

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
OFFICE OF HEALTH STRATEGY
PUBLIC HEARING

In Re:
Docket No. 23-32650-CON

Stamford Health-Norwalk Radiology, LLC,
Certificate of Need Proposal
to Acquire a 128-Slice CT Scanner at
148 East Avenue, Norwalk, Connecticut 06851

HELD BEFORE: ALICIA J. NOVI, ESQ.,
THE HEARING OFFICER

DATE: February 13, 2024

TIME: 9 a.m.

PLACE: (Via Teleconference)

Reporter: Robert G. Dixon, N.P., CVR-M #857

1 **APPEARANCES**

2 **For The APPLICANT:**

3 **PULLMAN & COMLEY**

4 **850 Main Street**

5 **Bridgeport, Connecticut 06601-7006**

6 **By: STEPHEN M. COWHERD, ESQ.**

7 **SCowherd@pullcom.com**

8 **203.330.2280**

9
10 **OHS Staff:**

11 **ALICIA J. NOVI, ESQ. (Hearing Officer)**

12 **STEVEN LAZARUS**

13 **YADIRA McLAUGHLIN**

14 **NICOLE TOMCZUK**

15 **FAYE FENTIS**

16

17

18

19

20

21

22

23

24

25

1 (Begin: 9 a.m.)

2
3 THE HEARING OFFICER: All right. Good morning. I want
4 to thank everybody for being here, especially on
5 this very snowy day that we have. This is
6 Stamford Health-Norwalk Radiology, LLC, Docket
7 Number 23-32650-CON.

8 Stamford, the Applicants in this matter, seek
9 a certificate of need for the application of
10 imaging equipment pursuant to Connecticut General
11 Statutes Section 19a-638(a)(10). Specifically,
12 the Applicant seeks to propose to acquire a
13 Revolution Ascend 128-slice CT unit.

14 Today is January 31st, 2024 [sic]. My name
15 is Alicia Novi. Dr. Deidre Gifford, the Executive
16 Director of the Office of Health Strategy
17 designated me to serve as Hearing Officer for this
18 matter to rule on all motions and recommend
19 findings of fact and conclusions of law upon
20 completion of the hearing.

21 Public Act Number 21-2, as amended by Public
22 Act Number 22-3, authorizes the agency to hold
23 public hearings by means of electronic equipment.
24 In accordance with this legislation, any person
25 who participates orally in an electronic meeting

1 shall make a good-faith effort to state his, her
2 or their name and title at the outset of each
3 occasion that such person participates orally
4 during an uninterrupted dialogue or series of
5 questions and answers.

6 We ask that all members of the public mute
7 the device that they are using to access this
8 hearing and silence any additional devices that
9 are around them.

10 This public hearing is being held pursuant to
11 Connecticut General Statutes Section 19a-639a(e).
12 As such, this matter constitutes a contested case
13 under the Uniform Administrative Procedures Act
14 and will be conducted in accordance therewith.
15 The Office of Health Strategy's staff is here to
16 assist me in gathering facts related to this
17 application and will be asking the applicant
18 witnesses questions.

19 At this time, I'm going to ask each staff
20 person assisting with questions today to identify
21 themselves by their name, the spelling of their
22 last name and OHS title.

23 MR. LAZARUS: Good morning, my name is Steven Lazarus,
24 L-a-z-a-r-u-s, and I'm the certificate of need
25 program support.

1 MS. McLAUGHLIN: Good morning. My name is Yadira
2 McLaughlin, M-c-L-a-u-g-h-l-i-n, and I am a
3 planning analyst at Office of Health Strategy.

4 THE HEARING OFFICER: Ms. Tomczuk?

5 MS. TOMCZUK: My name is Nicole Tomczuk, T-o-m-c-z-u-k,
6 and I'm a healthcare analyst with OHS.

7 THE HEARING OFFICER: Also present is Faye Fentis, who
8 is assisting with hearing logistics, gathering the
9 names for public comment and providing
10 miscellaneous other support.

11 The certificate of need process is a
12 regulatory process, and as such, the highest level
13 of respect will be accorded to the Applicants,
14 members of the public and our staff. Our priority
15 is the integrity and transparency of the process.
16 Accordingly, decorum will be maintained by all
17 present during these proceedings.

18 This hearing is being transcribed and
19 recorded. The video will be made available on the
20 OHS website and its YouTube account. All
21 documents related to this hearing will be
22 submitted to OHS and available through our
23 certificate of need portal, which is accessible on
24 the OHS CON webpage.

25 In making my decision, I will consider and

1 make written findings in accordance with Section
2 19a-639 of the Connecticut General Statutes.

3 Lastly, as Zoom has hopefully notified you in
4 the course of entering this hearing, I wish to
5 point out that by appearing on camera in this
6 virtual hearing, you are consenting to being
7 filmed. If you wish to revoke your consent,
8 please do so at this time by exiting the Zoom
9 meeting.

10 All right. So now I'm going to start by
11 going over the exhibits and the items of which I
12 am taking administrative notice.

13 And then I will -- actually, I'm going to ask
14 Faye, it looks like we are focusing on
15 Ms. Tomczuk. I'm not sure if that is being seen
16 on everybody else's computer.

