

# **Boston Outpatient Surgical Suites, LLC**

840 Winter Street, Waltham, MA 02451

## **Determination of Need DoN Application # BOSS-22051213-AS**

Application for Determination of Need  
for Transfer of Site, Substantial Capital Expenditure and Substantial Change in Service  
by Boston Outpatient Surgical Suites, LLC.

November 21, 2023

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10. **Notice of Intent**
11. **Application Fee**

*note - each of the sections listed in the Table of Contents is attached as a separate file for this submission.*



**Massachusetts Department of Public Health**  
**Determination of Need**  
**Affidavit of Truthfulness and Compliance**  
**with Law and Disclosure Form 100.405(B)**

Version: 7-6-17

**Instructions:** Complete Information below. When complete check the box "This document is ready to print:". This will date stamp and lock the form. Print Form. Each person must sign and date the form. When all signatures have been collected, scan the document and e-mail to: [dph.don@state.ma.us](mailto:dph.don@state.ma.us) Include all attachments as requested.

Application Number: BOSS-22051213-A5

Original Application Date: 11/21/2023

Applicant Name: Boston Out-Patient Surgical Suites, LLC

Application Type: Ambulatory Surgery

Applicant's Business Type: ☐ Corporation ☐ Limited Partnership ☐ Partnership ☐ Trust ☒ LLC ☐ Other

Is the Applicant the sole member or sole shareholder of the Health Facility(ies) that are the subject of this Application? ☒ Yes ☐ No

Describe the role /relationship: The Applicant is the sole member/owner/operator of the Health Facility that is the subject of the Application:

The undersigned certifies under the pains and penalties of perjury:

1. The Applicant is ;
2. I have read 105 CMR 100.000, the Massachusetts Determination of Need Regulation;
3. I understand and agree to the expected and appropriate conduct of the Applicant pursuant to 105 CMR 100.800;
4. I have read this application for Determination of Need including all exhibits and attachments, and certify that all of the information contained herein is accurate and true;
5. I have submitted the correct Filing Fee and understand it is nonrefundable pursuant to 105 CMR 100.405(B);
6. I have submitted the required copies of this application to the Determination of Need Program, and, as applicable, to all Parties of Record and other parties as required pursuant to 105 CMR 100.405(B);
7. I have caused, as required, notices of intent to be published and duplicate copies to be submitted to all Parties of Record, and all carriers or third-party administrators, public and commercial, for the payment of health care services with which the Applicant contracts, and with Medicare and Medicaid, as required by 105 CMR 100.405(C), et seq.;
8. I have caused proper notification and submissions to the Secretary of Environmental Affairs pursuant to 105 CMR 100.405(E) and 301 CMR 11.00;
9. If subject to M.G.L. c. 6D, § 13 and 958 CMR 7.00, I have submitted such Notice of Material Change to the HPC - in accordance with 105 CMR 100.405(G);
10. Pursuant to 105 CMR 100.210(A)(3), I certify that both the Applicant and the Proposed Project are in material and substantial compliance and good standing with relevant federal, state, and local laws and regulations, as well as with all previously issued Notices of Determination of Need and the terms and Conditions attached therein;
11. I have read and understand the limitations on solicitation of funding from the general public prior to receiving a Notice of Determination of Need as established in 105 CMR 100.415;
12. I understand that, if Approved, the Applicant, as Holder of the DoN, shall become obligated to all Standard Conditions pursuant to 105 CMR 100.310, as well as any applicable Other Conditions as outlined within 105 CMR 100.000 or that otherwise become a part of the Final Action pursuant to 105 CMR 100.360;
13. Pursuant to 105 CMR 100.705(A), I certify that the Applicant has Sufficient Interest in the Site or facility; and
14. Pursuant to 105 CMR 100.705(A), I certify that the Proposed Project is authorized under applicable zoning by-laws or ordinances, whether or not a special permit is required; or,
  - a. If the Proposed Project is not authorized under applicable zoning by-laws or ordinances, a variance has been received to permit such Proposed Project; or,
  - b. The Proposed Project is exempt from zoning by-laws or ordinances.

