



Rutland Regional Medical Center

160 Allen Street, Rutland, VT 05701 | 802.775.7111 | www.RRMC.org

September 29, 2017

Ms. Donna Jerry
Health Policy Analyst
Green Mountain Care Board
89 Main Street
Montpelier, VT 05620-3101

Re: RRMC CoN Application - Docket No. GMCB-012-17con
Proposed Medical Office Building, Loading Dock Replacement and Dietary
Renovation, Renovation of Old VOC Building and Upgrades to Site
Drainage and Detention Pond System

Dear Donna:

I am writing in response to your letter of September 13, 2017 asking questions about RRMC's proposed projects. The responses can be found below.

- 1. Provide a program comparison and 2014 FGI Guideline review spreadsheet as noted on page 3 of the 3 of General Building Information Medical Office Building (MOB).**

Please see attachment: MOB CoN Question 1 - 2014 FGI Guideline Review Spreadsheet

- 2. In Table format, provide the current and proposed number of procedure rooms for Ears, Nose, Throat and Audiology services and the current and proposed number of exams rooms for orthopedics.**

Please see attachment: MOB Con Question 2 - Current and Proposed Exam and Treatment Spaces

- 3. In a table format, for both Floor 1 and 2 of the new MOB, provide the gross and useable square feet, the number of providers, gross square feet per provider and common areas, and cost per square foot.**

Please see attachment: MOB CoN Question 3 - RRMC MOB, Gross Area, Usable Net Area, Number of Providers Common net Area, Cost per SF

- 4. Explain other options explored, their associated costs, and the reasons for not selecting each?**

Other alternatives were considered. In particular, we considered whether the current VOC building could be accommodated to properly care for the patients. The square footage was

simply too small and the starting structure too inadequate to accommodate patient needs. We did not proceed to costing out this option as it would not have met the needs of our patients.

- 5. Clarify whether the cost of the upgrade to site drainage and detention ponds systems is \$625,000 or \$650,000, and identify the line item where this cost is included in Table 1, *Project Costs*.**

The cost for site drainage and detention ponds is \$650,000 and it is included in Line 3 Site work on Table 1.

- 6. Identify the current square footage of the entire dietary area, the existing square footage of the portion of the dietary area slated for expansion and the proposed square footage of the portion of the dietary area after expansion/renovation.**

Please see attachment: MOB CoN Question 6 – Dietary Renovation and Expansion

- 7. Identify the cost of replacing the freight elevator and identify the line item in Table 1 where the cost is included.**

The cost of the freight elevator is \$122,000 and it is included in Line 1 New Construction on Table 1.

- 8. Clarify whether four or five leases will be terminated by moving the administrative office to the old VOC building owned by RRMC. Also, clarify whether the savings associated with the terminated leases is \$566,000 (p.9 of application) or \$566,199 (p. 3 of application).**

Once the VOC building becomes available for administrative use RRMC plans to terminate four leases. The savings associated with the terminations is \$566,199. We expect to realize this full savings in 2023 when all leases will have terminated.

- 9. The narrative states that the project will accomplish co-location, sharing of resources, and work flow efficiencies. The Staffing Report, however, does not indicate any change in staffing due to the project. Please explain.**

The new space will allow staff to work more effectively to care for their patients. Staff reductions are not possible.

- 10. Relative to HRAP standard 3.4 explain whether the renovations to the old VOC building, renovations to the portion of the dietary area slated for expansion and renovation, replacement of the freight elevator, and upgrades to drainage and detention pond systems were included in the 2016 and 2017 hospital budget submissions. Explain and identify the total costs associated with each of these components and confirm these costs are included in Table 1.**

The costs of the VOC project has been anticipated as part of the medical office building due to the dependence of the construction of the medical office building and the need for the VOC building to be vacated and available for administrative use. Therefore, we did not separately disclose this project. Similarly, we have known that in order to build the new medical office building our master site plan would need to account for upgrades to drainage and the existing storm water pond. Again, the scope of this work was anticipated in the planning for the

medical office building and not separately disclosed. The medical office building was included in our 2016 budget for \$8,000,000 million and in 2017 for \$27,375,000.

