Cabinet
Contrast Injector
Wall Clock
Trash Holder
Small File Cabinet
Crash Cart & Defib.
Cabinet with Sink
Contrast Warmer

Dedicated Neo Plasma Air Conditioner Unit

Wall Clock

Small Non-built in Storage Cabinet Patient Gown Bin

CT Control Room Norcom Phone

CT Workstations Chairs

Trash Holder

Radiologist Reading Room

Norcom Phone

Large View Boxes Kyocera Laser Printer Battery Back Up Unit

Dell Server for Powerscribe with Microphone Sectra PACs Workstation with Keyboard

Barco Mammo Monitors Worklist Monitor

Small View Boxes

Magnifying Glass

Floor Fan Standing Lamp

Bookcase Chair

Ultrasound Room

Coat Rack Disinfectant Station

Norcom Phone

Trash Holder

Chair

Patient Stretcher

Patient Gown Bin

Step Stool

Thermosonic Gel Warmer

Small Supply Cabinet

Back Hallway & Lab Storage Area All Telephone & Computers Servers Amplifier For Music System

Cooling Fan Extra Office PC

Side Chair Wheel Chair Vacuum Cleaner

Years Mammo Jackets

Film File Cabinets

View Box Side Chair

Bathrooms with supplies

SCHEDULE 2(a)

Excluded Assets

Radiology Books

Middlesex Hospital Dell Computer Middlesex Hospital Dell Monitor

Middlesex Hospital Large Planar Monitor Dr. Crain's Art Work

Dell PC & Monitor - Used for Internet Access

Seller's accounts receivable

Cash on hand

Notes Receivable

Bank Accounts

Insurance Proceeds

Deposits or Refunds of Taxes Paid

SCHEDULE 2(b)

Excluded Ct Scanner

Toshiba Asteion CT Scanner with Table

SCHEDULE 5(c)

Allocation

Medical Equipment	\$
Non-Medical Equipment	\$

SCHEDULE 9(a)(i)

Lease of Mammography System

SCHEDULE 11(c)

Liens on Assets

Exhibit A

Services Agreement

Exhibit B

Space License Agreement

**Attachment
D**

Diagnostic Imaging of Milford
30 Commerce Park
Milford, Connecticut 06460
Telephone: (203) 878-2341
Fax: (203) 878-3429

Diagnostic Imaging of West Haven
687 Campbell Avenue, Suite 1
West Haven, Connecticut 06516
Telephone: (203) 934-4482
Fax: (203) 934-8803

High Field Performance Open MRI (ACR accredited) • Digital Mammography (ACR accredited) •
Radiography & Fluoroscopy • Bone Densitometry • Ultrasound • CT Scan

This letter is in support of a CT scanner to be available to my patients at Diagnostic Imaging of West Haven. I have been sending my patients who require CT scans to this location formerly known as West Haven Radiology at 687 Campbell Avenue for many years. It is very important that CT scan procedures continue to be offered at this location, as there are no other facilities within our town limits that offer this service, which is much needed for proper diagnostic reasons.

DR. CHUSTECKA M.D.
388 MAIN STREET
WEST HAVEN, CT 06516



Diagnostic Imaging of Milford
30 Commerce Park
Milford, Connecticut 06460
Telephone: (203) 878-2341
Fax: (203) 878-3429

Diagnostic Imaging of West Haven
687 Campbell Avenue, Suite 1
West Haven, Connecticut 06516
Telephone: (203) 934-4482
Fax: (203) 934-8803

High Field Performance Open MRI (ACR accredited) • Digital Mammography (ACR accredited) •
Radiography & Fluoroscopy • Bone Densitometry • Ultrasound • CT Scan

This letter is in support of a CT scanner to be available to my patients at Diagnostic Imaging of West Haven. I have been sending my patients who require CT scans to this location formerly known as West Haven Radiology at 687 Campbell Avenue for many years. It is very important that CT scan procedures continue to be offered at this location, as there are no other facilities within our town limits that offer this service, which is much needed for proper diagnostic reasons.

A handwritten signature in black ink, appearing to read 'Channa Perera', is written over a horizontal line.

DR. Channa Perera




Diagnostic Imaging of Milford
30 Commerce Park
Milford, Connecticut 06460
Telephone: (203) 878-2341
Fax: (203) 878-3429

Diagnostic Imaging of West Haven
687 Campbell Avenue, Suite 1
West Haven, Connecticut 06516
Telephone: (203) 934-4482
Fax: (203) 934-8803

High Field Performance Open MRI (ACR accredited) • Digital Mammography (ACR accredited) •
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General Medical Practice
309 Main Street
West Haven, CT 06516




Diagnostic Imaging of Milford
30 Commerce Park
Milford, Connecticut 06460
Telephone: (203) 878-2341
Fax: (203) 878-3429

Diagnostic Imaging of West Haven
687 Campbell Avenue, Suite 1
West Haven, Connecticut 06516
Telephone: (203) 934-4482
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DR. R. KHOSRABEKY

10-16-12



Diagnostic Imaging of Milford
30 Commerce Park
Milford, Connecticut 06460
Telephone: (203) 878-2341
Fax: (203) 878-3429

Diagnostic Imaging of West Haven
687 Campbell Avenue, Suite 1
West Haven, Connecticut 06516
Telephone: (203) 934-4482
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Ann Celeste Nagas-Diaz, M.D.
Cornell Scott Hill Health Center
285 Main St.
West Haven, CT



Diagnostic Imaging of Milford
30 Commerce Park
Milford, Connecticut 06460
Telephone: (203) 878-2341
Fax: (203) 878-3429

Diagnostic Imaging of West Haven
687 Campbell Avenue, Suite 1
West Haven, Connecticut 06516
Telephone: (203) 934-4482
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Dr. L. Costantino, MD, PhD

10/17/12



Diagnostic Imaging of Milford
30 Commerce Park
Milford, Connecticut 06460
Telephone: (203) 878-2341
Fax: (203) 878-3429

Diagnostic Imaging of West Haven
687 Campbell Avenue, Suite 1
West Haven, Connecticut 06516
Telephone: (203) 934-4482
Fax: (203) 934-8803

High Field Performance Open MRI (ACR accredited) • Digital Mammography (ACR accredited) •
Radiography & Fluoroscopy • Bone Densitometry • Ultrasound • CT Scan

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WILLIAM E. ROSNER, M.D.
755 Campbell Avenue
West Haven, CT 06516
(203) 931-2828

Attachment E**TOSHIBA**
Leading Innovation >>>**TOSHIBA AMERICA MEDICAL SYSTEMS, INC.**2441 Michelle Drive, Tustin, CA 92780
Phone: (714) 730-5000

October 25, 2012

Ms. Kristen Harlow
West Haven Radiology
687 Campbell Avenue
New Haven, CT 06516

Dear Kristen,

Per your request, please accept this letter as a verification of the general information and condition of the Toshiba Astelon CT Scanner located at your West Haven Radiology Imaging Facility.

General Information:

- Model Name: Astelon 48 4-Slice
- Model Number: TSX-021A/3L
- Serial Number: B4542385
- System ID/SEG#: 227439
- System Turnover: July 20, 2004
- Warranty Period: July 21, 2004 to July 20, 2005

Condition and Service History:

- Overall Condition: Excellent
- Current Software: V2.05ER004 (Most recent release)
 - Base Software at turnover: 2.03ER003
 - FMI CT925-90828: 2.04ER001 08/16/2004
 - The total mAs in RealEC is calculated using the average method instead of maximum value method.
 - Scanograms are displayed in the Selector window in black.
 - Eliminates intermittent line artifacts in MPR images when using 2D/3D.
 - Allows CBP study to be output to a color printer.
 - Ensures that raw data includes date each time MWM is read.
 - Allows mechanical control Quit button to be enabled or disabled.
 - Prevents core dump when in Filter Edit mode.
 - Allows a minus value to be entered in Filter Edit mode.
 - Corrects FC error due to time-out of MARS PWB.

TOSHIBA
Leading Innovation >>>

TOSHIBA AMERICA MEDICAL SYSTEMS

- o FMI CT957-90828: 2.04ER004 10/05/2005
 - If system disk is full or a system disk error occurs, patient information on the image and in the summary section will match.
 - Prevents previous patient from being included with images of current patient due to defective reconstruction PWB.
 - Corrects transfer error when scan is started before midnight and is completed on the following day.
 - Corrects start position displayed after a 0-clear is performed.
 - Corrects early termination when a Repeat_eXam is performed after an eXam Plan containing a respiratory-gated scan is executed.

- o FMI CTA12-90828: 2.05ER001 08/21/2006
 - Correction so operator specified scan area matches system software scan area.

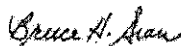
- o FMI CTA29-90828: 2.05ER004 10/25/2006
 - Corrected software so FC Abnormal message would not appear if scan and reconstruction were selected repeatedly (approximately 170 times).

- Preventive Maintenance: Performed Monthly (100% Complete)
- Warranty Uptime: 99.75% (07/21/04 to 07/20/05)
- System Uptime: 99.26% (07/21/05 to 10/10/12)
- Last Service Call: 02/21/12
- X-Ray Tube Replacement: 10/02/08

I want to thank you for being loyal customers of Toshiba America Medical Systems and we look forward to servicing your diagnostic imaging needs in the future. Should you have any questions or concerns regarding the letter, please feel free to contact me.

Best regards,

Bruce H. Gran



TOSHIBA
Leading Innovation >>>

Bruce Gran
Area Services Manager - ATL East
TOSHIBA AMERICA MEDICAL SYSTEMS
Phone: 203-261-9446
Cell Phone: 203-261-9446
Fax: 203-261-0773
Voice Mail: 800-621-1958 X4672
E-Mail: bgran@tams.com
Web: medical.toshiba.com



STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
Office of Health Care Access

December 27, 2012

VIA FAX ONLY

Debra Mauriello
Director, Diagnostic Imaging
Milford Hospital
300 Seaside Avenue
Milford, CT 06460

RE: Certificate of Need Application; Docket Number: 12-31784-CON
Milford Hospital
SBDI Holding, LLC d/b/a Diagnostic Imaging of West Haven proposes the acquisition of
an existing Computed Tomography (CT) Scanner in West Haven, CT from Radiologic
Associates of Middletown
Notification Deeming the CON Application Complete

Dear Ms. Mauriello:

This letter is to inform you that, pursuant to Section 19a-639a(d) of the Connecticut General Statutes, the Office of Health Care Access ("OHCA") has determined that the above-referenced application has been deemed complete as of December 16, 2012. The date of December 16, 2012, also begins the ninety-day review period of the application.

