**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 Shields Healthcare of Cambridge, Inc(the "Holder"), hereby acknowledge that the Holder is in receipt of the Determination of Need Notice of Final Action, dated July 22, 2022**,** issued by the Massachusetts Department of Public Health (the "Department") with respect to Application No. 22020311-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 Shields Healthcare of Cambridge, Inc[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

July 26, 2022 (date)

[SIGNATURE ON FILE]

By its Chief Executive Officer

[SIGNATURE ON FILE]

By its Board Chair