

**Green Mountain Care Board**  
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## DELIVERED ELECTRONICALLY

February 10, 2016

Ms. Eileen Elliott, Esq.  
Dunkiel, Saunders, Elliott, Raubvogel, Hand  
91 College St., PO Box 545  
Burlington, VT 05402

### **RE: Docket No. GMCB-010-15con, Proposed Ambulatory Surgical Center**

Dear Eileen:

Based on our review of the application and Green Mountain Surgery Center's (GMSC) responses to the first set of questions, please respond to the following:

1. Tables 3 and 4 reflect a 15.4% increase in utilization for each of the two ORs and a 15.5% increase for each of the four procedure rooms from year 1 to year 2. For the two following years, the tables indicate an approximate 1.0% annual increase in each OR and procedure room, which is described on page 5 as "very conservative." Provide the expected ranges (low, medium, high) and percent increase for each of the four years for OR and procedure room utilization. Identify the geographic sources and breakdown of the expected growth (*e.g.* Chittenden County, Franklin County or other areas including outside Vermont) for each of the four years.
2. Provide annual projections of growth in utilization (low, medium, high) and percent increase beyond the years identified and referenced in Question 1 above, until capacity is realized. Identify geographic sources of the expected growth for each year.
3. Correct the math errors and omissions and resubmit Tables 1, 2, 3 and 4 on pages 1-3. Please populate the row titled, "% Change from Previous Year" for OR 2 on Table 3.
4. For Physicians A-P in the confidential submission, provide the projected number of surgeries and procedures each is projected to perform in years 2017, 2018, 2019 and 2020 and of the total, the projected number/percent to be performed at GMSC.
5. Provide full copies of all studies, reports and/or analyses and assumptions for each scenario analyzed relative to the number of operating rooms, procedure rooms, and pre-and post-op beds.



6. Provide a cost benefit analysis through 2020 that supports the need for the project which includes an analysis of the impact on Vermont hospitals offering the same services.
7. Explain how the GMSC will provide health care services that are distinct from services currently provided at NMC and UVMMC. If there is little or no distinction, provide data demonstrating the need for duplication of existing services in Chittenden and Franklin counties.
8. Provide GMSC's proposed marketing plan for Years 1, 2, 3 and 4. Include the services marketed, target geographical areas, and annual budget for marketing/advertising.
9. Provide current wait times by procedure and surgery for each of the physicians A-P and for "other physicians" listed on page 27 of the application.
10. Provide GMCS's expected wait times for most surgeries and procedures for Years 1 through 4 of operation.
11. Assuming a national benchmark of 75-80% use of capacity, explain GMCS's need for the project in light of projected OR and procedure room utilization in Years 1 through 4 ranging from 44.2% to 61.4%.
12. Provide detailed information about the failed attempts by private practice specialty groups to attract new physicians referenced on page 9, including number of physicians, their specialties, and why in each instance the recruitment efforts failed.
13. Provide the vendor quote and a detailed breakdown of all costs necessary to make the electronic health record (EHR) fully operational.
14. Provide more detailed information regarding the current problems experienced with EPIC and their effect on providers interested in offering services at GMSC, as identified on page 22 of your responses.
15. Provide a side-by-side comparison of the proposed revisions to the policy for free and discounted care (page 24) and the policy submitted in the application. Explain why GMSC is making each revision.
16. Explain where patients will obtain imaging services.
17. Provide support for the statement that GMSC will be able to "immediately reduce the financial burden borne directly by...the state's health care system as a whole." Application at 5. Address how hospitals will pay for fixed capacity costs if revenue from lower risk and less complex cases are transferred to the GMSC.



18. Explain whether GMSC plans to provide additional financial support or other resources in exchange for its reliance on 911 emergency services to transport patients in the event of an emergency.
19. Relative to HRAP Standard 1.3, describe in detail why it is not feasible or appropriate for GMSC to provide services in collaboration with existing facilities and providers in the current Vermont health system.
20. Explain if GMSC plans to share in the cost of recruiting physicians to Vermont with other Vermont providers.
21. Explain whether and how GMSC will participate in state and national health care reform initiatives that move away from traditional fee-for-service reimbursement.
22. The plans submitted for the surgical center suite do not meet FGI 2014 guidelines, including the layout for sterile processing. Explain how GMSC will revise the plans to address deficiencies, and whether GMSC will incur additional costs, directly or indirectly, in order to comply with FGI guidelines
23. Provide a dimension plan indicating sizes and square footage for each function that complies with FGI 2014 requirements.

In responding to these questions, please restate the question in bold font and respond in unbolded font, and send the original and two hard copies with a Verification Under Oath to me at the Green Mountain Care Board, 89 Main Street, Montpelier, Vermont 05620. Please send the electronic copy to [donna.jerry@vermont.gov](mailto:donna.jerry@vermont.gov).

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

Sincerely,

*s/ Donna Jerry*

Donna Jerry  
Senior Health Policy Analyst

cc: Judy Henkin, Health Policy Director

