PROPOSED QUESTIONS FOR THE APPLICANT

Pursuant to Certificate of Need Rule 4.406, the Office of the Health Care Advocate submits the following Proposed Questions for the Applicant to the Green Mountain Care Board in the above-captioned Certificate of Need application review.

1. Please clarify whether you intend to pursue Joint Commission accreditation, accreditation from the Accreditation Association for Ambulatory Health Care, or both. If you do not intend to pursue both, please explain your reasons why.

2. Your application relies heavily on a single peer-reviewed citation for its claims regarding cost, quality, and patient experience at Ambulatory Surgery Centers (ASCs): Elizabeth L. Munnich & Stephen T. Parente, Procedures Take less Time at Ambulatory Surgery Centers, Keeping Costs Down and Ability to Meet Demand Up, 33(5) HEALTH Aff. 764, 765 (May, 2014). Please provide additional published, peer-reviewed literature to support your claims in these three areas.

3. The published literature on ASCs raises the following concerns about physician-owned ASCs:
   a. Over-referral for procedures by physicians with an ownership stake in the ASC.¹
   b. Referral of profitable patients (e.g., commercially insured) to the ASC and less profitable patients (e.g., Medicaid, uninsured) to hospitals.²

Please address these concerns including an explanation of how the GMSC will monitor these issues and ensure that these patterns do not emerge.

4. Please describe any input and recommendations you received from patients to ensure that the project will accommodate patients’ needs and provide copies of any written input.

² Gabel et al., Where Do I Send Thee? Does Physician-Ownership Affect Referral Patterns To Ambulatory Surgery Centers? Health Affairs, 27, no.3 (2008):w165-w174
5. Please provide further detail about how the GMSC will make its prices available to the public. You state in Exhibit 2.a that your charity care policy will be posted on your website. Will all prices and policies related to payment be posted visibly on the GMSC website? If not, how will they be made available to potential patients?

6. CON STANDARD 3.16 states that “An Applicant proposing to establish an ambulatory surgical center shall demonstrate how the applicant will provide access to all residents of each community within the identified service area without regard to individuals’ payer type, insurance status or ability to pay for necessary services.” In your statement regarding consistency with this standard on page 54 of the application, you state that “The proposed Center is committed to providing free and discounted care to needy patients at a level that is on par with Vermont non-profit hospitals.”

The Affordable Care Act added new standards for nonprofit hospitals’ billing practices including guidelines for financial assistance, billing, charges, and collections. The Internal Revenue Service and the Treasury Department issued final regulations in December 2014, which hospitals must comply with by January 2016. Please state whether or not you plan to adhere to these standards. If you do, please provide additional detail on how you plan to implement them. If not, please explain which provisions you do not plan to implement and your reasons why.

7. Will patients have the opportunity to apply for free or discounted care prior to receiving care at the GMSC? If yes, please provide additional detail about the process for doing so.

8. CON STANDARD 1.10 states that “Applicants proposing new health care projects requiring construction… shall show that Efficiency Vermont, or an organization with similar expertise, has been consulted on the proposal.”

Please provide more detail about your energy efficiency plans for this project, including the level of LEED certification you intend to obtain and your expected costs and returns for investment in efficiency measures.

9. Please provide a detailed explanation of the GMSC’s credentialing process, referenced on page 71 of the application.

10. Please provide detailed information about the payer mix for each physician who plans to operate at the GMSC. Specifically, please note whether the physician continuously accepts new Medicaid patients, has a cap or quota on the number of

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Medicaid patients allowed in his or her practice at a given time, or does not see any Medicaid patients.

11. Please describe the discussions you have had to date with UVM Medical Center regarding a transfer agreement.

12. Please explain in further detail the ways in which you determined that two operating rooms and four procedure rooms is the appropriate size for the GMSC.

13. Will the GMSC use the same Electronic Health Record (EHR) as UVM Medical Center? If not, will the GMSC’s EHR be compatible and able to communicate with UVM Medical Center’s EHR and the EHRs of other area hospitals?

Dated at Montpelier, Vermont this 31st day of July, 2015.

/s/ Julia Shaw
Julia Shaw
Health Care Policy Analyst
Office of the Health Care Advocate
P.O. Box 606
Montpelier, VT 05601
Voice (802) 383-2211

CERTIFICATE OF SERVICE

I, Julia Shaw, hereby certify that I have served the above Proposed Questions for the Applicant on Michael N. Donofrio, General Counsel to the Green Mountain Care Board; Judith Henkin, Health Policy Director of the Green Mountain Care Board, Donna Jerry, Green Mountain Care Board Health Policy Analyst and Drew Kervick and Eileen Elliott, representatives of ACTD LLC, by electronic mail, return receipt requested this 31st day of July, 2015.

/s/ Julia Shaw
Julia Shaw
Office of the Health Care Advocate