The loading dock, which included dietary renovations and the freight elevator scope was included in our 2017 budget at \$3.5 million. This is similar to the cost included in the CoN of \$3,220,065.

We decided to place the Medical Office building and the Locking dock project into one Certificate of Need as much of the work for the site plan and infrastructure will be planned and executed together.

The costs for old VOC Renovations, dietary (loading dock) expansion and renovation, replacement of the freight elevator, and upgrades to drainage and retention ponds, are listed below and they are all included in the costs in Table 1.

Old VOC Renovations:	\$1,745,567
Loading Dock and Dietary Expansion:	\$3,220,665 (1)
Freight Elevator:	\$ 122,000 (2)
Drainage and Detention Ponds:	\$ 650,000

- 1) The cost for Dietary expansion is included in the total cost for the Loading Dock and Dietary Expansion Project. Dietary renovation and expansion has not been estimated independently.
- 2) The cost for the freight elevator is included in the total cost for the Loading Dock and Dietary Expansion.

11. In table format, list existing equipment and indicate the equipment being reused or replaced (as noted on pages 7-8), specify the costs of the associated with each, and whether each will be fully depreciated at the time they are replaced as a part of this project. Confirm that each of these equipment costs are included in the Total project cost on Table 1.

Please see attachment: MOB CoN Question 11 – Equipment Costs

12. Provide a timeline for deciding how the project will be financed.

The CoN application contains the most conservative assumption possible for financing so that this cost will not be exceeded. RRMC's preferred financing plan is to leverage debt through the United States Department of Agriculture (USDA) as part of the Community Facilities Direct Loan program. We are requesting full funding through the USDA but know that it is likely that they may not approve 100% of the funding request. They could require that we also secure supplemental funding through banking partners or issuance of public debt, should they not fund 100% of the project. We have engaged with the USDA and have begun the application process. The approval process is lengthy and requires a number of reports from environmental agencies and architectural and construction management partners. In addition, a full independent financial feasibility and appraisal study will need to be completed, both are in process. We expect to have all required documentation to the USDA by December 1, 2017. There are no set time limits for review and approval by the USDA so timing is not clearly known. That said, we anticipate a decision from the USDA in the Spring of 2018. Once the outcome and approval of the USDA loan is known we will then move to

execute the second phase of the plan which will include working with banking institutions to secure construction loan funding and if required, bank qualified debt. All of this plan of finance is expected to be completed by summer of 2018.

- 13. Explain whether the purchase of any of the replacement equipment will result in increased charges. If so, identify the equipment, current charges, and proposed charges. Address whether any component of the proposed project will increase the cost of medical care.**

The answer is no the new equipment supports workflow and improved clinical quality and not new revenue. We have not built any new revenue into the financial tables.

- 14. Relative to Statutory Criterion 4 provide a more detailed explanation as to how the project improves quality or provides great access to health care for residents.**

This building allows us to maintain access and quality for our patients. As noted in the application, and in Question 15 below, the space is significantly too small for the number of providers and services being delivered.

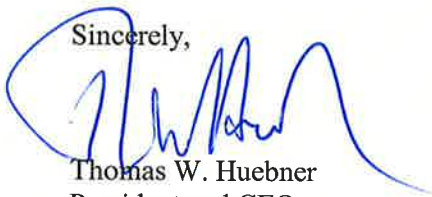
- 15. Explain how the project or specific components of the project address the institute of Healthcare Improvement Triple Aims of: (a) improving the individual experience of care; (b) improving the health of populations; and (c) reducing the per capita costs of care for populations.**

This space will improve the experience of care because the care will be rendered in adequate space. The current space is very overcrowded, does not allow for the appropriate flow of patients. For example, the current space does not allow for two patients with crutches to pass each other in the halls of the orthopedic clinic.

The health of our patients is improved because this is space that allows us to provide musculoskeletal and ENT services to our community. It is space that will allow us to retain and recruit providers.

The per capita cost of our population will not be directly reduced by this project. That will be achieved by the active management of our patients, especially those with chronic illnesses. It is important to note that both our musculoskeletal and ENT services allow patients to maintain mobility and function. This allows maintenance of independence, which over time will help to control per capita costs.