If you have any questions regarding this matter, please feel free to contact me at (860) 418-7015.

Sincerely,

A handwritten signature in black ink, appearing to read "Paolo Fiducia".

Paolo Fiducia
Associate Health Analyst,

*** TX REPORT ***

TRANSMISSION OK

TX/RX NO 3227
RECIPIENT ADDRESS 912038764539
DESTINATION ID
ST. TIME 12/27 11:53
TIME USE 00'25
PAGES SENT 2
RESULT OK



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

FAX SHEET

TO: DEBRA MAURIELLO
FAX: 203 876 4539
AGENCY: SBDI HOLDING, LLC
FROM: PAOLO FIDUCIA
DATE: 12/27/12 TIME: 1045 am
NUMBER OF PAGES: 2
(including transmittal sheet)

Comments: 12-31784-CON

NOTIFICATION DEEMING THE CON APPLICATION COMPLETE

PLEASE PHONE IF THERE ARE ANY TRANSMISSION PROBLEMS.



STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
Office of Health Care Access

December 28, 2012

VIA FAX ONLY

Debra Mauriello
Director, Diagnostic Imaging
Milford Hospital
300 Seaside Avenue
Milford, CT 06460

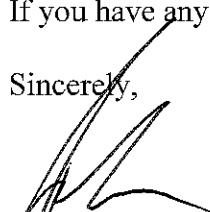
RE: Certificate of Need Application; Docket Number: 12-31784-CON
Milford Hospital
SBDI Holding, LLC d/b/a Diagnostic Imaging of West Haven proposes the acquisition of an existing Computed Tomography (CT) Scanner in West Haven, CT from Radiologic Associates of Middletown
Notification Deeming the CON Application Complete

Dear Ms. Mauriello:

Please disregard the letter sent to you on December 27, 2012, regarding the notification deeming the CON application complete. This letter is to inform you that, pursuant to Section 19a-639a(d) of the Connecticut General Statutes, the Office of Health Care Access ("OHCA") has determined that the above-referenced application has been deemed complete as of **December 28, 2012**. The date of December 28, 2012, also begins the ninety-day review period of the application.

If you have any questions regarding this matter, please feel free to contact me at (860) 418-7015.

Sincerely,



Paolo Fiducia
Associate Health Analyst

*** TX REPORT ***

TRANSMISSION OK

TX/RX NO 3228
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DESTINATION ID
ST. TIME 12/28 12:12
TIME USE 00'26
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RESULT OK



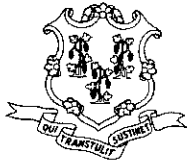
STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
OFFICE OF HEALTH CARE ACCESS

FAX SHEET

TO: DEBRA MAURIELLO
FAX: 203 876 4539
AGENCY: SRDI HOLDING, LLC
FROM: PAOLO FIDUCIA
DATE: 12/28/12 TIME: 11 AM
NUMBER OF PAGES: 2
(including transmittal sheet)

Comments: 12-31784-CON
NOTIFICATION REEMINT THE CON APPLICATION COMPLETE

PLEASE PHONE IF THERE ARE ANY TRANSMISSION PROBLEMS.



STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
Office of Health Care Access

January 4, 2013

Debra Mauriello
Director, Diagnostic Imaging
Milford Hospital
300 Seaside Avenue
Milford, CT 06460

RE: Certificate of Need Application, Docket Number 12-31784-CON
SBDI Holding, LLC d/b/a Diagnostic Imaging of West Haven
Proposal to Acquire an Existing Computed Tomography ("CT") Scanner in West Haven

Dear Ms. Mauriello:

With the receipt of the completed Certificate of Need ("CON") application information submitted by SBDI Holding, LLC d/b/a Diagnostic Imaging of West Haven ("Applicant") on September 5, 2012, 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: SBDI Holding, LLC d/b/a Diagnostic Imaging of West Haven

Docket Number: 12-31784-CON

Proposal: Proposal to Acquire an Existing Computed Tomography ("CT")
Scanner in West Haven with a total capital expenditure of \$10,000

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

Date: January 24, 2013

Time: 1:30 p.m.

Place: Department of Public Health, Office of Health Care Access
410 Capital Avenue, Third Floor
Hartford, CT 06134

The Applicants are designated as party 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).

Sincerely,



Kimberly R. Martone
Director of Operations

Enclosure

cc: Henry Salton, Esq., Office of the Attorney General
Marianne Horn, Department of Public Health
Kevin Hansted, Department of Public Health
Wendy Furniss, Department of Public Health
Marielle Daniels, Connecticut Hospital Association

KRM: PF: lmg



STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

Office of Health Care Access

January 4, 2013

Requisition # 40755

New Haven Register
40 Sargent Street
New Haven, CT 06531-0715

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, January 7, 2013**. 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,

A handwritten signature in cursive script, appearing to read "Kim Martone".

Kimberly R. Martone
Director of Operations

Attachment

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

KRM:PF:lmg

PLEASE INSERT THE FOLLOWING:

Office of Health Care Access Public Hearing

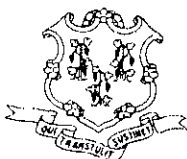
Statute Reference: 19a-638
Applicant: SBDI Holding, LLC d/b/a Diagnostic Imaging of West Haven
Town: West Haven
Docket Number: 12-31784-CON
Proposal: SBDI Holding, LLC d/b/a Diagnostic Imaging of West Haven Proposes the Acquisition of an Existing Computed Tomography (CT) Scanner from Radiologic Associates of Middletown with a total capital expenditure of \$10,000
Date: January 24, 2013
Time: 1:30 p.m.
Place: Department of Public Health, Office of Health Care Access
410 Capitol Avenue, Third Floor
Hartford, CT 06134

Any person who wishes to request status in the above listed public hearing may file a written petition no later than January 18, 2013 (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.

*** TX REPORT ***

TRANSMISSION OK

TX/RX NO 3238
RECIPIENT ADDRESS 912038764593
DESTINATION ID
ST. TIME 01/04 13:00
TIME USE 00'41
PAGES SENT 5
RESULT OK



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

FAX SHEET

TO: DEBRA MAURIELLO
FAX: (203) 876-4593
AGENCY: MILFORD HOSPITAL
FROM: LESLIE GREER
DATE: 1/4/13 TIME: _____
NUMBER OF PAGES: 5
(including transmittal sheet)



Comments: DN: 12-31784-CON Public Hearing Notice

PLEASE PHONE IF THERE ARE ANY TRANSMISSION PROBLEMS.

Greer, Leslie

From: ADS <ADS@graystoneadv.com>
Sent: Friday, January 04, 2013 11:59 AM
To: Greer, Leslie
Subject: Re: Public Hearing Notice DN: 12-31784-CON

Good day!

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

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

We sincerely appreciate your business.

PLEASE NOTE: New Department of Labor guidelines allow web base 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.

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
<http://www.graystoneadv.com/>

From: <Greer>, Leslie <Leslie.Greer@ct.gov>
Date: Friday, January 4, 2013 11:51 AM
To: ads <ads@graystoneadv.com>
Cc: "Olejarz, Barbara" <Barbara.Olejarz@ct.gov>
Subject: Public Hearing Notice DN: 12-31784-CON

Please run the attached public hearing notice in the New Haven Register by 1/7/12. For billing purposes refer to requisition #40755, if you have any questions or need additional information contact Barbara Olejarz @ (860) 418-7001.

Thank you,

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

 3°°1°#11°E,°S#°#16E1æ°1-#°-1S°#°S1-1E#°E#°°11°E°

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 *jm*

DATE: January 7, 2013

RE: Certificate of Need Application; Docket Number: 12-31784-CON
SBDI Holding, LLC d/b/a Diagnostic Imaging of West Haven
Proposal to Acquire an Existing Computed Tomography ("CT") Scanner in
West Haven

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 34038
Hartford, Connecticut 06134-0308
www.ct.gov/dph

Affirmative Action/Equal Opportunity Employer



STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
Office of Health Care Access

January 15, 2013

VIA FAX ONLY

Debra Mauriello
Director, Diagnostic Imaging
Milford Hospital
300 Seaside Avenue
Milford, CT 06460

RE: Certificate of Need Application; Docket Number: 12-31784-CON
SBDI Holding, LLC d/b/a Diagnostic Imaging of West Haven proposes to acquire an
existing Computed Tomography ("CT") Scanner in West Haven

Dear Ms. Mauriello:

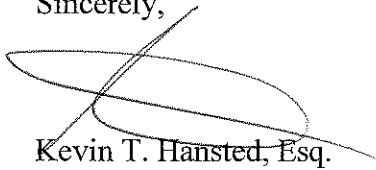
The Office of Health Care Access ("OHCA") will hold a public hearing on Thursday, January 24, 2013, at 1:30 p.m. at the Department of Public Health, Office of Health Care Access, Third Floor Hearing Room, 410 Capitol Avenue, Hartford, regarding the Certificate of Need ("CON") application identified above. 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. The Applicant's prefiled testimony must be submitted to OHCA no later than **9:00 am, on Tuesday, January 22, 2013.**

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 OHCA's attachment outlining the suggested discussion points to prepare for the hearing.

Please contact Paolo Fiducia at (860) 418-7035, if you have any questions concerning this request.