17 MR. LAZARUS: It might be your screen.

18 THE HEARING OFFICER: Oh, okay.

19 It just switched for me.

20 All right. I'm going to start by going over
21 the exhibits and items of which I'm taking
22 administrative notice. I will ask if there are
23 any objections.

24 The CON portal contains the pre-hearing table
25 of record in this case, and the exhibits that were

1 identified in the table from A to T.

2 Mr. Lazarus, Ms. McLaughlin and Ms. Tomczuk,
3 do you have any additional exhibits that you wish
4 to enter into the record at this time?

5 MS. McLAUGHLIN: Yes, Exhibit U, which was added as a
6 public comment this morning on February 13, 2024.

7 THE HEARING OFFICER: All right. Okay. I'm going to
8 go ahead and ask the Applicant's attorney to
9 identify themselves.

10 And do you have any objection to Exhibit U?

11 MR. COWHERD: Good morning, Hearing Officer Novi, and
12 the hearing panel. Stephen Cowherd on behalf of
13 the Applicant, Stamford Health-Norwalk Radiology,
14 LLC.

15 We have no objection to Exhibits A through T
16 of the hearing record, but we have not been
17 supplied with nor seen Exhibit U. So I'd like to
18 reserve any objection with respect to that.

19 Secondly, just to clean up the record, I
20 believe the Hearing Officer said January 31st in
21 her introductions.

22 Obviously, it's the 13th of February.

23 THE HEARING OFFICER: I do apologize, Attorney Cowherd.

24 I write out my instructions in advance. You did
25 catch me. I did write these for the original

1 hearing day. Today is February 13, 2024.

2 Thank you.

3 All right. So with that noted, the hearing
4 day of today's hearing is now February 13th. And
5 I would like to notify the Applicant that I will
6 be taking administrative notice of the following
7 documents; the statewide healthcare facilities and
8 services plan and its supplements, the facilities
9 and services inventory, OHS acute care hospital
10 discharge database, the all payer claims database
11 data, and the hospital reporting systems, the HRS
12 financial and utilization data.

13 I may also take administrative notice of
14 other prior OHS decisions, agreed settlements and
15 determinations that may be relevant to this
16 matter, but which have not yet been identified.

17 Attorney Cowherd, I know you have already
18 identified yourself, but if you would like to
19 re-identify yourself for the record?

20 MR. COWHERD: Are we muted?

21 THE HEARING OFFICER: No, you are not muted.

22 MR. COWHERD: Okay. On behalf of the Applicant, I have
23 with me our two witnesses, Ms. Longmore to my left
24 and Dr. Shih who will testify later in this
25 proceeding.

1 THE HEARING OFFICER: Perfect. Wonderful. All right.

2 Okay. So do you have any objections to any
3 of the other items that we'll be taking
4 administrative notice of?

5 MR. COWHERD: None.

6 THE HEARING OFFICER: Okay. Great. So at this time I
7 would like to mark all of the identified exhibits
8 as full exhibits.

9
10 (Exhibit Letters A through U (21 exhibits),
11 marked for identification and noted in index.)
12

13 THE HEARING OFFICER: And do you have any exhibits you
14 would like to enter in?

15 MR. COWHERD: Nothing further, Hearing Officer.

16 THE HEARING OFFICER: Okay. So we're going to proceed
17 in the order established in the agenda for today's
18 hearing.

19 I'd like to advise the Applicant that we may
20 ask questions related to your application that you
21 feel you have already addressed. We will be doing
22 this for the purpose of ensuring that the public
23 has knowledge of your proposal, and for the
24 purpose of clarification.

25 I want to reassure you that we have reviewed

1 your application completeness responses and your
2 pre-filed testimony, and I will do so many times
3 before issuing a decision.

4 As the hearing is being held virtually, we
5 ask that all participants to the extent possible
6 should enable the use of video cameras when
7 testifying or commenting during the proceedings.
8 All participants and the public should mute their
9 devices and should disable their cameras when we
10 go off the record or take a break.

11 Please be advised that although we try and
12 shut off the hearing recording during breaks, it
13 may continue. If the recording is on, any audio
14 or video that has been disabled will be accessible
15 to all participants. Public comments taken during
16 the hearing will likely go in the order
17 established by OHS during the registration
18 process. However, I may allow public officials to
19 testify out of order.

20 I or OHS staff will call each individual by
21 name when it is their turn to speak. Registration
22 for public comments can be done using the Zoom
23 chat function. Please list your name and that you
24 would like to make a public comment in the
25 message.

1 Public comment is scheduled to start at 12
2 p.m. If the technical portion of this hearing is
3 not completed by 12 p.m., the public comment may
4 be postponed until the technical portion is
5 complete. Applicant's witnesses must be available
6 after public comment, as OHS may have follow-up
7 questions based on the public comment.

8 If anyone listening to this hearing would
9 like to submit written comments in lieu of
10 speaking today, you may do so by emailing your
11 comments to CONcomment@ct.gov.

12 Again, that's CONcomment@ct.gov.

13 Are there any other housekeeping matters or
14 procedural issues we need to address before we
15 start?

16 MR. COWHERD: None with respect to the Applicant.

17 THE HEARING OFFICER: Okay. Great. All right. So at
18 this point I would go ahead, and Attorney Cowherd,
19 you can go ahead with your opening statement.

20 MR. COWHERD: Obviously, the joint venture, the
21 Stamford Health-Norwalk Radiology, LLC, has worked
22 very assiduously and for a long time with respect
23 to this application. I won't have a long opening
24 statement beyond this.

