



M. JODI RELL  
GOVERNOR

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

CRISTINE A. VOGEL  
COMMISSIONER

September 22, 2009

Jody Bishop-Pullan  
Case Manager/Administrator  
City of Stamford  
Department of Health and Social Services  
888 Washington Blvd  
Stamford, CT 06904

VIA FACSIMILE ONLY

RE: Certificate of Need Determination under Report Number 09-31438-DTR  
Relocation of the School Dental Clinic within Stamford

Dear Ms. Bishop-Pullan:

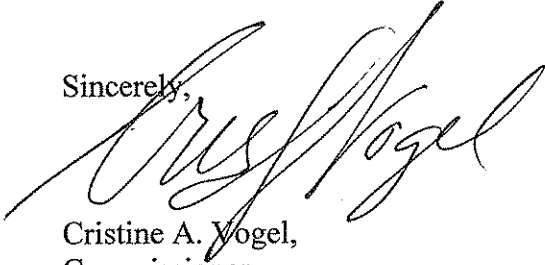
On August 19, 2009, the Office of Health Care Access ("OHCA") received your letter regarding the relocation of the School Dental Clinic from the Rogers Magnet School, 83 Lockwood Avenue in Stamford to the Rogers International School 2 Blachley Road in Stamford, Connecticut. OHCA has reviewed this matter and makes the following findings:

1. City of Stamford Department of Health and Social Services is a non-profit facility located in Stamford, Connecticut.
2. City of Stamford Department of Health and Social Services proposes to relocate the School Dental Clinic from the Rogers Magnet School, 83 Lockwood Avenue in Stamford to the Rogers International School 2 Blachley Road in Stamford, Connecticut.
3. The Rogers International School Dental Clinic will provide preventive dental services- prophylaxis, fluoride treatments, x-rays and sealants to students attending the school.
4. The capital expenditure associated with this proposal is \$14,300.

Based upon the above findings, OHCA determines that City of Stamford Department of Health and Social Services' proposal to relocate the School Dental Clinic from the Rogers Magnet School, 83 Lockwood Avenue in Stamford to the Rogers International School 2 Blachley Road in Stamford, Connecticut will not result in a change in the type of services provided or in the termination an existing function or service. Additionally, the capital expenditure associated with this proposal is \$14,300. Therefore, a CON is not required pursuant to General Statutes §§ 19a-638 and 19a-639.

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 "Cristine Vogel", written over the word "Sincerely,".

Cristine A. Vogel,  
Commissioner

Copy: Rose McLellan, License and Applications Supervisor, DPH