From: Roberts, Karen
To: Foster, Tillman

Subject: FW: 2016 ANNUAL REPORT CONCERNING OWNERSHIP OF, OR AFFILIATION WITH, GROUP MEDICAL

PRACTICES encrBypass1

**Date:** Tuesday, May 16, 2017 9:18:15 AM

Attachments: BCHP Group medical practice report annual filing 2016.xlsm

**From:** Kent, Siobhan (BCHP) [mailto:Siobhan Kent@bchphysicians.org]

**Sent:** Monday, May 15, 2017 4:51 PM

**To:** Grouppracticefilings, OHCA <Grouppracticefilings@ct.gov> **Cc:** Shaw, Robert (BCHP) <Robert\_Shaw@bchphysicians.org>

Subject: 2016 ANNUAL REPORT CONCERNING OWNERSHIP OF, OR AFFILIATION WITH, GROUP

MEDICAL PRACTICES encrBypass1

Good afternoon,

Attached is the Group practice report for Boston Children's Health Physicians – 2016.

Thank you,

Siobhán M. Kent

### **Operations Specialist & Practice Liaison**

19 Skyline Drive, 1N-F12, Hawthorne, NY 10532

M: 40 Sunshine Cottage Rd, 1N-F12, Valhalla, NY 10595 914-594-2390 | F: 914-594-2393 | www.bchphysicians.org

Siobhan Kent@bchphysicians.org | Siobhan.Kent@childrens.harvard.edu



CONFIDENTIALITY NOTICE: The information contained in this message is legally privileged and confidential information intended for the use of the individual or entity named above. If the reader of this message is not the intended recipient, or the employee or agent responsible to deliver it to the intended recipient, you are hereby notified that any release, dissemination, distribution, or copying of this communication is strictly prohibited. If you have received this communication in error, please notify the author immediately by replying to this message and delete the original message. This document may contain information covered under the Privacy Act, 5 USC 552(a), Health Insurance Portability and Accountability Act, Public Law 104-191, and DoD Directive 6025.18. It must be protected in accordance with those provisions.

# Annual Report Concerning Ownership of, or Affiliation with Group Medical Practices Summary of Instructions

Sections 1(f) and (g) of P.A. 14-168, AN ACT CONCERNING JOINT VENTURES AND AFFILIATIONS OF GROUP MEDICAL PRACTICES (the "Act"), effective October 1, 2014, require that hospitals, hospital systems, and group medical practices comprised of thirty or more physicians ("filers"), submit to the Attorney General ("OAG") and to the Department of Public Health ("DPH") an Annual Report providing information concerning the filers, and group practices that may be owned by or affiliated with the filers.

The Annual Report must be filed with the <u>Attorney General</u> and with the <u>DPH Office of Health Care Access</u> ("OHCA") no later than December 31, 2014 and annually thereafter.

This file includes the spreadsheets needed to fullfill the Annual Reporting requirement. There are three tabs (Medical Practices, Physician Name, and Business Entity that all must be completed. Further instructions are provided on the individual tabs. The file should be electronically submitted to the following email address: GroupPracticeFilings@ct.gov

### **Key Definitions:**

- (1) "Affiliation" means the formation of a relationship between two or more entities that permits the entities to negotiate jointly with third parties over rates for professional medical services;
- (2) "Hospital" has the same meaning as provided in section 19a-490 of the general statutes;
- (3) "Hospital system" means: (A) A parent corporation of one or more hospitals and any entity affiliated with such parent corporation through ownership, governance or membership, or (B) a hospital and any entity affiliated with such hospital through ownership, governance or membership;
- (4) "Group practice" please reference the P.A. 14-168 section 1(a)
- (5) "Primary service area" means the smallest number of zip codes from which the group practice draws at least seventy-five per cent of its patients.

Primary Service Areas ("PSAs") are defined by a set of postal zip codes. The Act defines PSA to mean "the smallest number of zip codes from which the group practice draws at least seventy-five per cent of its patients."

Click on the following for a full copy of the Filing Instructions.

