Docket No. GMCB-015-16con

Certificate of Need Application
Creation of SVMC Dental Home
Southwestern Vermont Medical Center
January, 2017

Document prepared by:
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Bennington, VT 05201
802 440 4051
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January 3, 2017

Donna Jerry, Health Care Administrator
Green Mountain Care Board
89 Main Street, Third Floor, City Center
Montpelier, VT 05620

RE: Docket No. GMCB-015-16con
CON application to create the SVMC dental home

Dear Ms. Jerry,

This application is pursuant to Certificate of Need (CON) statute 18 V.S.A. 9440(c)(2)(A). Southwestern Vermont Medical Center (SVMC) is applying for a certificate of need to create a dental home on SVMC’s Bennington Campus. This project requires a CON because it will be a new service with an annual operating expense greater-than $500,000, and thereby exceeds the threshold for invoking CON jurisdiction per statute.

SVMC requests approval to create a dental home for the following reasons;

- A significant percentage of the population within SVMC’s service area is afflicted with dental decay. Tooth decay is particularly acute in children and youth. For example, Bennington kindergarteners have the highest incidence of tooth decay among peers in Vermont (Vermont Department of Health, Keep Smiling Report, 2014).
- Access to dental services throughout our service area is limited. No dentists in Bennington are accepting new patients with Medicaid’s Dr. Dynasaur insurance coverage.
- The proposed SVMC dental home aligns with the goals of the Vermont Oral Health Plan, including the strategy to ensure that all Vermonters have access to a dental home and the goal of enhancing Vermont’s oral health workforce through provider recruitment.

SVMC intends to renovate 1,890 sq ft in the Medical Office Building to install the SVMC dental home. The renovated facility will have 4 dental exam and treatment rooms, a small laboratory for preparing implants, and a panoramic dental x-ray machine. The cost of the project is estimated to be approximately $804,000 for renovation, fit-up and dental practice software.

Attached with this letter is the signed and notarized Verification of Oath form and check for $1,005 representing 0.125% of the total project cost of approximately $804,000.

We thank the Green Mountain Care Board for considering this important project.

James Trimarchi, Director Planning 802 440 4051 James.Trimarchi@svhealthcare.org
Verification Under Oath

STATE OF VERMONT
GREEN MOUNTAIN CARE BOARD

In re: Submission of project CON  )
Application to create an  )
SVMC Dental Home  )
) Docket No. _GMCB-015-016con_

Verification Under Oath to file with Certificate of Need Application, correspondence and additional information subsequent to filing an Application.

[Officer or other deponent], being duly sworn, states on oath as follows:

1. My name is Tom Dee. I am the President and Chief Executive Officer of Southwestern Vermont Medical Center. I have reviewed the certificate of need application to create the SVMC Dental Home.

2. Based on my personal knowledge and after diligent inquiry, I attest that the information contained in the certificate of need application for the SVMC Dental Home 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 certificate of need application for the SVMC Dental Home 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 certificate of need application for the SVMC Dental Home 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:

   James Trimarchi, Director Planning

5. In the event that the information contained in the certificate of need application for the SVMC Dental Home becomes untrue, inaccurate or incomplete in any material respect, I acknowledge my obligation to notify the Green Mountain Care Board and to supplement the report for the SVMC Dental Home Project as soon as I know, or reasonably should
know, that the information or document has become untrue, inaccurate or incomplete in any material respect.

[signature]

On 12/19/16 Tom Dee appeared before me and swore to the truth, accuracy and completeness of the foregoing.

[signature]

Notary public
My commission expires 2/10/2019
[seal]
Certificate of Need Application Form

Name of Applicant: Southwestern Vermont Medical Center
Date of Application: 1/3/2017
Project Title: Creation of SVMC Dental Home
Address Street 1: 100 Hospital Dr.
City/Town: Bennington
State: VT
Zip Code: 05201
Telephone number: 802-440-4051
FAX: 
E-mail address: James.Tammachi@SVHEALTHCARE.org

Project Type & Amount (indicate ☐ project category below)

Non-Hospital Categories
☐ Construction, development, purchase, renovation, or other establishment of a health care facility, or any capital expenditure by or on behalf of a health care facility, for which the capital cost exceeds $1,500,000.
☐ A change from one licensing period to the next in the number of licensed beds of a health care facility through addition or conversion, or through relocation from one physical facility or site to another.
☐ Offering any home health service.
☐ The purchase, lease, or other comparable arrangement of a single piece of diagnostic or therapeutic equipment for which the cost, or in the case of a donation, the value, is in excess of $1,000,000.
☐ Offering of a health care service or technology having an annual operating expense which exceeds $500,000 for either of the next two budgeted fiscal years, if the service or technology was not offered or employed by the health care facility within the previous three fiscal years.
☐ A project which is exempt from the requirements above solely because the cost or value does not exceed financial thresholds, if the cost or value is greater than $750,000 or, in the case of medical equipment, $500,000 and if the commissioner finds that the proposed development:
   1. may be inconsistent with the health resource allocation plan;
   2. has the potential for significantly increasing utilization or rates; or
   3. may substantially change the type, scope or volume of service.

