

July 27, 2020



Via Email

Sherman Lohnes, Esq., Director
Division of Health Care Facility Licensure and Certification
Massachusetts Department of Public Health
67 Forest Street
Marlborough, MA 01752

Re: VHS Acquisition Subsidiary Number 9, Inc. (d/b/a MetroWest Medical Center) – Formal 90-Day Notice of Closure of Medical/Surgical Service, Intensive Care Unit, Emergency Department, Operating Rooms, and Outpatient Rehab at Leonard Morse Campus

Dear Attorney Lohnes:

We write on behalf of VHS Acquisition Subsidiary Number 9, Inc., d/b/a MetroWest Medical Center (the “Medical Center”) in follow-up to the initial essential services closure notice that the Medical Center filed with the Department of Public Health (the “Department”) and the appropriate parties required by the Department’s regulations on June 26, 2020. Pursuant to 105 CMR 130.122(B), the Hospital hereby provides formal ninety (90) day notice to the Department of its decision to discontinue its operation of all medical hospital services at its Leonard Morse Campus located at 67 Union Street, Natick, MA 01760 (“LMC”). These services include its Medical-Surgical unit consisting of 64 beds, its Intensive Care Unit consisting of 10 beds, all Operating Rooms, its Emergency service, and its Outpatient Rehabilitation Service, collectively referred to as the “Services.” Following these closures, only LMC’s inpatient Psychiatric Service, its Sleep Lab Service, outpatient laboratory phlebotomy, electroconvulsive therapy and its CT Service will remain open. We offer the following comments with respect to this matter.

Over the course of the last year, the Medical Center determined that the Services should be discontinued because of insufficient patient volume, which is an indicator that the patient population does not use the services at LMC where alternative sites nearby are providing similar services. The process to close the Services began in early 2020, but was temporarily put on hold by the Medical Center to ensure medical/surgical bed resources were available for the pending progress of COVID-19 and the State of Emergency. The Medical Center has renewed its decision to close the Services and restarted the process in June of this year. In compliance with applicable requirements at 105 CMR 130.122(B), the Medical Center provides this written notice of the planned discontinuance of the above described Services. The following information regarding the discontinuation is hereby provided for your review.

1. Current Utilization Rates. The following represents the patient volume of the Services at the Medical Center over the last several years, including year-to-date (YTD). Each of the Services has experienced a declining volume trend over this time period.



The Medical Center’s LMC facility has experienced a 24% drop in emergency department volume from 2015 to 2019. In 2020, there has been an additional 34% decrease in monthly emergency department volume (898 visits per month in 2019 to 595 visits per month through June 2020).

	2015	2016	2017	2018	2019	2020 Jan-Jun	Trend
Emergency Department	14,087	13,115	12,065	11,454	10,778	3,571	Declining volume

The declining emergency visit trend correlates with a sharp decline in the other acute care services. For example, the Average Daily Census (“ADC”) for LMC’s medical/surgical unit dropped from 19.3 patients in 2016 to 13.6 patients in 2019, which represents an almost thirty percent (30%) drop in ADC, or about one third (1/3) in admissions to the unit on an ADC basis. In 2020, the ADC for YTD volume dropped even further to under eleven patients per day (10.7). Thus, notwithstanding the State of Emergency and the progression of COVID-19, the ADC at LMC for its medical/surgical unit continued to drop. The decline in ADC in the intensive care unit (“ICU”) was even more significant during the 2016-2019 period, dropping over thirty-six percent (36%). For 2020, the YTD volume for the ICU stands at its lowest in five years.

	2016	2017	2018	2019	2020 Jan-Jun	Trend
Med Surg Unit ADC	19.3	16	15.2	13.6	10.7	Declining Volume
ICU ADC	4.4	3.8	3.3	2.8	2.2	Declining Volume

Both inpatient and outpatient surgery services had similar volume declines. Between 2016 and 2019, inpatient surgeries dropped 12%. Outpatient surgeries dropped almost 6%. Accordingly, the average decline in total surgeries at LMC dropped 7% from 2016 through 2019. The YTD volume of total surgery cases shows further decline, with an almost 38% drop in monthly surgeries (130 surgeries) compared to 2019 (208 surgeries).

	2016	2017	2018	2019	2020 Jan-Jun	Trend
IP Surgery Cases	625	561	526	552	137	Declining Volume
OP Surgery Cases	2,064	2,106	1,961	1,947	644	Declining Volume
Total Surgery	2,689	2,667	2,487	2,499	781	Declining Volume

LMC’s outpatient rehabilitation services have also been impacted by changes in patient volume. Between 2016 and 2019, there was an over fifteen percent (15%) drop in patient utilization of LMC’s Occupational Therapy Service. Over the same period, the volume of Physical Therapy declined by almost ten percent (10%). In both cases, and like the other Services being closed,



volume dropped year after year. Accordingly, by the end of 2019 total outpatient rehabilitation utilization dropped eleven percent (11%) since 2016. The YTD volume of total outpatient rehabilitation cases shows further decline, with a substantial drop in monthly volume (82 cases) compared to 2019 (189 cases). This significant and consistent decline in outpatient rehabilitation volume in the last few years is evidence that patients are not choosing LMC for these services in greater numbers.

