

From: [Greer, Leslie](#) on behalf of [Grouppracticefilings, OHCA](#)
To: [Foster, Tillman](#); [Roberts, Karen](#)
Subject: Copy of group_medical_practice_report_pa_14_168 (2).xlsm
Date: Thursday, December 22, 2016 3:04:47 PM
Attachments: [Copy of group_medical_practice_report_pa_14_168 \(2\).xlsm](#)

From: Friia, Carol [mailto:Carol.Friia@adrad.com]
Sent: Monday, December 19, 2016 3:36 PM
To: Grouppracticefilings, OHCA
Cc: Friia, Carol
Subject: Copy of group_medical_practice_report_pa_14_168 (2).xlsm

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 Attorney General and with the DPH Office of Health Care Access ("OHCA") no later than December 31, 2014 and annually thereafter.

This file includes the spreadsheets needed to fulfill 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 ----->	December 15, 2016
Full Legal Name of Entity Reporting ----->	Bridgeport Radiological Associates LLC
Type of Provider Reporting (see options below) -----> (Hospital, Hospital System, Group Practice)	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	Is the Group Practice reported owned or affiliated by the Hospital or Hospital System?
1	Bridgeport Radiological Associates LLC	N/A	N/A
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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
- 3 Under the heading "Before Sheet,:" click on "Business Entity"
- 4 Click inside the "create a copy" box
- 5 Click "OK"

