

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

July 9, 2013

David Klein, Ph.D.
Vice President/COO
Natchaug Hospital
189 Storrs Rd
Mansfield Center, CT 06250

Re: Certificate of Need Determination; Report Number: 13-31844-DTR
Relocation of the Joshua Center Southeast Program

Dear Dr. Klein:

On June 10, 2013, the Office of Health Care Access ("OHCA") received your Certificate of Need ("CON") Determination request concerning relocating the Joshua Center Southeast Program (Joshua Center Montville) from Uncasville, CT to Groton, CT.

Natchaug Hospital operates seven PHP/IOP programs for children and/or adolescents in Eastern Connecticut. The Joshua Center Montville program offers a partial hospital program (PHP) and/or intensive outpatient program (IOP) treatment for behavioral disorders under the license issued by the State of Connecticut Department of Public Health. Natchaug Hospital is proposing to relocate this program from 20 Maple Avenue in Uncasville to the existing location of the Care Plus PHP program at 1353 Gold Star Highway in Groton. The new site is less than ten miles away and provides additional square footage at the Groton location to accommodate patients from southern and northern parts of New London County.

Pursuant to Conn. Gen. Stat. § 19a-639c, Natchaug Hospital has demonstrated to the satisfaction of OHCA that the Joshua Center Southeast will be serving the same population, in New London County, less than 10 miles away and its payer mix will remain unchanged from the current distributions. Based upon the foregoing, OHCA concludes that a CON *is not required* for Natchaug Hospital to relocate the Joshua Center Southeast from Uncasville to Groton.

If you have any questions regarding this letter, please contact Alla Veyberman, Health Care Analyst, at (860) 418-7007.

Sincerely,

A handwritten signature in cursive script that reads "Kim Martone". To the right of the signature is a circular stamp containing the initials "KRM".

Kimberly R. Martone
Director of Operations

C: Rose McLellan, License and Applications Supervisor, DPH, DHSR

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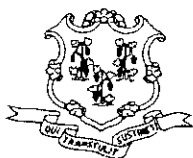
(If you require aid/accommodation to participate fully and fairly, contact us either by phone, fax or email)

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

*** TX REPORT ***

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STATE OF CONNECTICUT
OFFICE OF HEALTH CARE ACCESS

FAX SHEET

TO: DR. DAVID C. KLEIN

FAX: 860.450.0165

AGENCY: NATCHAUG HOSPITAL

FROM: OHCA

DATE: 07/09/13 Time: _____

NUMBER OF PAGES: 3
(including transmittal sheet)



Comments: Docket Number: 13-31842 & 13-31844

**PLEASE PHONE
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IF THERE ARE ANY

Phone: (860) 418-7001

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