

STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

Office of Health Care Access

December 3, 2014

VIA FACSIMILE ONLY

Scott Gretz
Executive Director
The World Health Clinicians, Inc.
d/b/a CIRCLE CARE Center
618 West Avenue
Norwalk, CT 06850

RE:

Revised Certificate of Need Determination Report Number 14-31931-DTR

Establishment of Health Care Facility

Dear Mr. Gretz:

On August 12, 2014, the Office of Health Care Access ("OHCA") received your Certificate of Need ("CON") Determination Form on behalf of The World Health Clinicians, Inc. d/b/a CIRCLE CARE Center ("Petitioner") with respect to the establishment of an outpatient clinic. On August 26, 2014 OHCA issued a Determination Report under Docket No. 14-31931-DTR finding that no CON was required for the Petitioner's proposal. The purpose of this letter is to revise the original Determination issued by OHCA in order to reflect that the Petitioner will also provide mental health and substance abuse outpatient treatment services. Therefore, OHCA hereby finds as follows:

The Petitioner is a not for profit corporation that provides primary care services for patients with HIV and other sexually transmitted diseases, as well as testing and counseling services. In addition, the Petitioner also provides mental health and substance abuse outpatient treatment services. The Petitioner is currently in the process of obtaining its Outpatient Clinic/Primary care license from the State of Connecticut Department of Public Health. The Petitioner seeks to continue providing its services as a not for profit outpatient clinic upon receipt of its license.

Connecticut General Statutes §19a-638(b)(12) provides an exemption from the CON requirement for "School-based health centers, community health centers, as defined in section 19a-490a, not-for-profit outpatient clinics licensed in accordance with the provisions of chapter 368v and federally qualified health centers." Upon receipt of its license, the Petitioner will be a not-for-profit outpatient clinic subject to this exception. Therefore, OHCA hereby determines that a *CON is not required* for the Petitioner's proposal.

Sincerely,

Kimberly R. Martone Director of Operations

KinMons

C: Rose McLellan, License and Applications Supervisor, DPH, DHSR.

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(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

* * COMMUNICATION RESULT REPORT (DEC. 3.2014 2:50PM) * * *

FAX HEADER:

TRANSMITTED/STORED : DEC. 3. 2014 2:49PM FILE MODE OPTION ADDRESS RESULT PAGE

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E-2) BUSY E-4) NO FACSIMILE CONNECTION



STATE OF CONNECTICUT DEPARTMENT OF PUBLIC HEALTH OFFICE OF HEALTH CARE ACCESS

FAX SHEET

TO:	SCOTT GRETZ
FAX:	203 854-0371
AGENCY:	THE WORLD HEALTH CLINICIANS, INC.
FROM:	OHCA
DATE:	12/3/14 Time:
NUMBER O	PAGES: (including transmittal sheet
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Comments:	Please see attached determination report number 14-31931-DTR

PLEASE PHONE Barbara K. Olejarz IF THERE ARE ANY TRANSMISSION PROBLEMS.

Phone: (860) 418-7001

Fax: (860) 418-7053

410 Capitol Ave., MS#13HCA P.O.Box 340308 Hartford, CT 06134