

— THE —

**University of Vermont**  
MEDICAL CENTER

—

*By Courier & Email*

*Office of the General Counsel*

May 4, 2016

Donna Jerry  
Senior Health Policy Analyst  
89 Main Street, Third Floor, City Center  
Montpelier, VT 05620

Re: Letter of Intent and Certificate of Need Application  
for Replacement of the da Vinci Robotic Surgical System

Dear Donna:

On behalf of The University of Vermont Medical Center, I am pleased to submit the following documents in connection with UVM Medical Center's Certificate of Need application for the replacement of its da Vinci Robotic Surgical System:

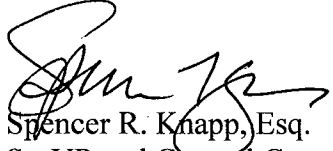
1. Letter of Intent, requesting expedited review;
2. Verification under Oath, signed by John Brumsted, MD;
3. Certificate of Need Application with:
  - a. A Narrative Description of the Project;
  - b. A detailed response to the applicable CON criteria, including the HRAP CON standards;
  - c. Financial Tables; and
  - d. Applicable attachments to the CON application.

Since we are requesting expedited review, we understand that your office will take care of the public notice requirements in accordance with 18 V.S.A. §§ 9440(c)(2)(A) and 9440(c)(5).

We look forward to receiving your decision on our request for expedited review and to working closely with you and your staff during the review process. If you or any members of your staff have questions concerning our application materials, please feel free to contact me any time.

Thank you.

Very truly yours,

A handwritten signature in black ink, appearing to read "Spencer R. Knapp". The signature is fluid and cursive, with a large initial "S" and "K".

Spencer R. Knapp, Esq.  
Sr. VP and General Counsel

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May 4, 2016

Donna Jerry  
Senior Health Policy Analyst  
89 Main Street, Third Floor, City Center  
Montpelier, VT 05620

Re: Letter of Intent for Replacement of da Vinci Robotic Surgical System

Dear Donna:

In accordance with 18 V.S.A. § 9440(c)(5) and the Certificate of Need Program Rule 4.000 (“Rule 4”), The University of Vermont Medical Center (“UVM Medical Center”) is filing this Letter of Intent and the enclosed Certificate of Need application, seeking expedited approval, without a hearing and with such other abbreviated process as the Green Mountain Care Board determines is appropriate, of a project to replace its da Vinci Robotic Surgical System (the “Project”).

Under 18 V.S.A. § 9440(c)(5) and Rule 4, a request for expedited review may be granted if the project is likely to be (a) uncontested and (b) does not substantially alter services. Because this is simply an equipment replacement project involving a service that UVM Medical Center already provides, it is very unlikely that the project will be contested.

Under § 4.304 of Rule 4, a CON project does not “substantially alter services” if:

- (a) The project raises no significant health care policy or planning concerns; and
- (b) The project consists of the routine replacement of existing equipment that is depreciated, out-of-date or obsolete.

The Project’s cost of \$2.4 million is not substantial in terms of UVM Medical Center’s overall budget, and the Project will not have a significant impact on UVM Medical Center’s services or financial health. Moreover, because there will be no changes to our services, we do not believe that the Project raises any significant health care policy or planning concerns. Finally, consistent with the Rule, this Project consists only of the routine replacement of UVM Medical Center’s existing robotic surgical system that is fully depreciated and nearly obsolete.

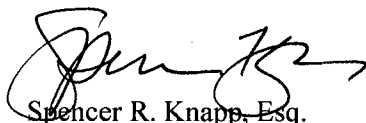
Under Rule 4, we believe that the Green Mountain Care Board may declare this application uncontested and issue written notice granting a Certificate of Need without any further process, and we respectfully request that the Board do so.

In accordance with 18 V.S.A. § 9440(c)(2) and the underlying CON regulations and guidelines, we provide the following information concerning the Project, which is amplified in the enclosed application:

- Project Scope: The Project involves the purchase of a new da Vinci Robotic Surgical System for a total cost of \$2.4 million.
- Project Rationale and Objectives: Our existing da Vinci Robotic Surgical System was purchased in 2008 and is now fully depreciated. The system is exhibiting increasing periods of down-time, and lacks certain enhancements made available by current technology. In December 2017, Intuitive Surgical, the manufacturer, will discontinue service and support, and end production of replacement parts, making the robotic surgical system effectively obsolete.
- Need to be Addressed: The Project is critical to the continued viability of UVM Medical Center's successful robotic surgery program. Failure to replace the aging equipment would inevitably lead to the demise of the program and UVM Medical Center would no longer be able to offer comprehensive cancer care for the rural population of Vermont.
- Cost, Access, Quality: The Project will provide continued patient access to robotic surgical services and improved quality through technological enhancements without any increase in costs or charges.
- Location: No facilities renovations will be required to replace the stand-alone surgical system, which can simply be wheeled into the operating room.
- Service Area: Vermont and the New York counties of Essex, Warren, Washington, Clinton, Franklin and St. Lawrence, with a combined population of approximately one million persons.
- Projected Expenditures: \$2.4 million.

We look forward to working with you and your staff during the review process for this application.

Very truly yours,



Spencer R. Knapp, Esq.  
Sr. VP and General Counsel

STATE OF VERMONT  
GREEN MOUNTAIN CARE BOARD

In re: The University of Vermont Medical Center Inc.     )  
Application for Certificate of Need to Replace the     )  
da Vinci Robotic Surgical System                     )  
Capital Expenditure: \$2.4 million                     )


JOHN R. BRUMSTED, M.D., being duly sworn, states on oath as follows:

1. My name is John R. Brumsted, M.D. I am the Chief Executive Officer of The University of Vermont Medical Center Inc. and President and Chief Executive Officer of The University of Vermont Health Network. I have reviewed the foregoing Certificate of Need Application.
2. Based on my personal knowledge, after diligent inquiry, the information contained in the Application 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 Application 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 The University of Vermont Medical Center Inc. in connection with the Certificate of Need program is true, accurate, and complete. I have disclosed to the Board of Trustees all significant deficiencies, of which I have personal knowledge after diligent inquiry, in such policies and procedures, and I have disclosed to the Board of Trustees any misrepresentation of facts, whether or not material, that involves management or any other employee participating in providing information submitted or used by The University of Vermont Medical Center Inc. in connection with the Certificate of Need program.
5. The following certifying individuals have provided information or documents to me in connection with the Application, 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 reasonable 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) Cheung Wong, M.D., Division Chief, Oncology. This individual certified to the accuracy of the description of the equipment and the operations of the Robotic Surgery Program as described in the Application, including all information regarding the function, operation and clinical aspects of the Program.
- (b) Marc Stanislas, Director, Finance. This individual certified to the accuracy of all financial information submitted with the Application, including the CON Financial Tables.

6. In the event that the information contained in the Application becomes untrue, inaccurate or incomplete in any material respect, I acknowledge my obligation to notify the Green Mountain Care Board, and to supplement the Application, as soon as I know, or reasonably should know, that the information or document has become untrue, inaccurate or incomplete in any material respect.

  
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JOHN R. BRUMSTED, M.D.

On April 29 2016, JOHN R. BRUMSTED, M.D. appeared before me and swore to the truth, accuracy and completeness of the foregoing.

  
\_\_\_\_\_  
Notary Public  
My commission expires 2/10/2019.

