Burlington, Vermont Plattsburgh, New York

Kelli Rockandel, Esq. *E-mail*: krockandel@dinse.com

December 7, 2015

Donna Jerry Senior Health Policy Analyst Green Mountain Care Board 89 Main St., City Center Montpelier, VT 05620



Re: Genesis Healthcare, Purchase of 5 Nursing Homes in VT, GMCB-014-15con

Dear Donna:

Enclosed for filing with the Green Mountain Care Board, please find the following documents on behalf of the Applicant, Genesis Healthcare, Inc.:

- 1. An electronic copy and two hard copies of:
  - a. The License to Operate issued to Burlington Health & Rehab by the Department of Disabilities, Aging and Independent Living on August 24, 2015, to be filed under **Exhibit No. II.C.3** to Applicant's Certificate of Need application, and
  - b. The CV/resume of David King, Medical Director of Bennington Health and Rehab, to be filed under **Exhibit No. II.A.3** to Applicant's Certificate of Need application; and
- 2. The original and two copies of the Verification Under Oath by Ms. Wendy LaBate, Senior Vice President of Genesis Northeast Division, as to these Supplemental Exhibits.
- 3. A Certificate of Service indicating service of the Supplemental Exhibits and Verification Under Oath on Jacqueline Majoros.

Thank you for your assistance with this matter. Please do not hesitate to contact me with any questions or concerns.

Very truly yours,

DINSE, KNAPP & McANDREW, P.C.

Kelli Rockande

cc:

Jacqueline Majoros

Enclosures

{B1469788.1 14842-0006}

## AGENCY OF HUMANISERVICES

## Department of Disabilities, Aging and Independent Living Division of Licensing and Protection

### License to Operate

Date Issued: August 24, 2015

Facility:

**Burlington Health & Rehab** 

Licensee:

Burlington Health & Rehabilitation Center, LLC

Address:

300 Pearl Street

Burlington, VT 0540148531

This is to certify that the above named is hereby granted a license to operate a nursing home in accordance with Title 33, Vermont Statutes Annotated Chapter 71.

This license shall be in force from September 1, 2015 until August 31, 2016 unless sooner revoked or suspended.

Number of licensed beds: 126

Classification of Beds: Skilled

Staff:

Medical Director:

Mark Putcher, MD

License # 042.0007896

Director of Nursing

Danielle Mardigras, RN

License # 026.0037848

Administrator:

Meagan Buckley

License # 027.0045917

CONDITIONS: N/A

SASTOOM This license framed under glass shall at all times be displayed in a conspicuous place in the interior of the licensed premises so that it may be read by the public.

This license is not assignable or transferable and is issued only for the persons and premises named herein.

This license is granted in consideration of the application thereof, and said application and all statements, information, answers, promises and agreements therein contained are hereby referred to and made a part hereof.

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State Agency Survey Director

#### Form A – Verification Form

# STATE OF VERMONT GREEN MOUNTAIN CARE BOARD

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## <u>Verification Under Oath</u> <u>Supplemental Exhibits</u>

Wendy LaBate, being duly sworn, states on oath as follows:

- My name is Wendy LaBate. I am the Senior Vice President of Operations for the Northeast Division of Genesis Healthcare, Inc. I have reviewed the Supplemental Exhibits being submitted with this Verification to support the Certificate of Need application for the proposed purchase by Genesis Healthcare, Inc. and its Subsidiaries of Bennington Health and Rehabilitation Center, LLC, Berlin Health and Rehabilitation Center, LLC, Burlington Health and Rehabilitation Center, LLC, Springfield Health and Rehabilitation Center, LLC, and St. Johnsbury Health and Rehabilitation Center, LLC, dated October 15, 2015.
- 2. Based on my personal knowledge, after diligent inquiry, these Supplemental Exhibits are true, accurate and complete documents.
- 3. In the event that the information contained in the Supplemental Exhibits becomes untrue, inaccurate or incomplete in any material respect, I acknowledge my obligation

to notify the Green Mountain Care Board, and to supplement the Certificate of Need 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.

Senior Vice President of Operations

Northeast Division, Genesis

Healthcare, Inc.

On December \_\_\_\_\_\_\_, 2015 Wendy LaBate appeared before me and swore to the truth, accuracy and completeness of the foregoing.

Ronda Manacesi West Notary Public My commission expires: 10/31/19

#### **CERTIFICATE OF SERVICE**

I, Kelli Rockandel, hereby certify that I have served the above Supplemental Exhibits and Verification Under Oath by Ms. Wendy LaBate on Jacqueline Majoros, State Long Term Care Ombudsman, by first-class mail by depositing it in the U.S. mail this 7th day of December, 2015.

DINSE, KNAPP & McANDREW, P.C.

By: /s/ Kelli Rockandel, Esq.
Kelli Rockandel, Esq.

David E. King, MD PO Box 379 Shaftsbury, VT. 05262

#### Curriculum Vitae

#### Work Experience:

7/86 to Present – Physician at Shaftsbury Medical Associates, Inc. 1986 to Present – Medical Director at Prospect Nursing Home 1990 to Present – Medical Director at Bennington Health and Rehab.

#### Education-

Graduated High School in June, 1775
Graduated From Muhlenberg College, Allentown, PA in June, 1979 wit Honors in Biology, Summa Cum Laude
Graduated from Thomas Jefferson University Medical College in June 1983

Residency- Washington Hospital, Washington, PA July, 1983 to June 1986

Hospital Affiliation- Southwestern Vermont Medical Center
Positions Held: President of Medical Staff
Medical Staff Vice President
Family Practice Department Chair
PHO Task Force Chairman
PHO Contracting Committee Chairman
Ethics Committee Chairman