

August 14, 2015

Kimberly R. Martone
Director of Operations, Office of Health Care Access
Connecticut Department of Public Health
410 Capitol Avenue, MS #13 CMN
Hartford, Connecticut 06134

RE: CON Determination for Geriatric Partial Hospital/Intensive Outpatient Program

Dear Ms. Martone:

Enclosed is a Certificate of Need Determination Form to support the request of Natchaug Hospital to provide a geriatric partial hospital/intensive outpatient program at Windham Hospital. We are requesting a waiver of the CON process since Natchaug already provides the identified services to the identified population at Natchaug Hospital in Mansfield Center, which is only four miles from Windham Hospital, and therefore in the same service area.

Thank you for your consideration.

Regards,

Stephen W. Larcen, Ph.D.

President, Natchaug Hospital
President, Behavioral Health Network, Hartford HealthCare



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	Natchaug Hospital, Inc.	
Doing Business As	Natchaug Hospital, Inc.	
Name of Parent Corporation	Hartford Health Care Corporation	
Petitioner's Mailing Address, if Post Office (PO) Box, include a street mailing address for Certified Mail	189 Storrs Road, Mansfield Center, CT 06250	
What is the Petitioner's Status: P for profit and NP for Nonprofit	NP	
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.	David C. Klein, Ph.D., Vice President of Clinical Operations	

Contact Person's Mailing Address, if PO Box, include a street mailing address for Certified Mail	189 Storrs Road, Mansfield Center, CT 06250	
Contact Person's Telephone Number	(860) 465-5903	
Contact Person's Fax Number	(860) 450-0165	
Contact Person's e-mail Address	david.klein@hhc.health.org	

SECTION II. GENERAL PROPOSAL INFORMATION

- a. Proposal/Project Title: Geriatric Partial Hospital/Intensive Outpatient Program
- b. Estimated Total Project Cost: \$15,200
- c. Location of proposal, identifying Street Address, Town and Zip Code:
- Windham Hospital, 112 Mansfield Ave, Willimantic, CT 06226
- d. List each town this project is intended to serve:

Natchaug Hospital currently operates an adult Partial Hospital/Intensive Outpatient Program, known as Sachem House, at its main campus in Mansfield Center. Along with younger adults, Sachem House serves the older adults who will be served by the proposed project (see proposal description). Sachem House is an ambulatory program operating five days per week, so the clients reside in towns within reasonable driving distance of the program. Transportation is provided to most clients, as they do not have access to their own means of transportation. Locating the geriatric program in Windham Hospital, less than 4 miles from Natchaug Hospital, is not expected to affect the towns served. During the past two years, 92% of the services at Sachem House have been provided to clients residing in Windham or Tolland Counties, or the nearby New London County towns of Lebanon, Norwich, Franklin, and Colchester. The table below presents the towns in descending order of frequency and represents more than 92% of the services at Sachem House.

Town	County	Percent
Windham	Windham	45.3%
Mansfield	Tolland	10.3%
Coventry	Tolland	6.8%
Lebanon	New London	6.3%
Columbia	Tolland	4.0%
Ashford	Windham	3.5%
Willington	Tolland	2.7%
Hebron	Tolland	2.1%
Killingly	Windham	1.8%
Norwich	New London	1.4%
Hampton	Windham	1.1%
Franklin	New London	1.1%
Tolland	Tolland	1.0%
Eastford	Windham	0.8%
Vernon	Tolland	0.8%
Colchester	New London	0.8%
Canterbury	Windham	0.8%
Plainfield	Windham	0.8%
Chaplin	Windham	0.7%

- e. Estimated starting date for the project: April 1, 2016

SECTION IV. 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.

See attached

2. Identify the types of services that are being proposed and what DPH licensure categories will be sought, if applicable.

See attached.

3. Identify the current population served and the target population to be served.

See attached.

SECTION V. AFFIDAVIT

(Each Petitioner must submit a completed Affidavit.)