LLC

All parties must sign. Add additional names as needed.

Brian McKeon, MD

10/19/2023

Name:

Signature:

Date

This document is ready to print: ☒

Date/time Stamp: 10/19/2023 11:07 AM

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**ARTICLES OF ORGANIZATION  
OF  
BOSTON OUT-PATIENT SURGICAL SUITES, L.L.C.**

**FILED**  
RECEIVED  
STATE OF TENNESSEE

2009 DEC 15 PM 3:09

THE HONORABLE  
CLERK OF THE COURT  
CLERK OF THE STATE

The undersigned, acting as the organizer of a limited liability company under the Tennessee Revised Limited Liability Company Act, Tennessee Code Annotated, Section 48-249-101 et seq. (the "Act"), hereby adopts the following Articles of Organization for such limited liability company:

**ARTICLE I.**

The name of the limited liability company is Boston Out-Patient Surgical Suites, L.L.C.

**ARTICLE II.**

The street address and zip code of the initial registered office of the limited liability company and the county in which the office is located is 20 Burton Hills Boulevard, Nashville, Davidson County, Tennessee 37215. The name of the limited liability company's initial registered agent at its initial registered office is Claire M. Gulmi.

**ARTICLE III.**

The limited liability company shall be managed by a board of directors.

**ARTICLE IV.**

The street address and zip code of the principal executive office of the limited liability company and the county in which the principal executive office is located is 20 Burton Hills Boulevard, Nashville, Davidson County, Tennessee 37215.

**ARTICLE V.**

The members of the limited liability company and any other parties to any contribution agreement or contribution allowance agreement with the limited liability company shall not have preemptive rights.

**ARTICLE VI.**

Section 48-249-503(b)(2) of the Act shall not apply to the limited liability company.

0031-1628



RECEIVED  
STATE OF TENNESSEE

2009 DEC 15 PM 3:09

#### ARTICLE VII.

The operating agreement of the limited liability company shall be in writing. The operating agreement shall be binding upon any person that becomes a member or a holder of financial or governance rights of the limited liability company, regardless of whether such person executes the operating agreement.

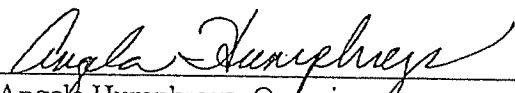
#### ARTICLE VIII.

To the fullest extent permitted by the Act, as in effect on the date hereof and as hereafter amended from time to time, a director shall not be liable to the limited liability company or its members for monetary damages for breach of fiduciary duty as a director. If the Act or any successor statute is amended after adoption of this provision to authorize limited liability company action further eliminating or limiting the personal liability of directors, then the liability of a director shall be eliminated or limited to the fullest extent permitted by the Act, as so amended from time to time. Any repeal or modification of this Article VIII by the members of the limited liability company shall not adversely affect any right or protection of a director of the limited liability company existing at the time of such repeal or modification or with respect to events occurring prior to such time.

#### ARTICLE IX.

The limited liability company shall indemnify and advance expenses to any responsible person, officer, employee or agent made a party to a proceeding to the fullest extent permitted by the Act and applicable law, as in effect on the date hereof and as hereafter amended from time to time.

IN WITNESS WHEREOF, these Articles of Organization have been executed on this 5<sup>th</sup> day of December, 2009, by the undersigned organizer of the limited liability company.

  
Angela Humphreys, Organizer

8296000.1



Community Meeting  
June 23, 2022

1265 Main Street

WALTHAM, MA 02451 | PRESENTATION



## Community Meeting Details

- ▶ This community meeting is being held as part of the Determination of Need process by the Department of Public Health (DPH).
- ▶ We notified elected officials as well as health, housing and other public service providers.
- ▶ We notified abutters within 500 feet of the property. This is beyond the 300-foot notice that is part of the planning process.
- ▶ The purpose of this community meeting is to educate the public, solicit feedback and answer any questions.