Sincerely,



Thomas W. Huebner
President and CEO

TWH/jsb

Enclosures



Rutland Regional Medical Center

An Affiliate of Rutland Regional Health Services

160 Allen Street
Rutland, VT 05701

802.775.7111

Form A - Verification Form

STATE OF VERMONT
DEPARTMENT OF BANKING, INSURANCE,
SECURITIES AND HEALTH CARE ADMINISTRATION

In re: Rutland Regional Medical Center)	Docket No. GMCB-012-17con
)	Medical Office Building, Loading Dock, Replacement
)	and Dietary Renovation, Renovation of Old VOC
)	Building and Upgrades to Site Drainage and
)	Detention Pond System

Exhibit A – Form of Verification Under Oath when filing a Certificate of Need Application.

Thomas W. Huebner, being duly sworn, states on oath as follows:

1. My name is Thomas W. Huebner. I am President and Chief Executive Officer of Rutland Regional Medical Center. I have reviewed the attached letter from myself to Donna Jerry, Health Policy Analyst, dated September 29, 2017.
2. Based on my personal knowledge, after diligent inquiry, the information contained in this Certificate of Need letter dated September 29, 2017 is true, accurate and complete, does not contain any untrue statement of a material fact, and does not omit to state a material fact necessary to make the statement made therein not misleading, except as specifically noted herein.
3. My personal knowledge of the truth, accuracy and completeness of the information contained in the Certificate of Need letter dated September 29, 2017 is based upon either my actual knowledge of the subject information or, where identified below, upon information reasonably believed by me to be reliable and provided to me by the individuals identified below who have certified that the information they have provided is true, accurate and complete, does not contain any untrue statement of a material fact, and does not omit to state a material fact necessary to make the statement made therein not misleading.
4. I have evaluated, within the 12 months preceding the date of this affidavit, the policies and procedures by which information has been provided by the certifying individuals identified below, and I have determined that such policies and procedures are effective in ensuring that all

information submitted or used by Rutland Regional Medical Center in connection with the Certificate of Need program is true, accurate, and complete. I have disclosed to the RRHS-RRMC Board of Directors all significant deficiencies, of which I have personal knowledge after diligent inquiry, in such policies and procedures, and I have disclosed to the RRHS-RRMC Board of Directors any misrepresentation of facts, whether or not material, that involves management or any other employee participating in providing information submitted or used by Rutland Regional Medical Center in connection with the Certificate of Need program.

5. The following certifying individuals have provided information or documents to me in connection with the letter, and each such individual has certified, based on his or her actual knowledge of the subject information or, where specifically identified in such certification, based on information reasonably believed by the certifying individual to be reliable, that the information or documents they have provided are true, accurate and complete, do not contain any untrue statement of a material fact, and do not omit to state a material fact necessary to make the statement made therein not misleading:

(a) Judi Fox, VP Fiscal Services, CFO

The information or documents provided by the certifying individual.

All financial related information.

Subject information of which the certifying individual has actual knowledge.

As stated above.

The individuals and the information reasonably relied on by the certifying individual.

In the case of documents identify the custodian of the documents.

Judi Fox

(b) James Greenough, VP Corporate Support Services

The information or documents provided by the certifying individual.

All scope related information.

Subject information of which the certifying individual has actual knowledge.

As stated above.

The individuals and the information reasonably relied on by the certifying individual.

In the case of documents identify the custodian of the documents.

James Greenough

6. In the event that the information contained in the Certificate of Need letter dated September 29, 2017 becomes untrue, inaccurate or incomplete in any material respect, I acknowledge my obligation to notify the Department of Banking, Insurance, Securities and Health Care Administration, and to supplement the Interim Report as soon as I know, or reasonably should know, that the information or document has become untrue, inaccurate or incomplete in any material respect.



Thomas W. Huebner, President and CEO

On September 29, 2017, Thomas W. Huebner appeared before me and swore to the truth, accuracy and completeness of the foregoing.



[seal]

Notary public
My commission expires February 10, 2019



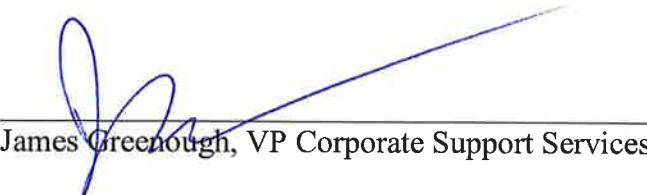
Judi Fox, VP Fiscal Services, CFO

On September 29, 2017 Judi Fox appeared before me and swore to the truth, accuracy and completeness of the foregoing.



