FAX: 802-864-0328



April 18, 2016

VIA US MAIL and EMAIL Donna Jerry Senior Health Policy Analyst Green Mountain Care Board 89 Main Street Montpelier, VT 05620

Re:

Docket No. GMCB-020-15con, Proposed Purchase of Rowan Court Health and

Rehabilitation Center in Barre, VT

18/ Shireen Hart Bruk

Dear Ms. Jerry:

I enclose one original and two hard copies of Applicants' Responses to Green Mountain Care Board Requests Dated March 11, 2016, for submission and review by the Green Mountain Care Board. Please feel free to contact me with any questions or comments.

Thank you.

Very truly yours,

Shireen T. Hart, Esq.

Encls.

STATE OF VERMONT GREEN MOUNTAIN CARE BOARD

IN RE: APPLICATION OF)	
BARRE GARDENS HOLDINGS LLC AND)	GMCB 020-15cor
BARRE GARDENS NURSING AND REHAB LLC	_)	
	_	

VERIFICATION UNDER OATH

David Gamzeh, being duly sworn, states on oath as follows:

- 1. My name is David Gamzeh. I am the managing member of Barre Gardens Holdings LLC and Barre Gardens Nursing and Rehab LLC (the "applicants"). I have reviewed the APPLICANTS' RESPONSES TO GREEN MOUNTAIN CARE BOARD REQUESTS DATED MARCH 11, 2016 (the "Submission").
- 2. Based on my personal knowledge and after diligent inquiry, I attest that the information contained in the Submission is true, accurate and complete, does not contain any untrue statement of a material fact, and does not omit to state a material fact.
- 3. My personal knowledge of the truth, accuracy and completeness of the information contained in the Submission is based upon either my actual knowledge of the subject information or upon information reasonably believed by me to be true and reliable and provided to me by the individuals identified below in paragraph 4. Each of these individuals has also 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.
- 4. The following individuals have provided information or documents to me in connection with the Submission and each individual has certified, based either upon his or her actual knowledge of the subject information or, where specifically identified in such certification, based on information reasonably believed by the individual to be reliable, that the information or documents 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:

Ari Stawis Akiva Glatzer Joshua Farkovits Jordan Fensterman Heather Filinow Ephram Mordy Lahasky Andrew Bachand CPA

5. In the event that the information contained in the Submission becomes untrue, inaccurate or incomplete in any material respect, I acknowledge my obligation to notify the Green

Mountain Care Board and to supplement the Submission as soon as I know, or reasonably should know, that the information or document has become untrue, inaccurate or incomplete in any material respect.

David Gamzeh

On April 15, 2016, David Gamzeh appeared before me and swore to the truth, accuracy and completeness of the foregoing.

Notary public

My commission expires February 14 2020

MINDY GOLDBERG
NOTARY PUBLIC, STATE OF NEW YORK
Registration No. 01GO6337093
Qualified in Kings County
Commission Expires February 16, 2020

STATE OF VERMONT GREEN MOUNTAIN CARE BOARD

IN RE: APPLICATION OF)	
BARRE GARDENS HOLDINGS LLC AND	ı.)	GMCB 020-15con
BARRE GARDENS NURSING AND REHAB LLC)	

APPLICANTS' RESPONSES TO GREEN MOUNTAIN CARE BOARD REQUESTS DATED MARCH 11, 2016

Request No. 1 For each of the following (a)-(i), provide in table format with the 29 facilities (from Attachment U) listed in the y axis, the requested information (from the CMS website) in the x axis, indicating the date or time period covered:

Answer:

(a) The overall CMS star ratings (1-5 stars) reflected in the application;

Facility	Overall CMS Star Rating as of 1/15/16										
	*	**	***	***	****						
	Much Below Average	Below Average	Average	Above Average	Much Above Average						
Rowan Court		X									
Brighton f/k/a Friendship	X										
Burlington	X										
Cambridge			X								
Claiborne & Hughes	X										
Colonial Manor	X										
Delmar		X									
Eastview			X								
Franklin Woods			X								
Hamilton					X						
Health Center at Galloway		X									
Highland Manor		X									
Holliswood Center					X						
Lebanon			X								
Logan	X										
Manor Care n/k/a Barclay's			X								
Maple Ridge				X							
Neptune		X									
North Ridge		X									
Pearl Valley		X									
Pickerington		X									
Renaissance		X									
St. Francis		X									
Sheridan		X									
Valley View					X						
Villages of Orleans	X										
Waters Edge	X										
Winchester	X										
TOTAL (minus Rowan)	8	10	5	1	3						

The eighteen short and long-term resident stay quality measure reflected in the application. For each measure where the facility scores below the state average for the state where the facility is located, indicate the percentage below average, leaving measures that are at, or above the state average blank; **a**

