



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

September 24, 2013

VIA E-MAIL ONLY

Nancy Rosenthal
Senior Vice President Health Systems Development
Yale-New Haven Hospital
20 York Street
New Haven, CT 06510

RE: Certificate of Need Determination Report Number 13-31854-DTR
Yale-New Haven Hospital
Termination of Project ElderCare (Elder Care Clinics) by Yale-New Haven Hospital

Dear Ms. Rosenthal:

On August 5, 2013, the Office of Health Care Access ("OHCA") received your notification of the termination of Project ElderCare (Elder Care Clinics) on behalf Yale-New Haven Hospital ("Hospital"). Project ElderCare offers primary care services to elderly residents of New Haven, East Haven, West Haven and Hamden. These services are provided at several easy-to-access community locations, including senior centers and elderly housing complexes. The current location of these Elder Care clinics is as follows: Atwater Clinic, 26 Atwater Street, Tower One, 18 Tower Lane, Casa Otonal, 135 Sylvan Avenue, and Edith Johnson Tower, 114 Bristol Street (all in the City of New Haven).

The four Elder Care Clinics are currently operated by the Hospital and the clinical services are provided by Northeast Medical Group, Inc. ("Practice"). The Practice is a medical foundation established under chapter 594b of the Connecticut General Statutes. The Hospital and the Practice share the same corporate parent, Yale-New Haven Health Services Corporation.

The Hospital is proposing to transfer the operational control of the four Elder Care Clinics to the Practice. This proposal will remove the Elder Care Clinics from the Hospital's Department of Public Health license. The Elder Care Clinics' sites will be operated as primary care physician offices operated by the Practice.

The cessation of operation of the Elder Care Clinics by the Hospital is a termination of inpatient or outpatient services offered by a hospital, as referenced in Connecticut General Statutes § 19a-638(a)(4). Based upon the foregoing, OHCA concludes that a CON is required.

Please feel free to contact Steven W. Lazarus, Associate Health Care Analyst at (860) 418-7012, if you have any questions.

Sincerely,

A handwritten signature in black ink, appearing to read "Kimberly R. Martone".

Kimberly R. Martone
Director of Operations

An Equal Opportunity Provider

(If you require aid/accommodation to participate fully and fairly, contact us either by phone, fax or email)

410 Capitol Ave., MS#13HCA, P.O.Box 340308, Hartford, CT 06134-0308
Telephone: (860) 418-7001 Fax: (860) 418-7053 Email: OHCA@ct.gov

*** TX REPORT ***

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DEPARTMENT OF PUBLIC HEALTH
OFFICE OF HEALTH CARE ACCESS

FAX SHEET

TO: Nancy Rosenthal ✓
FAX: (203) 363-4736
AGENCY: _____
FROM: Steven Lazarus
DATE: 9/24/13 TIME: 4:05 pm
NUMBER OF PAGES: 2
(including transmittal sheet)

Comments: Con Determination 13-31854 Enclosed.

PLEASE PHONE IF THERE ARE ANY TRANSMISSION PROBLEMS.