Sincerely,



Kevin T. Hansted, Esq.
Hearing Officer

ISSUES

for Public Hearing:

Certificate of Need Application, Docket Number: 12-31784-CON

SBDI Holding, LLC d/b/a Diagnostic Imaging of West Haven

Diagnostic Imaging of West Haven's Acquisition of an Existing Computed Tomography ("CT") Scanner in West Haven from Radiologic Associates of Middletown

Please be fully prepared to discuss the following:

1. The need for Diagnostic Imaging of West Haven to acquire an existing CT scanner aside from being the only one in town, referring physicians in the surrounding area and located on a major bus route.
2. The decline in CT scans volume from FY 2009 to the present and the low projected scans volume for the next three (3) years.
3. The existing providers in the towns of Orange, Milford, North Haven and New Haven.

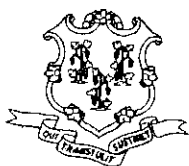
Provide a written response to the following as an attachment to the pre-file testimony:

1. Updated annual utilization (Jan-Dec) for the existing CT scanner.
2. A list of referrals by doctor/specialty/number of referrals for the most recent year.

 *** TX REPORT ***

TRANSMISSION OK

TX/RX NO 3245
 RECIPIENT ADDRESS 912038764539
 DESTINATION ID
 ST. TIME 01/15 11:48
 TIME USE 00'38
 PAGES SENT 4
 RESULT OK



STATE OF CONNECTICUT
 DEPARTMENT OF PUBLIC HEALTH
Office of Health Care Access

January 15, 2013

VIA FAX ONLY

Debra Mauriello
 Director, Diagnostic Imaging
 Milford Hospital
 300 Seaside Avenue
 Milford, CT 06460

RE: Certificate of Need Application; Docket Number: 12-31784-CON
 SBDI Holding, LLC d/b/a Diagnostic Imaging of West Haven proposes to acquire an existing Computed Tomography ("CT") Scanner in West Haven

Dear Ms. Mauriello:

The Office of Health Care Access ("OHCA") will hold a public hearing on Thursday, January 24, 2013, at 1:30 p.m. at the Department of Public Health, Office of Health Care Access, Third Floor Hearing Room, 410 Capitol Avenue, Hartford, regarding the Certificate of Need ("CON") application identified above. 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. The Applicant's prefiled testimony must be submitted to OHCA no later than **9:00 am, on Tuesday, January 22, 2013.**

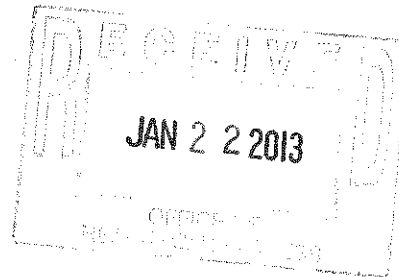
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Additionally, please find OHCA's attachment outlining the suggested discussion points to prepare for the hearing.



MILFORD HOSPITAL

Radiology Department
300 Seaside Avenue
Milford, CT 06460
Phone - 203-876-4242
Fax - 203-876-4539



Date: 1-22-13

Facsimile Information Sheet

To: Paolo Fiducia

Fax Number: 860-418-7053

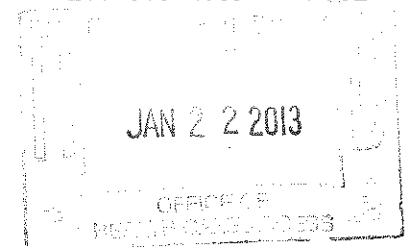
Pages (including cover): 8

From: Debra Mauriello (203-876-4241)

Additional Message: Please find the pre-filed testimony
and annual utilization for CT scanner at SBDI (West
Haven Radiology). CON Docket # 12-31784-CON

This transmission is intended only for the addressee(s) named above. It may contain information that is confidential and prohibited from unauthorized use or disclosure. If you are not the intended recipient, you are hereby notified that any review, use or disclosure, copying, or dissemination of this transmission or the taking of any action in reliance on its contents is strictly prohibited.

If you have received this transmission in error, please notify the sender immediately so that arrangements can be made for its disposal. Thank you for your cooperation.



Good afternoon members of the Office of Health Care Access

My name is Dr. Paul Davis. I currently serve as President of Diagnostic Imaging of Milford, a private Radiology corporation serving the New Haven County community. I am also Chairman of Radiology at Milford Hospital. Diagnostic Imaging of Milford has provided professional radiology services to Milford Hospital since 1990. Diagnostic Imaging of Milford and Seabridge Corporation, a wholly owned subsidiary of Milford Health & Medical, Inc., are partners in a joint venture called Seabridge Diagnostic Imaging (SBDI).

With me today is Mr. Joseph Pelaccia, President of Seabridge Corporation and President/CEO of Milford Hospital. Also present is Ms. Deborah Mauriello, Director of Radiology at Milford Hospital and manager of Diagnostic Imaging of Milford.

Seabridge Diagnostic Imaging respectfully requests that a Certificate of Need be granted for an existing and functioning American College of Radiology certified CT Scanner located at 687 Campbell Avenue, West Haven, Connecticut. This CT Scanner, currently owned by Radiology Associates of Middletown, has been operational and serving the West Haven community since 2004. The purchase of CT Scanners and providing CT services by free standing radiology entities were exempt from CON requirements in 2004.

Diagnostic Imaging of Milford purchased a currently operational diagnostic imaging center located at 687 Campbell Avenue, West Haven, from Radiology Associates of Middletown. Services provided at this center include general x-ray, digital mammography, ultrasound and CT Scans. The CT Scanner is currently owned and operated by Radiology Associates of Middletown. All requests for CT exams and verification for appropriateness currently flow through the current owners. Diagnostic Imaging of Milford radiologists perform CT interpretive services for Radiology Associates of Middletown. Radiology Associates of Middletown has expressed their desire to discontinue this arrangement since they have no further interest or ties to the West Haven community. This is the only CT Scanner available to the community. In order to continue providing this important diagnostic medical service to the community, SBDI respectfully requests that the CON be authorized.

West Haven is a city with a population estimated at 56,000 located between New Haven and Milford. This city is home to approximately 150 physicians, both

primary care and specialists. As there is no community hospital in West Haven many of the physicians and patients have a strong desire to obtain their healthcare needs to the extent possible, in the local community. Our application is supported by multiple letters from area physicians. These physicians and their patients have relied on this preexisting CT service for many years. CT scans are the backbone imaging modality in medicine. Many patients are imaged with CT for urgent and life threatening illnesses such as stroke, pulmonary embolus, infections and inflammations such as appendicitis, diverticulitis and pancreatitis. This exam often dictates who can be treated at home and who needs hospitalization.

This diagnostic equipment scans patients in close proximity to their physicians' office in an effective and efficient manner. It eliminates the cost and delays often experienced by patients forced to find transportation to a neighboring town. Many patients refuse to venture to downtown New Haven for safety concerns.

Other nearby communities have CT Scanners with much less population density. Branford with a population of 30,000 has 2 CT Scanners, Guilford with a 22,000 population has 2 CT Scanners, Milford with a population of 56,000 has 2 CT Scanners and Hamden with a population of 56,000 has 2 CT Scanners. The West Haven community should be afforded the same access to diagnostic healthcare services as other surrounding cities and towns.

The application reflects changing volumes in CT scans performed at the West Haven facility. This can be explained by a number of factors. First and foremost is the exam count methodology. Due to CPT code changes in 2011, scans of the abdomen and pelvis previously counted as two exams are now counted as one exam. CT scans of the abdomen and pelvis are the most requested diagnostic examinations. Secondly, Radiology Associates of Middletown, who owns the CT, does not participate with all insurances. One notable excluded healthcare payer is United Healthcare which by our recent analysis accounts for 25% of all West Haven patients seen at the imaging center. Diagnostic Imaging of Milford will accept all patients needing a CT scan regardless of insurance or ability to pay. Finally, Diagnostic Imaging of Milford has no control over the CT scheduling. Scheduling for CT exams are completely controlled by Radiology Associates of Middletown who have little interest in meeting the healthcare needs of the West Haven community. The CON application reflects a conservative no change in future volume. Since Diagnostic Imaging of Milford accepts all payers the expected volume should increase by at least 25%.

It is our position that the West Haven community should continue to have local access to this needed and valuable imaging service. The approval of a CON would allow for ongoing advanced diagnostic imaging services in a city deserving this level of healthcare within their own community. In conjunction with the Milford Hospital system the CT images from this community would be part of an integrated patient record, available to all local physicians via internet access.

Thank you for allowing me to present this testimony today.

Paul S. Davis, MD

West Haven Radiology January 2012 - December 2012 CT Scan Statistics					
Referring Physician	Specialty	Count	Referring Physician	Specialty	Count
O'Brien, John	Phy. Rehabilitation	1	Chen, Eaton	ENT	1
Bloomgarden, Gary	Neurosurgery	3	Baisamo, Joseph	Internal Medicine	10
Fortgang, Paul	ENT	6	Jung, Lee	Internal Medicine	1
Taylor, Mark	GI	1	Struger, John	Neurosurgery	1
Sumner, Jeffrey	Ortho	1	Gottiparthi, Sreedhar	Internal Medicine	100
Dean, Richard	Urology	2	Czibulka, Agnes	ENT	2
Gerstenhaber, Brett	Pulmonary	1	Miller, Gary	Internal Medicine	1
DeVito, Ralph	Urology	14	Atlas, Stephen	Internal Medicine	4
Fynan, Thomas	Oncology	2	Monaco, Paul	Internal Medicine	1
Camilleri, Joseph	Urology	1	Umashanker, Renuka	GI	1
Fazzone, Philip	Cardiology	1	Hillis, Lynne	Internal Medicine	14
Miller, Denis	Internal Medicine	1	Gowda, Madhu	Critical Care	11
Hirokawa, Ronald	ENT	1	Rathi, Sanjay	Neurology	2
Hesse, David	GI	2	Iorio, Louis	Ortho	1
Fernando, Benedict	Internal Medicine	29	Moll, David	Internal Medicine	1
Srinathan, Kandiah	Internal Medicine	2	Hotchkiss, Mark	Internal Medicine	1
Panullo, Wayne	GI	1	Perera, Channa	Internal Medicine	17