Facility	Rowan	Brighton	Burlington	Cambridge	Claiborne	Colonial	Delmar	Eastview	Franklin	Hamilton	Galloway	Highland	Holliswood	Lebanon	Logan	Manor Care	Maple Ridge	Neptune	North Ridge	Pearl Valley	Pickerington	Renaissance	St. Francis	Sheridan	Valley	Villages of Orleans	Waters Edge	Winchester
Moderate to severe pain (lower = better)	+7.5	+7.4		+10.9	+30	+14.6		+7.0			+6.0	6.0+				+1,3	+7.1	+7.1	+3.6				+1.2		+18.0	+21.9		+1.5
Pressure ulcers worsened (lower = better)	+0.1			0.0	+0.5					+1.5		+0,7			+0.5		0		+0,3			2	+1.0		+2.7	+2.6		
Seasonal flu vaccine (higher = better)	-41.0	-25.9	9.7-	9.05-	-7.7			6.9-			4.6		-28.8	-16,3			-9.1		-144	-31.7		-63.9	4.1			-24.6	-6.1	
Pneumococcal vaccine (higher = better)	\$	-34.2	-27.9	-62,8	-3.3			-14.1			-20.6		-16.4	-15.8			-2.5	-40.3	-17.5	-64.7		-49.1				-0.7	-0.1	
Received antipsychotic medication (lower = better)	+1.2	+1.6	6"0+	+0,7		+0,7		+2.0	+1,1			9.1+	+8.2		+0.5				+0.4			0.9+						
Falls with major injury (lower = better)	100						+4.2		+0.4	6.9+	+2.4	+1.0	+0.3		6.0+		+1.9				+0.4				+3.1	+0*1		
Urinary tract infection (lower = better)				+6.4		+1.5					+5.8	+1.7		+3.0	+5.7	+0.4	+0.3									+4.5		+2,3
Self-report moderate to severe pain (lower = better)	1000	+5,9		+19.1		+13	+2,0	6*0+			+0.9	+0.7		+4.9			4.4					+3,5			+13.6	+5.9	0.8+	
Have pressure ulcers (lower = better)	9'1+		+1.8	+1.0	+1,2							+2,4		+2.1			+3.5			+3.1	+2.3	+0.8	+2.1		+2.2		+10.2	
Lose control of bowels/bladder (lower = better)	(2.3)			+5.6									+23,5			+21.2	+39.9	+11.8				+16.2	+38.2		+14.4	+12.5		+5.4
Catheter inserted/left in bladder (lower = better)	K		+2.0	+5.5			+0.4		+4.1	-	+1.9				+0.2			+5.0			7	+0.5		+7.0			+2.0	
Physically restrained (lower = better)	100	+1.0	+0.8	+5.4			+0,3				+2.1		+0*4		+2.6					+0.7	+2.1	9.0+					+1.2	+0.7
Need for help with daily activities increased (lower = better)	+1.2	+2.3	+1.4	+0.4	+8.6		+10.8	+16.2						+1.0			+13	+2.7			+10.7	+11.0					+18.4	+3.6
Lost too much weight (lower = better)	+8.7	+2,9		+0.7									+0.5		+2.4		+3.9	+2.5		+8.1		+8.6	+0.9					9.11+
Depressive symptoms (lower = better)		+6.4	+11.0	+1.0					+6.2				+85.2	+27.9	+17,3		+25.3	+0.7	+75.2	+31.9	+12.3			+13.8	9'0+	1 1 1 8	+36.6	+18.1
Seasonal flu vaccine (higher = better)	-5.4	8.		-14.4		-0.1	-3,0						-5.9				<i>UL</i> -			-13.2		-27.0	-6.7			-3.3	-15.0	
Pneumococcal vaccine (higher = better)	-15.7	-11.9	-12.9	-30.0	-5.7		-5.5	-0.5			-12.7		4.8	-34,5			-12	-8.0		-9.3		-46.7	-3.7	-2.0			-1.7	
Received antipsychotic medication (lower = better)	+3.3	+5.4		+5.0		+1.0	+12.2	-1.0		+17,9			+19.5	+1.1	+4.4		+12.1		+10.6	+21.6		+2.1		+0.7		+3.4		+1,9

The CMS data is as of January 15, 2016.

Request No 1. (cont) (c) The CMS star ratings for staffing reflected in the application;

Facility	Star rating for staffing as of 1/15/16										
	*	**	***	****	****						
	Much Below Average	Below Average	Average	Above Average	Much Above Average						
Rowan Court		X		the suspense Arty							
Brighton f/k/a Friendship		X									
Burlington		X									
Cambridge		X									
Claiborne & Hughes		X									
Colonial Manor				X							
Delmar				X							
Eastview			X								
Franklin Woods					X						
Hamilton			X								
Health Center at Galloway			X								
Highland Manor		X									
Holliswood Center		X									
Lebanon			X								
Logan			X								
Manor Care n/k/a Barclay's		X									
Maple Ridge				X							
Neptune	X										
North Ridge			X								
Pearl Valley	Not available										
Pickerington			X								
Renaissance				X							
St. Francis			X								
Sheridan		X									
Valley View			X								
Villages of Orleans		X									
Waters Edge	X										
Winchester	X										
TOTAL (minus Rowan)	3	9	9	4	1						