## Meeting Agenda

- ▶ First, I'll provide you with an overview of the meeting and instructions about how to participate.
- ▶ Next, I'll have the project principals introduce themselves and they will then proceed to tell you more about their proposed facility.
- ▶ Their presentation will be followed by a question & answer period to address any questions you might have.



## How Will This Virtual Meeting Work?

- ▶ First, under "View" in the top right-hand corner, click on "Gallery" instead of "Speaker" to ensure that you can see all participants.
- ▶ At the end of the presentation, we'll first take comments from any public officials in attendance. Next, the applicant will address any questions you might have but I'd like to ask that the discourse this evening remain respectful.
- ▶ If you'd like to ask a question, please click on "Participants" at the bottom of your screen. You will then see a list of participants on the right-hand side of your screen. At the bottom of that list, you will see a "Raise Hand" button. Press that button if you'd like to ask a question. Those of you on your phone can press \*9.



## Project Principals

Paul Ferreira



- ▶ Managing Partner of Blue Hawk Investments, LLC, a private equity real estate investment and development firm based in Newton.
- ▶ Iconic properties including the award-winning Hotel Indigo in Newton.
- ▶ Over \$450 million of projects in New England, Texas and Mexico and other parts of the United States.

## Project Principals

Greg DeConciliis



- ▶ Physician Assistant and Administrator of the Boston Outpatient Surgical Suites, a multi-specialty ambulatory surgery center in Waltham.
- ▶ President of the Massachusetts Association of Ambulatory Surgery Centers.

## Project Information

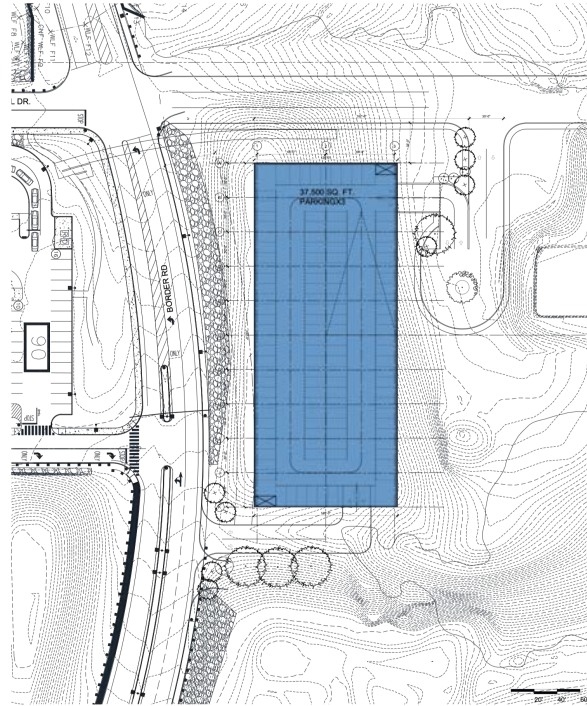


1265 Main Street  
Waltham, MA 02451

### Border Road Parcel

#### 1265 MAIN MEDICAL OWNER, LLC:

3-Story, 71,000SF including 3 story  
+/- 331 space understructure  
parking garage



## Map Image | Proposed Building Site





[JV] Masterplan Concept | Property Parcel



Rendering | Proposed Building [Aerial View]





## Rendering | Proposed Building



bluehawk  
INVESTMENTS, LLC

## Project Team | Design Assist

<b>Owner:</b>	1265 Main Medical Owner, LLC
<b>Developer:</b>	Blue Hawk Investments, LLC <a href="https://www.bluehawkinvestments.com">https://www.bluehawkinvestments.com</a>
<b>Architect:</b>	Machado Silvetti (Core and Shell) <a href="http://www.machado-silvetti.com">http://www.machado-silvetti.com</a>
<b>Architect:</b>	CUBE 3 (Tenant Improvements) <a href="https://www.cube3.com">https://www.cube3.com</a>
<b>Civil:</b>	VHB <a href="https://www.vhb.com">https://www.vhb.com</a>
<b>Construction Manager:</b>	Altair Construction, LLC <a href="http://altair-construction.com">http://altair-construction.com</a>
<b>Geotechnical:</b>	SLR <a href="https://www.slrconsulting.com">https://www.slrconsulting.com</a>
<b>MEP Engineers:</b>	Cummings Engineering
<b>Legal:</b>	Goulston & Storrs <a href="https://www.goulstonstors.com">https://www.goulstonstors.com</a>
<b>Structural:</b>	H+O Structural Engineering <a href="https://www.hayesoneill.com">https://www.hayesoneill.com</a>

