



## Office of Health Care Access Certificate of Need Application

### Final Decision

**Hospital:** Hospital of Saint Raphael

**Docket Number:** 02-516

**Project Title:** Establish Primary Care Services for the Elderly

**Statutory Reference:** Section 19a-638, Connecticut General Statutes

**Filing Date:** May 9, 2002

**Hearing Date:** Not Applicable

**Decision Date:** May 31, 2002

**Default Date:** August 7, 2002

**Staff:** Sandra Czunas  
Steven Lazarus

**Project Description:** The Hospital of Saint Raphael (“Hospital”) is seeking OHCA authorization for Project ElderCare, a primary care services program for the elderly with no associated capital cost. The program currently operates at seven sites in New Haven and is seeking to expand to McQueeney Towers, 358 Orange Street in New Haven and Surfside 200, 204 Oak Street, West Haven Connecticut.

**Nature of Proceeding:** On May 9, 2002, the Office of Health Care Access (“OHCA”) received the Hospital’s Certificate of Need (“CON”) application seeking authorization to operate two proposed primary care service sites for the elderly at McQueeney Towers, 358 Orange Street in New Haven and Surfside 200, 204 Oak Street in West Haven Connecticut, in addition to seven existing sites, with no associated capital expenditure. The Hospital is a health care facility or institution as defined by Section 19a-630, of the Connecticut General Statutes (“C.G.S.”).

OHCA's authority to review and approve, modify or deny this application is established by Section 19a-638, C.G.S. The provisions of this section, as well as the principles and guidelines set forth in Section 19a-637, C.G.S., were fully considered by OHCA in its review.

## FINDINGS OF FACT

### Clear Public Need

#### Contribution of the Proposal to the Quality and Accessibility of Health Care Delivery in the Region

#### Impact on the Hospital's Current Utilization Statistics

1. The Hospital of Saint Raphael ("Hospital") is an acute care hospital located in New Haven, Connecticut. (*CON Application, May 9, 2002, page 1*)
2. The Project Eldercare program ("Program") is an onsite preventive health care education and social services program for the frail elderly operated by the Hospital. (*CON Application, May 9, 2002, page 2*)
3. The Hospital seeks formal approval for the Program at the existing seven sites and to gain approval for the expansion of two additional sites. (*CON Application, May 9, 2002, page 2*)
4. The Hospital proposes to establish the two additional sites at McQueeney Towers, 358 Orange Street in New Haven and Surfside 200, 204 Oak Street, West Haven, Connecticut. (*CON Application, May 9, 2002, page 3*)
5. The Program currently has sites at the following locations:

---

*Crawford Manor  
New Haven Housing Authority  
90 Park Street  
New Haven, CT 06511*

*Atwater Senior Center  
26 Atwater Street  
New Haven, CT 06513*

*Edith Johnson Towers  
11 Bristol Street  
New Haven, CT 06511*

*East Shore Senior Center  
411 Townsend Avenue  
New Haven, CT 06512*

*Ribicoff  
New Haven Housing Authority  
200 Brookside Street  
New Haven, CT 06511*

*Casa Otonal Housing Corporation  
135 Sylvan Avenue  
New Haven, CT 06511*

*Tower One  
10 Tower One  
New Haven, CT 06511*

---

(*CON Application, May 9, 2002, page 6*)

6. The Program was initiated in 1992 to provide primary care services to those elderly in New Haven who suffered from chronic illness, had poor mobility and function, experienced more frequent hospitalizations, and did not receive regular primary care. (*CON Application, May 9, 2002, page 3*)
7. The Hospital states it began and then expanded the Program at the request of local elderly public housing facilities. (*CON Application, May 9, 2002, page 3*)
8. Services currently provided at the seven existing locations and to be provided at the two proposed locations include the following:

Medical Services:

- Physical Examinations
- Treatment of Non-emergency illnesses and injuries
- Immunizations
- Prescription renewals
- Referrals to specialists

Social Services:

- Psycho-social evaluation
- Individual and family counseling
- Case management
- Financial Counseling
- Community resources referrals
- Advocacy

Health Education / Screenings / Other:

- Screenings for high blood pressure
- Podiatry
- Various educational programs for Health-promotion

(*CON Application, May 9, 2002, page 7*)

9. Program services will be provided by physician assistants, social workers and a geriatric physician. (*CON Application, May 9, 2002, page 2*)
10. According to the Hospital, approximately 300 individuals are served by the Program each month. (*CON Application, May 9, 2002, page 2*)
11. The Hospital states that the Program addresses cultural, geographic, transportation and economic barriers and provides necessary health care services to an underserved segment of the senior population in greater New Haven. (*CON Application, May 9, 2002, page 3*)
12. The Project operates under a separate cost center at the Hospital and the proposed two new sites will be included in this existing cost center. (*CON Application, May 9, 2002, page 7*)

