

Supplemental CON Application Form
Transfer of Ownership of a Group Practice
Conn. Gen. Stat. § 19a-638(a)(3), as amended by Public Act 18-91

Applicant:

Project Name:

Affidavit

Applicant: _____

Project Title: _____

I, _____, _____
(Name) (Position – CEO or CFO)

of _____ being duly sworn, depose and state that the (Facility Name) said facility complies with the appropriate and applicable criteria as set forth in the Sections 19a-630, 19a-637, 19a-638, 19a-639, 19a-486, as amended by Public Act 18-91 and/or 4-181 of the Connecticut General Statutes, and that all facts contained in this Certificate of Need application are true and correct to the best of my knowledge.

Signature

Date

Subscribed and sworn to before me on _____

Notary Public/Commissioner of Superior Court

My commission expires: _____

1. Project Description: Transfer of Ownership of a Group Practice

- a. Is the proposed transfer the result of a request for proposal or other similar voluntary offer for sale? Please explain in detail and provide dates and documentation.
- b. Explain how each applicant determined the need for the proposal to occur and discuss the benefits of this proposal to the public (discuss each separately).
- c. Describe the transition plan and how the Applicants will ensure continuity of services to the patient population. Provide a copy of any transition plan, if available.
- d. For each Applicant (and any new entities to be created as a result of the proposal), provide the following information as it would appear **prior** and **subsequent** to approval of this proposal:
 - i. Legal chart of corporate or entity structure including all affiliates; and
 - ii. List of owners and the % ownership and shares of each.
- e. Does this proposal avoid the corporate practice of medicine? Explain in detail.
- f. Has the Applicant notified the Attorney General's office in writing of the proposed "material change," as defined Conn. Gen Stat. § 19a-486i(c)?

2. Financial Information

- a. Describe the financial impact of the proposal for each applicant and indicate how the ownership change will affect patient costs.

3. Clear Public Need

- a. Is the proposal being submitted due to provisions of the Federal Sherman Antitrust Act and Conn. Gen Stat. §35-24 et seq. statutes (i.e., unlawful restraint or monopolization of commerce or trade)? Explain in detail.
- b. Is the proposal being submitted due to provisions of the Patient Protection and Affordable Care Act (PPACA)? Explain in detail.
- c. Excluding Certificate of Need state statute, is the proposal being submitted as a result of any specific state or federal laws? Explain in detail.