



Office of Health Care Access
Modification of Previously
Authorized Certificate of Need
Final Decision

Petitioner for Modification	State of Connecticut, Department of Public Health
Modification Docket Number:	07-30398-MDF
Modification Project Title:	A modification of a previous Certificate of Need to revise the wording of Conditions #3 and #4 and allow until December 31, 2008 for required document filings.
Original Project Docket Number and Title	Docket Number 04-30398-CON: The establishment of a 100 bed mobile hospital at a total capital expenditure of \$8,500,000
Statutory Reference:	Section 4-181a(b), Connecticut General Statutes
Filing Date:	December 18, 2007
Decision Date:	December 21, 2007
Staff	Karen Roberts

Project Description: The State of Connecticut Department of Public Health ("Applicant") proposes a modification of the Certificate of Need ("CON") authorization under Docket Number 04-30398-CON in order to revise the wording of Conditions #3 and #4 and allow until December 31, 2008 for required document filings.

Findings of Fact

1. On May 5, 2005, under Docket Number 04-30398-CON, the Office of Health Care Access (“OHCA”) granted a Certificate of Need (“CON”) pursuant to Sections 19a-638 and 19a-639 of the Connecticut General Statutes to the State of Connecticut, Department of Public Health (“Applicant”) to establish a 100 bed mobile field hospital (“MFH”) at a total capital expenditure of \$8,500,000. Conditions #3 and #4 of the CON Order state the following:

“3. The Applicant must submit copies of the executed MOUs¹ with all the acute care hospitals in Connecticut by December 31, 2007.”

“4. The Applicant must a copy² of its designation/licensure with OHCA by December 31, 2007.”

(Source: CON decision under Docket Number 04-30398-CON)

- 2) On December 18, 2007, OHCA received a letter from the Applicant requesting that OHCA extend the timeframe set forth in CON conditions #3 and #4 and allow until December 31, 2008 to comply with the above cited documentation submissions³.
- 3) The Applicant provides the following statements to support its request for time extension for compliance with Condition #3:
 - a) The Applicant is actively promoting awareness of the MFH and its potential use by Connecticut’s acute care facilities through participation in regional meeting and local health and hospital “open house” events.
 - b) Hospital staff and the general public have been given the opportunity to tour a component of the facility with the Applicant and the Connecticut Disaster Medical Assistance Team (“DMAT”) personnel available to answer questions and to recruit for medical and support volunteers for the DMAT and the Emergency Credentialing Program.
 - c) Currently, the Applicant is in the process of visiting each acute care hospital and conducting a site assessment to pre-identify a site on each hospital campus for set-up in the event the MFH is deployed to that facility.
 - d) The five Department of Emergency Management and Homeland Security (“DEMHS”) area coordinators have also been notified of the site visits and are participating in site selections other than those at the acute care hospitals.
 - e) During the site assessments, the Applicant has been identifying the issues that would need to be addressed in the hospital-level agreements and the Applicant has begun to draft a template.
 - f) The information and recommendations gathered from hospital and local emergency personnel will support sound agreements that align with current hospital operations, such

¹ Memorandums of Understanding

² Sic

³ The Applicant’s letter was written in July 2007 and the information provided in the letter is now four months old. Although the Applicant wrote and dated the letter in July 2007, OHCA has no evidence of receipt at this agency and therefore considers the information to be filed as of December 18, 2007.

as billing and staffing, as well as addressing the myriad additional considerations of operating from the austere environment of a mobile field hospital.

- g) As of July, 2007, 21 of the 31 site assessments have been completed, one hospital has declined the site assessment due to lack of adequate space on campus for set-up and two “off-site” locations have been identified in two of the DEMHS regions.
- h) The Applicant indicates that it is its intent to identify two or three additional sites in each DEMHS region by December 31, 2007.

(Source: Pages 2-3 of the Applicant's December 18, 2007 modification request)

- 4) The Applicant provides the following statements to support its request for time extension for compliance with Condition #4:

- a) A Department of Public Health workgroup has been drafting regulations that would provide the licensing framework for MFH operations.
- b) The Governor's request for federal designation as a Critical Access Hospital was not granted; however, the Applicant was encouraged by federal authorities to explore opportunities to align the MFH with one or more acute care hospitals.
- c) In view of the above, the Applicant has determined that it was most appropriate to propose in regulations a licensing framework, which would be based upon operation of the MFH under the administrative auspices and licensure authority of the acute care hospital, which it is deployed to support.
- d) At the time of the drafting of the modification request in July 2007, the Applicant was drafting proposed regulations and planning to submit them to the Office of the Attorney General for legal review.

(Source: Page 3 of the Applicant's December 18, 2007 modification request)

- 5) The Applicant states the following in its request for a filing time extension regarding the accomplishments toward full project implementation, to date:

- a) The Applicant acquired the mobile hospital structure and the durable medical equipment and supplies needed to operate the facility in an emergency, until such time as additional material could be obtained through the Strategic National Stockpile.
- b) The facility was dedicated as the Otilie W. Lundgren Memorial Mobile Field Hospital in a formal ceremony on the State Capitol grounds on April 5, 2006.
- c) The Board of Directors has been constituted, has adopted its by-laws and is meeting quarterly.
- d) A process for request and authorization for use of components of the MFH has been developed.
- e) Local emergency planners, as well as key partners such as the Disaster Medical Assistant Team, the Connecticut Military Department and Medical Reserve Corps are regularly utilizing components of the MFH for drills and exercises, large and small.
- f) Portions of the MFH have been used to support operations of the Department of Public Safety. Activities such as these are ongoing and help to establish and maintain readiness to deploy in an actual public health emergency.

(Source: Page 1 of the Applicant's December 18, 2007 request for modification)

Discussion

OHCA has reviewed this request for a modification to a previously authorized CON and finds that the relationship of the CON authorized under Docket Number 04-30398-CON to Section 19a-637, C.G.S., is not altered by this request for a modification under Docket Number 07-30398-MDF. The Applicant has proceeded with project implementation in a timely manner and the request to extend the filing deadline for the documentation required by Conditions #3 and #4 appears reasonable. The additional time needed to comply with Conditions #3 and #4 will not result in a change to project scope or to the authorized capital expenditure.

Order

Based on the above discussion and the reasons provided in the Applicant's modification request, OHCA hereby grants the request and modifies the CON authorized under Docket Number 04-30398-CON. Conditions #3 and #4 of the CON Order are modified as follows:

3. The Applicant must submit copies of the executed MOUs with the acute care hospitals in Connecticut by December 31, 2008.
4. The Applicant must a copy of its designation/licensure with OHCA by December 31, 2008.

All other conditions set forth in the CON authorization issued under Docket Number 04-30398-CON, not further modified herein, will remain in full effect.

By Order of the
Office of Health Care Access

Signed by Commissioner Vogel on December 21, 2007

Date

Cristine A. Vogel
Commissioner

CAV/kr