25 I will turn it over to our first witness,

1 Ms. Longmore, and she will introduce herself and
2 I'll go off camera.

3 THE HEARING OFFICER: So Ms. Longmore, I would like you
4 to please raise your right hand.

5 E L I Z A B E T H L O N G M O R E,

6 called as a witness, being first duly sworn by the
7 THE HEARING OFFICER, was examined and testified
8 under oath as follows:

9
10 THE HEARING OFFICER: Thank you. And if you could
11 please just spell your last name for the record?

12 ELIZABETH LONGMORE: Yes, ma'am. L-o-n-g-m-o-r-e.

13 THE HEARING OFFICER: All right. Thank you very much.
14 Go ahead and begin -- and I would also like to ask
15 that before you begin, if you would like to adopt
16 your pre-filed testimony?

17 THE WITNESS (Longmore): Yes, I hereby adopt my
18 pre-filed testimony.

19 THE HEARING OFFICER: Perfect. All right. Go ahead.

20 THE WITNESS (Longmore): Good morning. Thank you very
21 much for hearing us today. I am Elizabeth
22 Longmore. I am the President and CEO of Stamford
23 Health-Norwalk Radiology, LLC. My testimony today
24 will address how there is a clear public need in
25 the proposal area, specifically the area of

1 Norwalk, New Canaan, Wilton, Weston, and Westport.

2 Our intent in placing a 128-slice CT scanner
3 in this area is specifically to improve the
4 quality of care, accessibility of a lower cost
5 care option to patients in this service area, and
6 to improve the cost effectiveness of the
7 healthcare system.

8 In addition, we look to positively impact the
9 financial strength of the healthcare system by
10 lower -- by providing this lower cost option. And
11 in line with the mission of our organizations,
12 it's our intent that we will not deny CT scan
13 access to any patients based on their ability to
14 pay or their inability to pay.

15 Lastly, it's our intent to also continue to
16 provide equitable choice to patients in the
17 service area. And as always, we do not want to
18 unnecessarily duplicate or replicate care in these
19 service areas.

20 **THE HEARING OFFICER:** All right. Thank you very much.

21 I'm going to go ahead -- and actually, if Attorney
22 Cowherd would like to come back on camera?

23 Would you like to have both of your witnesses
24 go first and then we can ask questions as a group
25 of both of them?

1 MR. COWHERD: Yes, I think the Applicant would prefer
2 that, and I'll let Dr. Shih now speak.

3 THE HEARING OFFICER: All right. Thank you very much.

4 MR. COWHERD: You're welcome.

5 THE HEARING OFFICER: Good morning, sir. If you could
6 just begin by stating your name, your title, and
7 spelling your last name for the record?

8 DR. ANDREW SHIH: I'm Dr. Andrew Shih. I am the
9 Clinical Director of Outpatient Imaging at
10 Stamford Health.

11 And my last name is spelled S-h-i-h.

12 THE HEARING OFFICER: Thank you. And if you could
13 please raise your right hand? I'm going to swear
14 you in right now.

15 D R. A N D R E W S H I H,
16 called as a witness, being first duly sworn by the
17 THE HEARING OFFICER, was examined and testified
18 under oath as follows:

19
20 THE HEARING OFFICER: Thank you. Go ahead and put your
21 hand down. All right. If you would like to go
22 ahead and begin by adopting your pre-file
23 testimony?

24 THE WITNESS (Shih): I hereby adopt my pre-filed
25 testimony.

1 THE HEARING OFFICER: Go ahead with your comments.

2 THE WITNESS (Shih): So good morning, Hearing Officer
3 Novi and members of the OHS hearing committee.
4 I'm a board-certified diagnostic radiologist with
5 fellowship training in musculoskeletal imaging.
6 I'm also a partner with Norwalk Radiology
7 Consultants, a.k.a. NRC -- has been -- and I've
8 been a member of NRC since 2010.

9 In 2021, I joined the staff of Stamford
10 Health. And as I said, I serve as the Clinical
11 Director of Outpatient Imaging. In addition, I
12 serve as the Medical Director at the imaging
13 center in Norwalk, where I'm responsible for
14 patient quality, care and clinical operations.

15 I'm here today to testify in support of the
16 certificate of need for a CT scanner for the joint
17 venture, and my testimony will primarily address
18 how we will provide high quality CT scan services
19 and ensure patient safety, as well as how approval
20 of the CON will result in improved patient choice
21 and health equity in the proposed service area.

22 Some background on NRC is that NRC has
23 been -- a well-established reputation as a
24 provider of high quality imaging services for
25 Norwalk and its surrounding communities. For over

1 40 years, our radiologists have taken care of the
2 patients in the area, and I would note, have
3 accepted all government payers, including Medicaid
4 over that time.

5 Each NRC member is fellowship trained, which
6 means they have undertaken specialized training in
7 specific areas such as neuroradiology, breast
8 imaging, chest imaging, or musculoskeletal
9 imaging. And they bring to the community the
10 expertise and experience that comes with training
11 at preeminent medical institutions, such as Yale,
12 Johns Hopkins, Harvard, Columbia, NYU, Memorial
13 Sloan Kettering, the Hospital for Special Surgery,
14 to name a few.

