ATTACHMENT 7

AFFILIATED PARTIES FORM



Massachusetts Department of Public Health Determination of Need Affiliated Parties

Application Date: 0		03/04/2025		Application Number:			r: UMMH-25021208-HE											
Applicant Information																		
Applie	ant Name:	UMass Memorial Health Care, Inc.																
Contact Person:		Kathleen G. Healy								-	Title: Lega	jal Cou	unsel					
Phone:		6175575995 Ext			Ext:	E-mail: khealy@rc			rc.com									,
Affi	iated Pa																	
1.9 Affiliated Parties: List all officers, members of the board of directors, trustees, stockholders, partners, and other Persons who have an equity or otherwise controlling interest in the application.																		
Add/ Del Rows	Name (Last)	Name (First)	Mailing Address		City		State	Affiliation		F	Position with affiliated entity (or with Applicant)	Stock, shares, or partnership	Percent Equity (numbers only)	Convictions or violations	List other health care facilities affiliated with	Business relationship with Applicant		
+ -	Young, MD	Lynda	11 Otsego Road			Worcester		MA	Applicant Officer and Tr		ee Ch	hairperson		0%	No	UMMMC	No	
+ -	Guardiola	Elvira	122 Sterling Street, #1			Worcester			MA	IA Applicant Officer and Tr		ee Vie	ice Chairperson		0%	No	UMMMC	No
+ -	Dickson, MD	Eric	Eric 93 Mirick Road			Princeton			MA Applicant Office		er and Truste	ee Pr	resident and CEO		0%	No	UMMMC	Yes
+ -	Melgar	Segio	71 Clubhouse Way			Sutton		MA	Applicant Officer		Tre	reasurer		0%	Νο	UMass Memorial HealthAlliance-Clinton Hospital; UMass Memorial Health-Harrington Hospital; UMMMC; Community HealthLink; HealthAlliance Home Health and Hospice; Marlborough Hospital	Yes	
+ -	Eshghi	Katharine	e 16 Oak Meadow Road			Lincoln			MA	MA Applicant Officer		Se	ecretary		0%	No	имммс	Yes
+ -	Bennett	David	7 Mt. View Drive			Paxton		MA	Applicant Trustee		Tri	rustee		0%	No	ИМММС	No	
+ -	Thomsen	Rosemary	118 Kirkstall Road			Newton			MA Applicant Truste		ee	Tri	rustee		0%	No	ИМММС	No
+ -	Pawlicki	Raymond 23 Marlborough Street			Boston			MA	Applicant Trust	ee	Tri	rustee		0%	No	ИМММС	No	
+ -	O'Brien	Michael 7 Witherbee Lane			Southborough			MA	MA Applicant Trustee		Tri	rustee		0%	No	UMMMC; UMass Memorial Health - Harrington Hospital	No	
+ -	McMurray	Jean	35 Heritage Drive			Whitinsville			MA	MA Applicant Trustee		Tri	rustee		0%	No	UMMMC	No

Affiliated Parties UMass Memorial Health Care, Inc.

03/04/2025 1:13 pm

Page 1 of 2

Add/ Del Rows	Name (Last)	Name (First)	Mailing Address	City	State	Affiliation	Position with affiliated entity (or with Applicant)	Stock, shares, or partnership	Percent Equity (numbers only)	Convictions or violations	List other health care facilities affiliated with	Business relationship with Applicant
+ -	Benjamin, MD	Evan	108 Chandler Street, Unit 2	Boston	MA	Applicant Trustee	Trustee		0%	No	UMMMC	No
+ -	King, PhD	Jean	29 Castle Road	Northboro	MA	Applicant Trustee	Trustee		0%	No	UMMMC	No
+ -	Kane	Nancy	109 Wilderness Drive, Unit 117	Naples	FL	Applicant Trustee	Trustee		0%	No	UMMMC	No
+ -	Bovenzi	Leslie	560 Goodrich Street	Lunenburg	MA	Applicant Trustee	Trustee		0%		UMMMC; HealthAlliance Home Health and Hospice	No
+ -	Colombo, DNP, MHA, RN	Lisa	58 Stanhope Road	East Falmouth	MA	Applicant Trustee	Trustee		0%	No	UMMMC	No
+ -	Mailman	Susan	24 Holden Street	Worcester	MA	Applicant Trustee	Trustee		0%	No	UMMMC	No
+ -	Shea	John	39 Coventry Road	Worcester	MA	Applicant Trustee	Trustee		0%		UMMMC; Community HealthLink	No
+ -	Siegrist	Richard	97 Worcester Street	Boston	MA	Applicant Trustee	Trustee		0%	No	UMMMC	No
+ -	Collins, MD	Michael	72 Flagg Street	Worcester	MA	Applicant Trustee	Trustee		0%	No	UMMMC	No
+ -	Flotte, MD	Terence	122 Paxton Road	Holden	MA	Applicant Trustee	Trustee		0%	No	UMMMC	No
+ -	Paulhus, Jr.	Robert	10 Larcridge Lane	Ashland	MA	Applicant Trustee	Trustee		0%	No	UMMMC	No
+ -					MA							
+ -					MA							

Document Ready for Filing

When document is complete click on "document is ready to file". This will lock in the responses and date and time stamp the form. To make changes to the document un-check the "document is ready to file" box. Edit document then lock file and submit Keep a copy for your records. Click on the "Save" button at the bottom of the page.

To submit the application electronically, click on the"E-mail submission to Determination of Need" button.

x

This document is ready to file:

Date/time Stamp: 03/04/2025 1:13 pm

E-mail submission to Determination of Need

Affiliated Parties UMass Memorial Health Care, Inc.

03/04/2025 1:13 pm

Page 2 of 2