MACHADO SILVETTI

**CUBE3**  
architecture | interiors | planning



**ALTAIR**  
CONSTRUCTION

**SLR**

*goulston&storrS*

**H+O**  
STRUCTURAL ENGINEERING

bluehawk  
INVESTMENTS, LLC

Map Image | Proposed Roadway Improvements



**Figure 2b**  
Roadway Improvements -  
Route 117 and Green Street  
1265 Main Street Off-Site Roadway Improvements  
Waltham, Massachusetts





Community Meeting  
August 31, 2022

# 1265 Main Street

WALTHAM, MA 02451 | PRESENTATION



## Community Meeting Details

- ▶ This community meeting is being held for a proposed Ambulatory Surgical Center (ASC) by 1265 Main Waltham Surgery Center, LLC/Revolution Orthopaedics, LLC on Border Road in Waltham.
- ▶ This meeting is in addition to the one we hosted on June 23, 2022 as part of the Determination of Need process by the Department of Public Health (DPH).
- ▶ Though this project is part of the 1265 Main Street Mixed-Use Development in Ward 1, we wanted to provide residents in Ward 7 who live in close proximity to the site an opportunity to learn more about this proposal and have any questions they might have addressed.



# Meeting Agenda

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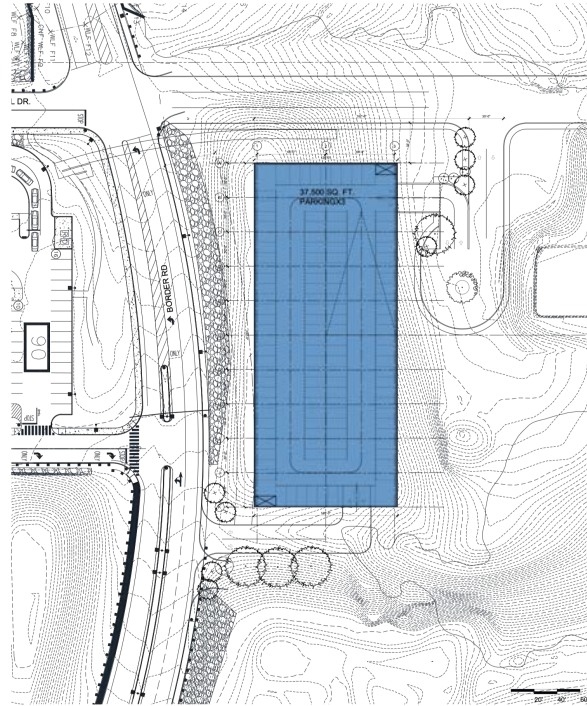


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Waltham, MA 02451

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Rendering | Proposed Building [Aerial View]





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bluehawk  
INVESTMENTS, LLC

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<b>Architect:</b>	CUBE 3 (Tenant Improvements) <a href="https://www.cube3.com">https://www.cube3.com</a>
<b>Civil:</b>	VHB <a href="https://www.vhb.com">https://www.vhb.com</a>
<b>Construction Manager:</b>	Altair Construction, LLC <a href="http://altair-construction.com">http://altair-construction.com</a>
<b>Geotechnical:</b>	SLR <a href="https://www.slrconsulting.com">https://www.slrconsulting.com</a>
<b>MEP Engineers:</b>	Cummings Engineering
<b>Legal:</b>	Goulston & Storrs <a href="https://www.goulstonstorrs.com">https://www.goulstonstorrs.com</a>
<b>Structural:</b>	H+O Structural Engineering <a href="https://www.hayesoneill.com">https://www.hayesoneill.com</a>