15 Our trusted radiologists work closely with
16 referring physicians to recommend the most
17 appropriate imaging for each patient's condition
18 to provide expert interpretations to facilitate
19 precise and timely diagnoses. This leads to
20 improved patient outcomes and avoids unnecessary
21 procedures and treatments, reducing healthcare
22 costs.

23 NRC will provide radiology services at the
24 imaging center and staff it with a board-certified
25 radiologist during hours of operation. NRC also

1 provides professional services for imaging
2 performed on Stamford Health patients at its main
3 hospital campus and outpatient location. The
4 center will then adopt the same imaging
5 techniques, protocols, patient safety policies,
6 and accreditation standards already in place at
7 Stamford Health, maintaining a high level of
8 quality and safety across all sites.

9 Furthermore, through the integration of
10 electronic information systems, such as PACS and
11 EMR, patients scanned on the new CT scan will have
12 their images and reports readily accessible to the
13 providers that are most likely to treat them. I
14 think this creates a unique synergy as having the
15 same radiologists provide care to patients in both
16 the outpatient and inpatient settings and having
17 integrated systems, which allow for the seamless
18 flow of medical information or major quality of
19 care benefits and promote coordination and
20 continuity of care.

21 In regards to the CT scan, most of the
22 advantages -- or the advantages of the new GE
23 Revolution Ascend 128-slice CT scanner we are
24 proposing to purchase and introduce are detailed
25 in our CON application. Because the scanner comes

1 with new technology not available in older units,
2 scans will be performed using a lower radiation
3 dose because, among other factors, the dosage will
4 be automatically calibrated to the patient's size
5 and shape. Another benefit of automation is in
6 patient positioning and scanning parameters, which
7 have greater variability when performed manually.

8 Greater standardization between serial scans
9 allows for more accurate comparisons, which is
10 especially critical in clinical applications, such
11 as cancer patients when assessing changes in tumor
12 size is critical. Other quality improvements
13 include a wider bore, or the tunnel in which the
14 patient lies in for the scan, which decreases the
15 sensation of claustrophobia and accommodates
16 larger size patients for bariatric scanning.

17 In transitioning to improving patient choice
18 and access, I'm particularly excited because the
19 joint venture between NRC and Stamford Health is
20 poised to achieve these goals and provide lower
21 cost, high quality CT scan services to the
22 proposed service area. The convenient location
23 and other important attributes will bring in a
24 central diagnostic tool closer to home to these
25 patients.

1 As our CON application points out, advanced
2 imaging services like CT are paramount in
3 addressing the healthcare needs of an aging
4 population as they consistently rank among the top
5 services utilized by this population, and as
6 chronic diseases such as hypertension affect close
7 to 50 percent of those 65 and older in the greater
8 Norwalk area.

9 Furthermore, the CT scanner will be able to
10 perform important and cost-effective screening
11 exams, such as CT coronary artery calcium
12 assessments and low-dose CT lung screenings in
13 order to identify the symptomatic patients who may
14 benefit from early or preventative interventions.

15 In closing, I want to sincerely thank the
16 members of the Office of Health Strategy for
17 considering our request to acquire a new CT
18 scanner for the Norwalk imaging center. I believe
19 we have shown that this new state-of-the-art
20 technology implemented by the unique attributes of
21 the joint venture will provide patients in the
22 proposed service area with more convenient, timely
23 and affordable access to high-quality imaging
24 services within their community and from known and
25 trusted providers of their choosing.

1 The ongoing synergies between Stamford Health
2 and NRC will further improve coordination and
3 continuity of care, improve quality standards and
4 ensure access to services for all individuals.

5 So thank you, and I'm available to answer any
6 other questions should you have any.

7 THE HEARING OFFICER: Great. Thank you very much.

8 MR. COWHERD: Hearing Officer Novi?

9 THE HEARING OFFICER: Yes.

10 MR. COWHERD: Steven Cowherd again and on behalf of the
11 Applicant. At this time, we'd like to object to
12 Exhibit U.

13 THE HEARING OFFICER: Okay.

14 MR. COWHERD: Exhibit U is expert testimony filed as
15 public comment, wholly inappropriate for admission
16 into this proceeding.

17 Further, the sender of that exhibit, Advanced
18 Radiology Consultants requested the public
19 hearing -- had every opportunity to intervene in
20 this proceeding.

21 And I would point to Exhibit P of the record,
22 Ms. Longmore's testimony, as to the inclusion of
23 the Advanced Radiology Consultants CT scanner that
24 they say is not included in this proceeding;
25 Exhibit P, pages 4 and 5.

1 And finally, and very respectfully, we think
2 that the Office of Health Strategy should be
3 guided by its own knowledge of the healthcare
4 delivery system and the guidelines of 19a-639, and
5 not this inappropriate submission by Advanced
6 Radiology with respect to the issues that are
7 relevant to this proceeding.

8 Thank you very much.

9 **THE HEARING OFFICER:** I understand your objection, and
10 what we would like to ask is that you -- we would
11 like to give you the chance to reply in writing.

12 Would you be open to that?

13 **MR. COWHERD:** Certainly.

14 **THE HEARING OFFICER:** Okay. Because they wrote this
15 morning, and we would like to give you time to
16 make any objection that you have in writing and
17 lay out the facts that you feel are irrelevant to
18 your objection so that we can also enter those
19 into the record and use those if needed in our
20 decision.