Hulcher, William	Internal Medicine	1	Chang, Susan	Nephrology	2
DuFour, Karen	Internal Medicine	1	Adelola, Adedayo	Internal Medicine	1
Rogol, Peter	Pulmonary	4	Zarcu-Power, Flora	Internal Medicine	1
Honig, Stanton	Urology	1	Generoso, Ramon	GI	1
McLaughlin, Christopher	Surgery	1	Jaffe, Phillip	GI	1
Hauser, Jack	Internal Medicine	1	Fahmi, Nasiba	Internal Medicine	2
Lebson, Robert	Internal Medicine	1	Yapa, Ramani	Internal Medicine	1
Dickey, Phillip	Neurosurgery	1	Takoudes, Thomas	ENT	2
Yanagisawa, Ken	ENT	1	Sarfraz, Naeem	Internal Medicine	1
Drabinski, Mark	Internal Medicine	14	Aggarwal, Sanjay	Internal Medicine	1
Loscalzo, Christopher	Internal Medicine	1	Ikepeazu, Nkemakonah	General Surgeon	2
Passarelli, Marianne	Urology	5	Esposito, Stephanie	Internal Medicine	1
Buckley, Thomas	Urology	8	Laurans, Maxwell Scott	Neurology	1
Riegler, Nital	Internal Medicine	1	Collins, Beth	Plastic Surgery	1
Lasala, Johanna	Oncology	2	Rosner, William	Internal Medicine	11
Martin, Thomas	Urology	8	Spector, Gary	Internal Medicine	1
Oliver, Garth	Internal Medicine	1	Helburn, Daniel	GI	1
Honig, Jaimy	Internal Medicine	1	Afolalu, Abisola	Internal Medicine	2

Addis-Thomas, Eliz.	Podiatry	1 Alaparthi, Latha	GI	2
Radebold, Andrea	Internal Medicine	1 Arnel, Harvey	Urology	1
Balas, Horetu	Internal Medicine	22 Brammer, Robin	Internal Medicine	1
Fahay, Diane	Pediatrics	1 Hass, David	GI	1
Dhindsa, Sumeet	Internal Medicine	1 Kellner, Daniel	Urology	1
Rueben, Daniel	Oncology	2 Sakalake, Durgadas	Ortho	1
Fernando, Kumu	Internal Medicine	16 Feuerstadt, Paul	Internal Medicine	1
DeSilva, Anura	Internal Medicine	13 Chhatiwala, Hatim	Internal Medicine	3
Nawaz, Hafsa	Internal Medicine	18 Hutchinson, Gordon	Metabolism	1
Imevbore, Michael	Pulmonary	73 Sidana, Jasdeep	Pulmonary	6
Giardiello, Kenneth	Surgery	1 Kerner, Jeffrey	ENT	1
Knowlton, Christin	Radiation Oncology	1 Lazarides, Lazaros	Internal Medicine	3
Mapas-Dimaya, Ann	Geriatrics	13 Katigbak, Mario	CardioThora Surg	2
Maher, Mary Grey	Urology	3 Gould, Michael	Urology PA	3
Nascimento, Joao	Internal Medicine	1 Nwokolo-Nwangwu, C	Internal Medicine	3
Perez, Rogelio, Roger	GI	12 Khodzinsky, Roman	Internal Medicine	1
Salzano, Richard	Surgery	1 Chhabra, Sunita	Internal Medicine	1
Ionescu, Simina	Geriatrics	7 Saunders, Steven	Internal Medicine	1
Tabaka, Mark	Internal Medicine	2 Thompson, Jennifer	GI	1

Toosy, Kaiser	Pulmonary	4	Twohig, Kevin	Pulmonary	6
Umapathy, M.S.	Family Practice	1	Vahey, Marianne	Internal Medicine	8
Walayedda, Anurudda	Internal Medicine	12	Westergan, Robert	Ortho	1
Willet, Michael	ENT	1			
Total		329			251
Total Referrals 2012		580			
Total Volume 2012		580			

*** TX REPORT ***

TRANSMISSION OK

TX/RX NO 3259
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TIME USE 00'54
PAGES SENT 5
RESULT OK



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

FAX SHEET

TO: DEBRA MAURIELLO

FAX: 203 876 4539

AGENCY: DIAGNOSTIC IMAGING OF WEST HAVEN

FROM: PAOLO FIDUCIA

DATE: 1/23/13 Time: _____

NUMBER OF PAGES: 5
(including transmittal sheet)



Comments: 84
Please see the attached regarding the hearing regarding DN 12-31748 scheduled for tomorrow.



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

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(including transmittal sheet)

Comments:

Please see the attached regarding the hearing regarding DN 12-31748⁸⁴
scheduled for tomorrow.

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

TENTATIVE AGENDA

PUBLIC HEARING

Docket Number: 12-31784-CON

**SBDI Holding, LLC d/b/a Diagnostic Imaging of West Haven
Proposal to Acquire an Existing Computed Tomography ("CT") Scanner
in West Haven**

January 24, 2013, at 1:30 p.m.

- I. Convening of the Public Hearing**
- II. Applicant's Direct Testimony (10 minutes)**
- III. OHCA's Questions**
- IV. Closing Remarks**
- V. 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



STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
Office of Health Care Access

TABLE OF THE RECORD

APPLICANT: SBDI Holding, LLC d/b/a Diagnostic Imaging of West Haven

DOCKET NUMBER: 12-31784-CON

PUBLIC HEARING: January 24, 2014 at 1:30 p.m.

PLACE: 410 Capitol Avenue, Third Floor
Hartford, Connecticut

EXHIBIT	DESCRIPTION
A	Letter from the Applicant dated August 31, 2012 enclosing the CON application to Acquire an Existing Computed Tomography ("CT") Scanner in West Haven under Docket Number 12-31784, received by OHCA on September 5, 2012. (46 pages)
B	OHCA's letter to the Applicant dated October 4, 2012 requesting additional information and/or clarification in the matter of the CON application under Docket Number 12-31784. (3 pages)
C	Applicant's responses to OHCA's letter of October 4, 2012, dated November 14, 2012, in the matter of the CON application under Docket Number 12-31784, received by OHCA on November 16, 2012. (44 pages)
D	OHCA's letter to the Applicant dated December 27, 2012 deeming the application complete as of December 16, 2012 in the matter of the CON application under Docket Number 12-31784. (1 page)
E	OHCA's letter to the Applicant dated December 28, 2012 revising the December 27, 2012 letter and deeming the application complete as of December 28, 2012. (1 page)
F	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 January 24, 2012 in the matter of the CON application under Docket Number 12-31784, dated January 4, 2013. (4 pages)
G	OHCA's letter to the Applicant dated January 7, 2013, designating Kevin Hansted as hearing officer in the matter of the CON application under Docket Number 12-31784. (1 page)

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I	Letter from the Applicant enclosing prefile testimony and responses to interrogatories dated January 22, 2013 in the matter of the CON application under Docket Number 12-31784, received by OHCA on January 22, 2013. (7 pages)

Directions to the Office of Health Care Access

From I-91 North or South and from East of the River:

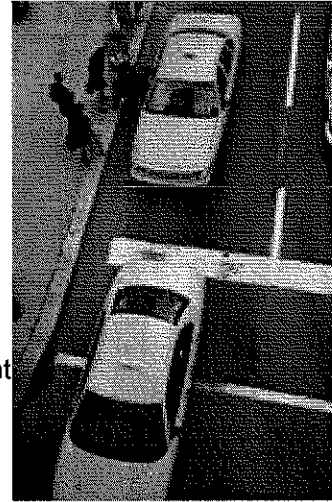
In Hartford take I-84 westbound. Exit at Asylum Street, exit 48.

At the signal at the bottom of the ramp, make a gradual right, staying to the left of the fork in the road.

At the first light, take an immediate left onto Broad Street.

Travel on Broad Street to the light at the first four-way intersection; take a right onto Capitol Avenue. OHCA (tan brick building at 410 Capitol Avenue) is two blocks down on the right.

* Pass 410 and enter in the driveway between 410 and 450 Capitol Avenue. Turn right into the parking lot behind the building and proceed to the Security building in the lot. You will be directed to available parking.



From the West:

Take I-84 East to Capitol Avenue, Exit 48B. Bear right on the exit ramp. At the end of the ramp, turn right onto Capitol Avenue. OHCA is 3 blocks down on the right (tan brick building at 410 Capitol Avenue).

Proceed from * above

Directions to Forest and Sisson (Lot C) for visitor shuttle service:

From I-91 (north or south) and from east of the river

In Hartford, take I-84 west. Take Exit 46, Sisson Avenue. At the end of the exit ramp, turn left at the signal light onto Sisson Avenue. Take your first left onto **Capitol Ave. Take your first left onto Forest Street. The parking lot is on your left and is labeled State of Connecticut. A shuttle bus to take you to our offices will either be waiting, or will appear in a few minutes.**

From the West

Take I-84 East to Exit 46, Sisson Avenue. At the end of the exit ramp, turn left at the light onto Sisson Avenue. Take your first left onto **Capitol Avenue. Take your first left onto Forest Street. The parking lot is on your left and is labeled State of Connecticut. A shuttle bus to take you to our offices will either be waiting, or will appear in a few minutes**



STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
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STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
Office of Health Care Access

AGENDA

PUBLIC HEARING

Docket Number: 12-31784-CON

**SBDI Holding, LLC d/b/a Diagnostic Imaging of West Haven
Proposal to Acquire an Existing Computed Tomography ("CT") Scanner
in West Haven**

January 24, 2013, at 1:30 p.m.