[seal]

Notary public
My commission expires February 10, 2019



James Greenough, VP Corporate Support Services

On September 29, 2017, James Greenough appeared before me and swore to the truth, accuracy and completeness of the foregoing.



[seal]

Notary public
My commission expires February 10, 2019

Located in the clinical area.	
3.1-3.9 Diagnostic Imaging Services	
2.2-3.4.3.2 Radiography Room	180 sf. min or as required by equipment mfg., Handwashing station in each x-ray room
Dressing Room or Booth	As required by program, located near patient toilet.
3.1-5 General Support Services and Facilities	
3.1-5.2.2.3 Clean linen storage	
3.1-5.2.3.1 Soiled linen storage	
3.1-5.3 Materials Management	
3.1-5.4 Waste Management	
3.1-5.5 Environmental Services	No required min. size Min. of 1 per floor To include: Service sink, storage.
3.1-5-6 Engineering and Maintenance Services	
Mech. Room	
Normal power	
Emergency power	
tel/data room	
Elevator mech. rm.	
3.1-6 Public and Administrative Areas	
3.1-6.2.1 Entrance	At grade level and sheltered.
3.1-6.2.2 Reception	No required min. size
3.1-6.2.3 Waiting	No required min. size
3.1-6.2.4 Public Toilets	ADA compliant
3.1-6.2.4 Telephone Access	Needs to be provided
3.1-6.2.5 Drinking Water	Needs to be provided
3.1-6.2.6 Wheelchair Storage	Needs to be provided out of traffic lane
3.1-6.3.2 Interview Space	Private space
3.1-6.3.3 Office/Work Space	No required min. size As required by the program
3.1-6.3.5 Medical Records	As required by the program
3.1-6.4.1 Staff Lockers	No specific FGI requirements
3.1-6.4.2 Staff Lounge	No specific FGI requirements
Conference rooms	No specific FGI requirements
3.1-7 Design and Construction Requirements	
NFPA 101 2012	Use Group B business (Ambulatory Care)
IBC 2012	Construction Type 2B (000)
	Limit 3 stories, 23,000 sf / fl
	Smoke compartments 10,000 sf max.
	Fully sprinkled
	Exterior walls, 0 hr fire rating
	Columns and beams, 0 hr fire rating
	Bearing walls, 0 hr fire rating
	Floors, 0 hr fire rating
	Roof, 0 hr. fire rating
	Separation of Occupancy 2 hr fire sep.
	Stairs 1 hr. fire separation
	Elevator enclosure 1 hr fire separation
Corridors	5'0" min. width
	Nothing extends into the 5' travel path.
Handwashing stations	Faucets to be hands free or wrist blades.

Clean linen storage				
Soiled linen storage				
Materials Management				
Waste Management				
HSKP	1	28 sf	28 sf	
HSKP	1	44 sf	44 sf	
Mech. Room	1	242 sf	242 sf	
Normal power	1	173 sf	173 sf	
Emergency power	1	126 sf	126 sf	
tel/data room	1	108 sf	108 sf	
Elevator mech. rm.	1	84 sf	84 sf	
Service Corridor			1650 sf	2,383 sf
Check-in/out	4	64 sf	256 sf	
Surgical Scheduling	1	119 sf	119 sf	
Work room	1	218 sf	218 sf	
Waiting	1	309 sf	309 sf	
Waiting	1	495 sf	495 sf	
Waiting	1	151 sf	151 sf	
Public Toilets	2	46 sf	92 sf	ADA compliant w/ out swing door
Intake/ Vitals	1	125 sf	125 sf	
Provider/Audiologist Office	5	120 sf	600 sf	Private office
Mid Level office	1	145 sf	145 sf	3 person
MA (scribe) work space	1	109 sf	109 sf	4 person
Supervisor's office	1	143 sf	143 sf	2 person
Staff Work Space	1	231 sf	231 sf	3 person
ENT Corridors			2736 sf	5'-0" finish to finish
ENT total net area			10304 sf	
Walls and Structure			842 sf	
ENT total gross area			11,146 sf	2 smoke compartments
Staff Lockers	1	444 sf	444 sf	Shared with other practices
Staff Lounge	1	305 sf	305 sf	Shared with other practices
staff Toilets	2	47 sf	94 sf	ADA compliant w/ out swing door
Conference Room	1	239 sf	239 sf	Shared with other practices
Corridor			418 sf	1,500 sf
Entry vestibule w/ wheelchair storage	1	437 sf	437 sf	
Elevator Lobby	1	135 sf	135 sf	
Elevator	1	121 sf	121 sf	
Stair 1	1	174 sf	174 sf	
Stair 2 and vestibule	1	402 sf	402 sf	1,269 sf
First Floor total net area			15,456 sf	
Exterior Walls and Structure			2,705 sf	
FIRST FLOOR GROSS AREA			17,319 sf	