21 Would you be open to that?

22 **MR. COWHERD:** Yes, happy to do that.

23 **THE HEARING OFFICER:** Okay. So at this point I will
24 ask -- that will be asked as a late file from you.

1 (Late-filed Exhibit Number 1, marked for
2 identification and noted in index.)
3

4 **THE HEARING OFFICER:** And we will go ahead and pick a
5 date for that as we get to the closing for the
6 late file to be due as we get closer to the
7 closing of the hearing.

8 We would like to hear from you in writing and
9 see, as the public comment was done in writing as
10 well.

11 **MR. COWHERD:** Understood.

12 **THE HEARING OFFICER:** All right. So at this point,
13 Attorney Cowherd, do you have any questions for
14 your own applicant -- or for your own witnesses?

15 **MR. COWHERD:** No, not at this time. I would reserve
16 the right to ask followup off of the Office of
17 Health Strategy's questions, but thank you.

18 **THE HEARING OFFICER:** Of course. I'm going to ask,
19 Steve, would you like to take a break? Or --

20 **MR. COWHERD:** Yes. We can take a five-minute break.

21 **THE HEARING OFFICER:** Great. Well, how about we take a
22 ten-minute break?

23 We are going to break now until 9:35, at
24 which time we will come back with OHS questions.

25 I would like to remind everybody that this

1 hearing may still be recording. And if you leave
2 your microphone and your video camera on, you may
3 be visible to the public. So I suggest muting
4 yourself and stopping your video.

5 Thank you, everybody. We'll see you at 9:35.

6
7 (Pause: 9:24 a.m. to 9:35 a.m.)
8

9 **THE HEARING OFFICER:** All right. Welcome back,
10 everybody. It is now 9:35 a.m. As you were just
11 informed by the Zoom chat, this meeting is being
12 recorded and if you do not consent to being
13 recorded, please exit the Zoom hearing at this
14 time.

15 All right. I'm going to go ahead -- and wait
16 for Stamford Health to come back in.

17 All right. Welcome back, Attorney Cowherd.
18 At this point, we're going to go ahead and
19 begin --

20 **MR. COWHERD:** We can hear you, and we're on camera, so.

21 **THE HEARING OFFICER:** Yes. All right. So at this
22 point, we're going to go ahead and begin with
23 OHS's questions. Yadira, Nicole and Steve, do you
24 have any questions for the applicants?

25 **MR. LAZARUS:** Good morning, Attorney Cowherd. We do

1 not have any questions, however we would like to
2 follow up on what you had asked the Applicants to
3 file as Late-Exhibit 1, the response to Exhibit U,
4 the public comment that was submitted by Advanced
5 Radiology Consultants.

6 And we can just ask that they focus their
7 response on anything that's relevant to the
8 application and that's statutorily required.

9 MR. COWHERD: Hearing officer, we had difficulty with
10 Mr. Lazarus. I caught the end, that in our
11 response, the late file to the advanced radiology
12 letter, we would address statutory criteria.

13 We'll certainly do that.

14 I have to confess, we did not hear clearly
15 the beginning of what he said.

16 THE HEARING OFFICER: I understand. There was a little
17 bit of a microphone issue. So what Mr. Lazarus
18 asked was that you, in following up to my request
19 for the written reply to Exhibit U, if you could
20 focus on the statutory criteria of the CON
21 application in your response and what would go
22 towards those criteria.

23 MR. COWHERD: Okay. Noted.

24 THE HEARING OFFICER: Okay. All right. So at this
25 point I would like to ask -- I have one question

1 that I would like to ask. And that is, when will
2 NRSI make their funding determination?

3 **THE WITNESS (Longmore):** So we have --

4 **THE HEARING OFFICER:** Ms. Longmore, if you could just
5 identify yourself as you answer the question.

6 **THE WITNESS (Longmore):** So sorry. Yes, Elizabeth
7 Longmore. I'm the President. We have capital
8 funding that is available to us in order to
9 effectively fund the project and in order to meet
10 the date that we reported in our application.

11 **THE HEARING OFFICER:** Okay.

12 **MR. COWHERD:** Hearing officer Novi, I'd further note
13 just for the record that the letters of credit of
14 both joint venture partners are an exhibit to the
15 application.

16 **THE HEARING OFFICER:** Yes. In the exhibit they did say
17 that NRSI had options that they were considering
18 and that they would make a determination prior to
19 the beginning of construction, which is why I
20 asked the follow-up question.

21 Actually, that was on page 27.

22 So by capital funding, you mean that you've
23 already established your source of funding? Or?

24 **THE WITNESS (Longmore):** Yes, we have available funds
25 in order to be able to initiate the project and to

1 fund the purchasing of the equipment.

2 THE HEARING OFFICER: Okay. Great.

3 That is my only question.

4 I'm going to just go ahead and check back
5 with the analysts again. Any additional follow-up
6 questions? I'm not seeing any.

7 MS. McLAUGHLIN: Yadira McLaughlin, no. No questions.

8 THE HEARING OFFICER: Thank you, Ms. McLaughlin.

9 All right. So at this point, any follow-up
10 questions from my question, Attorney Cowherd?

11 MR. COWHERD: None at this time. I'd like to move to
12 closing remarks, if the Hearing Officer approves?

13 THE HEARING OFFICER: So I would like to hold off on
14 those until -- I mean, you can.

15 We can do closing remarks now, or I tend to
16 hold off until after the public comment portion so
17 that you can comment on that as well.