Petitioner: Natchaug Hospital, Inc.

Project Title: Geriatric Partial Hospital/Intensive Outpatient Program

I, Stephen W. Larcen, Ph.D., Chief Executive Officer
(Name) (Position – CEO or CFO)

of Natchaug Hospital, Inc. 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.

Stephen Larcen 8/14/15
Signature Date

Subscribed and sworn to before me on 8/14/2015

Susan M. Dean
Notary Public/Commissioner of Superior Court

My commission expires: _____



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.

Natchaug Hospital has provided partial hospital and intensive outpatient services at Sachem House since 1975. The program is located at the main Natchaug Hospital campus at 189 Storrs Road in Mansfield Center. The services are provided under license from the Department of Public Health (DPH); the license is attached.

The partial hospital and intensive outpatient services at Sachem House in Mansfield Center are the only services which are the focus of the current proposal. The DPH license also includes inpatient services at Mansfield Center, as well as partial hospital and intensive outpatient services at satellite locations in Vernon, Enfield, Groton, Danielson, Old Saybrook, Dayville, and Norwich, CT.

2. Identify the types of services that are being proposed and what DPH licensure categories will be sought, if applicable.

The services proposed are identical to the services currently provided at Sachem House in Mansfield Center, i.e., partial hospital and intensive outpatient services. The program at Sachem House provides care for adults of all ages, and the proposal is to develop a specific program targeted to the unique needs of the older adults in the Sachem House program, and to locate that program at Windham Hospital in Willimantic, less than 4 miles from Sachem House. The program at Windham Hospital is referred to as a "Geriatric Partial Hospital/Intensive Outpatient Program" to identify the focus of treatment as the behavioral health challenges faced by an older adult population. The proposal intends to create a separate program focused specifically on the needs of older adults at Windham Hospital. The Sachem House program will continue to operate at Natchaug Hospital, but will no longer serve those older adults.

The proposal is to include the services at Windham Hospital under the Natchaug Hospital license. The request is to add Windham Hospital as a satellite location on the Natchaug Hospital license, as is the case for the satellite locations noted above. Sachem House was in fact operated by Natchaug Hospital at the Windham Hospital location from 1993 to 2000.

A letter of support stating his intention to locate the program at Windham Hospital is included with this application from David A. Whitehead, Regional President of the East Region of Hartford HealthCare, which includes Windham Hospital.

3. Identify the current population served and the target population to be served.

The current population served at Sachem House is adults requiring partial hospital or intensive outpatient care for behavioral health needs, including mental health and substance abuse disorders. The target population is those adults who are struggling with issues normally associated with aging, such as changes in health,

employment status, income, family constellation, self-perception, living circumstances, as well as concerns with death and dying, abuse of prescribed and non-prescribed medications, alcohol or other drugs, dependence on others, and related issues of aging and loss.

By history, the adult ambulatory (partial hospital/intensive outpatient) programs at Natchaug Hospital have served an older population within the general adult programs. Those programs, because they serve adults of all ages, do not necessarily have an environment designed specifically for older adults, nor is the clinical focus of the program entirely devoted to the needs of older adults, nor are the staff necessarily selected based on their experience and/or training with older adults. The intention is to create a program with those features so the clients will find the program to be more appropriate to their needs.

Although the clients in the Geriatric program at Windham Hospital will be older than the clients who continue to receive services at Sachem House at Natchaug Hospital, there will not be an inflexible rule that all clients of a certain age (e.g., 65) are served within a certain program. There are many adults over 65 who continue to be employed at a level comparable or above the level at which they were employed in earlier adulthood, and who may not be struggling with the issues identified above. Similarly, there may be clients younger than 65 who have lost jobs, experienced the death of a spouse and the departure of children to college and careers, or who have become dependent on medications prescribed for chronic pain, and are struggling with those or similar issues. The decision as to the program in which the client receives services will be based recommendations developed upon an initial clinical assessment with endorsement by the client. It is also possible that a client may move between the Sachem and Windham programs during an episode of care or from one episode of care to another.