- I. Convening of the Public Hearing**
- II. Applicant's Direct Testimony (10 minutes)**
- III. OHCA's Questions**
- IV. Closing Remarks**
- V. Public Hearing Adjourned**

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(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

**PUBLIC HEARING
INFORMAL PARTICIPANT
SIGN UP SHEET
January 24, 2013
1:30 p.m.**

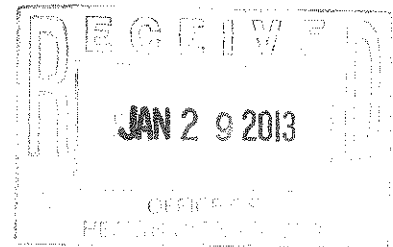
Applicant: Docket Number: 12-31784-CON
SBDI Holding, LLC d/b/a Diagnostic Imaging of West Haven
Proposal to Acquire an Existing Computed Tomography ("CT") Scanner in West Haven

Name	Phone	Fax	Representing Organization/Self
Paul Davis	203-878-2341		SBDI Holding
Debra Maurullo	203-876-4241		SBDI Holding

ORIGINAL

1

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



CONSIDER SBDI HOLDING, LLC
DBA: DIAGNOSTIC IMAGING OF WEST HAVEN'S APPLICATION
TO ACQUIRE AN EXISTING COMPUTED TOMOGRAPHY SCANNER
IN WEST HAVEN, CONNECTICUT

DOCKET NO. 12-31784-CON

JANUARY 24, 2013

1:32 P.M.

410 CAPITOL AVENUE
HARTFORD, CONNECTICUT

POST REPORTING SERVICE
HAMDEN, CT (800) 262-4102

RE: APPLICATION TO ACQUIRE EXISTING TOMOGRAPHY SCANNER
JANUARY 24, 2013

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 to
4 Consider SBDI Holding, LLC, DBA: Diagnostic Imaging of
5 West Haven's Application to Acquire an Existing Computed
6 Tomography Scanner in West Haven, Connecticut, held at
7 410 Capitol Avenue, Hartford, Connecticut, on January 24,
8 2013 at 1:32 p.m. . . .

9
10
11

12 HEARING OFFICER KEVIN HANSTED: Good
13 afternoon, everyone. Before we begin, would you just
14 please just turn off any cell phones? Certainly, if
15 either of you are doctors and you need to keep it on for
16 emergency purposes, that's fine. Thank you.

17 This public hearing before the Office of
18 Health Care Access, identified by Docket No. 12-31784-
19 CON, is being held on January 24, 2013 to consider SBDI
20 Holding, LLC, DBA: Diagnostic Imaging of West Haven's
21 Application to Acquire an Existing Computed Tomography
22 Scanner in West Haven, Connecticut.

23 This public hearing is being held pursuant
24 to Connecticut General Statutes, Section 19a-639a, and

RE: APPLICATION TO ACQUIRE EXISTING TOMOGRAPHY SCANNER
JANUARY 24, 2013

1 will be conducted as a contested case, in accordance with
2 the provisions of Chapter 54 of the Connecticut General
3 Statutes, which is the Uniform Administrative Procedures
4 Act.

5 My name is Kevin Hansted, and I've been
6 designated by Commissioner Jewel Mullen of the Department
7 of Public Health to serve as the Hearing Officer for this
8 matter.

9 The staff members assigned to assist me in
10 this case are Kaila Riggott and Paolo Fiducia. The
11 hearing is being recorded by Post Reporting Services.

12 Following the hearing, I will issue a
13 proposed final decision, in accordance with Connecticut
14 General Statutes, Section 4-179.

15 In making its decision, OHCA will consider
16 and make written findings concerning the principles and
17 guidelines set forth in Section 19a-639 of the
18 Connecticut General Statutes.

19 The Applicant, SBDI Holding, LLC, DBA:
20 Diagnostic Imaging of West Haven, has been designated as
21 a party in this proceeding.

22 At this time, I will ask staff to read
23 into the record those documents already appearing in
24 OHCA's Table of the Record in this case. All documents

RE: APPLICATION TO ACQUIRE EXISTING TOMOGRAPHY SCANNER
JANUARY 24, 2013

1 have been identified in the Table of the Record for
2 reference purposes. Mr. Fiducia?

3 MR. PAOLO FIDUCIA: Yes. Paolo Fiducia,
4 OHCA staff. We have Exhibits A through I.

5 HEARING OFFICER HANSTED: Thank you. Does
6 staff have any additional exhibits to enter?

7 MR. FIDUCIA: No.

8 HEARING OFFICER HANSTED: No. Do the
9 Applicants have any objections to the exhibits?

10 DR. PAUL DAVIS: None.

11 CHAIRMAN HANSTED: Thank you. At this
12 time, anyone that will be testifying here today I would
13 ask you to stand, raise your right hand, and be sworn in
14 by the court reporter.

15 (Whereupon, the parties were sworn.)

16 COURT REPORTER: Would you state your full
17 names for the record, please?

18 DR. DAVIS: Paul Davis.

19 MS. DEBRA MAURIELLO: Debra Mauriello.

20 COURT REPORTER: Thank you.

21 HEARING OFFICER HANSTED: And to those
22 individuals that just took the oath, the first time you
23 speak today, would you just please state your full name
24 and adopt any written testimony that you presented to

RE: APPLICATION TO ACQUIRE EXISTING TOMOGRAPHY SCANNER
JANUARY 24, 2013

1 OHCA? At this time, you may proceed.

2 DR. DAVIS: Okay. My name is Paul Davis,
3 and I do adopt any of the testimony submitted.

4 CHAIRMAN HANSTED: Thank you.

5 DR. DAVIS: May I begin?

6 CHAIRMAN HANSTED: You may.

7 DR. DAVIS: Okay. Good afternoon, members
8 of the Office of Health Care Access. My name is Dr. Paul
9 Davis. I currently serve as President of Diagnostic
10 Imaging of Milford, a private radiology corporation
11 serving the New Haven County community.

12 I am also Chairman of Radiology of Milford
13 Hospital, Diagnostic Imaging of Milford Hospital.
14 Diagnostic Imaging of Milford has provided professional
15 radiology services to Milford Hospital since 1990.

16 Diagnostic Imaging of Milford and
17 Seabridge Corporation, a wholly-owned subsidiary of
18 Milford Health and Medical, Incorporated, are partners in
19 a joint venture, called Seabridge Diagnostic Imaging, or
20 SBDI.

21 With me today is Ms. Debra Mauriello,
22 Director of Radiology at Milford Hospital and manager of
23 Diagnostic Imaging of Milford.

24 Mr. Joe Pellaccia, President of Seabridge

RE: APPLICATION TO ACQUIRE EXISTING TOMOGRAPHY SCANNER
JANUARY 24, 2013

1 Corporation and President and CEO of Milford Hospital, is
2 also scheduled to be here, but has been detained for
3 emergency Milford Hospital business and will hopefully
4 join us during the hearing.

5 Seabridge Diagnostic Imaging respectfully
6 requests that a Certificate of Need be granted for an
7 existing and functioning American College of Radiology
8 Certified CT Scanner, located at 687 Campbell Avenue in
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10 This CT scanner, currently owned by
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RE: APPLICATION TO ACQUIRE EXISTING TOMOGRAPHY SCANNER
JANUARY 24, 2013

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24 support it by multiple letters from area physicians.

RE: APPLICATION TO ACQUIRE EXISTING TOMOGRAPHY SCANNER
JANUARY 24, 2013

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RE: APPLICATION TO ACQUIRE EXISTING TOMOGRAPHY SCANNER
JANUARY 24, 2013

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24 Scheduling for CT exams are completely controlled by

RE: APPLICATION TO ACQUIRE EXISTING TOMOGRAPHY SCANNER
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1 Radiology Associates of Middletown, who have little
2 interest in meeting the health care needs of the West
3 Haven community.

4 The CON application reflects a
5 conservative, no change in future volume. Since
6 Diagnostic Imaging of Milford accepts all payers, the
7 expected volume should increase immediately by at least
8 25 percent.

9 It is our position that the West Haven
10 community should continue to have local access to this
11 needed and valuable imaging service.

12 The approval of a CON would allow for
13 ongoing advanced diagnostic imaging services in a city
14 deserving this level of health care within their own
15 community.

16 In conjunction with the Milford Hospital
17 system, the CT images from this community would be part
18 of an integrated patient record, available for all local
19 physicians via internet access.

20 Thank you for allowing me to present this
21 testimony today.

22 CHAIRMAN HANSTED: Thank you. Ms.
23 Mauriello, did you have any testimony today?

24 MS. MAURIELLO: Not at this time.

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1 CHAIRMAN HANSTED: No, okay. At this
2 time, I think OHCA has a few questions. Mr. Fiducia?

3 MR. FIDUCIA: Yes. The next couple of
4 questions regard Diagnostic Imaging of Milford.

5 DR. DAVIS: Okay.

6 MR. FIDUCIA: Based on your historical and
7 projected volume of Diagnostic Imaging of Milford, do you
8 confirm that Diagnostic Imaging of Milford has the
9 capacity to serve the population of West Haven?

10 DR. DAVIS: Excuse me while I reference
11 that chart. I have it. It's hard to say that we'd be
12 able to scan all of the patients from West Haven,
13 especially assuming an increase in volume that we'd
14 expect with the changes in insurances that we would
15 accept, but more important than that is Milford is not
16 very, very, or not immediately accessed by the West Haven
17 population.

18 I mean the West Haven population deserves
19 a CT scanner in their community near their physician's
20 offices. This would be quite a traveling burden for a
21 lot of the population.

22 MR. FIDUCIA: Okay, the next one would be
23 you listed on your pre-filed testimony there's a list of
24 referring physicians.

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1 DR. DAVIS: Okay.

2 MR. FIDUCIA: Also, in the application.
3 Do you confirm like do they have the ability to refer
4 these patients to the Milford location?

5 DR. DAVIS: Well all of the physicians are
6 free to refer anywhere they see fit, I mean both to
7 Milford, New Haven, or even Hartford, for that matter.

8 I think that they've expressed a desire to
9 me, through letters of support and personal
10 conversations, of keeping their patients in West Haven
11 and being able to perform those services locally.

12 It's their feeling and mine that a CT scan
13 today offers a very basic imaging service. I know the
14 State has classified this as an advanced imaging service,
15 but CT scans have been around for 30 to 40 years.
16 They've become really a backbone of medicine, and, for a
17 lot of patients, this is a service that's needed, you
18 know, immediately.