13. The Hospital states that all existing and proposed locations operate in spaces provided rent-free from the New Haven Housing Authority or the West Haven Housing Authority. *(CON Application, May 9, 2002, page 3)*

**Financial Feasibility of the Proposal and its Impact on the Hospital's Rates and  
Financial Condition  
Rates Sufficient to Cover Proposed Capital and Operating Costs  
Impact of the Proposal on the Interests of Consumers of Health Care Services and  
Payers for Such Services**

14. The operating costs associated with this project are minimal. The Program will incur the expense of a half-time (0.5 FTE) medical assistant, and incremental costs for medical supplies utilized in each new clinic location. *(CON Application, May 9, 2002, page 3)*
15. The Hospital projects minimal losses in the amount of \$2,525 and \$3,459 for FY2002 and FY2003, respectively, and projects a gain of \$3,119 in FY2004. *(CON Application, May 9, 2002, page 34)*
16. The Hospital attributes projected losses in operations in FYs 2002 and 2003 (start-up years) to the need to cover incremental salary costs of a half-time medical assistant during this start-up period. The Hospital expects that revenue from the program will offset direct program costs during FY 2004. *(CON Application, May 9, 2002, page 9)*
17. There are no capital expenditures associated with the proposed Program expansion. *(CON Application, May 9, 2002, page 3)*

**Consideration of Other 19a-637, C.G.S.  
Principles and Guidelines**

The following findings are made pursuant to other principles and guidelines set forth in Section 19a-637, C.G.S.:

18. There is no State Health Plan in existence at this time. *(CON Application, May 9, 2002, page 2)*
19. The Hospital has adduced evidence that this proposal is consistent with the Hospital's long-range plan. *(CON Application, May 9, 2002, page 2)*
20. The Hospital has improved productivity and contained costs through group purchasing, energy conservation, reengineering and applications of technology. *(CON Application, May 9, 2002, page 4)*

21. The Hospital currently does not have teaching or research responsibilities. (*CON Application, May 9, 2002, page 6*)
  
22. The Hospital has sufficient technical, financial and managerial competence to provide efficient and adequate services to the public. (*CON Application, May 9, 2002, page 4 and Attachment 1, pages 12-21*)

## **Rationale**

The Hospital of Saint Raphael (“Hospital”) seeks formal approval to operate nine (seven existing, two proposed) sites for Project ElderCare, an onsite preventive health care education and social services program for the frail elderly. Currently, the Hospital operates seven sites, located at Crawford Manor, Edith Johnson Towers, Ribicoff, Tower One, Atwater Senior Center, East Shore Senior Center and Casa Otonal Housing Corporation in New Haven. The Hospital proposes two additional sites to be located at McQueeney Towers, 358 Orange Street in New Haven and Surfside 200, 204 Oak Street, West Haven, Connecticut.

Project ElderCare was initiated in 1992 in an effort to treat New Haven elderly who suffered from chronic illness, had poor mobility and function, experienced more frequent hospitalizations, and did not receive regular primary care. The Hospital states that the Program addresses cultural, geographic, transportation and economic barriers and provides necessary health care services to an underserved segment of the senior population in greater New Haven. Services to be provided at the proposed sites include medical services, social services, health education, screenings and other services. The Hospital states that approximately 300 individuals are served by the Program clinics each month.

The Project operates under a separate cost center at the Hospital and the proposed two new sites will be folded into this existing cost center. In addition, all existing and proposed locations operate in spaces provided rent-free from the Housing Authorities of New Haven and West Haven.

Finally, the proposal is financially feasible. There is no capital expenditure associated with the proposed expansion. After a small loss in FY2002 and FY 2003, the Hospital expects a gain of \$3,119 in FY2004. In addition, there are no capital costs associated with this Proposal.

Based upon the foregoing Findings of Fact and Rationale, the Certificate of Need application of Saint Raphael Hospital to operate primary care clinics at Crawford Manor, Edith Johnson Towers, Ribicoff, Tower One, Atwater Senior Center, East Shore Senior Center and Casa Otonal in New Haven and McQueeney Towers in New Haven and Surfside 200 in West Haven, Connecticut, with no associated capital expenditure, is hereby GRANTED.

## ORDER

Saint Raphael Hospital is hereby authorized to operate nine primary care clinics at Crawford Manor, Edith Johnson Towers, Ribicoff, Tower One, Atwater Senior Center, East Shore Senior Center and Casa Otonal Housing Corporation in New Haven and McQueeney Towers, 358 Orange Street in New Haven and Surfside 200, 204 Oak Street, West Haven, Connecticut, with no associated capital expenditure.

All of the foregoing constitutes the final order of the Office of Health Care Access in this matter.

By Order of the  
Office of Health Care Access

May 31, 2002  
Date

Signed by:  
Raymond J. Gorman  
Commissioner

RJG/sec  
w:\decision\02516dec