In the two years ending June 30, 2015, Natchaug Hospital provided 12,126 days of partial hospital or intensive outpatient care for adults 50 years of age or older. Each day of care is three hours in duration or longer. 6,572 of those days of care were for adults 55 or older, 3,069 days of care were for adult 60 or older, and 1,364 days of care were for adults 65 or older. Natchaug Hospital has a demonstrated history of providing care to the population that will be served in proposed program.

Because Natchaug Hospital has served older adults at a partial hospital/intensive outpatient level of care for 40 years and has done so in the service area in which the proposed program will be located, a waiver of the Certificate of Need Process is requested.

Greer, Leslie

From: Hansted, Kevin
Sent: Friday, August 21, 2015 1:12 PM
To: Greer, Leslie
Subject: FW: OHCA Determination #15-32021-DTR
Attachments: License_DPH_2015_2017.pdf

Kevin T. Hansted
Staff Attorney
Department of Public Health
Office of Health Care Access
410 Capitol Ave., MS #13HCA
P.O. Box 340308
Hartford, CT 06134
Phone: 860-418-7044
Email: kevin.hansted@ct.gov



CONFIDENTIALITY NOTICE: This email and any attachments are for the exclusive and confidential use of the intended recipient. If you are not the intended recipient, please do not read, distribute or take action in reliance on this message. If I have sent you this message in error, please notify me immediately by return email and promptly delete this message and any attachments from your computer system. We do not waive attorney-client or work product privilege by the transmission of this message.

From: Klein, David [<mailto:David.Klein@hhchealth.org>]
Sent: Friday, August 21, 2015 12:14 PM
To: Hansted, Kevin
Subject: RE: OHCA Determination #15-32021-DTR

I apologize. The current DPH license is attached.

David Klein, Ph.D.
Vice President of Clinical Operations



189 Storrs Road
Mansfield Center, CT 06250

860 465 5903 tel
david.klein@hhchealth.org

www.hartfordhealthcare.org
www.natchaug.org

From: Hansted, Kevin [<mailto:Kevin.Hansted@ct.gov>]
Sent: Friday, August 21, 2015 11:28 AM
To: Klein, David
Subject: OHCA Determination #15-32021-DTR

Dear Dr. Klein,

I am in receipt of your determination request regarding adding a Partial Hospital/Intensive Outpatient Program at Windham Hospital. Your request references a DPH license. However, no license was attached. Please provide me with a copy of the license referenced in the determination.

Thank you,

Kevin T. Hansted
Staff Attorney
Department of Public Health
Office of Health Care Access
410 Capitol Ave., MS #13HCA
P.O. Box 340308
Hartford, CT 06134
Phone: 860-418-7044
Email: kevin.hansted@ct.gov



CONFIDENTIALITY NOTICE: This email and any attachments are for the exclusive and confidential use of the intended recipient. If you are not the intended recipient, please do not read, distribute or take action in reliance on this message. If I have sent you this message in error, please notify me immediately by return email and promptly delete this message and any attachments from your computer system. We do not waive attorney-client or work product privilege by the transmission of this message.

This e-mail message, including any attachments, is for the sole use of the intended recipient(s) and may contain confidential and privileged information. Any unauthorized review, use, disclosure, or distribution is prohibited. If you are not the intended recipient, or an employee or agent responsible for delivering the message to the intended recipient, please contact the sender by reply e-mail and destroy all copies of the original message, including any attachments.

STATE OF CONNECTICUT

Department of Public Health

LICENSE

License No. H0003

Hospital for Mentally Ill Persons

In accordance with the provisions of the General Statutes of Connecticut Section 19a-493:

Natchaug Hospital, Inc. of Mansfield Center, CT d/b/a Natchaug Hospital, Inc. is hereby licensed to maintain and operate a Hospital for Mentally Ill Persons.

Natchaug Hospital, Inc. is located at 189 Storrs Road, Mansfield Center, CT 06250.

