



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

September 30, 2010

VIA FACSIMILE ONLY

Christine Sherwood
Community Health & Wellness Center of Greater Torrington
469 Migeon Avenue
Torrington, CT 06790

Re: Certificate of Need Exemption Report Number: 10-31660-EXM
Community Health & Wellness Center of Greater Torrington
Proposal to add Dental Care Services in Torrington

Dear Ms. Sherwood:

On August 19, 2010, the Office of Health Care Access ("OHCA") received your application for exemption from the Certificate of Need ("CON") process to add dental care services at Community Health & Wellness Center of Greater Torrington ("CHWCGT") located at 469 Migeon Avenue, Torrington, Connecticut, with an associated capital cost of \$683,241.

CHWCGT provided the following information with respect to this request:

1. CHWCGT is a private, non-profit, Federally Qualified Health Center ("FQHC") located at 469 Migeon Avenue, Torrington, Connecticut.
2. CHWCGT proposes to expand its existing primary care clinic to include dental care services at the above location.
3. CHWCGT currently serves over 4100 unduplicated patients and have provided over 23, 000 units of service in the past 18 months.
4. The proposed capital expenditure associated with this proposal is \$683,241.

Based on the above findings, OHCA determines that the proposal of Community Health & Wellness Center of Greater Torrington to add dental care services at 469 Migeon Avenue, Torrington, Connecticut meets the requirements of Section 19a-639(d) of the Connecticut General Statutes, and, therefore, is exempt from OHCA's Certificate of Need process.

Thank you for advising OHCA of your plans. If you have any questions concerning this letter, please contact Paolo Fiducia, Associate Health Care Analyst at (860) 418-7001.

Sincerely,

A handwritten signature in black ink, appearing to read "Norma D. Gyle". The signature is fluid and cursive, with a large, stylized initial "N" and "G".

Norma D. Gyle, R.N., Ph.D.
OHCA Deputy Commissioner

Cc: Rose McLellan, DPH

NDG:pf

*** TX REPORT ***

TRANSMISSION OK

TX/RX NO 2060
RECIPIENT ADDRESS 918604823067
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STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
OFFICE OF HEALTH CARE ACCESS

FAX SHEET

TO: CHRISTINE SHERWOOD

FAX: 860 482 3067

AGENCY: COMMUNITY HEALTH + WELLNESS CENTER OF GREATER TORRINGTON

FROM: PAOLO FIDUCIA

DATE: 9/30/10 TIME: 115pm

NUMBER OF PAGES: 3
(including transmittal sheet)



Comments:
10-31660-EXM

PLEASE PHONE IF THERE ARE ANY TRANSMISSION PROBLEMS.