1 For purposes of this subdivision, the purchase or lease of one or more articles of medical equipment which are necessarily interdependent in the performance of their ordinary functions or which would constitute any health care facility as determined by the commissioner, are considered together in calculating the amount of an expenditure.
Project Type & Amount, continued

Hospital Categories

☐ Construction, development, purchase, renovation, or other establishment of a health care facility, or any capital expenditure by or on behalf of a health care facility, for which the capital cost exceeds $3,000,000.

☐ The purchase, lease, or other comparable arrangement of a single piece of diagnostic or therapeutic equipment for which the cost, or in the case of a donation, the value, is in excess of $1,000,000.?

☑ Offering a health care service or technology having an annual operating expense which exceeds $500,000 for either of the next two budgeted fiscal years, if the service or technology was not offered or employed by the hospital within the previous three fiscal years.

☐ Change from one licensing period to the next in the number of licensed beds of a health care facility through addition or conversion, or through relocation from one physical facility or site to another.

Proposed Capital Expenditure (Total from Table 1 in application) $ 603,781

Proposed Lease Amount (payment times term)

$ 

Please note:
The Chief Executive Officer of the applying entity must sign and attach verification form 'A'.

2 See footnote 1.
Project Description

Southwestern Vermont Medical Center (SVMC) proposes to create a new dental home on the SVMC Bennington campus and thereby address the unmet community demand for quality dental services. The total project cost to implement the dental home is approximately $804,000. We request CON approval by March 1, 2017 to maintain the proposed project timeline (appendix 1).

SVMC requests approval to create a dental home for the following reasons;

- A significant percentage of the population within SVMC’s service area is afflicted with dental decay. Tooth decay is particularly acute in children and youth;
  - Bennington kindergarteners have the highest incidence of tooth decay among peers in Vermont (Vermont Department of Health, Keep Smiling Report). Of the 24 kindergartens across Vermont that underwent screening, the two kindergartens in Bennington exhibited the highest percentage of children with tooth decay (over 50% compared with average of 29% across 24 schools),
  - Third graders in Bennington have some of the lowest rates of dental sealants (38% versus 52% across 24 Vermont schools) (Vermont Department of Health, Keep Smiling Report),
  - Of 520 Bennington middle school students screened in October 2015, 20% needed immediate dental work or follow-up (2015 Bennington Oral Health Screenings report),
  - 18% of adults in Bennington County report having significant dental decay – 6 or more permanent teeth having been removed due to decay. This incidence is 12% higher than the average across Vermont (16%) (http://assessment.communitycommons.org),

- Access to dental services throughout our service area is limited;
  - Very limited access for patients with Vermont Medicaid insurance (Dr. Dynasaur) (http://www.vtmедакicaid.com/secure/providerLookUp.do),
  - The number of dentists in Bennington and Windham has decreased by 4 since 2001,
  - Five dental practices in Bennington have unsuccessfully recruited dentists in the last 2 years (Dentist Survey Statistical Report),
  - Accession planning is necessary - 76% of dentists in Bennington are 50 years or older with 47% over 60 years of age,

- The proposed SVMC dental home aligns with the goals of the Vermont Oral Health Plan 2014;
  - The Oral Health Plan’s prevention strategy seeks to ensure that all Vermonters have access to a dental home. A dental home in the Bennington region, that is accepting new patients, would advance Vermont towards this goal,
  - The plan also seeks to reduce the incidence of dental caries through appropriate use of dental sealants. Dental sealants would be offered at the SVMC dental home,
The plan’s workforce development goal seeks to enhance the oral health workforce to meet the needs of all Vermonters. The SVMC dental home would strive to recruit and develop dentists that can serve Vermonters for years to come.

The SVMC dental home will treat both children and adults with Medicaid and commercial insurance.

SVMC intends to renovate 1,890 sq ft in the Medical Office Building on the Bennington Campus to install the SVMC dental home. The renovated facility will have 4 dental exam and treatment rooms, a small laboratory for preparing implants, and a panoramic dental x-ray machine. Care coordination and client record maintenance will occur through Dentrix software running on PC based computers. The facility will have a small reception and waiting area. The cost of the project is estimated to be $804,000 for renovation of the facility, fit-up of the exam rooms with dental chairs and equipment, purchase and installation of the laboratory, x-ray equipment, computers, and software. These costs represent all costs associated with the project. There are no enabling projects.

SVMC’s dental home will be staffed by 2 dentists in collaboration with 2 hygienists and support staff. The dentists will initially be from the local community while recruitment efforts seek to attract dentists completing their residency. During the first two years we anticipate leveraging mentoring to transition from senior local dentists to dentists at the inception of their career, and thereby build the local dental care workforce.

The cost of the project are necessary and reasonable. Less expensive alternatives are not available or appropriate. The project will not disrupt current services or create undue negative impact on patients seeking other services. The project will serve the public good by providing access to high quality dental care and develop Vermont’s oral health workforce.