18 MR. COWHERD: Well, if there's public comment that
19 you'd like to take in -- I see the technical
20 portion on the agenda is at noon, but we can
21 certainly do that.

22 Can the witnesses be excused at this point?

23 THE HEARING OFFICER: So if you have any question -- if
24 you excuse your witnesses now, we won't be able to
25 have them clarify anything that comes out of the

1 public comment.

2 Usually we ask that your witnesses stay so
3 that they can clarify anything that you would like
4 them to clarify once public comment is made.

5 MR. COWHERD: Understood. So just to be clear, are you
6 going to open up this hearing now to public
7 comment? Or are you going to wait until noon to
8 do that?

9 THE HEARING OFFICER: We do have to wait until noon for
10 the public comment.

11 MR. COWHERD: Okay.

12 THE HEARING OFFICER: If there is no public comment, we
13 will immediately roll into closing arguments and
14 whatever you -- and any follow-up questions that
15 you have. If there is, we'll do those first, then
16 closing arguments and -- or questions for your own
17 witnesses and closing arguments.

18 MR. COWHERD: Okay. Understood. I believe both
19 Dr. Shih and Ms. Longmore are available. So we
20 will be here at noon to address any public comment
21 that comes in, as well as deliver closing remarks
22 on this application.

23 THE HEARING OFFICER: Great. Thank you, Attorney
24 Cowherd.

25 I would like to remind anyone that is

1 listening that would like to make a public comment
2 that you can sign up to make a public comment by
3 entering your name into the chat and stating that
4 you would like to make a comment. And then
5 Ms. Fentis will go ahead and collect that
6 information.

7 If you would like to e-mail in or submit
8 written comments, you can do that as well. That
9 will be open for seven days following this
10 hearing, and that can be emailed to
11 CONcomment@ct.gov.

12 Again, that is CONcomment@ct.gov.

13 At this point, I'm going to go ahead. We'll
14 take a break until 12 p.m., which we'll come back
15 for public comment.

16 Attorney Cowherd, thank you and your
17 witnesses for attending this morning, and I will
18 see you at twelve.

19 MR. COWHERD: Thank you, OHS staff.

20 THE HEARING OFFICER: Bye.

21 MR. COWHERD: Bye.

22
23 (Pause: 9:41 a.m. to 12 p.m.)
24

25 THE HEARING OFFICER: Okay. It is now 12 p.m. I am

1 going to go ahead and restart this hearing.

2 This is the hearing for Stamford
3 Health-Norwalk Radiology, LLC, Docket Number
4 23-32650-CON. This is the beginning of the public
5 participation portion for a CON hearing for the
6 certificate of need acquisition of imaging
7 equipment.

8 All right. I see that -- sorry.

9 MR. COWHERD: Steven Cowherd on behalf of the
10 Applicant.

11 THE HEARING OFFICER: All right. Thank you. I was
12 just about to say, I see that you are back with
13 us. Hello, Attorney Cowherd.

14 MR. COWHERD: We are back. And I'd like to, if I may,
15 renew our objection to what Advanced Radiology
16 Consultants --

17 THE HEARING OFFICER: Uh-huh.

18 MR. COWHERD: The letter it provided this morning is
19 clearly prohibited as an informal participant
20 providing expert testimony under the applicable
21 rules of practice.

22 So we would also ask that with respect to the
23 public comment portion of this proceeding, that
24 Advanced Radiology's comments, if they have any or
25 their emissaries offer any, would also be stricken

1 from the record, the final record of this
2 proceeding.

3 Thank you. I just wanted to interject that
4 before you move to the technical portion.

5 **THE HEARING OFFICER:** I'm going to ask again that you
6 do an objection in writing, because we do want to
7 give you a chance to respond in writing to that.
8 And you can also include any information in that
9 reply as well that does work towards the statute
10 in your reply. We will be mindful of that.

11 We'd like to go ahead and just welcome
12 everyone back. Thank you for joining us. We had
13 the technical portion this morning. Signup for
14 public comment has been on Zoom in the comment
15 section.

16 I'm just going to ask Ms. Fentis if we have
17 had anybody who signed up and would like to give
18 public comment.

19 **MS. FENTIS:** There have been no signups.

20 **THE HEARING OFFICER:** All right. At this point I am
21 going to ask if anybody who would like to give a
22 public comment who has not signed up to do so, if
23 you could please, in the chat function, let
24 Ms. Fentis know that you are interested in
25 speaking, and your name?

1 And if your name on Zoom is different from
2 your actual name, you will have to give them both
3 your actual name and your Zoom name so that we
4 have that as well.

5 I'll give that a few seconds.

6 And as I give her a few minutes, I'm just
7 going to read a few pieces of information. I
8 typically allow for comments and commenters to
9 speak for up to three minutes with elected and
10 appointed officials being granted some
11 flexibility.

12 The order of comment will likely be as
13 follows, although some exceptions may be made, and
14 that is; one, elected and appointed officials and
15 representatives will go first; two, the
16 Applicant's clinical professionals and executives
17 will go second; three, clinical professionals and
18 executives; and four, members of the public. And
19 we will call the names of those who have signed up
20 to speak in the order in which they have
21 registered.