X-Ray	3	285 sf	855 sf	
Gowned Waiting	1	185 sf	185 sf	
Clean linen storage				
Soiled linen storage				
Materials Management				
Waste Management				
HSKP	1	72 sf	72 sf	
Mech. Room	1	85 sf	85 sf	
Normal power	1	68 sf	68 sf	
Emergency power	1	68 sf	68 sf	
tel/data room	1	62 sf	62 sf	355 sf
Check-in/out	7	62 sf	434 sf	
Copy/Work/Data Entry	1	134 sf	134 sf	
Waiting	1	325 sf	325 sf	
Waiting	1	188 sf	188 sf	
Waiting	1	159 sf	159 sf	
Public Toilets	2	51 sf	102 sf	ADA compliant w/ out swing door
Conference/Consult	1	113 sf	113 sf	
Team Rooms	1	681 sf	681 sf	
Team Rooms	1	555 sf	555 sf	
Team Rooms	1	451 sf	451 sf	
Staff Lockers				Located on the first floor
Staff Lounge				Located on the first floor
Practice Manage office	1	165 sf	165 sf	
Supervisor office	2	76 sf	152 sf	
Nurse Navigators	1	239 sf	239 sf	
Surgical Scheduler	2	116 sf	232 sf	
Staff Toilets	2	45 sf	90 sf	
Corridors	1	2925 sf	2,925 sf	5'0" finish to finish
Corridors	1	322 sf	322 sf	
Corridors	1	209 sf	209 sf	
Supplies	1	13 sf	13 sf	
Supplies	1	30 sf	30 sf	
Supplies	1	13 sf	13 sf	
VOC/Physiatry total Net area			12,812 sf	
Walls and Structure			931 sf	
VOC/Physiatry total Gross area			13,743 sf	2 smoke compartments
Public Corridor	1	1645 sf	1645 sf	
Elevator Lobby	1	295 sf	295 sf	
Elevator	1	121 sf	121 sf	
Stair 1	1	164 sf	164 sf	
Stair 2	1	243 sf	243 sf	2,468 sf
Second Floor total net area			15,635 sf	
Exterior Walls and Structure			1,855 sf	
FIRST FLOOR GROSS AREA			17,490 sf	

Exam and Treatment	3086 sf
Office and Work space	2139 sf
Support space	2026 sf
Waiting	1399 sf
Building support space	2383 sf
Common area	1269 sf
Corridors	3154 sf
15456 sf	

Exam and Treatment	3,240 sf
Office and Work space	3,535 sf
Support space	1,724 sf
Waiting	857 sf
Building support space	355 sf
Common area	2,468 sf
Corridors	3,456 sf
15,635 sf	

MOB CoN Question 2 - Current and Proposed Exam and Treatment Spaces

First Floor ENT					
	CURRENT		PROPOSED		
	No.	Area	No.	Area	
Exam Room 1	1	111 sf	6	120 sf	720 sf
Exam Room 2	1	61 sf			
Exam Room 3	1	65 sf			
Exam Room 4	1	75 sf			
Exam Room 5	1	106 sf			
Exam Room 6	1	54 sf			
Exam Room 7	1	61 sf			
Exam Room 8	1	85 sf			
Exam Room 9	1	69 sf			
Exam Room 10	1	65 sf			
Exam Room (allergy)			1	120 sf	120 sf
Exam Rooms (Audiology)			2	275 sf	550 sf
Audiology Exam/Balance room			2	120 sf	240 sf
Audiology Lab			1	120 sf	120 sf
Procedure Room 1	1	136 sf	2	160 sf	320 sf
Procedure Room 2	1	138 sf			
Procedure Room 3	1	147 sf			
Large Procedure Rooms			4	254 sf	1016 sf
ENT	13	1,173 sf	18	3,086 sf	