(d) The CMS star ratings for RN staffing reflected in the application;

Facility Star rating for RN staffing as of 1/15/16 **** **** Much Below Below Average Above Average Average Much Above Average Average Rowan Court X Brighton f/k/a X Friendship X Burlington X Cambridge Claiborne & X Hughes Colonial Manor X Delmar X X Eastview Franklin Woods X Hamilton X Health Center at X Galloway X **Highland Manor** Holliswood X Center Lebanon X X Logan Manor Care X n/k/a Barclay's X Maple Ridge Neptune \mathbf{X} North Ridge X Pearl Valley Not available X Pickerington X Renaissance St. Francis X Sheridan X X Valley View Villages of X Orleans Waters Edge X Winchester X **TOTAL** (minus 4 5 7 6 4 Rowan)

(e) Any fines, penalties or denials of Medicaid since 2012;

(f) Any fines, penalties or denials of Medicare since 2012;

Facility	Fines, penalties since 2012	Denials since 2012	Notes
Rowan Court	Fine - 12/05/2012 - \$17,150 Fine - 04/01/2013 - \$68,088 Fine - 09/19/2013 - \$21,450 Fine - 11/13/2013 - \$63,246 Fine - 05/13/2014 - \$1,950 Fine - 02/17/2015 - \$1,950	Federal Payment Denial – 04/01/2013 Federal Payment Denial – 11/2013/2013	
Brighton f/k/a Friendship	NONE	NONE	
Burlington	NONE	NONE	
Cambridge	NONE	NONE	
Claiborne & Hughes	Fine - 08/27/2015 - \$19,110		Mr. Lahasky and Mr. Farkovits took ownership in January 2015.
Colonial Manor	Fine - 02/25/2013 - \$3,250 Fine - 06/25/2013 - \$20,150 Fine - 08/07/2014 - \$11,440	Federal Payment Denial – 06/25/2013	Jordan Fensterman did not become 7% owner until June/June 2014.
Delmar	Fine – 05/10/2013 \$168,155	Federal Payment Denial – 05/2010/2013	The applicants did not have any ownership interest in Delmar until long after these fines and the denial were imposed. They took ownership in 2015.
Eastview	NONE	NONE	
Franklin Woods	Fine – 07/31/2014 - \$2,194	NONE	Jordan Fensterman did not become 7% owner until June/June 2014.
Hamilton	NONE	NONE	
Health Center at	NONE	NONE	
Galloway			
lighland Manor	NONE	NONE	
Holliswood Center	NONE	NONE	
ebanon	NONE	NONE	
Logan	Fine – 12/12/2013 - \$2,080 Fine – 12/12/2013 - \$2,080 Fine – 06/17/2014 - \$2,275	NONE	Jordan Fensterman did not become 7% owner until June/June 2014.
Manor Care n/k/a Barclay's	Fine – 04/18/2013 - \$1,138 Fine – 04/18/2013 - \$5,363	NONE	Mr. Lahasky and Mr. Farkovits took ownership in November 2015.
/aple Ridge	NONE	NONE	S-45-7 (S-55-7 (S-55-7 (-1)))
leptune	NONE	NONE	
North Ridge	Fine – 02/17/2015 - \$1,625 Fine – 02/17/2015 - \$3,900	NONE	Jordan Fensterman did not become 7% owner until June/June 2014.
Pearl Valley	Fine – 02/18/2013 - \$14,490 Fine – 10/02/2013 - \$49,525	Federal Payment Denials – 02/18/2013 and 10/02/2013	Mr. Lahasky purchased his interest in 2015, long after these fines were imposed.
rickerington	Fine – 12/03/2014 - \$2,080	NONE	Jordan Fensterman did not become 7% owner until June/June 2014.
enaissance	NONE	NONE	1
t. Francis	NONE	NONE	
heridan	NONE	NONE	
alley View	NONE	NONE	
illages of Orleans	NONE	NONE	
Vaters Edge	NONE	NONE	
Vinchester	NONE	NONE	

The CMS data is as of January 15, 2016.

(g) The provider entity for mental health services, indicating whether on-site or telehealth;

Facility	Provider entity for mental health services	On-site or tele- health	Provide entity for psychiatry services	On-site or tele-health
Brighton f/k/a Friendship	i			
Burlington				
Cambridge				
Claiborne & Hughes				
Colonial Manor				
Delmar	CHE Behavioral Health Services	On site		
Eastview				
Franklin Woods				
Hamilton				
Health Center at	CHE Behavioral Health	On site		
Galloway	Services			
Highland Manor				
Holliswood Center	CHE Behavioral Health Services	On site		
Lebanon				
Logan				
Manor Care n/k/a Barclay's				
Maple Ridge				
Neptune	CHE Behavioral Health Services	On site		
North Ridge				
Pearl Valley				
Pickerington				
Renaissance				
St. Francis	CHE Behavioral Health Services	On site		
Sheridan				
Valley View	CHE Behavioral Health Services	On site		
Villages of Orleans				
Vaters Edge				
Winchester				

Upon information and belief, all above mental health and psychiatry services are provided on site.