22 Again, I would like to strongly encourage
23 anyone who is listening to submit written comments
24 to OHS by e-mail or mail no later than one week --
25 that is seven calendar days from today. That

1 would be February 20th to our e-mail address,
2 CONcomment@ct.gov.

3 Again, that is CONcomment@ct.gov.

4 I ask that you please try to the best of your
5 abilities to limit duplication of comment.

6 All right. Ms. Fentis, have we gotten anyone
7 else?

8 MS. FENTIS: Nobody else has signed up.

9 THE HEARING OFFICER: Okay. So at this time I'm going
10 to go ahead. And since we did not get any public
11 comment, I will go ahead and move onto the ending
12 of the technical portion.

13 Attorney Cowherd, you can -- if you have any
14 follow-up questions for your witnesses? Or would
15 you like to proceed to closing argument?

16 MR. COWHERD: The latter, Hearing Officer Novi.

17 I'm ready to provide closing remarks.

18 THE HEARING OFFICER: Okay. All right. Go ahead.

19 MR. COWHERD: Okay. In these remarks, I would like to
20 highlight for the Office of Health Strategy, some
21 of the important statutory criteria that this
22 application meets.

23 Let's first turn to clear public need. The
24 numbers in this application support clear public
25 need in many, many ways.

1 First, we have Exhibit R, which is the health
2 planning unit's own need analysis, which shows a
3 utilization rate of 26.33 per 1,000 Connecticut
4 residents, and residents of this service area.

5 That analysis, which was prepared by the
6 Office of Health Strategy, shows that the units in
7 the service area would have to operate at 142.8
8 percent of capacity to meet demand. And as we
9 know, that is well in excess of the 85 percent
10 threshold in the statewide health services and
11 facilities plan.

12 Then you have Exhibit P, Ms. Longmore's
13 testimony at page 5, which shows the utilization
14 as between the 2020 health system planning units
15 inventory and 2022 in this service area has
16 actually increased over that time.

17 And at pages 5 and 6, even using that updated
18 facilities and services plan, you know, inventory,
19 you have five units that are still exceeding 85
20 percent of capacity. So on every measure there,
21 you have an excess of the threshold necessary to
22 establish need.

23 Finally, we think the Office of Health
24 Strategy should take into account what Stamford
25 Hospital, through its joint venture, is facing on

1 its own campus and outpatient facilities. They
2 are all -- every unit is operating in excess of
3 the 85 percent threshold and, I would point out,
4 172 percent of capacity with respect to their
5 hospital outpatient department units that are
6 respectively at the Tully Health Center and the
7 Darien Imaging Center.

8 Among other things, as shown in the
9 application, that is forcing more complex studies
10 that require longer times for the processing and
11 the patient to be scanned. That's causing
12 inordinate delays, and in the application you have
13 for CT angiography, right now, a 53-day scheduling
14 lag. We all can do better than that, and this
15 application is meant to achieve that, and does.

16 There are too many delays through the health
17 system, delivery system in this State. This
18 application addresses clear public need for that
19 and will allow patients that are leaving this
20 service area to get scanning to receive it closer
21 to home.

22 Now let's turn to lower costs. Again, the
23 numbers speak for themselves. Page 9 of
24 Ms. Longmore's testimony, the tables at pages 25
25 and 26 of the application show that for commercial

1 scans, the estimated cost will be \$430. That is
2 \$784 lower than the commercial cost for a scan on
3 a hospital outpatient department unit.

4 The proposed unit will also serve patients
5 regardless of ability to pay, as Ms. Longmore
6 emphasized in her testimony, and completely adhere
7 to the hospital's charity care financial
8 assistance policy with regard to the underserved
9 Medicaid uninsured population.

10 Turning to financial feasibility, Exhibit I
11 to the application, the Applicant's financial
12 worksheet shows clearly that this is a financially
13 feasible application. And to the Hearing
14 Officer's question during the Applicant's
15 presentation as to the ability to fund this
16 application, you have Exhibit 1A to the
17 Applicant's completeness questions that shows
18 letters of credit ready for both joint venture
19 participants to move forward with this project.

20 Turning next to the criterion of improved
21 access, as Ms. Longmore again in her testimony
22 states, these services are going to provide
23 greater choice in the service area closer to the
24 home of people who are having to leave the service
25 area for scans, and importantly address health

1 disparities for a patient population that is
2 diverse, and where there are some inequities with
3 respect to access to advanced imaging services
4 that can be fully addressed and are shown as
5 capable of being addressed in the Applicant's
6 submission.

7 With respect finally to high quality, I just
8 turn to Exhibit Q in Dr. Shih's testimony.
9 Norwalk Radiology Consultants has been a mainstay
10 of radiology services in this service area for 40
11 years. They have a bevy of highly trained
12 physicians who are sub-specialists who can adapt
13 this technology to provide the best care for
14 patients, hopefully resulting in early diagnosis,
15 which again drives down the cost of healthcare for
16 especially the underserved population that are
17 going to utilize this unit.

18 The images themselves will be fully
19 integrated into the picture archiving system of
20 Stamford Health, along with the EMR. And so
21 continuity of care as between the outpatient and
22 inpatient settings or elsewhere in the community
23 will be fully supported and insured.