Second Floor Vermont Orthopedic Center and Physiatry						
VOC	CURRENT			PROPOSED		
	No.	Area		No.	Area	
Exam Rms (12)	12	96 sf	1,152 sf	23	120 sf	2,760 sf
Exam Room 1	1	120 sf	120 sf			
Exam Room 7	1	88 sf	88 sf			
Exam Room 15	1	134 sf	134 sf			
VOC Subtotal	15		1,494 sf			
Physiatry						
Exam Rooms	1	95 sf	95 sf	4	120 sf	480 sf
	2	115 sf	230 sf			
	1	118 sf	118 sf			
Physiatry subtotal			443 sf			
VOC and Physiatry	19		1,595 sf	27	3,240 sf	

MOB CoN Question 3 - RRCM MOB, Gross Area, Usable Net Area, Number of Providers Common net Area, Cost per SF

First Floor, ENT						
Gross Area	Usable Net Area	Cost/SF	Construction Cost	Providers	Area per Provider	Cost/SF/Provider
17,319 SF				8		
	Exam and Treatment	3,086 sf		Physicians	3	
	Office and Work space	2,139 sf		Mid-Level	3	386 sf
	Support space	2,026 sf		Audiologist	2	267 sf
	Waiting	1,399 sf				253 sf
	Corridors	3,154 sf				175 sf
	ENT NET Usable Area	11,804 sf				394 sf
				ENT NET SF/Provider		1,476 sf
	Building support space	2,383 sf				298 sf
	Common area	1,269 sf				159 sf
	First Floor Net Usable Area	15,456 sf		First Floor NET SF/Provider		1,932 sf
First Floor Gross Area	17,319 sf	\$ 320.59	\$ 5,552,312	First Floor Gross SF/Provider	2,165 sf	\$ 2,564.73
Second Floor VOC and Psychiatry						
Gross Area	Usable Net Area	Cost/SF	Construction Cost	Providers	Area per Provider	Cost/SF/Provider
17,490 SF				16		
	Exam and Treatment	3,240 sf		Physicians	9	
	Office and Work space	3,535 sf		Mid-Level	6	203 sf
	Support space	1,724 sf		Behavioralist	1	221 sf
	Waiting	857 sf				108 sf
	Corridors	3,456 sf				54 sf
	VOC/Physiatry Net Usable Area	12,812 sf				216 sf
				VOC/Physiatry NET SF/Provider		801 sf
	Building support space	355 sf				22 sf
	Common area	2,468 sf				154 sf
	Second Floor Net Usable Area	15,635 sf		Second Floor NET SF/Provider		977 sf
Second Floor Gross Area	17,490 sf	\$ 320.59	\$ 5,607,133	Second Floor Gross SF/Provider	1,093 sf	\$ 5,129.45
Connector						
	Gross Area	2,335 sf	Construction Cost	Providers	Area per Provider	Cost/SF/Provider
		\$ 320.59	\$ 748,580	24	97 sf	\$ 320.59
Total MOB						
	37,144 sf	\$ 320.59	\$ 11,908,025	24	1,548 sf	\$ 496,168