Summary Project Description

Location of the proposed project– The SVMC dental home will be located in the Medical Office Building (MOB) on the Bennington Campus. This location is ideal because the MOB houses the majority of SVMC’s physician office practice. Local residents are familiar with seeking outpatient services at this facility. SVMC intends to renovate 1,890 sq ft to accommodate 4 dental exam room and treatment rooms as well as support rooms. All costs associated with this renovation are included in the project cost.

This project was originally slated for the Toolan Building as indicated in the initial letter of intent. However, long-term campus master facility planning suggests future removal of the Toolan Building. As such, it is prudent to install the dental home in a permanent location rather than in a temporary location and incur future additional costs to move the dental service. The MOB space available for the dental home was vacated by SVMC Gastrointestinal practice which relocated to
the specialty medicine suite. As such, there are no enabling moves associated with implementation of the dental home in the MOB.

Completion of the dental home in the MOB will contribute to the percentage of the MOB that has undergone renovation during the last three years,

<table>
<thead>
<tr>
<th>Floor</th>
<th>Renovation Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>First Floor</td>
<td>47% renovated after completion of the dental home</td>
</tr>
<tr>
<td>Second Floor</td>
<td>32% renovated</td>
</tr>
<tr>
<td>Third Floor</td>
<td>42% renovated</td>
</tr>
<tr>
<td>Total Building</td>
<td>41% renovated after completion of the dental home</td>
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</tbody>
</table>

These renovations have consolidated and created the following:

- Primary Care Suite
- ExpressCare
- General Surgery Suite
- Specialty Medicine Suite (Pulmonology, Rheumatology, Infectious Disease, Gastrointestinal)
- Dental Home (proposed within)

Each project has been evaluated and launched independently based upon need, appropriate space, design, and financial condition. Each independent project has achieved its goals of improving the patient experience, enhancing provider collaboration, and reducing expenses.

Service to be added and proposed location where the services will be rendered—The SVMC dental home would be a new service for SVMC. This service would render the following care:

- Oral evaluations and cleanings
- Diagnostic imaging
- Preventive treatments (ex. sealants)
- Restorative services
- Tooth extractions
- Endodontics

These services will be provided to both adults and children, with the preponderance of patients (80%) insured by Medicaid. We anticipate the balance of patients to be SVMC employees with commercial insurances.

Description of the proposed service area—SVMC’s serves the population within Bennington County, Western Windham County, the Eastern NY counties of Rensselaer and Washington and Northern Berkshire County, MA. The implementation of the SVMC dental home will serve these communities because access to dental care across the region is sparse. However, we anticipate that the majority of clients will originate from the communities of Bennington, North Bennington and Pownal. The current dentists in the region are wholly supportive of this project and welcome implementation of SVMC’s dental home because they recognize the large unmet need.
Detailed description of equipment to be purchased— SVMC plans to purchase two digital x-ray systems, one panoramic, the other with traditional bite-sensors. These two systems work in concert with the intraoral camera to provide the clearest view of dental issues, while limiting patient exposure to harmful x-rays. The intraoral camera is essential for patients to visualize opportunities to improve personal hygiene and avoid future dental carries and expensive dental treatments. The costs of this equipment is;

- Panoramic System $40,715 GXDP-700, Gendex
- Combo sensor system $31,560 GXS-700, Gendex
- Intraoral Camera system $7,720 IRIS, GXC-300, Gendex

These imaging devices link to the electronic record through Dexis software, which will also be purchased as part of this project.

The costs of these equipment are included in the project cost.

Number of square feet of renovation/new construction— SVMC will renovate 1,890 sq ft of existing space in the Medical Office Building to implement the SVMC dental home.

Total Project Cost— Total project costs are estimated to be $804,000 comprised of several components;

- Renovation $319,102
- Minor medical and office equipment $235,123
- X-ray and intraoral camera systems $79,994
- Software and associated hardware $169,563
- Total $803,781

These project costs include contingencies for design, construction and software implementation.
A summary of the construction and installation expenses in CSI16 format appears below;

<table>
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<tr>
<th>Division</th>
<th>SUMMARY</th>
<th>MATERIAL Cost</th>
<th>LABOR Cost</th>
<th>OTHER Cost</th>
<th>TOTAL Cost</th>
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<tr>
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<tr>
<td>2</td>
<td>Sitework</td>
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<tr>
<td>3</td>
<td>Concrete</td>
<td>$</td>
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<td>$-</td>
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<td>Masonry</td>
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<td>-</td>
<td>$-</td>
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<tr>
<td>TOTAL</td>
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<td>$</td>
<td>-</td>
<td>$803,781.00</td>
<td>$803,781.00</td>
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</table>

How will the project be financed– SVMC plans to finance this capital project from operating revenue, thereby no debt will be incurred. The cost of this project was included in the 2017 fiscal year capital budget submitted to the Green Mountain Care Board.