19 It doesn't want to be -- patients would
20 rather not be scheduled and rather have that service
21 immediately, or that day, or the next day, and often
22 dictates further treatments, again, as I said, either at
23 home or in hospitalizations.

24 MR. FIDUCIA: Thank you. Now, in your

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1 pre-filed testimony, you state that you will accept all
2 patients needing a CT scan, regardless of insurance or
3 ability to pay.

4 DR. DAVIS: Yes.

5 MR. FIDUCIA: And you will expect a 25
6 percent volume increase, because of that.

7 DR. DAVIS: Yes.

8 MR. FIDUCIA: Do you know, right now,
9 where these patients currently are seeking CT scan
10 service?

11 DR. DAVIS: Well, again, I could only
12 speculate, because all these patients are scheduled
13 through the current owners, Radiology Associates of
14 Middletown, so, again, this is all speculation, I would
15 imagine they would call the office, and they would say we
16 don't accept this particular insurance, and then those
17 physicians would be free to refer to any other facility
18 that might accept that insurance, so I imagine those
19 patients would be scattered throughout Southern
20 Connecticut.

21 MR. FIDUCIA: And how do you plan to
22 attract these potential patients?

23 DR. DAVIS: Well the 25 percent?

24 MR. FIDUCIA: Well, yes, the increase that

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1 you're projecting.

2 DR. DAVIS: Okay. First off, it's very
3 cumbersome for physicians now to call. They'll call down
4 to our office. The mechanics of it, they'll call down to
5 the existing imaging center, say we want to get a CAT
6 scan. We have to refer them to a different phone number,
7 a different scheduling office, so that's number one, it's
8 cumbersome. That's number one.

9 Number two, we know already from our --
10 since we've been there for 10 months now, we already see
11 that 25 percent of the patients that come through the
12 office for other types of exams have this United Health
13 Care, okay, so, our leap of faith is that the same
14 patient population will be coming to our office for CAT
15 scans, and we'll be able to service those patients right
16 there, without turning them away, so that's the immediate
17 25 percent increase in volume that we would fully expect.

18 Also, being in control of the scheduling
19 is very, very helpful. I think that the -- from a
20 logistical point of view, you have the referring
21 physicians and their medical assistants and their
22 secretaries calling.

23 They're very, very busy people. They
24 don't want to call all over and schedule a mammogram

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1 here, or a chest x-ray here, and a CT there if they can
2 at all help it. It's very convenient for them to have
3 access to one phone number, where they can get most of
4 their imaging services in town.

5 I mean that's anecdotal, but that's human
6 nature, and I think that should help support the service,
7 as well.

8 MR. FIDUCIA: Okay.

9 CHAIRMAN HANSTED: All set? Kaila, did
10 you have any questions?

11 MS. RIGGOTT: I just had one question on
12 your pre-filed testimony, based on something you
13 mentioned a short time ago.

14 You said that the approval of the CON
15 would allow for ongoing advanced diagnostic imaging, and
16 I'm just trying to reconcile that advanced with the
17 statement that you made, that it's basic care.

18 DR. DAVIS: Right.

19 MS. RIGGOTT: I know this is a four-slice
20 scanner, correct?

21 DR. DAVIS: Yes. Well the State has
22 designated us as an advanced imaging modality. That's
23 the classification of the State, and that's why we're
24 here at this hearing, because we need your permission to

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1 continue this service.

2 It's my own feeling that CT scans have
3 become a basic imaging service, that's what I mean by
4 that, that's useful on a day-to-day basis.

5 For instance, if somebody has trauma to
6 the head, it used to be, in the old days, you might get a
7 skull x-ray. That's gone by the wayside. People go
8 right to a CAT scan.

9 If somebody has abdominal pain and they're
10 worried about appendicitis, they'll come right in for a
11 CAT scan immediately. That's what I mean by a very basic
12 and very common usage, as opposed to, for instance,
13 something like a PET CT scanner, where that I would
14 qualify as a very advanced imaging that is a scheduled
15 case, mostly for oncology patients. That's really not
16 the type of service we're trying to keep running in the
17 community.

18 CHAIRMAN HANSTED: Anything else?

19 MS. RIGGOTT: No, that's it.

20 CHAIRMAN HANSTED: I don't have any
21 further questions. Seeing as there's no one, no general
22 public in the room, I'll assume there's no public comment
23 here today.

24 I just want to mention to you, you had

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1 mentioned in the beginning, that there was a doctor, who
2 wanted to attend today, but was called away on an
3 emergency call.

4 DR. DAVIS: If I may?

5 CHAIRMAN HANSTED: Sure.

6 DR. DAVIS: That was the President of
7 Milford Hospital, who was called away, because the
8 Department of Health is now currently at the hospital, so
9 he had to stay there.

10 I thought he would join us, but perhaps he
11 got tied up, so it's not a physician. It's the President
12 of the hospital.

13 CHAIRMAN HANSTED: Okay, I'm sorry.

14 DR. DAVIS: That's all right. Who is our
15 partners in this whole venture.

16 CHAIRMAN HANSTED: Okay. Before I
17 adjourn, did you want me to take a break, so you can
18 contact him to see if he needs time to get here, or are
19 you satisfied?

20 DR. DAVIS: If I may?

21 CHAIRMAN HANSTED: Sure.

22 DR. DAVIS: If we could take a five-minute
23 recess?

24 CHAIRMAN HANSTED: Absolutely.

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1 DR. DAVIS: It's your call, but I'll just
2 call him and see if he'd like to make a statement.

3 CHAIRMAN HANSTED: I'd be happy to. I
4 want to give you that opportunity, so let's take a five-
5 minute recess.

6 DR. DAVIS: Thank you.

7 (Off the record)

8 CHAIRMAN HANSTED: Okay.

9 DR. DAVIS: Unfortunately, the Department
10 of Public Health is still at the hospital, and he's still
11 with them, but he did relay a message to me, which I'd
12 like to read, if I could. Not read, but talk about.

13 CHAIRMAN HANSTED: Well it's hearsay, so I
14 can't accept it, but you're happy to say if you want. I
15 just can't take it into consideration.

16 DR. DAVIS: Okay. I know you can't take
17 it into consideration, but, if he was here, I'm sure Mr.
18 Pellaccia would say, as President of the Hospital and
19 partner in SBDI, he's in full support of the project and
20 does not wish to interrupt current services to the West
21 Haven community, of which he grew up in.

22 He feels it's a very important service to
23 continue.

24 CHAIRMAN HANSTED: Okay, thank you. And

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1 did you want to give a closing statement before I
2 adjourn?

3 DR. DAVIS: I did.

4 CHAIRMAN HANSTED: Sure. Go right ahead.

5 DR. DAVIS: Members of the Health Care
6 Access -- excuse me. Members of the Office of Health
7 Care Access, on behalf of Seabridge Diagnostic Imaging
8 and all related parties, including Diagnostic Imaging of
9 Milford and Milford Hospital, I thank you for allowing us
10 to present our views on the need for continuing to
11 operate the ACR-accredited CT scanner presently located
12 in West Haven.

13 It is our hope and vision to continue to
14 offer this valuable service to the citizens of West Haven
15 and surrounding communities.

16 CT is no longer considered a luxury
17 imaging modality, but, rather, an essential part of
18 basic health care, utilized by a multitude of general and
19 specialty physicians alike on a daily basis.

20 West Haven is a medium-sized city, with a
21 large physician base, and its residents should be
22 afforded this needed service, without having to travel
23 outside their community, as do the citizens of
24 surrounding cities and towns pointed out in my testimony.

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1 It is unfortunate -- it is an unfortunate
2 fact that, according to recent FBI data, neighboring New
3 Haven ranks the fourth most dangerous city in the nation,
4 which further disinclines patients from wanting to
5 venture out for needed diagnostic exams.

6 I wholeheartedly agree with OHCA's mission
7 statement, which is to protect and improve the health and
8 safety of the people of Connecticut.

9 Approving of this ongoing CT service, by
10 granting a CON, will help achieve that goal. Thank you.

11 CHAIRMAN HANSTED: Thank you. And, with
12 that, I will adjourn this hearing. Thank you, both.

13 (Whereupon, the hearing adjourned at 2:00
14 p.m.)

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CERTIFICATE

I, Paul Landman, a Notary Public in and for the State of Connecticut, and President of Post Reporting Service, Inc., do hereby certify that, to the best of my knowledge, the foregoing record is a correct and verbatim transcription of the audio recording made of the proceeding hereinbefore set forth.

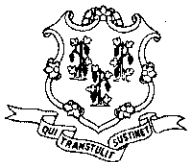
I further certify that neither the audio operator nor I are attorney or counsel for, nor directly related to or employed by any of the parties to the action and/or proceeding in which this action is taken; and further, that neither the audio operator nor I are a relative or employee of any attorney or counsel employed by the parties, thereto, or financially interested in any way in the outcome of this action or proceeding.

In witness whereof I have hereunto set my hand and do so attest to the above, this 28th day of January, 2013.



Paul Landman
President

Post Reporting Service
1-800-262-4102



STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
Office of Health Care Access

June 4, 2013

Debra Mauriello
Director, Diagnostic Imaging
Milford Hospital
300 Seaside Avenue
Milford, CT 06460

RE: Certificate of Need Application; Docket Number: 12-31784-CON
SBDI Holding, LLC d/b/a Diagnostic Imaging of West Haven proposes to acquire a Computed Tomography ("CT") Scanner in West Haven

Dear Ms. Mauriello:

Enclosed please find a copy of the Proposed Final Decision rendered by Hearing Officer Kevin T. Hansted, Esq. in the above-referenced case.

Pursuant to Connecticut General Statutes § 4-179, SBDI Holding, LLC d/b/a/ Diagnostic Imaging of West Haven Society for the acquisition of CT scanner in West Haven, the party in this matter, may request the opportunity to file exceptions or a brief or a request to present an oral argument, in writing, with the Deputy Commissioner, OHCA of the Department within twenty-one (21) days from the mailing of the decision, or by June 25, 2013. If no such request is received by this date, the Deputy Commissioner will take those rights to be waived and will render a Final Decision in this matter.