MOB CoN Question 6 - Dietary Renovation and Expansion

RRMC MOB, Dietary Existing Total Area, Proposed Total Area, Existing Area of Space to be Expanded, Proposed Area of Space to be Expanded.		
Existing Dietary		Proposed Dietary
Ground Floor		
Staff Work Areas	487 sf	487 sf
Dry Storage	494 sf	0 sf
First Floor		
Cafeteria	5,196 sf	5,196 sf
Kitchen	2,594 sf	2,594 sf
Dishwashing	922 sf	922 sf
Refrigerator 1	67 sf	67 sf
Refrigerator 2	70 sf	70 sf
Refrigerator 3	109 sf	109 sf
Freezer 1	116 sf	116 sf
Freezer 2	146 sf	146 sf
Storage	74 sf	74 sf
Dry storage	486 sf	383 sf
Dry Storage		674 sf
Cart Storage		136 sf
Office 1	70 sf	70 sf
Office 2	104 sf	104 sf
Admin. Office		92 sf
Office 3		98 sf
Office 4		98 sf
Staff Lockers		289 sf
Staff Toilet	28 sf	28 sf
Staff Toilet		86 sf
Service Elevator	56 sf	148 sf
Stair	75 sf	218 sf
Corridor	201 sf	268 sf
Dietary, Existing		
Total Net Area	11,295 sf	
Dietary Existing		
Total Gross Area	11,430 sf	
Dietary Proposed		
Total Net Area		12,473 sf
Dietary, Proposed		
Total Gross Area		12,840 sf
Gross area of Dietary Addition		2,338 sf

MOB CoN Question 11 - Equipment Costs

				For Diagnostic or Therapeutic Equipment to be Replaced Only					
	Existing Equipment	Reused - Replaced - New	Specify the costs of the new or replacement items	If replaced, what equipment is it being replaced with	If replaced, is the item Fully Depreciated at the time of replacement as part of this project - yes or no	Useful Life when New	Useful Life Assigned	Estimated Replacement Date	Estimated Remaining Book Value at time of Replacement
1	CR Konica Nano Quantum Odyssey HF X-Ray Machine	Replaced	\$ 425,000	Base System Digital Radiography (X-Ray Machine)	Yes			12/1/2019	\$ -
2	Discovery XR650 1200 Base System Digital Radiography (X-Ray Machine)	Reused - Note 2	\$ -	N/A	N/A			N/A	N/A
3	GE Proteus XRF - DR	New	\$ 130,000	N/A	N/A			N/A	N/A
4	Ziess Opmi Microscope	Replaced	\$ 20,000	JedMed V Series Microscope	No (See Note 1)	7 years	10 years	12/1/2019	\$ 201
5	IAC Sound Booth (Purchased Used)	Replaced	\$ 48,148	Eckel Noise Control Tec Sou	No (See Note 1)	10 years	10 years	12/1/2019	\$ 533
6	IAC Sound Booth (Purchased Used)	Replaced	\$ 48,148	Eckel Noise Control Tec Sou	No (See Note 1)	10 years	10 years	12/1/2019	\$ 951
7	GSI 61 Audiometer (Purchased Used)	Replaced	\$ 23,300	Otometrics Madsen Audion	No (See Note 1)	10 years	10 years	12/1/2019	\$ 1,421
8	GSI 61 Audiometer (Purchased Used)	Replaced	\$ 23,300	Otometrics Madsen Audion	No (See Note 1)	10 years	10 years	12/1/2019	\$ 358
	Sub-Total		\$ 717,896						
9	Furnishings and misc. non-diagnostic/therapeutic medical equipment to be replaced and Furnishings and misc. medical equipment including diagnostic/therapeutic to be purchased new including, but not limited to: desks, chairs, tables, physicians stools, hand sanitizers, soap dispensers, waste baskets, paper towel holders, etc. included under the Furnishings Line Item in Table 1.	Replaced/New	\$ 1,207,665	N/A	N/A			N/A	N/A
	Total		\$ 1,925,561						
	Table 1 Furnishings, Fixtures & Other Equipment		\$ 1,925,561						
	Difference		\$ -						

Note 1: This equipment was purchased by the ENTA Clinic prior to becoming a department of Rutland Regional Medical Center (RRMC) in October 2012. When these items were purchased as used equipment by RRMC from ENTA in October 2012, a useful life of 10 years was assigned. However, the actual useful life for this equipment when new is 10 years or less. This equipment will not be fully depreciated on RRMC's books when they are replaced as part of this project. However, they will be older than their actual useful life of 7 or 10 years.

Note 2: This Discovery XR650 1200 Base System Digital Radiography machine will no longer be replaced, since the cost to move the equipment is not more than the cost to replace.

Note 3: In response to CON Standard 3.7, we should have listed 2 Audiometers, since they are a required part of the sound booth.