Need for the project including data– SVMC requests approval to develop a dental home for the following reasons;

- The US surgeon general indicates that people with the restricted access to preventive services and dental treatment experience the greatest rates of oral disease, thereby increasing healthcare spending through Emergency Department visits and correlated health conditions (heart disease and diabetes),
- Dental homes are widely recognized as the best delivery system for oral care because they establish clear oral health goals with the patient. The dental home provides continuous, comprehensive and coordinated care,
- Best oral health outcomes can be achieved through enrollment in a dental home by age 1. SVMC obstetrics and Women’s and children services will coordinate directly with SVMC’s dental home to encourage newborn enrollment,
- SVMC’s dental home will provide the following services;  
  - Risk assessments for dental disease and oral conditions,
  - Oral evaluations and cleanings,
  - Diagnostic imaging,
  - Preventive treatments (ex. sealants),
  - Restorative services,
  - Tooth extractions,
Endodontics,

- Access to dental care in the region is scarce and developing SVMC’s dental home aligns with Vermont’s Oral Health Plan.

**Objective to be achieved by the project**— SVMC seeks to implement a new service, SVMC’s dental home and thereby better meet the health needs of the region’s population. The dental home will provide a new dental care access point and develop the oral health workforce (as indicated in Vermont’s Oral Health Plan).

**Impact on healthcare costs, access and quality**— We anticipate that this project will increase healthcare spending on dental care short term while decreasing general healthcare spending longer term. Untreated dental issues do not resolve themselves but rather advance to more significant and costly health concerns. Ineffective oral care has been linked to a higher incidence of heart disease and other chronic disease that result in significant healthcare spending. The goal of SVMC’s dental home is to provide easy access to quality dental care, particularly to those with limited or no dental insurance, and thereby address dental issues before they progress to more complex general medical issues.

SVMC’s dental home will adhere to state reimbursement rates for dental care, including Dr. Dynasaur insurance. Due to lower reimbursement rates from Dr. Dynasaur insurance, other dentists in the region limit access. SVMC’s dental home has established a financial model that demonstrates the ability to accept clients with Dr. Dynasaur insurance. SVMC’s dental home will treat both children and adults with Medicaid insurance. Open access to residents most in need of dental care is essential to improve the health of the population.

All procedures conducted at SVMC’s dental home will adhere to best practice and thereby ensure high quality care delivery.

**Project beginning and completion date**— SVMC is poised to begin the project upon approval from the GMCB. Appendix 1 illustrates the timeline for the project. We anticipate gaining swift approval for this project because of its importance for the community and the opportunity it presents to reduce future healthcare spending. Renovations could begin in June, 2017 with first patients being seen in October, 2017.
CON Statutory Criteria

CON Statutory Criteria 1- the application is consistent with the health resource allocation plan;

The application is consistent with the health resource allocation plan as evidenced by consistency with specific CON standards demonstrated below.

CON Standard 1.3: To the extent neighboring health care facilities provide the services proposed by a new health care project, an application shall demonstrate that a collaborative approach to delivering the service has been taken or is not feasible or appropriate.

Dentists throughout the region have been made aware of the plan to launch the SVMC dental home. The vast majority of dentists support launch of the SVMC dental home because of the shortage of dentists in the region and the limited access to dentistry for Medicaid patients, including children and adults. SVMC has held a series of discussions with local dentists to garner their perspective and input into the creation of the SVMC dental home, the services offered, the technology available and the staffing model. Every effort has been made to engage and collaborate with the local dentist to ensure that the service meets the unmet needs of the community, while not disrupting current dental practices.

CON Standard 1.4: If an application proposes services for which a higher volume of such service is positively correlated to better quality, the applicant shall show that it will be able to maintain appropriate volume for the service and that the addition of the service at the facility will not erode volume at any other Vermont facility in such a way that quality at that facility could be compromised.

The quality of dental services is not correlated with volume and thereby this CON standard does not apply. However, the SVMC dental home will implement specific systems to monitor quality and remediate issues (see CON standard 1.6). In addition clinicians at the SVMC dental home will be required to engage in continuing education to ensure familiarity and use of the best evidence-based practices.
CON Standard 1.6: Applicants seeking to develop a new healthcare project shall explain how the application will collect and monitor data relating to healthcare quality and outcomes related to the proposed new healthcare project. To the extent practicable, such data collection and monitoring shall be aligned with related data collection and monitoring efforts, whether within the applicant’s organization, other organizations or the government.

To ensure access and delivery of high quality dental care, the SVMC dental home will establish a series of metrics that range from obtaining timely appointments, to the percentage of children receiving preventive services. Five measures that align with the National Quality Forum and the Dental Quality Alliance have been selected;

**Access:** Percentage of patients that are treated at the SVMC dental home within 48 hours of referral from an emergency department, urgent care center, primary care practice or school nurse;

- denominator: number of referrals during a given period,
- numerator: those treated within 48 hours of referral,
- additional data elements include date and time of referral and date and time of treatment.

**Maintenance:** Percentage of adults (over 18 years of age) enrolled in the SVMC dental home that have received dental services, including an annual examination, cleaning and oral hygiene coaching, within the last 12 months;

- denominator: number of adults enrolled in the SVMC dental home,
- numerator: number of those adults receiving dental services within the last 12 months (rolling),
- additional data elements include; date of the birth of the patient and the patient’s calculated age, current date, and date the patient received the most recent prior dental services.