Request No 1. (cont) (i) Re-hospitalization rates.

Facility	Re-hospitalization rates Q2 2014 – Q1 2015	AHCA Average Rate by State Q1 2015
Brighton f/k/a Friendship	14.30%	16.9%
Burlington	19.80%	15.20%
Cambridge	21.40%	17.30%
Claiborne & Hughes	13.60%	16.80%
Colonial Manor	11.60%	15.20%
Delmar	Not available	
Eastview	11.60%	15.20%
Franklin Woods	22.00%	17.30%
Hamilton	Not available	
Health Center at Galloway	21.60%	18.70%
Highland Manor	14.90%	16.90%
Holliswood Center	21.60%	16.7%
Lebanon	22.50%	17.30%
Logan	14.60%	17.30%
Manor Care n/k/a Barclay's	18.70%	18.70%
Maple Ridge	17.00%	15.20%
Neptune	20.40%	20.4%
North Ridge	11.50%	15.20%
Pearl Valley	2.50%	15.4%
Pickerington	18.50%	17.30%
Renaissance	19.8%	15.90%
St. Francis	10.60%	16.70%
Sheridan	22.10%	15.20%
Valley View	Not available	
Villages of Orleans	17.10%	16.70%
Waters Edge	Not available	15.20%
Winchester	21.09%	17.30%

<u>Request No. 2.</u> In the same table format, list Holliswood and Williamsburg in the y axis and the overall CMS ratings (1-5 stars) by month for the period Mr. Gamzeh and Mr. Glatzer served as Administrators in the x axis. Indicate the dates covered by the ratings.

Answer: Month/Year David Gamzeh -Akiva Glatzer-David Gamzeh -Akiva Glatzer -Williamsbridge Williamsbridge Holliswood Holliswood 2 1/2009 2 2/2009 3/2009 1 4/2009 1 5/2009 1 6/2009 1 7/2009 1 8/2009 1 9/2009 1 10/2009 1 1 11/2009 12/2009 1/2010 1 2/2010 1 2 3/2010 2 4/2010 2 5/2010 2 6/2010 7/2010 2 2 8/2010 2 9/2010 2 10/2010 11/2010 2 5 2 5 12/2010 1/2011 2 5 2 5 2/2011 2 5 3/2011 2 5 4/2011 5 2 5/2011 2 6/2011 5 7/2011 3 5 8/2011 3 5 5 3 9/2011 3 5 10/2011 11/2011 3 5 3 5 12/2011 1/2012 3 5 3 5 2/2012 3/2012 3 5

Month/Year	Gamzeh Williamsbridge	Glatzer Williamsbridge	Gamzeh Holliswood	Glatzer Holliswood
4/2012		3		
5/2012		4	5 5	
6/2012		4		
7/2012		4	5	
8/2012		4	5	
9/2012		4	5	
10/2012		5	5	
11/2012				5
12/2012				5
1/2013				5
2/2013				5
3/2013				5
4/2013				5
5/2013				5
6/2013				5
7/2013				5
8/2013				5
9/2013				5
10/2013				
11/2013				5 5
12/2013				5
1/2014				5
2/2014				5
3/2014				5
4/2014				5
5/2014				5
6/2014				5
7/2014				5
8/2014				5
9/2014				5
10/2014				5
11/2014				5
12/2014				5
1/2015				5
2/2015				4
3/2015				4
1/2015				4
5/2015				4
5/2015				4
7/2015				5
8/2015				5

<u>Request No. 3</u> Explain in detail the applicants' plans to improve each quality measure rated below-average at Rowan Court, currently designated a Special Focus Facility (SFF) by CMS.

Answer:

Here are the below-average quality measures at Rowan Court, as of April 12, 2016:

Short stay Moderate	Short stay Pressure	Short stay Seasonal	Short stay Pneumoco ccal	Short stay Received antipsych	Long stay Have	Need for help with	Long stay Percent of	Long stay Lost too	Long stay Seasonal	Long stay Pneumoco ccal	Long stay Received antipsych
+3.9	+0.5	-43.1	-32.7	+0.6	+2.5	+3.2	+13.0	+1.8	-7.0	-9.6	+2.0

It is important to note that the quality measures change frequently – especially with respect to a Special Focus Facility where one can expect to see an uncharacteristically rapid improvement in areas that were significantly below average. In fact, the quality measures for Rowan Court have improved significantly since January 15, 2016 through the present. For that reason, the applicants expect that the quality measures may look very different any number of months from now. If, however, one were to assume that the above quality measures still existed at the time of a change in ownership, then the Applicants would address such measures as follows.

Specific Quality Measures

a. Reducing short stay moderate to severe pain (lower % is better)

The applicants' initial step would be to identify Rowan Court's current approach to identifying and managing pain, and the basis for that approach. Working with the appropriate team and consistent with the QAPI, the applicants would use this information to assure that such approach is consistent with current, evidence-based pain management practices.