If you wish to expedite the process and avoid the necessity that the Deputy Commissioner await the expiration of the aforementioned twenty-one days, you may submit a written statement to the Deputy Commissioner affirmatively waiving those rights.

Sincerely,

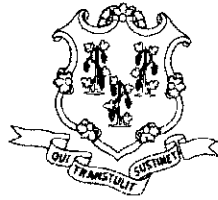
A handwritten signature in black ink, appearing to read "Kimberly R. Martone", with a horizontal line underneath.

Kimberly R. Martone
Director of Operations

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



Department of Public Health Office of Health Care Access

Proposed Final Decision

Applicant: SBDI Holding, LLC
d/b/a Diagnostic Imaging of West Haven
687 Campbell Avenue, West Haven, CT 06516

Docket Number: 12-31784-CON

Project Title: Acquisition of a Computed Tomography Scanner in
West Haven

Project Description: SBDI Holding, LLC d/b/a Diagnostic Imaging of West Haven (“SBDI Holding, LLC” or “Applicant”) is proposing the acquisition of a Computed Tomography (“CT”) Scanner from Radiologic Associates of Middletown, P.C. The total capital expenditure associated with this proposal is \$10,000.

Procedural History: The Applicant published notice of its intent to file the Certificate of Need (“CON”) application in the *New Haven Register*, on August 8, 9 and 10, 2012. On September 5, 2012, the Office of Health Care Access (“OHCA”) received the CON application from the Applicant for the above-referenced project. On December 28, 2012, OHCA deemed the CON application complete.

On January 4, 2013, the Applicant was notified of the date, time and place of the public hearing. On January 7, 2013, a notice to the public announcing the hearing was published in the *New Haven Register*.

Commissioner Jewel Mullen designated Attorney Kevin T. Hansted as the hearing officer in this matter. Pursuant to Connecticut General Statutes (“Conn. Gen. Stat”) § 19a-639a, a public hearing regarding the CON application was held on January 24, 2013. The hearing was conducted as a contested case in accordance with the provisions of the Uniform Administrative Procedure Act (Chapter 54 of the General Statutes) and Conn. Gen. Stat. § 19a-639a.

Findings of Fact

1. SBDI Holding, LLC is a taxable corporation owned equally by Seabridge Corporation and Diagnostic Imaging of Milford, P.C.. Ex. A, p. 13.
2. Seabridge Corporation is a taxable entity affiliated with Milford Hospital. Diagnostic Imaging of Milford, P.C., is a physician-owned radiology group. Ex. A, p. 13.
3. Seabridge Corporation and Diagnostic Imaging of Milford, P.C., operate SBDI Holding, LLC, which in turn purchases the equipment for Diagnostic Imaging of Milford, P.C.'s existing imaging center located at 30 Commerce Park, Milford, CT. Ex. A, p. 13.
4. Diagnostic Imaging of Milford, P.C. provides professional radiology services, including mammography, bone density, plain radiography, fluoroscopy, ultrasound, CT scans and Magnetic Resonance Imaging. Ex. A, p. 13.
5. Diagnostic Imaging of Milford, P.C. recently acquired a free-standing radiology office in West Haven, CT, ("Diagnostic Imaging of West Haven") where it currently provides plain radiography, ultrasound and mammography. Radiologic Associates of Middletown, P.C. provides CT scan services at this location. Ex. A, p. 13.
6. SBDI Holding, LLC is proposing the acquisition of the existing Toshiba Asteion 4-Slice CT Scanner from Radiologic Associates of Middletown, P.C. Ex. A, pages. 4 & 13.
7. According to SBDI Holding, LLC, the populations to be served by the proposed CT scanner are residents of the City of West Haven and portions of the Town of Orange. Ex. A, p. 14.
8. SBDI Holding, LLC claims the following as the basis for the proposed acquisition of the CT scanner from Radiologic Associates of Middletown:
 - The CT scanner currently being utilized is the only free standing unit in the City of West Haven;
 - The CT scanning service is supported entirely by referring physicians in the surrounding area; and
 - Diagnostic Imaging of West Haven is located on a major bus route. Ex. C, p. 22.
9. Diagnostic Imaging of Milford operates an 8-Slice CT Scanner Monday through Friday from 8:00 am to 5:00 pm at 30 Commerce Park, Milford, CT. Ex. A, p. 4.

10. SBDI Holding, LLC indicates that existing providers of CT scanning services are located in Milford at Milford Hospital, and New Haven at Yale New Haven Hospital and Hospital of Saint Raphael. The following CT providers are located within the Applicant's service area towns.

Table 1: Existing Service Area CT Providers with Associated Scans Performed in CY 2010

Town	Existing CT Provider	Number of CT Scans Performed in CY 2010	Distance in miles to existing providers#
Milford	1. Milford Hospital, 300 Seaside Avenue*	10,979	8.3 miles
New Haven	1. Hospital of Saint Raphael, 1450 Chapel Street*	18,900	4.0 miles
	2. Hospital of Saint Raphael, 1450 Chapel Street *	3,991	4.0 miles
	3. Yale-New Haven Hospital, 20 York Street**	32,863	2.8 miles
	4. Yale-New Haven Hospital, 20 York Street***	4,332	2.8 miles
	5. Yale-New Haven Hospital, 20 York Street***	6,751	2.8 miles
	6. Yale-New Haven Hospital, 20 York Street*	13,526	2.8 miles
	7. Yale-New Haven Hospital, 20 York Street*	12,726	2.8 miles
	8. Yale-New Haven Hospital, 20 York Street****	962	2.8 miles
	9. Yale-New Haven Hospital, 60 Temple Street*****	3,215	4.0 miles

In September 2012, Yale New Haven Hospital purchased the Hospital of Saint Raphael. The number of CT scans performed in calendar year ("CY") 2010 for each provider was obtained from the Office of Health Care Access' Imaging Questionnaire.

- *Radiology Department
- **Emergency Department
- ***Smilow Cancer Center
- ****Biopsy
- *****Satellite Location
- # Source: MapQuest
- Ex. A, p. 5.

11. The Applicant claims that the patient population at Diagnostic Imaging of West Haven will not change as a result of this proposal. Ex. A, p. 5.

12. The following table indicates the number of referrals to Diagnostic Imaging of West Haven by town for Year 2012 (Jan-Sept):

Table 2: Number of referrals by town for Year 2012 (Jan-Sept) for Diagnostic Imaging of West Haven

Town	# of Referrals
West Haven	338
Orange	38
New Haven	24
Milford	5
North Haven	2
Other	39
Total	446

Ex. C, p. 25

13. Physicians located in West Haven made the most referrals to Diagnostic Imaging of West Haven in 2012 (Jan-Sept).
Ex. C, pages 25-28.

14. Historical CT Scans performed at Diagnostic Imaging of Milford, 30 Commerce Park, Milford, CT, are listed as follows:

Table 3: Historical CT Scans

	FY 2009	FY 2010	FY 2011	FY*2012
D.I. Milford	2790	2398	1706	1548

*Applicant's FY year is the calendar year, January to December.

Ex. C, page 23.

Ex. J, email.

15. Historical CT Scans performed at Diagnostic Imaging of West Haven by Radiologic Imaging of Middletown, P.C. are listed as follows:

Table 4: Historical CT Scans

	FY 2009	FY 2010	FY 2011	FY* 2012
D.I. West Haven	1081	913	631	580

*Applicant's FY year is the calendar year, January to December.

Ex. C, page 23.

Ex. I, Profile Testimony

16. SBDI Holding, LLC attributes the decline in CT Scans between FY 2010 and FY 2011 to the new combination CPT codes for abdomen and pelvis CT Scan, and to public awareness of radiation exposure. Prior to 2011, an abdomen and pelvis CT scans were counted as two separate exams. As of January 1, 2011, they are now counted as one exam. Ex. A, p. 8.

17. The following table represents the projected CT Scans for the next three fiscal years as provided by the Applicant:

Table 5: Projected CT Scans

	FY 2013	FY 2014	FY 2015
D.I. Milford	1597	1597	1597
D.I. West Haven	596	596	596

Ex. C, Applicant's responses to Completeness Letter, p. 52.

18. According to SBDI Holding, LLC, volume is expected to remain consistent for the Diagnostic Imaging West Haven CT Scanner, as the population of West Haven has only grown 1% since 2005. Ex. A, p. 8.
19. The proposed total capital expenditure associated with this proposal is \$10,000 for medical equipment purchase.
 Ex. A, p. 10.
20. SBDI Holding, LLC proposes to fund the proposed capital expenditure through its equity. Ex. A, p. 10.
21. SBDI Holding, LLC projects the following revenues and expenditures incremental to the proposal:

Table 6: Projected Revenues and Expenditures Incremental to the Proposal

	FY 2013	FY 2014	FY 2015
Revenue From Operations	\$242,801	\$242,801	\$242,801
Total Operating Expense	\$177,476	\$180,159	\$183,023
Overall Gain (Loss) from Operations	\$65,325	\$62,642	\$59,778

Ex. A, p. 39.

22. SBDI Holding, LLC's current and proposed patient payer mix as a result of this proposal is as follows:

Table 7: Applicant's Projected Payer Mix

Payer	Current FY 2012	Year 1 FY 2013	Year 2 FY 2014	Year 3 FY 2015
Medicare	33.86%	33.86%	33.86%	33.86%
Medicaid	9.79%	9.79%	9.79%	9.79%
CHAMPUS & TriCare	0.0%	0.0%	0.0%	0.0%
Total Government	43.65%	43.65%	43.65%	43.65%
Commercial Insurers	54.62%	54.62%	54.62%	54.62%
Uninsured	0.0%	0.0%	0.0%	0.0%
Workers Compensation	1.63%	1.63%	1.63%	1.63%
Total Non-Government	56.25%	56.25%	56.25%	56.25%
Total Payer Mix	99.9%	99.9%	99.9%	99.9%

Ex. A, pages 10 & 11.