**Maintenance:** Percentage of children (age 18 and younger) enrolled in the SVMC dental home that have received comprehensive examination within the last 12 months;

- denominator: number of children enrolled in the SVMC dental home,
- numerator: number of those children receiving dental services within the last 12 months (rolling),
- additional data elements include; date of the birth of the patient and the patient’s calculated age, current date, and date the patient received the most recent comprehensive examination.

**Prevention:** Percentage of children (age 18 and younger) enrolled in the SVMC dental home that receive the following services (each service monitored independently);

- Personally directed oral health and oral hygiene instruction,
• Cleaning,
• Topical fluoride application,

• denominator: number of children enrolled in the SVMC dental home,
• numerator: number of those children receiving the indicated dental service,
• additional data elements include; date of the birth of the patient and the patient’s calculated age, and date the patient received the indicated dental service.

Prevention: Percentage of children (age 6-9 years) enrolled in the SVMC dental home that have received sealant on a permanent first molar;

• denominator: number of children enrolled in the SVMC dental home,
• numerator: number of those children that have received sealant on a permanent first molar,
• additional data elements include; date of the birth of the patient and the patient’s calculated age, and date the patient received the sealant on a permanent molar.

The National Quality Forum and The Dental Quality Alliance provide flow charts for coding and abstracting the dental record to determine the numerator and denominator for each measure. Performance on these measures will be compared to established benchmarks and strategies to increase performance are published, readily available, and will be implemented.

Performance on these metrics will be monitored monthly and reviewed by the medical director and clinical team. Action plans will be developed to increase performance and exceed benchmarks. The SVMC dental home will consider monitoring other metrics of access and quality as opportunities are identified that best serve the community. The suite of metrics to be monitored will be evaluated and updated at least annually by the medical director of the SVMC dental home.

CON Standard 1.7: Applicants seeking to develop a new healthcare project shall explain how such a project is consistent with evidence-based practice. Such explanation may include a description of how practitioners will be made aware of evidence-based practice guidelines and how such guidelines will be incorporated into ongoing decision making. (2005 State Health Plan, page 48)

The clinical treatments provided by practitioners at SVMC’s dental home will be consistent with evidence based practice and processes. These treatments will adhere to the most updated practice guidelines from the Vermont Dental Society and American Dental Association (ADA) and National Dental Association. Providers will be required to maintain credentials and participate in continuing medical education (CME) opportunities. Importantly, dental providers will be encouraged to integrate newly identified best practices into treatment plans and thereby expedite the transfer of knowledge into practice. In addition, a series of clinical metrics will be developed to ensure performance is monitored and quality care delivered.
These efforts are consistent with the 2005 Vermont State Health Plan. In particular, the range of processes ensure evidence based practice is 1) identified and approved, 2) disseminated and accepted, 3) integrated into day-to-day clinical practice, and 4) verified by performance monitoring, as indicated in the state health plan. Moreover these practices “enable practitioners to consider evidence-based practice at the time of patient interaction”. Launch of SVMC’s dental home will provide a venue for providers’ to deliver best-practice, evidence based treatments, while maintaining the flexibility to quickly adapt treatments as new medical evidence emerges.

CON Standard 1.8: Applicants seeking to develop a new healthcare project shall demonstrate, as appropriate, that the applicant has a comprehensive evidence-based system for controlling infectious disease.

SVMC is dedicated to limiting infection risk for all patients. To ensure the highest quality equipment sterilization, all dental instruments will be processed at SVMC central sterilization rather than through the rapid sterilization process more typical of dental practices. In addition, all staff will receive vaccinations including the annual flu vaccine, as is mandatory for SVMC employment. Lastly, all dental home staff will be required to complete annual training in infection prevention. These measures will ensure knowledge and use of the latest practices in controlling infectious disease.

CON Standard 1.9: Applicants proposing construction projects shall show that costs and methods of the proposed construction are necessary and reasonable. Applicants shall show that the project is cost-effective and that reasonable energy conservation measures have been taken.

The costs and methods of the proposed project are necessary and reasonable. Total project costs are estimated to be $804,000 comprised of 4 main components;

- Renovation: $319,102
- Minor medical and office equipment: $235,123
- X-ray and intraoral camera systems: $79,994
- Software and associated hardware: $169,563

$803,781

These numbers include contingencies for design, construction and software implementation.

A summary of the construction and installation expenses in CSI16 format appears below;
These costs are reasonable and necessary. The complete CSI detail appears in appendix 3 and quotes from Henry Schein Dental for dental equipment and software appear in appendix 4.

Through SVMC’s partnership with Efficiency Vermont, all appropriate energy conservation initiatives have been integrated into the project (see letter of support from Efficiency Vermont in appendix 5).

CON Standard 1.10: Applicants proposing new health care projects requiring construction shall show such projects are energy efficient. As appropriate, applicants shall show that Efficiency Vermont, or an organization with similar expertise, has been consulted on the proposal.

