

SENT ELECTRONICALLY

December 17, 2020

Ms. Johanna Beliveau
Visiting Nurse and Hospice of Vermont/New Hampshire
88 Prospect St.
White River Junction, VT 05001

RE: Docket No. GMCB-011-20con, Health Information Technology Project, \$5.5 million.

Dear Ms. Beliveau:

Thank you for your letter of intent received on December 3, 2020 regarding the above-referenced project. The project as described is subject to Certificate of Need (CON) review under 18 V.S.A. § 9434 (a)(1).

The application must include a detailed description of the proposed project, entities and relationship of entities involved in the project, and the need/rationale for the proposed project; an explanation of how the proposed project meets the applicable statutory criteria in 18 V.S.A. § 9437; a description of any planning process for the project; a description of the health information technology components of the project and associated costs including capital costs and annual operating expenses; a description of all program components, services, and staffing; a description of any renovation/construction/fit-up components and associated costs, if applicable; and a project timeline.

Note that the Board is currently working to update the Health Resource Allocation Plan (HRAP), which is referenced in one of the criteria, 18 V.S.A. § 9437(1)(C). There are no HRAP standards that apply to this project, however the statutory criteria set forth in 18 V.S.A. § 9437(1)-(5) and (8-9) apply to your application.

The application must also address the Institute for Healthcare Improvement's Triple Aims: 1) improving the individual experience of care, 2) improving the health of populations, and 3) reducing the per capita costs of care for populations.

The Board also requires submission of sufficient financial information to evaluate the project. For each of the financial documents noted below, specify the 12-month period for projected Years 1, 2, and 3 and provide a summary of all financial assumptions that underlie the projections for each of the following:

- Profit and Loss Statements
- Revenue Projections



- Balance Sheets
- Cash Flows
- Operating Costs
- Most recent audited financial statement of applicant and/or entities financing the project

In addition, provide:

- Financial Table 1, Project Costs
- Financial Table 2, Financing Arrangement
- Financial Table 6A, 6B, and 6C, Revenue Source Projections
- Financial Table 7A, 7B, and 7C, Utilization Projections
- Financial Table 9A, 9B, and 9C, Staffing Projections

Once complete, please send your application to me electronically at donna.jerry@vermont.gov, and provide a three-hole punched hard copy with a Verification Under Oath to the Green Mountain Care Board, 144 State Street, Montpelier, Vermont 05602, Attention: Donna Jerry.

If you have further questions, please do not hesitate to contact me at 802-760-8162.

Sincerely,

s/ Donna Jerry

Donna Jerry, Senior Health Policy Analyst
Green Mountain Care Board

cc: Michael Barber, GMCB General Counsel