Name of Group Practice ----->	
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(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	Cohen, Steven	Diagnostic radiology
2	DiBartholomeo, Thomas	Interventional radiology
3	Even, Michele	Diagnostic radiology
4	Fan, Jennifer	Diagnostic radiology
5	Federman, Adam	Interventional radiology, Diagnostic radiology
6	Goodstine, Shelly	Diagnostic radiology
7	Harkins, Kelly	Diagnostic radiology
8	Hughes, Terence	Interventional radiology
9	Karol, Ian	Diagnostic radiology
10	Kaye, Adam	Diagnostic radiology
11	Kaye, Alan	Diagnostic radiology
12	Kier, Ruben	Diagnostic radiology
13	Lo, Lawrence	Diagnostic radiology
14	Kumar, Yogesh	Diagnostic radiology
15	Marrinan, Greg	Diagnostic radiology
16	Mele, Frank	Diagnostic radiology
17	Muro, Gerard	Diagnostic radiology
18	Olsasvky, Thomas	Diagnostic radiology
19	Pittaro, Denise	Diagnostic radiology
20	Reeser, Pamela	Diagnostic radiology
21	Rosovsky, Mark	Diagnostic radiology
22	Sapire, Joshua	Diagnostic radiology
23	Schwartz, Dana	Diagnostic radiology
24	Sheikh, Kiran	Diagnostic radiology
25	Smith, Scott	Diagnostic radiology
26	Soldano, Lucille	Diagnostic radiology
27	Steenbergen, Peter	Diagnostic radiology
28	Stein, Stephen	Diagnostic radiology
29	Velasco, Noel	Diagnostic radiology, Interventional radiology
30	Williams, Scott	Diagnostic radiology
31	Yagan, Nada	Diagnostic radiology
32	Zinn, Kenneth	Interventional radiology
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- 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)
Line	Name and address of Group Practice	Location	Primary Service Area as defined in Section 1(11) of PA 14-168	Name and address of each Business Entity that provides 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	Bridgeport Radiological Associates LLC, 3 Enterprise Drive Shelton, Suite 220, CT 06484	1315 Washington Boulevard, Stamford, CT 06902	06902,06905,06903,06820,06906,06907,06840,06901,06854,06851,06830,06850,06897,06880	Advanced Radiology Consultants LLC, 3 Enterprise Drive Shelton, Suite 220, CT 06484	Diagnostic radiology, Interventional radiology
2	Bridgeport Radiological Associates LLC, 3 Enterprise Drive Shelton, Suite 220, CT 06484	1315 Washington Boulevard, Stamford, CT 06902	06902,06905,06903,06820,06906,06907,06840,06901,06854,06851,06830,06850,06897,06880	Advanced Radiology MRI Centers LTD Parntership, 3 Enterprise Drive Shelton, Suite 220, CT 06484	Diagnostic radiology
3	Bridgeport Radiological Associates LLC, 3 Enterprise Drive Shelton, Suite 220, CT 06484	15 Corpiorate Drive, Trumbull, CT 06611	06468, 06484, 06606, 06611, 06614, 06824, 06825, 06604, 06460, 06610, 06612, 06615	Advanced Radiology Consultants LLC, 3 Enterprise Drive Shelton, Suite 220, CT 06484	Diagnostic radiology, Nuclear medicine
4	Bridgeport Radiological Associates LLC, 3 Enterprise Drive Shelton, Suite 220, CT 06484	15 Corpiorate Drive, Trumbull, CT 06611	06468, 06484, 06606, 06611, 06614, 06824, 06825, 06604, 06460, 06610, 06612, 06615	Advanced Radiology MRI Centers LTD Parntership, 3 Enterprise Drive Shelton, Suite 220, CT 06484	Diagnostic radiology
5	Bridgeport Radiological Associates LLC, 3 Enterprise Drive Shelton, Suite 220, CT 06484	1055 Post Road, Fairfield, CT 06824	06824,06825,06880,06606,06605,06604,06611,06890,06612	Advanced Radiology Consultants LLC, 3 Enterprise Drive Shelton, Suite 220, CT 06484	Diagnostic radiology
6	Bridgeport Radiological Associates LLC, 3 Enterprise Drive Shelton, Suite 220, CT 06484	1055 Post Road, Fairfield, CT 06824	06824,06825,06880,06606,06605,06604,06611,06890,06612	Advanced Radiology MRI Centers LTD Parntership, 3 Enterprise Drive Shelton, Suite 220, CT 06484	Diagnostic radiology
7	Bridgeport Radiological Associates LLC, 3 Enterprise Drive Shelton, Suite 220, CT 06484	297 Boston Post Road, Orange, CT 06477	06460,06516,06477,06461,06484,06614,06611,06401,06525,06418,06512,06468,06606,06483,06513,06511,06615	Advanced Radiology Consultants LLC, 3 Enterprise Drive Shelton, Suite 220, CT 06484	Diagnostic radiology
8	Bridgeport Radiological Associates LLC, 3 Enterprise Drive Shelton, Suite 220, CT 06484	297 Boston Post Road, Orange, CT 06477	06460,06516,06477,06461,06484,06614,06611,06401,06525,06418,06512,06468,06606,06483,06513,06511,06615	Advanced Radiology MRI Centers LTD Parntership, 3 Enterprise Drive Shelton, Suite 220, CT 06484	Diagnostic radiology
9	Bridgeport Radiological Associates LLC, 3 Enterprise Drive Shelton, Suite 220, CT 06484	4 Corporate Drive, Suite 182 Shelton, CT 06484	06484,06483,06401,06611,06614,06418,06468,06478,06606,06770	Advanced Radiology Consultants LLC, 3 Enterprise Drive Shelton, Suite 220, CT 06484	Diagnostic radiology
10	Bridgeport Radiological Associates LLC, 3 Enterprise Drive Shelton, Suite 220, CT 06484	4 Corporate Drive, Suite 182 Shelton, CT 06484	06484,06483,06401,06611,06614,06418,06468,06478,06606,06770	Advanced Radiology MRI Centers LTD Parntership, 3 Enterprise Drive Shelton, Suite 220, CT 06484	Diagnostic radiology
11	Bridgeport Radiological Associates LLC, 3 Enterprise Drive Shelton, Suite 220, CT 06484	2876 Main Street, Stratford, CT 06614	06614,06615,06610,06606,06460,06484,06604,06611,06608	Advanced Radiology Consultants LLC, 3 Enterprise Drive Shelton, Suite 220, CT 06484	Diagnostic radiology, Interventional radiology
12	Bridgeport Radiological Associates LLC, 3 Enterprise Drive Shelton, Suite 220, CT 06484	2876 Main Street, Stratford, CT 06614	06614,06615,06610,06606,06460,06484,06604,06611,06608	Advanced Radiology MRI Centers LTD Parntership, 3 Enterprise Drive Shelton, Suite 220, CT 06484	Diagnostic radiology
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