Efficiency Vermont has assigned a designated energy consultant to review the project design and support energy efficiency initiatives. By partnering with Efficiency Vermont, SVMC is ensuring that every effort is being taken towards energy efficiency within the specifications of this project. A letter confirming engagement of Efficiency Vermont appears in appendix 5.

This project complies with the standards of:
- Guidelines for Design and Construction of Health Care Facilities, and
- Facilities Guidelines Institute (FGI), 2014 edition

Attestation of this compliance across the entire project is provided in a memo (appendix 6) from SVMC’s Director of Engineering who will oversee the project construction.

CON Standard 2.2: Applicants seeking to introduce new ambulatory care services, including hospital ambulatory care center or physician office based services, shall show how such services are consistent with Vermont’s focus on health promotion. Services to prevent the onset of disease and to minimize the effects of disease shall be given the highest priority.

Accessible quality dental care has been demonstrated to prevent the onset of disease and to minimize the effects of disease, thereby this project should be given the highest priority. Poor dental care has been linked to a range of other medical conditions including heart disease. Individuals receiving care at the SVMC dental home will receive high quality dental care as well as oral hygiene instruction and coaching (see CON Standard 1.6 for associated prevention metrics). By coupling treatment with coaching, the SVMC dental clinic will prevent the onset of future dental disease and minimize the effects of chronic dental disease.

CON Standard 3.4: Applicants subject to budget review shall demonstrate that a proposed project has been included in hospital budget submissions or explain why inclusion was not feasible.

The project to launch the SVMC dental home was included in narrative of the fiscal years 2016 and 2017 budgets submitted to the GMCB.

CON Statutory Criteria 2- the cost of the project is reasonable, because:
(A) the applicant’s financial condition will sustain any financial burden likely to result from completion of the project;

The hospital’s overall financial health over the past 5 years has improved. SVMC plans to finance this capital project from operating revenue, thereby no debt will be incurred. The cost of this project was included in the fiscal year 2016 & 2017 budgets submitted to the GMCB. SVMC is poised to develop the SVMC dental home upon CON approval.
(B) the project will not result in an undue increase in the costs of medical care. In making a finding under this subdivision, the commissioner shall consider and weigh relevant factors including:

(i) the financial implications of the project on hospitals and other clinical settings, including the impact on their services, expenditures, and charges;

Implementation of the SVMC dental home will initially increase healthcare spending and then appropriately decrease healthcare spending by Vermonters. Historic restricted access to dental services artificially suppresses utilization and spending on dental care. Launching the SVMC dental home will release this demand by providing a new access point. However, patients with untreated dental issues often recur in the SVMC Emergency Department, where they receive only treatment for the pain and not corrective dental care. SVMC will actively seek to redirecting individuals from the higher cost setting of the Emergency Department to the SVMC Dental home. Establishing the SVMC dental home will provide appropriate access to dental treatment and thereby prevent subsequent urgent visits for medical services. Moreover, providing preventive services at the SVMC dental home, particularly to Medicaid patients (both children and adults) will begin to diminish the number of individuals at risk of dental issues. We anticipate that implementation of the SVMC dental home will eventually reduce the demand for urgent dental related issues to higher cost medical services and thereby reduce healthcare spending.

Importantly the SVMC dental home will monitor the percentage of patients that are treated at the SVMC dental home within 48 hrs of referral from an emergency department or urgent care center. This metric will serve as a proxy for whether the frequency of visits to medical services for dental issues is declining (the denominator) and whether healthcare spending is shifting from high cost settings to the dental clinic. Closely monitoring these referrals will inform whether the launch of the SVMC dental home is having the anticipated positive impact to reduce healthcare spending.

(ii) whether the impact on services, expenditures, and charges is outweighed by the benefit of the project to the public;

The benefit of launch of the SVMC dental home outweighs the impact on services and expenditures. By providing high quality dental services SVMC seeks to reduce unnecessary high cost medical treatments and shift care to lower cost preventive dental care. This shift is sensible financially as well as medically. For example, patients with untreated dental issues often recur in the SVMC Emergency Department, ExpressCare and primary care practices. Since these services do not provide dental treatment, the care received at these clinical settings only stabilizes the dental issues and associated pain. Establishing the SVMC dental home will provide access to treatment and thereby prevent subsequent urgent visits to medical services for pain. Moreover, providing preventive services at the SVMC dental home, particularly to Medicaid patients (both children and adults), will begin to diminish the number of individuals at risk of dental issues requiring urgent or emergent medical care. We anticipate that implementation of the SVMC dental home will eventually reduce the number of visits for dental
related issues to medical services. Depressurizing medical services will allow better and more-
timely service of the medical needs of the community.

**(C) less expensive alternatives do not exist, would be unsatisfactory, or are not feasible
or appropriate;**

Less expensive alternatives to launching the SVMC dental home are not apparent or
appropriate. Access to high quality dental care in the Bennington region is scarce, particularly
for patients with Medicaid insurance (both adult and children). SVMC plans to spend $804,000
to renovate 1,890 sq ft for the SVMC dental home. The design of the facility and inclusion of
technology is modest and will facilitate recruitment of oral health professionals. Less expensive
designs without current technology would hamper the clinic’s success and the clinic’s ability to
meet the community need for quality dental services.