The Medicare.gov website was used for medical/physician specialties in the attached spreadsheets. For the list of specialties and descriptions of each please refer to the Medicare.gov website by clicking on the link below:

http://www.medicare.gov/physiciancompare/staticpages/resources/specialtydefinitions.html?AspxAutoDetectCookieSupport=1

## Hospitals, Hospital Systems, and Group Practices with 30 or more physicians Written Report due by December 31st annually

Date of Filing>	May 15, 2017
Full Legal Name of Entity Reporting>	Boston Children's Health Physicians, LLP
Type of Provider Reporting (see options below)>	Group Practice
Hospital, Hospital System, Group Practice)	

(1)	(2)	(3)	(4)
Line	Name of Group Practice being reported	Description of the nature of the relationship of the Hospital or Hospital System to the Group Practice	If within a hospital affiliated system, identify if owned directly by the hospital (Provide Hosp. Name) or by health system parent corporation?
1	Boston Children's Health Physicians, LLP	Group practice owned by two physicians affiliated with Boston Children's Hospital	See #3
2			
3			
5			
6			
7			
8			
9			
10			
11 12			
13			
14			
15			
16			
17			
18			
19 20			
21			
22			
23			
24			
25			
26 27			
28			
29			
30			
31			
32			
33 34			
34 35			
36			
37			
38			
39			
40			
41 42			
42			
44			
45			
46			
47			
48			
49			
50			

### Hospitals, Hospital Systems, and Group Practices with 30 or more physicians Written Report due by December 31st annually

Date of Filing>	May 15, 2017	
Full Legal Name of Entity Reporting>	Boston Children's Health Physicians, , LLP	
Type of Provider Reporting (see options below)>	Group Practice	
(Hospital, Hospital System, Group Practice)		

If more than one Group Practice is being reported, please follow the instructions below to add additional tabs.

1 Right click on the the "PhysicianName" tab below
2 Click the "Move or Copy" option

- Under the heading "Before Sheet:," click on "Business Entity"

4				
	Name of Group Practice>	Boston Children's Health Physicians, LLP		
(1)	(2)	(3)		
Line	Physician Name (Last, First)	Physician Specialty(s)		
		When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services.		
1	Nandini Kogekar, MD	Pediatric medicine		
2	Vicente Garcia, MD	Pediatric medicine		
	Loretta Cody, MD	Pediatric medicine		
	David Hedrick, MD	Pediatric medicine		
	Sona Mehra, MD Katherine Mini, MD	Pediatric medicine Pediatric medicine		
7	Steven Schiz, MD	Pediatric medicine Pediatric medicine		
8	Joanne Angiello, MD	Pediatric medicine		
	Anil Britto, MD	Pediatric medicine		
	Jane Brotanek, MD	Pediatric medicine		
	Eitan Kilchevsky, MD	Pediatric medicine		
	Joelle Mast, MD Claudio Sandoval, MD	Neurology Hematology/oncology		
	Mehmet Ozkaynak, MD	Hematology/oncology		
	Richard Rosencrantz, MD	Gastroenterology		
	Robyn Matloff, MD	Nephrology		
17	David Kronn, MD	Pediatric medicine		
	Christina Miliaresis, MD	Cardiovascular disease (cardiology)		
	Irfan Warsy, MD	Cardiovascular disease (cardiology)		
	Mark Glassman, MD	Gastroenterology		
21 22	Anne Pierog, MD Diana Lowenthal, MD	Gastroenterology Pulmonary disease		
23	Diana Lowenthal, MD	Fullionally disease		
24				
25				
26				
27				
28				
29 30				
31				
32				
33				
34				
35				
36 37				
38				
39				
40				
41				
42				
43				
44 45				
46				
47				
48				
49				
50				
51 52				
53				
54				
, , ,				

#### Hospitals, Hospital Systems, and Group Practices with 30 or more physicians Written Report due by December 31st annually Date of Filing -----May 15, 2017 Full Legal Name of Entity Reporting -----> Boston Children's Health Physicians, , LLP **Group Practice** Type of Provider Reporting (see options below) ------> (Hospital, Hospital System, Group Practice) If more than one Group Practice is being reported, please follow the instructions below to add additional tabs. Right click on the the "PhysicianName" tab below Click the "Move or Copy" option Under the heading "Before Sheet:," click on "Business Entity" 3 Click inside the "create a copy" box Click "OK" Name of Group Practice -----Boston Children's Health Physicians, LLP (1) (2) (3) Line Physician Name (Last, First) Physician Specialty(s) When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services. 55 56 57 58 59