Key considerations:

Identifying any and all barriers to preventing and managing pain, including root causes of undesirable variations in performance and practice.

Identifying how to reinforce optimal pain management practices and performance.

Identifying needed improvements and how to get everyone properly (re)trained and re(educated).

Reevaluating performance, practices and results.

b. Reducing unnecessary antipsychotic medications

The applicants would work with the facility staff, including the Medical Director and the QAPI team, to achieve a reduction in the use of antipsychotics with the present population at Rowan Court.

When a resident is admitted or re-admitted into to Rowan Court from a hospital, other nursing facility, or community setting with and being treated with antipsychotic drugs, it is our responsibility to determine why the drug was started. The applicants will evaluate the need for the antipsychotic drug at the time of admission. We can then determine whether it is appropriate to reduce the medication.

If, on the other hand, an antipsychotic drug is deemed necessary, it is our approach that any initial dose be started low and then titrated slowly to maintain the highest level of functioning with the lowest effective dose. Dosages are then monitored regularly with considerations of adverse reactions while examining the resident's response and level of functioning.

The ongoing use of Antipsychotic medication will be reviewed at least quarterly for each resident.

c. Flu Vaccine

Using the Priority Healthcare Group's Influenza Immunization Program, the applicants would use the following strategies:

(Re)educate staff, residents and families regarding the importance of the Influenza Immunization program and the risks and benefits.

Identify patients who have not been vaccinated or have declined vaccination.

Offer and re-offer the vaccine.

d. Pneumococcal Vaccine

Using the Priority Healthcare Group's Pneumococcal Vaccine Program, developed from CDC guidelines, the applicants would employ the following strategies:

(Re)educate staff, residents and families prior to or on admission.

Assess resident eligibility to receive the vaccine.

Request No. 4 List any of the remaining 28 facilities (of the 29 referenced in \P 1, above) with an SFF designation and explain in detail any programs or plans instituted to improve below-average quality measures.

Answer:

None of the facilities other than Rowan Court is designated as Special Focus Facility per CMS data of March 17, 2016.

Request No. 5 Confirm whether or not there is any pending litigation against any of the 29 facilities or the five individuals seeking to purchase Rowan Court. If so, please provide a detailed explanation and status of each.

Answer:

The only litigation involving one of the five individuals or their facilities is as follows:

Jordan Fensterman

Before Jordan Fensterman had direct involvement in nursing home transactions, his father, Howard Fensterman, was engaged in nursing home transactions. Howard Fensterman occasionally gifted Jordan Fensterman and his sister, Staci Leibson, a small portion of his interest in the nursing homes, always under 1%, and usually in the range of ½ to 1/3 of a point. A partner in one of the transactions filed a law suit against almost everyone involved in that particular nursing home, in which Jordan Fensterman holds a less than 1% ownership.

The case is pending in the New York State Supreme Court, Nassau County, under index # 010021/2015, Martin Farbenblum, Edward Farbenblum, Dr. Anthony Bacchi, and the M & E Farbenblum LLC, each individually and on behalf of HH Acquisition I LLC, vs. Howard Fensterman, Abrams, Fensterman, Fensterman, Eisman, Formato, Ferrara & Wolf, LLP, Robert Fensterman, Lori Fensterman, Jordan Fensterman, Staci Fensterman, Irwin Peckman, Steven J. Eisman, Mark Frimmel, Sara C. Lichtenstein, Patrick Formato, Allan Povol and John Does 1-10.

The case involves various claims asserted against the defendants relating to the sale of their interests in two separate skilled nursing and adult care facilities. Essentially, it is claimed by the plaintiffs that they did not receive all of the proceeds to which they were entitled from the sale of the facilities. The defendants have brought a third-party action against the attorney who drafted the relevant sales documents.

There have not been any dispositive motions. There was a motion brought to intervene in the action in December, 2015, which motion, along with all other proceedings, remains stayed. Discovery has yet to take place. It is presently stayed, awaiting the appointment of Estate representatives for plaintiff, Martin Farbenblum, and defendant, Steven J. Eisman.

Request No. 6 Explain in detail whether and how the addition of approximately 3 FTEs in 2016, 2 FTEs in 2017, and 1.8 FTEs in 2018 will ensure sufficient staffing on all shifts at Rowan Court. Further explain any strategy or safeguards the applicants will put into place to ensure the safety of all staff and the facility's residents, given the plan to admit more individuals with behavioral complexities.

Answer:

In anticipation of increasing census, along with the possibility of admitting more individuals with behavioral complexities, Rowan Court's leaders along with Priority Healthcare Group, will review the staffing patterns on each nursing unit on an as needed basis. The review includes consideration of the acuity of the patient population on the unit, the measurable patient outcomes, the physical layout of the unit, the needed skill sets of the nursing team, and standard nursing to patient ratios. Adjustments to the staffing are made based on the assessed needs.

