



TO: Margaret R. Cooke, Commissioner, Executive Office of Health and Human Services

FROM: William C. Jones, President and CEO *W.C. Jones*

DATE: September 9, 2022

SUBJECT: Acknowledgement of DON Approval – Berkshire Healthcare Systems, Inc. for Fairview Extended Care Services, Inc., d/b/a Windsor Nursing & Retirement Home -22032410-CL DoN Application

In compliance with the provisions of 105 CMR 100.310 A (2) and (11) Berkshire Healthcare Systems, Inc. for Fairview Extended Care Services, Inc. d/b/a Windsor Nursing & Retirement Home is submitting an acknowledgment of receipt of the approval of our DoN application. Please also accept this as Windsor Nursing & Retirement Home's written attestation of participation in MassHealth.

**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 Berkshire Healthcare Systems, Inc. for Fairview Extended Care Services, Inc. d/b/a Windsor Nursing and Retirement Home (the "Holder"), hereby acknowledge that the Holder is in receipt of the Determination of Need Notice of Final Action, dated August 26, 2022, issued by the Massachusetts Department of Public Health (the "Department") with respect to Application No. 22032410-CL. 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 Berkshire Healthcare Systems, Inc. for Fairview Extended Care Services, Inc. d/b/a Windsor Nursing and Retirement Home (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

8/30/2022 (date)



By its Chief Executive Officer



By its Board Chair