Hospitals, Hospital Systems and Group Practices with 30 or more physicians Written Report due by December 31st annually				
te of Filing				
more than one Group Practice is being reported, please follow the instructions below to add additional tabs.  Right click on the the "BusinessEntity" tab below				

- 2 Click the "Move or Copy" option
- 3 Under the heading "Before Sheet:," click on "(move to end)"
- 4 Click inside the "create a copy" box
  5 Click "OK"

(1)	(2)	(3)	(4)	(5)	(6)
	, ,			Name and address of each Business Entity that provides	
Line	Name and address of Group Practice	Location	of PA 14-168	services as part of the Group Practice	Description of services at this location
					When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services.
1	Boston Children's Health Physicians - Brookfield Children's Physicians	2 Old New Milford Rd, Ste 2D Brookfield, CT 06804	06804, 06811, 06801, 06810	Brookfield Children's Physicians 2 Old New Milford Rd, Ste 2D Brookfield, CT 06804	Pediatric medicine
2	Boston Children's Health Physicians - Children's Medical Group of Greenwich	42 Sherwood Place Greenwich, CT 06830	06830, 06831, 10573, 06807, 06878, 10580, 06870, 06902	Children's Medical Group of Greenwich 42 Sherwood Place Greenwich, CT 06830	Pediatric medicine
3	Boston Children's Health Physicians - Ridgefield Pediatric Associates	38B Grove St Ridgefield, CT 06877	06877, 06896, 06810	Ridgefield Pediatric Associates 38B Grove St Ridgefield, CT 06877	Pediatric medicine
4	Boston Children's Health Physicians at Danbury	67 Sandpit Rd, Ste 204 Danbury, CT 06810	06811, 06811, 06877, 10509, 06801, 06776, 06804, 10512, 06812, 06470, 06897, 06896, 06482, 12524 12533, 12590, 12564, 12603, 12563, 12570, 06488 12540, 10541, 10562	BCHP at Danbury 67 Sandpit Rd, Ste 204 Danbury, CT 06810	Cardiovascular disease (cardiology), Gastroenterology, Hematology/oncology, Nephrology, Neurology
	Boston Children's Health Physicians at Children's Specialty Center at Norwalk Hospital	30 Stevens Avenue Norwalk, CT 06856	06854, 06851, 06850, 06855, 06897, 06840, 06877 06880, 06811, 06824, 06605	Children's Specialty Center at Norwalk Hospital (I-Park Building) 761 Main Avenue, Suite 112S I-Park Building Norwalk, CT 06851	Cardiovascular disease (cardiology), Gastroenterology, Pulmonary disease
6	Boston Children's Health Physicians East Avenue Specialty Center	148 East Avenue, Suite 2N Norwalk, CT 06851	06902, 06851, 06897, 06854, 06880, 06840, 06824, 06850, 06820, 06877, 06611, 06883, 06825, 06905, 06855, 06614, 06606, 06896, 06903, 06484, 06468, 06830, 06615, 06604, 06907, 06906	East Avenue Specialty Center 148 East Avenue, Suite 2N Norwalk, CT 06851	Gastroenterology
7	Boston Children's Health Physicians at Tully Health Center	32 Strawberry Court, Suite 7 Stamford, CT 06902	06902, 06820, 06905, 06903, 06906, 06907, 06830, 06850, 06854, 06878, 10538, 10580, 06484, 06870, 06807, 06851, 06840, 06883	Tully Health Center 32 Strawberry Court, Suite 7 Stamford, CT 06902	Gastroenterology
8					
9 10					
11					
12					
13					
14					
15					
16					
17					
18			+		
19 20					
21					
22			<del> </del>		
23					
24					
25					
26					

		Hos	spitals, Hospital Systems and Group Practi Written Report due by Decembe	ces with 30 or more physicians r 31st annually	
Date of Filing ————————————————————————————————————					
2 ( 3 l 4 ( 5 (	Click the "Move or Copy" option Under the heading "Before Sheet:," click on "(move to end)" Click inside the "create a copy" box Click "OK"				
(1)	(2)	(3)	(4) Primary Service Area as defined in Section 1(11)	(5) Name and address of each Business Entity that provides	(6)
Line	Name and address of Group Practice	Location			Description of services at this location
					When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services.
27					
28					
29 30					
31					
32					
33					
34					
35					
36			<del> </del>		
37 38					
39					
40					
41					
42					
43					
44					
45					
46					
47					
48 49					
50			+		