Rowan Court's leaders, in conjunction with Priority Health Care Group, will evaluate on an as needed basis the potential need for a secured/locked unit, enhanced wander guard system and the installment of video cameras to ensure the safety of all staff, visitors and facility residents and do so in compliance with applicable laws and regulations and state approvals.

<u>Request No. 7</u> Provide the name and description of the contractor currently operating the food service at Rowan Court and who the anticipated food service provider will be if the purchase is approved.

<u>Answer:</u>

Rowan Court currently outsources dining services to Morrison Management Specialists, Inc., a Georgia corporation located in Atlanta, Georgia. The anticipated plan, if the purchase is approved, is to maintain the current food service provider for the foreseeable future.

Request No. 8 Based on data from the Vermont Division of Rate Setting, FY 2014 median raw food cost at Rowan Court was \$8.13 per person/per day. Explain whether the cost will be maintained, increased or decreased if the purchase is approved and ownership transferred to the applicants. If the cost will be decreased, explain in detail how reductions will be attained without negatively affecting quality of services or care.

Answer:

Rowan Court's current contractor agreement with Morrison Management Specialists is a daily rate which is all inclusive. If the purchase is approved, then the applicants' plan is to maintain the daily rate provided at the facility. They will reevaluate costs on an as needed basis. The applicants strive to ensure a seamless transition and establish and maintain a high level of quality of care and services for Rowan Court's residents. To do so, many of the changes to be made, if at all, are not identified until they transition operations and are better situated to identify areas for improvement.

<u>Request No. 9</u> Provide the patient admission criteria currently used at Rowan Court and the criteria to be used if the purchase is approved, given the plan to admit more individuals with behavioral complexities.

Answer:

Please see **Attachment KK**, which documents Project Greenlight, Revera's current admission process. Each resident referral is evaluated for admission on an individual basis, based on the facility's ability to meet the potential resident's overall needs. These same criteria will be used by the applicants if the purchase is approved. The applicants, however, expect over time to accept for admission individuals with greater behavioral complexities.

Request No. 10 Explain how occupational, speech and physical therapy is currently provided to patients and how it will be provided if the purchase is approved. Confirm whether the costs for the dietician, pharmacist, activities director, occupational, physical and speech therapists are reflected in the financial tables submitted with the application.

Answer:

Currently occupational, speech and physical therapy is provided to the patients by Genesis Rehab Services. Rowan Court currently plans to maintain Genesis Rehab Services and the current individuals that provide these services to the patients. Rowan Court will reevaluate these staff members and contracted services on an as needed basis.

The costs for the dietician, pharmacist, activities director, occupational, physical and speech therapists are reflected in the financial tables submitted with the application, as confirmed by Andrew Bachand CPA who prepared the financial tables.

<u>Request No. 11</u> Provide the policies, education and training materials currently used and those to be used if the purchase is approved to ensure that staffing and admissions criteria in each facility comply with the Americans with Disabilities Act.

Answer:

The current Admissions Policy Statement and Employee Handbook of Personnel Policies and Procedures for Rowan Court are submitted as **Attachment LL**. These same documents would be used by the applicants if the purchase is approved to ensure that staffing and admissions criteria comply with the Americans with Disabilities Act. Please note that the applicants would review and revise such documents as they transition. However, they plan to utilize the existing policies and procedures at the outset to ensure a smooth transition for the residents and staff. Improvements to such documents, or replacement of such documents, will be made as identified and in a manner that ensures a smooth change in ownership.

Request No. 12 Explain whether the new owners will create a separate Medicare wing(s).

Answer:

Rowan Court presently has a unit which focuses on short term care for residents. There are no plans to add or create a separate Medicare wing(s).

Request No. 13 Identify the number of patients currently receiving hospice care at Rowan Court and the agency or agencies that provide such service.

Answer:

As of March 30, 2016, the number of residents receiving hospice care at Rowan Court was 0.

The agencies that provide such services for Rowan Court are:

Central Vermont Home Health and Hospice 600 Granger Road Barre, VT 05641

and

Bayada Hospice 80 Pearl Street Essex Junction, VT 05452

Request No. 14 Provide both the facility's current and proposed organizational charts.

Answer:

See Application Narrative, at p.3 ¶ 12. The same organizational chart submitted with the original application narrative, **Attachment H**, applies to current operations and operations should the purchase be approved.

Request No. 15 Confirm that all personal, health care and non-health care interests, assets and liabilities are included in the personal financial statements for each of the five individuals proposing to purchase Rowan Court. Explain why Riverside Nursing and Rehabilitation Center, in which Ephram Mordy Lahasky is shown to have an interest, is not included on his personal financial statement.

Answer:

Each individual applicant confirms that all personal, health care and non-health care interests, assets and liabilities are included in his personal financial statement, as of the date it was executed.

Riverside Nursing and Rehabilitation Center was mistakenly identified as one of Mr. Lahasky's holdings. This is in his wife's name alone.

