

**State of Connecticut
Office of Health Care Access
CON Determination Form
Form 2020**

All persons who are requesting a determination from OHCA as to whether a CON is required for their proposed project must complete this Form 2020. The completed form should be submitted to the Director of the Office of Health Care Access, 410 Capitol Avenue, MS#13HCA, P.O. Box 340308, Hartford, Connecticut 06134-0308.

SECTION I. PETITIONER INFORMATION

If this proposal has more than two Petitioners, please attach a separate sheet, supplying the same information for each Petitioner in the format presented in the following table.

	Petitioner	Petitioner
Full Legal Name	The Farmington Imaging Center, LLC	
Doing Business As	Same	
Name of Parent Corporation	N/A	
Petitioner's Mailing Address, if Post Office (PO) Box, include a street mailing address for Certified Mail	353 Scott Swamp Road, Farmington, CT 06032	
What is the Petitioner's Status: P for profit and NP for Nonprofit	P	
Contact Person at Facility , including Title/Position: This Individual at the facility will be the Petitioner's Designee to receive all correspondence in this matter.	Carlos M. Badiola, M.D. Member.	

Contact Person's Mailing Address, if PO Box, include a street mailing address for Certified Mail	353 Scott Swamp Road, Farmington, CT06032	
Contact Person's Telephone Number	860-657-6916	
Contact Person's Fax Number	860-584-0541	
Contact Person's e-mail Address	carlioso@yahoo.com	

SECTION II. GENERAL PROPOSAL INFORMATION

- a. Proposal/Project Title: Sale of Membership Interests in The Farmington Imaging Center, LLC
- b. Estimated Total Project Cost:N/A
- c. Location of proposal, identifying Street Address, Town and Zip Code: 353 Scott Swamp Road, Farmington, CT 06032
- d. List each town this project is intended to serve: Avon, Bristol, Burlington, Canton, Farmington, Plainville, Plymouth/Terryville, Simsbury, Southington, West Hartford
- e. Estimated starting date for the project: 2015

SECTION III. PROPOSAL DESCRIPTION

Please provide a description of the proposed project, highlighting each of its important aspects, on at least one, but not more than two separate 8.5" X 11" sheets of paper. At a minimum each of the following elements need to be addressed, if applicable:

1. If applicable, identify the types of services currently provided and provide a copy of each Department of Public Health license held by the Petitioner.
2. Identify the types of services that are being proposed and what DPH licensure categories will be sought, if applicable.
3. Identify the current population served and the target population to be served.

SECTION IV. AFFIDAVIT

(Each Petitioner must submit a completed Affidavit.)

Petitioner: The Farmington Imaging Center, LLC

Project Title: Sale of Membership Interests in The Farmington Imaging Center, LLC

I, Carlos M. Badiola, M.D., Member
(Name) (Position – CEO or CFO)

of The Farmington Imaging Center, LLC being duly sworn, depose and state that the
(Organization Name)

information provided in this CON Determination form is true and accurate to the best of my
knowledge.

Carlos Badiola 4/20/15
Signature Date

Subscribed and sworn to before me on 04/20/2015

Amanda Chapdelaine
Notary Public/Commissioner of Superior Court

My commission expires: _____
AMANDA K. CHAPDELAINÉ
NOTARY PUBLIC
MY COMMISSION EXPIRES DEC. 31, 2018

PROPOSAL DESCRIPTION

This Certificate of Need Determination request is being filed by The Farmington Imaging Center, LLC (“FIC”), to determine whether the proposed sale of membership interests in FIC to a group of physicians, or a legal entity formed by such physicians, for the purpose of acquiring such interest (the “Proposal”), requires CON approval. FIC currently owns and operates an MRI and CT located at 353 Scott Swamp Road in Farmington.

For the reasons set forth below, FIC respectfully submits that the sale of membership interests in FIC does not constitute the “acquisition” of a magnetic resonance imaging or computed tomography scanner for which CON approval is required under Section 19a-638(10) of the Connecticut General Statutes (C.G.S.), nor does the proposed transaction constitute a “transfer of ownership” under C.G.S. § 19a-638(a)(2).

Background

FIC is a member-managed Connecticut limited liability company wholly owned by seven radiologists who each own an equal interest. These physicians are Carlos M. Badiola, M.D., Stewart E. Bober, M.D., Allen Currier, M.D., Christopher J. Leary, M.D., Folco Scappaticci, M.D., John M. Walker, M.D. and Dennis D. Ferguson, M.D. FIC owns and operates an MRI and CT located at 353 Scott Swamp Road in Farmington. Six of the seven physician-members of FIC separately own Radiologic Associates, P.C. (Dr. Ferguson recently retired from the practice of medicine). Radiologic Associates, P.C. is a radiology practice that provides x-ray, ultrasound, mammography, CT, MRI and interventional radiology professional services to patients in the greater Bristol and Farmington area.

