STATE OF CONNECTICUT

OFFICE OF HEALTH CARE ACCESS

M. JODI RELL GOVERNOR CRISTINE A. VOGEL COMMISSIONER

September 16, 2008

Kim Beauregard CEO InterCommunity Mental Health Group, Inc. 281 Main Street East Hartford, CT 06118

RE: Certificate of Need Determination; Report Number 08-31208-DTR InterCommunity Mental Health Group, Inc. d/b/a InterConnections, LLC Establishment of InterConnections, LLC in East Hartford

Dear Ms. Beauregard:

On July 22, 2008, the Office of Health Care Access ("OHCA") received your application for exemption from the Certificate of Need ("CON") process for the establishment of a psychiatric outpatient clinic for adults in East Hartford, Connecticut.

Please be advised that OHCA has reviewed the information submitted in your request and makes the following findings:

- 1. InterCommunity Mental Health Group, Inc. ("ICMHG") is a non-profit facility providing adult outpatient psychiatric treatment at 281 Main Street, East Hartford, Connecticut.
- 2. ICMHG is proposing to establish InterConnections, LLC, a group practice that qualifies as an affiliate of InterCommunity Mental Health Group, Inc. for the purpose of providing psychiatric outpatient services for adults at Gateway Square, 893 Main Street, East Hartford, Connecticut
- 3. The Department of Mental Health and Addiction Services ("DMHAS"), in a letter received August 26, 2008, from Assistant Commissioner Paul J. Di Leo, MS, FACHE, support the proposal of InterCommunity Mental Healt Group, Inc. d/b/a InterConnections, LLC to provide psychiatric outpatient treatment services for adults at 893 Main Street, East Hartford, Connecticut.

- 4. DMHAS states that InterConnections, LLC will be a group practice of independent contractor clinicians and that the practice qualifies as an affiliate under Connecticut General Statute Section 19a-630a. All net profits will be distributed to ICMHG as the sole member. In the first year the applicant estimates 180 unduplicated adults having a primary mental illness and/or a co-occurring psychiatric and substance use disorder will be served. ICMHG has a current contract with DMHAS.
- 5. ICMHG states that the purpose to establish a group practice is to provide direct services to adult patients not covered by government programs, as well as children and families,
- 6. The group practice will not be a clinic or any other facility that would require licensure from the Department of Public Health. The services will be provided by independent contractor clinicians who will bill for their services using their individual licenses. No facility fee will be associated with their services.
- 7. InterConnections, LLC will process the billing for the clinicians who provide services at the Group Practice location. The billing will be based on the individual clinicians' licenses and there will not be a facility fee associated with their services.
- 8. ICMHG states that the benefits of establishing the Group Practice are as follows:
 - The community gets access to mental health services for which there is a demonstrable need;
 - The clinicians get the ability to offer services in a private practice setting without having to contribute initial capital or manage the non-clinical aspects of the practice;
 - ICMHG gets additional tax exempt revenue stream, which will be used to further its charitable mission; and
 - DMHAS benefits from the added financial stability of a provider dedicated to providing both mental health and substance abuse services to the segments of the community most in need.
- 9. The capital expenditure associated with this proposal is \$45,000.

Based on the above findings, OHCA has determined that Certificate of Need approval is not required for InterCommunity Mental Health Group, Inc. to establish InterConnections, LLC a group practice that qualifies as an affiliate of InterCommunity Mental Health Group, Inc. for the purpose of providing psychiatric outpatient services for adults at Gateway Square, 893 Main Street, East Hartford, Connecticut. ICMHG will not be providing a new or additional function or service. Termination of these services would require CON approval, pursuant to Section 19a-638, C.G.S.

Thank you for providing information to OHCA regarding this proposal. If you have any questions concerning this letter, please contact Paolo Fiducia, Associate Health Care Analyst, Certification, Financial Analysis and Forecasting, at (860) 418-7001.

Sincerely,

Signed by Commissioner Vogel on September 16, 2008

Cristine A. Vogel Commissioner

C: Paul J. Di Leo, MS, FACHE, Assistant Commissioner, DMHAS Sandra Bauer, Health Processing Technician, DPH, DCBR Al Bidorini, Director, OPAS, DMHAS Donna C. Stimpson, Planning Specialist, DMHAS

CAV:pf