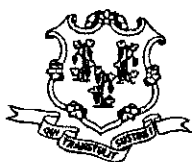

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DEPARTMENT OF PUBLIC HEALTH
OFFICE OF HEALTH CARE ACCESS

FAX SHEET

TO: NANCY ROSEN THAL

FAX: 203 863-4736

AGENCY: YALE-NEW HAVEN HEALTH SERVICES CORP.

FROM: KEVIN HANST ID

DATE: 8/30/13 Time: _____

NUMBER OF PAGES: 2
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Comments:

Determination regarding Discontinuation of Services at the Yale-New Haven Hospital.



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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

August 30, 2013

VIA FACSIMILE ONLY

Nancy Rosenthal
Senior Vice President-Health System Development
Yale-New Haven Health Services Corporation
20 York Street
New Haven, CT 06510

RE: Certificate of Need Determination Report Number 13-31860-DTR
Yale-New Haven Hospital
Discontinuation of Services at the Yale-New Haven Hospital
Pediatric Specialty Clinic at Guilford

Dear Ms. Rosenthal:

On August 28, 2013, the Office of Health Care Access ("OHCA") received your Certificate of Need ("CON") determination request on behalf of Yale-New Haven Hospital ("Applicant") with respect to whether a CON is required for the discontinuation of services at the Yale-New Haven Hospital Pediatric Specialty Clinic at Guilford (the "Clinic").

The Clinic is located at 405 Church Street in Guilford, Connecticut and provides outpatient chemotherapy infusion services, and outpatient office visits in the specialties of hematology/oncology, cardiology, endocrinology, respiratory and gastroenterology for pediatric patients.

The Applicant, a member of the Yale-New Haven Health System, is a 1,541 bed non-profit hospital that has been operating the Clinic with clinical services provided by Yale Medical Group. The Applicant is proposing the cessation of all services at the Clinic in March of 2014.

The cessation of services at the Clinic is a termination of inpatient or outpatient services offered by a hospital, as referenced in Connecticut General Statutes § 19a-638(a)(4). Based upon the foregoing, OHCA concludes that a CON is required.

Please feel free to contact me if you have any questions.

Sincerely,

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)

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