**CON Statutory Criteria 3- there is an identifiable, existing, or reasonably anticipated need
for the proposed project which is appropriate for the applicant to provide;**

SVMC requests approval to create a dental home for the following reasons;

- A significant percentage of the population within SVMC’s service area is afflicted with
dental decay. Tooth decay is particularly acute in children and youth;
  - Bennington kindergarteners have the highest incidence of tooth decay among peers in
    Vermont (Vermont Department of Health, Keep Smiling Report). Of the 24
    kindergartens across Vermont that underwent screening, the two kindergartens in
    Bennington exhibited the highest percentage of children with tooth decay (over 50%
    compared with average of 29% across 24 schools),
  - Third graders in Bennington have some of the lowest rates of dental sealants (38% vs
    52% across 24 Vermont schools) (Vermont Department of Health, Keep
    Smiling Report),
  - Of 520 Bennington middle school students screened in October 2015, 20% needed
    immediate dental work or follow-up (2015 Bennington Oral Health Screenings report),
  - 18% of adults in Bennington County report having significant dental decay – 6 or more
    permanent teeth having been removed due to decay. This incidence is 12% higher
    than the average across Vermont (16%) ([http://assessment.communitycommons.org](http://assessment.communitycommons.org)),

- Access to dental services throughout our service area is limited;
  - Very limited access for patients with Vermont Medicaid insurance (Dr. Dynasaur)
  - The number of dentists in Bennington and Windham has decreased by 4 since 2001,
  - Five dental practices in Bennington have unsuccessfully recruited dentists in the last 2
    years (Dentist Survey Statistical Report),
Accession planning is necessary - 76% of dentists in Bennington are 50 years or older with 47% over 60 years of age,

- The proposed SVMC dental home aligns with the goals of the Vermont Oral Health Plan 2014;
  - The Oral Health Plan’s prevention strategy seeks to ensure that all Vermonters have access to a dental home. A dental home in the Bennington region, that is accepting new patients, would advance Vermont towards this goal,
  - The plan also seeks to reduce the incidence of dental caries through appropriate use of dental sealants. Dental sealants would be offered at the SVMC dental home,
  - The plan’s workforce development goal seeks to enhance the oral health workforce to meet the needs of all Vermonters. The SVMC dental home would strive to recruit and develop dentists that can serve Vermonters for years to come,
  - The SVMC dental home will treat both children and adults with Medicaid and commercial insurance.

Launch of the SVMC dental home will provide a new high quality access point for dental care, particularly for the most vulnerable residents of the region and facilitate development of the dental workforce.

**CON Statutory Criteria 4- the project will improve the quality of healthcare in the state or provide greater access to healthcare for Vermont’s residents, or both;**

This project will improve the quality of healthcare in Vermont and provide greater access to critical healthcare for residents of Southern Vermont. Access to high quality dental care in the Bennington region is scarce, particularly for patients with Medicaid insurance (both adult and children). The SVMC dental home will provide a new, high quality access point for the community.

**CON Statutory Criteria 5- the project will not have an undue adverse impact on any other existing services provided by the applicant;**

The SVMC dental home will not have an undue adverse impact on existing care services provided by SVMC and may enhance existing services. For example, patients with untreated dental issues often recur in the SVMC Emergency Department, ExpressCare and primary care practices. Since these services do not provide dental treatment, the care received at these clinical settings only stabilizes the dental issues and associated pain. Establishing the SVMC dental home will provide access to treatment and thereby prevent subsequent urgent visits to medical services for pain. Moreover, providing preventive services at the SVMC dental home, particularly to Medicaid patients (both children and adults), will begin to diminish the number of individuals at risk of dental issues requiring urgent or emergent medical care. We anticipate that implementation of the SVMC dental home will eventually reduce the number of visits for dental
related issues to medical services. Depressurizing medical services will allow better and more-
timely service of the medical needs of the community.

Importantly the SVMC dental home will monitor the percentage of patients that are treated at the
SVMC dental home within 48 hours of referral from an emergency department or urgent care
center (see CON standard 1.6). This metric will serve as a proxy for whether the frequency of
visits to medical services for dental issues is declining (the denominator of the measure).
Closely monitoring these referrals will inform whether the launch of the SVMC dental home is
having the anticipated positive impact on existing medical services.

**CON Statutory Criteria 6- the project will serve the public good;**

Establishing the SVMC dental home will serve the public good by providing access to high
quality dental care and develop Vermont’s oral health workforce. Access to dental services are
limited throughout the region, particularly to patients with Medicaid dental insurance. The SVMC
dental home will serve both adult and children with Medicaid dental insurance (Dr. Dynasaur). In
addition, the dental home will recruit new dental professionals and thereby contribute to
Vermont’s oral health workforce and the goals of the Vermont Oral Health Plan.

