

**DELIVERED ELECTRONICALLY**

July 8, 2022

Jackie Zaun  
Northeastern Vermont Regional Hospital  
1315 Hospital Drive, P.O. Box 905  
Saint Johnsbury, VT 05819**RE: Docket No. GMCB-010-22con, Northeastern Vermont Regional Hospital,  
Emergency Department and Laboratory Expansion and Modernization. Project  
Cost: \$12,883,594.**

Dear Ms. Zaun:

Thank you for your letter dated July 7, 2022, acknowledging that the above-referenced project is subject to Certificate of Need (CON) review under 18 V.S.A § 9434.

The application must include a detailed description of the proposed project, the need for the proposed project and service area; an explanation of how the proposed project meets the applicable statutory criteria in 18 V.S.A. § 9437; a description of all program components, services, and staffing; a description of any demolition/renovation/construction/fit-up components and associated costs; a description of any temporary and permanent displacement of services or functions and associated costs; the cost of the individual project components and the total project cost; information on financing arrangements; a description of any health information technology components of the project and associated costs; an organizational chart and project timeline.

Note that the Board is currently working to update the Health Resource Allocation Plan (HRAP), referenced in 18 V.S.A. § 9437(1)(C). Because the update is not yet completed, the application should address the following applicable standards from the current HRAP: 1.4, 1.6, 1.7, 1.8, 1.9, 1.10, 1.11, 1.12, 3.4, 3.18, 4.3, and 4.5. If procurement of equipment includes new or replacement major medical equipment including CTs, MRIs, or PET/CTs, address standards 3.5, 3.6, 3.7, 3.20, and 3.23. Additionally, the statutory criteria set forth in 18 V.S.A. § 9437(1)-(5) and (7)-(9) apply to your application.

The application must 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.



Detailed financial information must be provided for the project and explain the impact of the project on change in charges. The required financial tables can be downloaded from and uploaded to Workday Adaptive Planning (FKA Adaptive Insights) when completed. Please contact Matthew Sutter, [Matthew.Sutter@vermont.gov](mailto:Matthew.Sutter@vermont.gov), or Flora Pagan, [Flora.Pagan@vermont.gov](mailto:Flora.Pagan@vermont.gov), with any questions regarding the financial tables or Workday Adaptive Planning.

Once complete, please send your application to me electronically at [Donna.Jerry@vermont.gov](mailto: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

cc. Laura Beliveau, Staff Attorney