	2016	2017	2018	2019	2020 Jan-Jun	Trend
Occupational Therapy	652	723	564	551	135	Declining Volume
Physical Therapy	1,896	1,865	1,722	1,718	357	Declining Volume
Total Rehab	2,548	2,588	2,286	2,269	492	Declining Volume

2. Impact of Discontinuance. The Medical Center does not expect any negative impact on patient access following the closure of these Services. Its Framingham Union Hospital campus is capable of taking on any and all additional volume that may result from the closing of the Services at LMC, and it is only 5.7 miles away from LMC. In addition to Framingham Union Hospital, Beth Israel Deaconess Hospital-Needham is 6.1 miles from LMC.

There are also numerous urgent care sites in the Town of Natick and City of Framingham which provide urgent care for many patients who would have sought care at the LMC emergency department. Likewise, Physical Therapy and Occupational Therapy are offered in other settings operated by the Medical Center that are geographically close and accessible to the patient community. These sites include:

- MWMC Framingham Union Hospital (5.7 Miles)
- MWMC Wellness Center (6.5 Miles)

Additionally, during the peak of the COVID-19 surge in the Commonwealth and at MWMC, there was adequate bed, ICU, and ventilator capacity at the Framingham Union Hospital campus to care for all of the patients that were admitted to both Framingham Union Hospital and LMC at any given time.

3. Date Set of Discontinuation. Ninety (90) day notice is hereby given for a target closure date of October 25, 2020.

4. Health Care Coalitions and Community Groups. The Medical Center anticipates that the following community group may have an interest in the discontinuation of the Services:



- MetroWest Health Foundation - 161 Worcester Rd #202, Framingham, MA 01701, 508-879-7625 (Contact: Martin Cohen)

5. Community Engagement and Planning Activities Prior to the Notice of Closure. The Medical Center has undertaken the following community engagement and planning activities:

- June 26, 2020 – Call with CEO and officials from local health care and community organizations concerning the rationale for changes, timeline, community resources, and plan for Framingham Union Hospital. Participants included MetroWest Chamber of Commerce, Framingham State University, Mass Bay Community College, New England Quality Care Alliance (NEQCA), Tenet Physician Resources (TPR), Charles River Medical Associates (CRMA), Reliant Medical Group, Brewster Ambulance Service, Fallon Ambulance Service, and MetroWest Health Foundation.
- June 26, 2020 – Notice of closures provided to the Medical Center’s governing board, medical staff, Massachusetts Nurses Association, Local 877 Union, IBEW 109 Union, Massachusetts Senators and Representatives for Natick and Framingham, local officials of Natick and Framingham, PFAC, and EMS providers from Natick, Framingham, Ashland, Holliston, Hopkinton, Marlborough, Millis, Sudbury, and Wayland, as well as Brewster Ambulance Service, Fallon Ambulance Service, and Lifeline Ambulance Service.
- June 26, 2020 – Employees were notified of the closures through email and open forums held by the Medical Center.
- June 26, 2020 – Letters mailed to EMS providers concerning the rationale for changes, timeline, community resources, and plan for Framingham Union Hospital.
- June 26, 2020 – Medical Staff was notified of the proposed closures by email.
- Communicated with local television news stations and newspapers concerning announcement of closures at Leonard Morse Campus.
- June 24, 2020 – Conference Call between Medical Center officials and Hon. Karen Spilka concerning rationale for changes, timeline, community resources, plans for affected employees and plan for Framingham Union Hospital.
- June 26, 2020 through July 1, 2020 – Held numerous conference calls and open forums with various stakeholders to discuss rationale for changes, timeline, community resources, plans for affected employees and plan for Framingham Union Hospital, including:

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- Hospital Directors
- Medical Staff Leadership
- Hospital Managers
- Leonard Morse Campus Employees and Perioperative Staff
- Framingham Union Hospital Employees
- Wellness Center Employees
- Board of Trustees

If you require further information with respect to this matter, please do not hesitate to contact me.
Thank you.

Sincerely,

A handwritten signature in black ink, appearing to read "ASL", is positioned above the name Andrew S. Levine.

Andrew S. Levine

cc: S. Davis, DPH
E. Gold, Esq., OAG
A. Harding, MWMC
R. Rodman, Esq., DPH
W. Mackie, DPH
A. Nardone, DPH
J. Ross, DMH
T. Williams, Esq., MWMC

Health Policy Commission
Office of the Attorney General (Massachusetts)
Center for Health Information and Analysis
Executive Office of Labor and Workforce Development

MetroWest Health Foundation