24 Lastly, I will point to all the technical
25 improvements that technology brings that are

1 outlined at page 4 of Dr. Shih's testimony, for
2 the Office of Health Strategy to look at it. So
3 you know, you touch upon clear public need met.
4 With respect to lowering cost of healthcare, this
5 application does so.

6 Does it improve access? Absolutely.

7 Is it financially feasible? The application
8 speaks for itself.

9 And does it provide high quality care? The
10 physicians are ready. The unit is state of the
11 art, and we respectfully ask that the Office of
12 Health Strategy approve this application.

13 Thank you.

14 **THE HEARING OFFICER:** All right. Thank you very much.

15 I'm just going to have -- Steve, would you like to
16 read off the one late file that we asked for just
17 as a last reminder before closing?

18 **MR. LAZARUS:** Yes. (Unintelligible) -- hopefully you
19 can hear me. We are requesting one late file, and
20 that is a response to the Exhibit U; that's a
21 public comment that was submitted by Advanced
22 Radiology Consultants.

23 And do you want to kind of -- Attorney Novi,
24 did you pick a date for that yet?

25 **THE HEARING OFFICER:** Yes, let's have that due on

1 February 20th.

2 Actually, Attorney Cowherd, does February
3 20th work for you, just one week?

4 MR. COWHERD: February 20?

5 THE HEARING OFFICER: Yes.

6 MR. COWHERD: Yes, we can meet that deadline. Yes.

7 THE HEARING OFFICER: Attorney Cowherd, were you able
8 to hear clearly? Because I know we've had a
9 little -- a bit of a sound issue with Mr. Lazarus.

10 Were you able to --

11 MR. COWHERD: It's still a little choppy, but heard him
12 loud and clear, Hearing Officer Novi.

13 THE HEARING OFFICER: All right. Great. I wanted to
14 make sure of that. Okay. All right. So I would
15 like to thank you, Attorney Cowherd, for both
16 Ms. Longmore and Doctor -- is it Shish [phonetic]?

17 THE WITNESS (Shih): She [phonetic].

18 THE HEARING OFFICER: Shih -- for attending today.

19 Thank you very much. I would like to thank
20 everybody who was listening today for attending.
21 It is now 12:15 p.m., and this hearing is
22 adjourned, but the record will remain open until
23 close by OHS.

24 Thank you, everybody, and have a good
25 afternoon.

1 MR. COWHERD: Thank you.

2

3

(End: 12:15 p.m.)

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

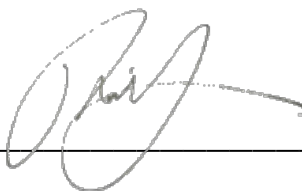
STATE OF CONNECTICUT

I, ROBERT G. DIXON, a Certified Verbatim Reporter within and for the State of Connecticut, do hereby certify that I took the above 39 pages of proceedings in the STATE OF CONNECTICUT, DEPARTMENT OF PUBLIC HEALTH, OFFICE OF HEALTH STRATEGY PUBLIC HEARING, In Re: Docket No. 23-32650-CON, Stamford Health-Norwalk Radiology, LLC, CERTIFICATE OF NEED PROPOSAL TO ACQUIRE A 128-SLICE CT SCANNER AT 148 EAST AVENUE, NORWALK, CONNECTICUT; held before: ALECIA NOVI, ESQ., THE HEARING OFFICER, on February 13, 2024, beginning at 9 a.m. (via teleconference).

I further certify that the within testimony was taken by me stenographically and reduced to typewritten form under my direction by means of computer assisted transcription; and I further certify that said deposition is a true record of the testimony given in these proceedings.

I further certify that I am neither counsel for, related to, nor employed by any of the parties to the action in which this proceeding was taken; and further, that I am not a relative or employee of any attorney or counsel employed by the parties hereto, nor financially or otherwise interested in the outcome of the action.

WITNESS my hand and seal the 28th day of February, 2024.



Robert G. Dixon, N.P., CVR-M No. 857

My Commission Expires 6/30/2025

1 INDEX

2 WITNESSES PAGE

3 Elizabeth Longmore 12

4 Dr. Andrew Shih 14

5

6 CON EXHIBITS

7 LETTER PAGE

8 A SH_NRC JV CON.pdf 9

9 B SH-NRC Worksheet B.xlsx 9

10 C DN 23-32650 Completeness Letter.pdf 9

11 D Completeness letter Responses 9

12 E Review-Application Deemed Complete.pdf 9

13 F Request for Public Hearing.pdf 9

14 G Notice of Hearing.pdf 9

15 H Order for Pre-Filed Testimony.pdf 9

16 I Newspaper Notice.pdf 9

17 J Motion to Extend Filing Date of Applicant 9

18 K Notice of Appearance for Public Hearing 9

19 L Amended Notice of Hearing.pdf 9

20 M Amended Order for Pre-Filed Testimony.pdf 9

21 N Amended Newspaper Notice.pdf 9

22 O Newspaper Publication.pdf 9

23 P E. Longmore Pre-file Testimony 9

24 Q Dr. A. Shih - Pre-file Testimony 9

25 R CT Need Analysis 9

S Hearing Agenda 9

T Pre-Hearing Table of Record.pdf 9

U Pubic comment 9

Exhibits available on CON portal.

20 LATE-FILED EXHIBITS

21 NUMBER PAGE

22 1 Applicant Response to Exhibit U 22

23

24

25