The maximum number of beds shall not exceed at any time:

60 Licensed Beds

This license expires **June 30, 2017** and may be revoked for cause at any time.
Dated at Hartford, Connecticut, July 1, 2015.

Satellites:

River East Day Treatment Center, 428 Hartford Turnpike, Vernon, CT

Joshua Center Enfield, 72 Shaker Road, CT

*Care Plus & Joshua Center Southeast, 1353 Gold Star Highway, Groton, CT

Joshua Center Northeast, 934 North Main Street, Danielson, CT

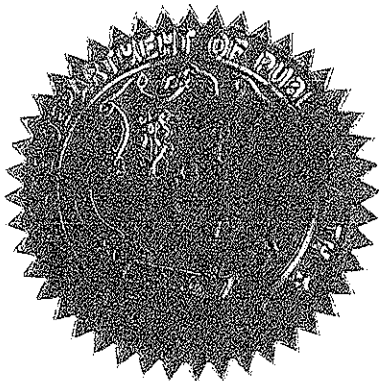
Joshua Center Shoreline, 5 Research Parkway, Old Saybrook, CT

Quinebaug Day Treatment Center, 11 Dog Hill Road, Dayville, CT

Thames Valley PHP, 11A Stott Avenue, Norwich, CT

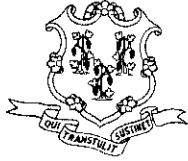
License revised to reflect:

*Corrected the name of the Satellite



Jewel Mullen MD

Jewel Mullen, MD, MPH, MPA
Commissioner



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

August 25, 2015

VIA FACSIMILE ONLY

David C. Klein, Ph.D.
Vice President of Clinical Operations
Natchaug Hospital, Inc.
189 Storrs Road
Mansfield Center, CT 06250

RE: Certificate of Need Determination Report Number 15-32021-DTR
Establishment of Geriatric Partial Hospital/Intensive Outpatient Program

Dear Dr. Klein:

On August 17, 2015, the Office of Health Care Access ("OHCA") received your Certificate of Need ("CON") Determination request on behalf of Natchaug Hospital, Inc. ("Petitioner") with respect to the establishment of a Geriatric Partial Hospital/Intensive Outpatient Program at Windham Hospital.

The Petitioner is licensed as a Hospital for Mentally Ill Persons and currently operates an adult Partial Hospital/Intensive Outpatient Program, known as Sachem House, at its main campus in Mansfield Center, Connecticut. Sachem House is an ambulatory program operating five (5) days per week and serves younger and older adults. The Petitioner is proposing the establishment of a Geriatric Partial Hospital/Intensive Outpatient Program at Windham Hospital to be operated under the Petitioner's license. The adult Partial Hospital/Intensive Outpatient Program at the main campus (Sachem House) will continue to operate. The new Partial Hospital/Intensive Outpatient Program at Windham Hospital will focus specifically on the geriatric population.

Connecticut General Statutes § 19a-638(a)(5) requires a CON for the "termination of inpatient or outpatient services offered by a hospital...". Since the Partial Hospital/Intensive Outpatient Program at Sachem House will continue to be offered, the Petitioner is not terminating any services. Additionally, OHCA does not regulate the establishment of new services offered by a hospital. As a result, a **CON is not required** for the Petitioner's 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 (AUG. 25. 2015 9:25AM) * * *

FAX HEADER:

TRANSMITTED/STORED : FILE MODE	AUG. 25. 2015 9:23AM OPTION	ADDRESS	RESULT	PAGE
232	MEMORY TX	98604500165	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: DAVID C. KLEIN

FAX: 860 450 0165

AGENCY: NATCHAUG HOSPITAL, INC.

FROM: OHCA

DATE: 8/25/15 **Time:** _____

NUMBER OF PAGES: 2
(including transmittal sheet)

Comments:
 Determination for DN: 15-32021-DTR, Establishment of Geriatric Partial Hospital/Intensive Outpatient Program.

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