23. 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 policies and standards not yet adopted as regulations by OHCA. (Conn. Gen. Stat. § 19a-639(a)(1)).
24. OHCA recently published a statewide facilities and service plan. Since the plan was not in circulation more than ninety days at the time the CON application was deemed complete, OHCA has not made any findings as to this proposal's relationship to the plan. (Conn. Gen. Stat. § 19a-639(a)(2)).
25. SBDI Holding, LLC has failed to establish that there is a clear public need for this proposal. (Conn. Gen. Stat. § 19a-639(a)(3)).
26. SBDI Holding, LLC has not satisfactorily demonstrated that the proposal is financially feasible. (Conn. Gen. Stat. § 19a-639(a)(4)).
27. SBDI Holding, LLC has failed to satisfactorily demonstrate that its proposal would improve the accessibility, quality or cost effectiveness of health care delivery in the region. (Conn. Gen. Stat. § 19a-639(a)(5)).
28. SBDI Holding, LLC has shown that there will be no change to the provision of health care services to the relevant populations and payer mix. (Conn. Gen. Stat. § 19a-639(a)(6)).
29. SBDI Holding, LLC has satisfactorily identified the population to be served by their proposal, but has failed to satisfactorily demonstrate that this population currently has a need as proposed. (Conn. Gen. Stat. § 19a-639(a)(7)).
30. The historical utilization in the service area does not support this proposal. (Conn. Gen. Stat. § 19a-639(a)(8)).
31. SBDI Holding, LLC has failed to satisfactorily demonstrate that its proposal would not result in an unnecessary duplication of existing imaging services in the area. (Conn. Gen. Stat. § 19a-639(a)(9)).

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 § 19a-639(a) of the Statutes. The Applicant bears the burden of proof in this matter by a preponderance of the evidence. *Goldstar Medical Services, Inc., et al. v. Department of Social Services, 288 Conn. 790 (2008)*.

SBDI Holding, LLC is a taxable corporation owned equally by Seabridge Corporation and Diagnostic Imaging of Milford, P.C. *FF 1*. Diagnostic Imaging of Milford, P.C. recently acquired a free-standing radiology office in West Haven, Connecticut from Radiologic Associates of Middletown, P.C. At that location, Diagnostic Imaging of Milford, P.C. currently provides plain radiography, ultrasound and mammography and Radiologic Associates of Middletown, P.C. provides CT scans. *FF 5*. SBDI Holding, LLC is proposing to acquire the existing 4-Slice CT Scanner located in West Haven from Radiologic Associates of Middletown, P.C. *FF 6*.

SBDI Holding, Inc. reports that in FY 2012, the CT scanner at Diagnostic Imaging of West Haven only performed 580 scans and that volume declined nearly 50% in the last three years reported. *FF 15*. Moreover, SBDI Holding, LLC projects that, at best, the CT scanner will only perform 596 scans annually for FYs 2013 through 2015. *FF 17*. Both the actual and projected annual scan utilization for the CT scanner is extremely low for this type of imaging equipment. Therefore, SBDI Holding, LLC has failed to demonstrate that there is currently a clear public need to acquire the CT scanner as proposed. *FF 25*.

SBDI Holding, LLC asserts that the CT scanner currently being utilized is the only freestanding unit in the City of West Haven. However, it also indicates that existing providers of CT scanning services are located in Milford at Milford Hospital, and New Haven at Yale New Haven Hospital's main and St. Raphael campuses. Existing providers of CT services are in fact located between 2.8 and 8.3 miles of the current West Haven location. *FF 10*. In light of declining historical volume, flat projected utilization and the close proximity of existing CT scan providers, OHCA finds that the Applicant has failed to demonstrate a clear public need to acquire the CT scanner and that patients' current CT needs can be accommodated by the other existing providers in the service area.

Based upon the lack of evidence demonstrating that SBDI Holding, LLC's proposed project fulfills a clear public need, OHCA is unable to conclude that SBDI Holding, LLC's financial projections, and the volumes upon which they are based, are reasonable and achievable, or that the project is financially feasible. *FF 26*.

ORDER

Based upon the foregoing Findings of Fact and Discussion, I respectfully recommend that the Certificate of Need application of SBDI Holding, LLC d/b/a Diagnostic Imaging of West Haven for the acquisition of a Computed Tomography Scanner from Radiologic Associates of Middletown, P.C. with an associated capital expenditure of \$10,000 be **DENIED**.

Respectfully submitted,

Date

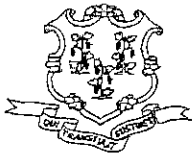
6/4/13

Kevin T. Hansted
Hearing Officer

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DEPARTMENT OF PUBLIC HEALTH
OFFICE OF HEALTH CARE ACCESS

FAX SHEET

TO: DEBRA MAURIELLO
FAX: 203 876 4539
AGENCY: SBDI HOLDING, LLC
FROM: PAOLO FIDUCIA
DATE: 6/4/13 TIME: 3 45 PM
NUMBER OF PAGES: 10
(including transmittal sheet)

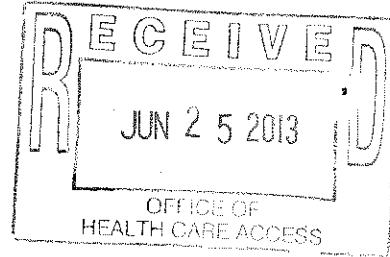
Comments: 12-31784-CON
PROPOSED FINAL DECISION

PLEASE PHONE IF THERE ARE ANY TRANSMISSION PROBLEMS.



MILFORD HOSPITAL

Radiology Department
300 Seaside Avenue
Milford, CT 06460
Phone - 203-876-4242
Fax - 203-876-4539



Date: June 25, 2013

Facsimile Information Sheet

To: Deputy Commissioner Lisa A. Davis, MBA, BSN, RN

Fax Number: 860-418-7053

Pages (including cover): 2

From: Debra Mauriello (203-876-4241)

Additional Message: Regarding CON-Docket # 12-31784-CON
SBD.I Holding

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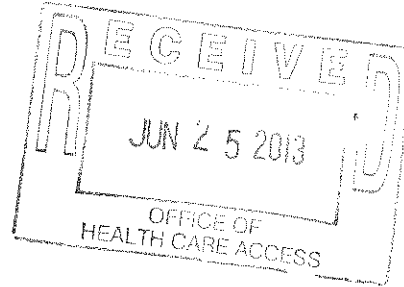
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MILFORD HOSPITAL

June 25, 2013

Lisa A. Davis, MBA, BSN, RN
Deputy Commissioner
Department of Public Health
Office of Healthcare Access
410 Capital Avenue, MS#13HCA
PO Box 340308
Hartford, CT 06134



Dear Deputy Commissioner Davis,

SBDI Holding respectfully requests the opportunity to present an oral argument to dispute the proposed final decision concerning the Certificate of Need, Docket # 12-31784CON, dated June 4, 2013, by Hearing Officer Kevin T. Hansted, Esq.

Sincerely,

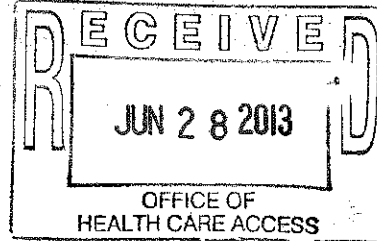
Paul Davis M.D.
Chairman, Diagnostic Imaging
Milford Hospital
300 Seaside Avenue
Milford, CT 06460



MILFORD HOSPITAL

June 25, 2013

Lisa A. Davis, MBA, BSN, RN
Deputy Commissioner
Department of Public Health
Office of Healthcare Access
410 Capital Avenue, MS#13HCA
PO Box 340308
Hartford, CT 06134



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Sincerely,

Paul Davis M.D.
Chairman, Diagnostic Imaging
Milford Hospital
300 Seaside Avenue
Milford, CT 06460

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

July 3, 2013

Paul Davis, M.D.
Chairman, Diagnostic Imaging
Milford Hospital
300 Seaside Avenue
Milford, CT 06460

Certified Mail: 7005 0390 0001 3507 0026


In RE: Certificate of Need Application; Docket Number: 12-31784-CON
SBDI Holding, LLC d/b/a Diagnostic Imaging of West Haven proposes to acquire
an existing Computed Tomography ("CT") Scanner in West Haven

NOTICE OF ORAL ARGUMENT

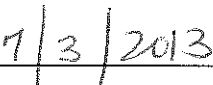
SBDI holding, LLC d/b/a/ Diagnostic Imaging of West Haven has requested oral
argument regarding the recommendation of Hearing Officer Kevin Hansted, Esq.
Pursuant to Section 4-179 C.G.S., Oral Argument for the above cited case has been
scheduled as follows:

August 9, 2013 at 3:00 p.m.
Department of Public Health
3rd Floor, DPH Conference Room 3C
410 Capitol Avenue, Hartford, Connecticut

August 9, 2013, you will have fifteen minutes to make your argument. If you wish to file
briefs, you must do so by August 5, 2013. Please call Barbara Olejarz at (860) 418-7005 if
you have any questions.



Lisa Davis, MBA, BSN, RN
Deputy Commissioner



Date

C: Jewel Mullen, M.D., M.P.H., M.P.A., Commissioner
Debra Mauriello, Director, Diagnostic Imaging



Phone: (860) 509-8000 • Fax: (860) 509-7184 • VP: (860) 899-1611
410 Capitol Avenue, P.O. Box 340308
Hartford, Connecticut 06134-0308
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FAX: 203 876-4539

AGENCY: MILFORD HOSPITAL

FROM: OHCA

DATE: 7/3/13 Time: _____

NUMBER OF PAGES: 3
(including transmittal sheet)

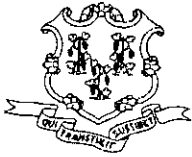


Comments:
Oral argument regarding Docket Number 12-31784, SBDI Holding LLC
d/b/a Diagnostic Imaging of West Haven

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FAX: 203 876-4198

AGENCY: MILFORD HOSPITAL

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(including transmittal sheet)



Comments:
Oral argument regarding Docket Number 12-31784, SBDI Holding LLC
d/b/a Diagnostic Imaging of West Haven