

Green Mountain Care Board 89 Main Street Montpelier, VT 05620 [phone] 802-828-2177 www.gmcboard.vermont.gov Alfred Gobeille, Chair Con Hogan Jessica Holmes, PhD Betty Rambur, PhD, RN Allan Ramsay, MD Susan Barrett, JD, Executive Director

SENT ELECTRONICALLY

October 21, 2015

Mr. Thomas Huebner, President and CEO Rutland Regional Medical Center 160 Allen St. Rutland, VT 05701

RE: Docket No. GMCB- 023-15con, Rutland Regional Medical Center, Proposed Replacement of Air Handling Units, Project Cost: \$3,500,000.

Dear Tom:

Thank you for the Letter of Intent relative to the above referenced project dated October 5, 2015 and received on October 13, 2015.

The application should begin with a detailed description of the proposed project, including a description of each component, upgrades in the capacity of existing systems, construction and/or renovation work, the cost of each component, the total project cost, expected beginning and end dates of project, and a phasing plan. The project description should also include a summary of all temporary and permanent displacements caused by the project and such costs must be included in the total project cost; a description of any repurposing of space, if applicable; why the proposed project as well as each component is needed; and effect the project will have on Rutland Regional Medical Center (RRMC).

Pursuant to 18 V.S.A. § 9437(1), the application must be consistent with the current Health Resource Allocation Plan (HRAP). The following HRAP CON Standards apply to the proposed project: 1.9, 1.10, 1.11, 1.12, and 3.4. In addition, statutory criteria 2-6 and 8, if applicable, apply to your application. Standard financial tables 1 and 2 and tables 3, 4, 5, A, B, C and a full set of assumptions that underlie each financial table must also be completed. Also provide a summary overview of the changes reflected in each table including increases or decreases and percent change represented. Also provide the effect of this project on rates and net patient revenues for the years represented in the financial table. Please provide existing and proposed floor plans and existing and proposed mechanical, electrical and plumbing summary narratives, if applicable. As we do not have a detailed explanation of the proposed project, please contact me if you believe some of the above referenced HRAP standards do not apply.

In responding, please restate the HRAP standards and statutory criteria verbatim in bolded font and respond to each in unbolded font. Please mail the original and two hard copies of the full application including financial tables, existing and proposed architectural and mechanical, electrical and plumbing plans, an excel version of the standard financial tables and the Verification Under Oath form to us and an electronic copy to donna.jerry@vermont.gov.



If you have any further questions, please do not hesitate to contact me at (802) 828-2918.

Sincerely,

s/ Donna Jerry
Health Policy Analyst

