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December 20, 2023 Dennis Renaud, Director

Determination of Need Program Department of Public Health

67 Forest Street

Marlborough, MA 01752

RE: BMC Health System, Inc.

Determination of Need Application #BMCHS-23050914-RE Boston Medical Center - Substantial Change in Service

Dear Mr. Renaud:

I write on behalf of BMC Health System, Inc. ("Holder") with respect to the above-captioned Determination of Need ("DoN"). In compliance with 105 CMR 100.310(A)(2) and 105 CMR

100.310(A)(11), enclosed please find a copy of the Holder's Acknowledgment of Receipt of the DoN and Attestation Regarding Participation in MassHealth ("Combined Attestation"). By way of this letter, all Parties of Record are also hereby provided a copy of the Combined Attestation as required under the DoN regulations.

Please contact me if you have any questions regarding the Combined Attestation.

Sincerely,

[signature on file]

Kathleen Harrell, Esq.

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Dennis Renaud, Director Determination of Need Program Department of Public Health December 20, 2023

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**Acknowledgment of Receipt of Determination of Need and Attestation Regarding Participation in MassHealth**

Pursuant to 105 C.M.R. § 100.310(A)(2) we, the undersigned chief executive officer and board chair of BMC Health System Inc (the "Holder"), hereby acknowledge that the Holder is in receipt of the Determination of Need Notice of Final Action, dated November 21, 2023 , issued by the Massachusetts Department of Public Health (the "Department") with respect to Application No. BMCHS-23050914-RE. This attestation is being provided to the Department and to all Parties of Record within thirty (30) days of the Determination of Need Notice of Final Action.

In addition, pursuant to 105 CMR 100.310(A)(11), we hereby attest that Boston Medical Center(the Health Care Facility or Facilities for which the Notice of Determination has been issued) [participates or intends to participate] in MassHealth pursuant to 130 CMR 400.000 through 499.000.

IN WITNESS WHEREOF, the undersigned have duly executed this Attestation on this December 20, 2023 (date)

[signature on file]

By its Chief Executive Officer

By itsBoard Chair

**Acknowledgment of Receipt of Determination of Need and Attestation Regarding Participation in MassHealth**

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IN WITNESS WHEREOF, the undersigned have duly executed this Attestation on this 12/19/2023 (date)

By its Chief Executive Officer

[signature on file]

By itsBoard Chair