<u>Request No. 16</u> Provide detailed information on the historical and current relationship/interests between Greystone Funding Corporation, the lender for this transaction, and the five individual purchasers.

Answer:

There is no relationship/interest other than that Greystone has provided financing on other homes to the individual applicants for other transactions.

Request No. 17 Provide the contingency plan if financing with HUD is not approved.

Answer:

First and foremost, please note that the projections in <u>Attachment BB</u> do not assume a HUD loan. In the event a HUD-insured loan is not approved, Greystone has represented that it will convert the bridge loan to a permanent loan subject to underwriting and loan-to-value and debt service coverage ration hurdles.

Second, the applicants have extensive, favorable lending relationships resulting from their interests in other skilled nursing facilities. The applicants submit that if they do not finance the purchase of Rowan Court through Greystone, they will have no difficulty securing a loan through a private bank.

ATTACHMENT KK

	CLINICAL GRID	
Red	Yellow	Green
/ent - (Unless a Certified Unit)	Chemotherapy- (Oral Agent) (consider costs of med)	TV .
nown Sex Offenders	Reverse Isolation- (Bed Management)	Tracheotomy – stable (infrequent suctioning)
leparin Drip	Isolation- (Bed Management)	Wound Care
sulin Drip	NG tube- (Short term with a Plan to Remove or	CADD/PCC pump
trating Medications	Replace with a Permanent Tube)	Wound Vac's
ocumented Danger to Self or Others	TPN	GT
uicidal ideology- (Attempts/ Recent History of)	Tracheotomy – less stable due to suctioning, care, or	JT .
urrent illegal drug use	infection status needs	PICC/Central lines
ehaviors- (Sexually Inappropriate)	CAPD- (Training and DPH Approval)	Oxygen Management
Veight over 450lbs	Chest Tubes- (Availability of Supplies)	Suctioning
	Traction- (Need time to get Equipment)	Chest PT/Postural Drainage
	CPM- (Need time to get Equipment)	Surgical Drains
	Kidney Transplants	S/P Cabbage/Valve Replacement/Repair
	MRDO- (Bed Management)	Hospice
	Chemical Restraints	Pain Management
	Physical Restraints	Respite
	Substance Abuse- (Legal)	Ostomy Care
	Bariatric > 350 # (Equipment and staffing needs	Tube Feeding (As long as the formula is at the centers)
	evaluation)	Endotrachial suction (Nurses must be trained prior
	Psychiatric Conditions- (Acute)	to acceptance-call O2
	Elopement Risk or History of	Solutions if training needed)
	Behaviors	Uncomplicated Ortho
		Oxygen and Respiratory treatments
	**TB- (Non Active or In Treatment) Center needs to	CPAP/Bi PAP
	confer with local health department for all referrals	
	with active TB. Once clearance has been given by the	
	HD for discharge from the hospital they will discuss	
	specific needs with center	
	SERVICES OUTSIDE CENTER	A Sanctiful Control of the Control o
		Chemotherapy
	171 J. 121 1	Blood Transfusions
		Hemodialysis
	Transfer of the Control of the Contr	Wound Clinic
		Radiation

ATTACHMENT LL



Employee Handbook of Personnel Policies And Procedures

538 Preston Ave., Suite 270 Meriden CT 06450

September 1, 2013

III. EQUAL EMPLOYMENT POLICIES

Equal Employment Opportunity

In order to provide equal employment and advancement opportunities to all individuals, employment decisions at Revera will be based on merit, qualifications and abilities. Revera does not discriminate in employment opportunities or practices on the basis of race, creed, religion, color, national origin, ancestry, age, sex, sexual orientation, marital or domestic partnership status, familial status, atypical heredity, cellular or blood trait, genetic information, disability, liability for service in the United States armed forces, veteran status, tobacco use outside of employment, or any other legally protected status.

If you or any Employee has a question or concern about any type of discrimination in the workplace, you are encouraged to bring these issues to the attention of your supervisor or the Executive Director. Employees can raise concerns and make reports without fear of reprisal. Anyone found to be engaging in any type of unlawful discrimination will be subject to disciplinary action up to and including termination of employment. If for any reason you are not comfortable discussing any matter with your supervisor or any other management personnel, please contact Revera Corporate Office to speak with the Vice President of Human Resources at 1-203-608-6100.

Americans with Disabilities Act (ADA)

The Company is committed to complying with the Americans with Disabilities Act and all other relevant state and federal laws protecting the rights of individuals with disabilities. Consistent with this commitment, the Company will not discriminate against any qualified Employee or applicant for employment with respect to any of the terms and conditions of employment because of such person's disability or perceived disability so long as the individual can perform the essential functions of his or her job. Furthermore, the Company will make reasonable accommodations for qualified applicants or Employees with known disabilities unless the accommodations would impose undue hardship to the operation of its business.

The Company encourages individuals with disabilities to contact their Center Executive Director or a member of the Human Resources Department to request a reasonable accommodation. Upon receipt of a request, the Company will meet with the Employee to determine what accommodations will be necessary and how best to respond to the request. The Company will make every

reasonable effort to evaluate the feasibility of the request and expeditiously communicate the decision regarding the request to the Employee.