Due to recent and future retirement activity as well as other events occurring in the health care industry, the physician members of FIC seek to sell some or all of their membership interest in FIC to a group of radiologists or a legal entity formed by such group. No change in the scope of services currently offered by FIC will result from the proposed transaction. Exclusive ownership of FIC’s assets will remain with FIC and will not change after the membership interest certificates are issued to the new physician members.

Discussion

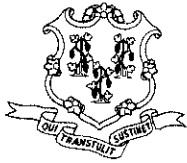
A CON may be necessary when an MRI or CT is “acquired,” C.G.S. § 19a-638(a)(10), or when there is a “transfer of ownership” of a “health care facility.” C.G.S. § 19a-638(a)(2). For the reasons discussed below, the proposed sale of membership interests in FIC does not require a CON under either of these statutory provisions.

Section 19a-630-1(1) of OHCA’s Regulations defines “acquisition” as the “acquisition through purchase, lease, donation or other comparable arrangement of a computed tomography scanner... magnetic resonance imaging scanner...” No purchase, sale, lease or comparable transaction is occurring with respect to FIC’s existing MRI or CT. Exclusive ownership of FIC’s assets (most notably, the MRI and CT) will remain with FIC.

C.G.S. § 19a-630(16) defines a “transfer of ownership” as “a transfer that impacts or changes the governance or controlling body of a health care facility, institution or group practice including, but not limited to, all affiliations, mergers, or any sale of any net assets of a health care facility.” FIC does not render professional services and thus is not a group practice as defined in C.G.S. § 19a-630(10) nor is it a “health care facility” as defined under C.G.S. § 19a-630(11). As such, this is not a “transfer of ownership” for which CON approval is required under C.G.S. 19a-638(a)(2).

We note that the above analysis is also consistent with OHCA’s prior determination that FIC was not required to seek a CON with respect to its proposed sale of membership interests to Jefferson Radiology under OHCA Docket #13-31869-DTR and OHCA’s recent determination that HVRA of Danbury, LLC and HVRA of New Milford, LLC were not required to seek a CON with respect to the admission of new physician members under OHCA Docket #14-31970-DTR.

For all of these reasons, we respectfully submit that OHCA should determine that the proposed sale of membership interests in FIC that is outlined above does not require a CON.



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

April 22, 2015

VIA FACSIMILE ONLY

Carlos M. Badiola, M.D.
The Farmington Imaging Center, LLC
353 Scott Swamp Road
Farmington, CT 06032

RE: Certificate of Need Determination Report Number 15-31993-DTR
Sale of Membership Interests in The Farmington Imaging Center, LLC

Dear Dr. Badiola:

On April 21, 2015, the Office of Health Care Access ("OHCA") received your Certificate of Need ("CON") Determination request on behalf of The Farmington Imaging Center, LLC ("Petitioner") with respect to the sale of membership interests.

The Petitioner is a member-managed imaging center wholly owned by seven radiologists who each own an equal interest. The Petitioner owns and operates an MRI and CT scanner located at 353 Scott Swamp Road in Farmington. The Petitioner's physician members seek to sell some or all of their membership interests to a group of radiologists or a legal entity formed by such group. The Peitioner will retain ownership of the MRI and CT subsequent to the proposed sale.

Conn. Gen. Stat. § 19a-638(a)(2) requires a CON for the "transfer of ownership of a health care facility". However, the Peitioner is not a health care facility as that term is defined in Connecticut General Statutes § 19a-630(11). Further, pursuant to Conn. Gen. Stat. § 19a-638(a)(10), a certificate of need is required for the "acquisition of computed tomography scanners, magnetic resonance imaging scanners...by any person, physician, provider..." The MRI and CT scanner will remain the property of the Petitioner and no other person, physician or provider will acquire an interest in the MRI or CT scanner. Based upon the foregoing, OHCA concludes that a **CON is not required** for the proposal.

Sincerely,

Kimberly R. Martone
Director of Operations

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

An Equal Opportunity Provider

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

410 Capitol Ave., MS#13HCA, P.O.Box 340308, Hartford, CT 06134-0308
Telephone: (860) 418-7001 Fax: (860) 418-7053 Email: OHCA@ct.gov

* * * COMMUNICATION RESULT REPORT (APR. 22. 2015 2:29PM) * * *

FAX HEADER:

TRANSMITTED/STORED : FILE MODE	APR. 22. 2015 2:28PM OPTION	ADDRESS	RESULT	PAGE
022 MEMORY TX		98605849998	OK	2/2

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

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



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

FAX SHEET

TO: Carlos M. Badiola, M.D.

FAX: 860 584 0541 9998

AGENCY: The Farmington Imaging Center, LLC

FROM: OFFICE OF HEALTH CARE ACCESS

DATE: 4/2/15 Time: _____

NUMBER OF PAGES: 2
(including transmittal sheet)

Comments: Determination for DN: 15-31993-DTR, Sale of Membership Interests in The Farmington Imaging Center, LLC

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