



**STATE OF CONNECTICUT**  
OFFICE OF HEALTH CARE ACCESS

M. JODI RELL  
GOVERNOR

CRISTINE A. VOGEL  
COMMISSIONER

November 7, 2006

Theresa Nicholson  
Assistant Vice President  
Behavioral Health Services  
Community Renewal Team, Inc.  
555 Windsor Avenue  
Hartford, CT 06120

RE: Certificate of Need Determination; Report Number 06-30855-EXM  
Community Renewal Team, Inc.  
CON Exemption Pursuant to Section 19a-639b, C.G.S.  
Establish a Psychiatric Outpatient Treatment Program for Adults at 25 Main Street,  
Hartford

Dear Ms. Nicholson:

The Office of Health Care Access ("OHCA") is in receipt of your request for exemption from the Certificate of Need ("CON") process, pursuant to Section 19a-639b of the Connecticut General Statutes ("C.G.S."), to establish a psychiatric outpatient treatment program for adults at 25 Main Street, Hartford.

Upon review of the information contained in the request, OHCA finds the following:

1. Community Renewal Team ("CRT") is a non-profit facility providing adult outpatient psychiatric and substance abuse treatment at 675 Tower Avenue, Hartford, Connecticut.
2. CRT is proposing to establish a psychiatric outpatient treatment program for adults at 25 Main Street, Hartford.
3. The Department of Mental Health and Addiction Services ("DMHAS"), in a letter dated October 26, 2006, from Deputy Commissioner Peter B. Rockholz, M.S.S.W., recommends an exemption under CGS Section 19a-639b for Community Renewal Team, Inc. to provide outpatient psychiatric services for adults at 25 Main Street in Hartford.

4. DMHAS states that CRT plans to serve 100 clients with co-occurring disorders and 50 with only mental illness.
5. The total capital expenditure associated with the proposal is \$0.

Based on the above findings, OHCA has determined that Community Renewal Team, Inc.'s request to establish a psychiatric outpatient treatment program for adults at 25 Main Street, Hartford meets the exemption requirements of Section 19a-639b of the Connecticut General Statutes and, therefore, is exempt from OHCA's CON process. Termination of these services would require CON approval, pursuant to Section 19a-638, C.G.S.

Thank you for providing information to OHCA regarding this proposal. If you have any questions concerning this letter, please contact Paolo Fiducia, Associate Health Care Analyst, Certification, Financial Analysis and Forecasting, at (860) 418-7001.

Sincerely,

Signed by Cristine A. Vogel  
Commissioner

C: Peter B. Rockholz, M.S.S.W., Deputy Commissioner, DMHAS  
Sandra Bauer, Health Processing Technician, DPH, DCBR  
Al Bidorini, Director, OPAS, DMHAS  
Donna C. Stimpson, Planning Specialist, DMHAS

CAV:pf