



30 Main Street, Suite 500 | P.O. Box 1489 | Burlington, VT 05402-1489

October 22, 2021

**ELECTRONIC DELIVERY**

Donna Jerry  
Senior Health Policy Analyst  
Green Mountain Care Board  
144 State Street  
Montpelier, VT 05602  
[donna.jerry@vermont.gov](mailto:donna.jerry@vermont.gov)

**Re: Garnet Clinical Services, LLC  
Establishment of Mobile Preventive and Urgent Care Units in Chittenden County**

Dear Ms. Jerry:

Please consider this letter as Garnet Clinical Services, LLC's ("Garnet") request for a determination that the Green Mountain Care Board (the "Board") does not have Certificate of Need jurisdiction over Garnet's proposed mobile preventative and urgent care units, under 18 V.S.A. § 9435(a).

Garnet is proposing to establish mobile preventative and urgent care units that will differ from local urgent care centers in that the offices, or units, will be mobile in nature. An additional key benefit to these mobile units is that they will offer longer hours, including evenings, weekends, and holidays. Typical scenarios would be an employer that engages Garnet to provide on-site employee health screenings or an individual who contacts Garnet and requests that a mobile unit visit their residence or place of employment to provide urgent care services. Importantly, these mobile units only will offer services that are available in physician office settings from family or internal medicine providers. There will be no fixed or mobile CT, MRI or PET/CT services.

**Background**

Garnet is proposing to use one larger vehicle, outfitted with two examination rooms, and three smaller, medical SUVs, for the provision of urgent care services. Garnet anticipates adding vehicles over time as patient volume dictates.

These mobile units will provide high quality care, delivered at a patient's home or place of employment, limiting barriers to treatment, improving health outcomes, and reducing costs. This would be a unique model of care delivery, with no offering comparable to this in Vermont. Initially, Garnet's mobile clinic will serve Chittenden County, with the hope to eventually offer mobile clinics around the state. This would be a pilot program for Garnet. They are not presently offering this service in Vermont or elsewhere.

This model has the benefit of removing barriers and gaps in care that cannot be addressed by other, traditional models:

- Availability when traditional primary care providers cannot meet a patient's needs (not accepting new patients, after hours, etc.).
- Urgent care provision without unnecessary utilization of local emergency departments, 9-1-1 system, or overcrowded urgent care centers.
- Healthcare access for those with mobility, childcare, and/or transportation challenges.
- A better patient experience in that Garnet will travel to the patient, rather than requiring the patient to travel to Garnet and then wait an undefined amount of time in a waiting room before being seen.
- Transitional and integrated care with PCP and other care teams.

Upon information and belief, there are no 24/7 urgent care options in Chittenden County, leading to over-utilization of emergency departments. Patients with chronic conditions are burdened with frequent provider visits, labs, etc. and healthcare is further complicated when patients have to consider transportation, childcare, time away from work, etc. Garnet's proposal addresses these challenges by bringing the house call back, with mobile preventative and urgent care services.

The mobile units will be staffed by health care providers who hold Vermont licenses in their field, whether it be medicine, nursing, etc.

#### **Green Mountain Care Board Jurisdictional Exclusion**

Pursuant to Green Mountain Care Board Rule 4.205: Certificate of Need, Exclusions from the Certificate of Need Process, and consistent with the provisions of 18 V.S.A. § 9435, to determine whether physician or other practitioner offices are excluded from Certificate of Need review, the Board provides those factors that must be considered, at minimum.

Garnet addresses each such factor in the context of its proposed project.

#### **(a) Billing procedures to be used.**

The mobile clinic's process for billing for visits will be consistent with billing for privately owned physician practices.

The place of service or POS will be coded "-15" for mobile, with services provided onsite for employers or at a patient's residence. Garnet will not bill any separate facility fees; instead, its charge will include the physician and practice expenses.

At the time of launch, Garnet will be out of network with insurance companies. The credentialing process will take 4-6 months and should be completed sometime in 2022. Garnet's fee schedule and payment policies will be consistent with that of other primary care providers.

#### **(b) Structure of ownership.**

Garnet is domiciled as a limited liability company in the State of Vermont and will be a wholly owned subsidiary of Garnet Transport Medicine, LLC, also a Vermont domiciled entity, whose majority owner is Ryan Ferris. The only other member is H. Kenneth Merritt Jr.

**(c) Training and specialties of the staff.**

Our Medical Director, who is an Emergency Medicine physician, will supervise all staff.

A typical care team will be composed of a PA/NP and one clinical support staff person (RN, or similar credentials). All employed PAs and NPs will have training in acute care and/or primary care.

The NP/PA will triage all urgent care visits via telemedicine to determine if an onsite visit is required. When care is delivered in a mobile clinic or in a patient's home, there will always be a minimum of two staff members present.

The following table details the staffing levels. Garnet will utilize a combination of part-time and full-time employees to ramp up to 24/7 staffing, with providers working between 10 and 40 hours/week. At this point, it is difficult to provide specific details, beyond what is set forth below, because of the staffing uncertainties. The details will evolve as individuals in various staff levels are hired.

Service provided by mobile unit	Provider level	Clinical Support Staff
Biometric Screenings	MD, PA or NP	RN, EMT, Paramedic
Primary/Preventative Care Visits	MD, PA or NP	RN, EMT, Paramedic, MA
Urgent Care Visits	MD, PA or NP	RN, EMT, Paramedic

**(d) Procedures to be performed.**

Garnet will offer the following procedures:

- Screening programs for hypertension and diabetes;
- Office visits (E/M) for new and established patients;
- Routine immunizations and medication administration;
- Suturing of minor lacerations;
- Splinting;
- Electrocardiograms; and
- CLIA waived labs. As defined by CLIA, "waived tests" are simple tests with a low risk for an incorrect result.

**(e) Patient referral patterns and relation to other health care institutions.**

- High acuity patients whose needs exceed Garnet's scope of practice will be referred to the appropriate emergency department and/or directed to call 9-1-1. This determination will be made by the provider on call (NP or PA), under the supervision of our Medical Director.
- Garnet will assist patients without primary care providers ("PCPs") of record in identifying PCPs who are accepting new patients.
- For presenting patients with established PCPs, Garnet will send the visit record to the patient's PCP for follow-up.
- Garnet will refer patients to specialists as appropriate.
- Garnet will make referrals to other community resources, such as social workers, housing assistance, etc., as needed.

**(f) Type of diagnostic and other equipment to be purchased.**

- Vitals machine;
- EKG;
- Minor surgical instruments;
- Basic exam room supplies; and
- Lab equipment.

None of the equipment to be purchased for the mobile units would come close to the threshold set forth in 18 V.S.A. § 9434(a)(4) for equipment.

**(g) Representations of the facility to the public.**

The clinic will be represented to the public as a preventative medicine and urgent care provider. Garnet will provide services consistent with those of a physician practice or brick and mortar urgent care. Although this will be a mobile clinic, Garnet will not offer emergency care. Instead, Garnet will refer high acuity patients to the appropriate emergency department.

**(h) The frequency with which other Vermont practitioners offer the same services.**

The services offered are similar to what is available in other physician practices and urgent care providers in the area. However, Garnet will offer after hours and mobile care. Garnet sees its services as a needed supplement to what exists today in the private practice landscape.

Garnet is eager to establish these services, as there is a heavy demand on the area's Emergency Departments that Garnet foresees the ability to help lighten. Please let me know if there is any other information that would be helpful to you in your review of this request.

Sincerely,

*/s/ Shireen T. Hart*

Shireen T. Hart