This policy governs all aspects of employment, including selection, job assignment, compensation, discipline, termination, and access to benefits and training.

Harassment Based On Race, Color, Religion, Gender, Sexual Orientation, National Origin, Age or Disability

It is the Company's policy to maintain a working environment of mutual respect, where no Employee is harassed based on race, color, religion, gender, sexual orientation, national origin, age or disability.

Harassment is verbal or physical conduct that demeans, stereotypes, or shows hostility or aversion toward an individual or group because of any protected characteristic such as race, color, religion, gender, sexual orientation, national origin, age or disability and which conduct may be offensive to others, create an offensive, intimidating or hostile working environment, or interfere with an Employee's work performance.

Examples of such conduct include, but are not limited to, the following:

- Epithets, slurs, insults or negative stereotyping with regard to race, color, religion, gender, sexual orientation, national origin, age, or disability;
- Acts or jokes that are hostile or demeaning with regard to race, color, religion, gender, sexual orientation, national origin, age or disability;
- Threatening, intimidating or hostile acts that relate to race, color, religion, gender, sexual orientation, national origin, age or disability; and
- Display of written or graphic material that demeans, ridicules or shows hostility toward an individual or group because of race, color, religion, gender, sexual orientation, national origin, age or disability.

The Company will not tolerate any form of prohibited harassment of Employees on the job by supervisors, other Employees or by non-Employees such as residents, their families or vendors.

Please note that while this policy sets forth our goals of promoting a workplace that is free of prohibited harassment, the policy is not designed or intended to limit our authority to discipline or take remedial action for workplace conduct which we deem unacceptable, regardless of whether that conduct satisfies the definition of prohibited harassment.

An Employee who believes that he or she has been the victim of harassment based on race, color, religion, gender, sexual orientation, national origin, age or disability, or who observes an incident of such harassment, should report the matter immediately to his or her supervisor. A supervisor who observes an incident that may constitute harassment or who otherwise becomes aware of such an incident should immediately notify a Human Resources representative, or the Center Executive Director or designee who will arrange for an appropriate investigation. Upon completion of the investigation, the Employees directly involved will be advised of the results of the investigation, to the extent appropriate under the circumstances.

An Employee not satisfied with his or her supervisor's response to a complaint of harassment based on race, color, religion, gender, sexual orientation, national origin, age or disability, or who for any reason feels uncomfortable discussing the matter with his or her supervisor (for example, if the complaint concerns the supervisor's conduct), may bring the complaint directly to the attention of the Center Executive Director and/or the Corporate Vice President of Human Resources. The complaint will be investigated, and the Employees directly involved will be advised of the results of the investigation, to the extent appropriate under the circumstances.

To the fullest extent possible, all internal investigations of harassment complaints will be conducted confidentially. It is the duty of all Employees to cooperate in investigations of harassment.

Any supervisor or other Employee who is found to have engaged in harassment of another Employee based on race, color, religion, gender, sexual orientation, national origin, age or disability will be disciplined in accordance with the Company's discipline policy.

Retaliation against an individual who has made a complaint under this policy and retaliation against individuals for cooperating with an investigation of a complaint under this policy is unlawful and will not be tolerated by the Company.

All questions regarding this policy should be directed to Corporate VP Human Resources at 1-203-608-6100.

Admissions

Highlights Policy Statement Written policies and procedures governing admissions to the facility will be maintained on a current basis to ensure fair and impartial admission practices. **Policy Interpretation and Implementation** The primary purpose of our admission policies is to establish uniform guidelines Purpose for personnel to follow in admitting residents to the facility. Applicability Our admission policies apply to all residents admitted to the facility without regard to race, color, creed, national origin, age, sex, religion, handicap, ancestry, marital or veteran status, and/or payment source. (The Americans with Disabilities Act (ADA) became law in 1990) **Objectives** The objectives of our admission policies are to: Provide uniform guidelines in the admission of residents to the facility; Admit residents who can be adequately cared for by the facility; Reduce the fears and anxieties of the resident and family during the admission process: d. Review with the resident, and/or his/her representative (sponsor), the facility's policies and procedures relating to resident rights, resident care, financial obligations, visiting hours, etc.; and e. Assure that appropriate medical and financial records are provided to the facility prior to or upon the resident's admission. Responsibility It shall be the responsibility of the administrator, through the admissions department, to assure that the established admission policies, as they may apply, are followed by the facility and resident. **Review of Policies** Our admission policies and procedures are reviewed for revisions and updates as necessary, but at least annually. Records of such revisions and/or reviews are maintained in the business office. Regulatory Reference Sources and Revision Dates **OBRA Regulatory** 483.12(c)(1)-(2) Reference Numbers Survey Tag Numbers F207

Date: ______ By: _____

Date: ______ By: _____

By: ______ By: _____

Date: ____

Admissions - ADA

Policy/Procedures

Reviewed/Revised