**CON Statutory Criteria 7- the applicant has adequately considered the availability of
affordable, accessible patient transportation services to the facility;**

Locating the SVMC dental home on SVMC’s Bennington campus will allow dental patients to
use the well-known and convenient Green Mountain Community Network services for
transportation. The Green Mountain Community Network serves as the state designated
transportation system for Bennington. Their Green Mountain Express bus service includes 8
stops each day at SVMC on both weekdays and weekends. The network also provides point-to-
point service for individuals with Medicaid that schedule 48 hours in advance.
CON Statutory Criteria 8- if the application is for the purchase or lease of new health care
information technology, it conforms with the health information technology plan
established under section 9351 of this title (added 1979, No. 65, § 1; amended 1985, No.
eff. March 15, 1999; 2003, No. 53 § 13, eff. July 1, 2005; No. 53, § 26; 2005, No. 71, § 277a;
2007, No. 70, § 34; 2007, No. 139 (Adj. Sess.), § 8; 2009, No. 61, § 5; 2009, No. 83 (Adj.

The SVMC dental home software and electronic record will reside on SVMC’s computer
network, thus making the dental clinic electronic medical record (EMR) and associated dental
images available to other healthcare providers within SVMC’s continuum of care. The dental
home software (Dentrix, Henry Shein Inc.) will conform to the health information technology plan
through several dimensions including;

- Eligible Hospital (EH) and Eligible Provider (EP) Meaningful Use (MU) attestation
- Vermont Blueprint for Health Medical Home participation
- Vermont Information Technology Leadership (VITL) Vermont Health Information
  Exchange (VHIE) sharing requirements
- Department of Vermont Health Access (DVHA) healthcare programs
- Accountable Care Organization (ACO) OneCare Vermont shared savings program
  participation
- Vermont’s Health Information Technology Plan’s vision

More specifically the dental home software allows for dental treatment planning, electronic
medical record, and images to be available to SVMC care givers participating in the patient’s
overall care.

Southwestern Vermont Medical Center (SVMC) has achieved and attested to Eligible Hospital
(EH) Meaningful Use (MU) Stage 2 Year 2 in calendar year 2016 and continues to achieve the
measures for Stage 2 Year 3 going in to calendar year 2017. In addition, the SVMC Dartmouth
Hitchcock Putnam Physician Group providers have achieved and attested to Meaningful Use
(MU) Stage 1 & Stage 2 based on the timing of different providers (50+/-) participation. Thus,
SVMC has the ability to participate in Vermont’s Electronic Healthcare Record Incentive
Program (EHRIP). In addition, the Vermont Information Technology Leadership (VITL)
coordination of the Regional Extension Center (REC) resources have assisted SVMC in
achieving the different levels of meaningful use amongst EPs in the Bennington Health Service
Area (HSA). The movement into achieving EH / EP MU stages has enabled
consumers/patients to begin to take an active role in their health care by accessing their
electronic health information. Dental home patients will benefit from the above achievements as
their electronic information will be accessible electronically in certified software (Office of the
National Coordinator for Health Information Technology, ONCHIT). Dentrix software on SVMC’s
network, along with the availability of the dental EMR and dental images, supports the above
noted initiatives.

SVMC actively participates in the Vermont Blueprint for Health Medical Home, as well as the
Accountable Care Organization (ACO) One Care Vermont (OCVt) Shared Savings
Program. The patients seen in the SVMC Dental Clinic will be fortunate to have their dental
EMR available to SVMC care givers that have achieved the following levels of NCQA certification based on the use of an EMR: Northshire Medical Center NCQA Level 3, Deerfield Medical Center NCQA Level 3, SVMC Medical Associates NCQA Level 2, and SVMC Pediatrics NCQA Level 2. In addition, SVMC has provided resources to coordinate the Vermont Blueprint for Health Medical Home initiative in the Bennington health service area that has yielded an 87%+/- participation rate amongst the 13 of 15 primary care practices. In addition, SVMC sends real time clinical data through the Vermont Information Technology Leadership (VITL) information exchange (VHIE) and then onto the Vermont Blueprint's population registry, Orion DOC-Site, to participate in clinical improvement projects. The dental software may support each of these initiatives.

SVMC actively participates in VITL and its information exchange and is fully connected as evident by live interfaces for patient demographics, laboratory and radiology results, transcribed reports, pathology reports and immunization interfaces being live. In addition, SVMC also participates in VITL’s subscription based services. The first is VITLAccess, which is a secure, provider portal providing a patient centered view of clinical data available through the VHIE. The second is VITLDirect, which is a secure point to point messaging system that supports meaningful use transition of care. The dental home plans to participate with each of these initiatives.

SVMC has most recently been actively participating with the Department of Vermont Health Access (DVHA) in syndromic surveillance reporting, lab result reporting and immunization tracking by passing electronic transaction through VITL’s VHIE and/or directly to DVHA’s data warehouse. The dental home software may further support these initiatives by having the dental planning record and images available.

Appendix 7 includes the standard financial tables from the Green Mountain Care Board and illustrates the modest financial impact of launching the SVMC dental home.