MACHADO SILVETTI

**CUBE3**  
architecture | interiors | planning



**ALTAIR**  
CONSTRUCTION

**SLR**

*goulston&storrs*

**H+O**  
STRUCTURAL ENGINEERING

bluehawk  
INVESTMENTS, LLC

## Map Image | Proposed Roadway Improvements



bluehawk  
INVESTMENTS, LLC

## For more information

- ▶ Contact Owen Eagan at 781-831-2494 or [eagan@consensus-strategies.com](mailto:eagan@consensus-strategies.com).
- ▶ Visit our website at <https://1265mainstreet.com>.



# The Commonwealth of Massachusetts

Executive Office of Health and Human Services

Department of Public Health

Determination of Need Program

99 Chauncy Street, 2<sup>nd</sup> Floor

Boston, MA 02111

(617) 753-7340

Fax: (617) 753-7349

DEVAL L. PATRICK  
GOVERNOR

TIMOTHY P. MURRAY  
LIEUTENANT GOVERNOR

JUDYANN BIGBY, MD  
SECRETARY

JOHN AUERBACH  
COMMISSIONER

February 25, 2010

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

Alan H. Einhorn, Attorney  
Foley & Lardner LLP  
111 Huntington Avenue  
Boston, MA 02199

NOTICE OF DETERMINATION OF NEED  
Project No. 4-4935  
(Transfer of Ownership of Boston Out-Patient  
Surgical Suites, LLC)

Dear Mr. Einhorn:

At their meeting of February 10, 2010, the Commissioner and the Public Health Council, acting together as the Department, voted pursuant to M.G.L. c.111, §.51 and the regulations adopted thereunder, to approve the application for a Determination of Need ("DoN") filed by Boston Out-Patient Surgical Suites, LLC ("BOSS"). The application, as approved, provides for the transfer of ownership and original licensure of BOSS. The change of ownership will be effected by a transaction whereby: (i) BOSS will merge into Boston Out-Patient Surgical Suites, LLC., a Tennessee limited liability company ("LLC"); (ii) Waltham Administrative Management, LLC. ("WAM"), which is owned primarily by the BOSS physicians and which currently manages BOSS, will also merge into LLC; (iii) AmSurg Holdings, Inc., a Tennessee corporation, will purchase sixty-five percent (65%) of the ownership interests of LLC; (iv) the remaining thirty-five percent (35%) of LLC's ownership interests will be contributed to a to-be-formed entity called BOSS Holdings, LLC (which, as a result, will be owned mostly by current BOSS owners). As a result of the transaction, AmSurg will own sixty-five percent (65%) of LLC and BOSS Holdings, LLC will own thirty-five percent (35%); and LLC ("the Applicant") will be the new owner-operator of the BOSS ambulatory surgery clinic.

This Notice incorporates by reference the Staff Summary and proceedings of the Public Health Council concerning this application.

The reason for this approval with conditions is that the application satisfies the standards applied under the Alternate Process for Change of Ownership, as listed at 105 CMR 100.602 of the Determination of Need regulation as follows:

- A. Individuals residing in the Applicant's health systems area will comprise a majority of the individuals responsible for decisions concerning:

- 1. approval of borrowings in excess of \$500,000;



2. additions or conversions which constitute substantial change in services;
3. approval of capital and operating budgets; and
4. approval of the filing of an application for determination of need.

B. The Applicant has consulted with MassHealth Office of Acute and Ambulatory Care of the Division of Medical Assistance concerning the access to medical services of Medicaid recipients in the Applicant's service area. Comments received by the Applicant from MassHealth indicate that MassHealth is not aware of specific access problems for MassHealth members seeking care at free-standing ambulatory surgery centers, including the Applicant's.

C. The Division of Health Care Quality has determined that neither the Applicant and any health care facility affiliates have not been found to have engaged in a pattern or practice in violation of the provisions of M.G.L. c.111, §51(D).

D. This standard stipulates that if the application is for a transfer of ownership of a hospital, then the applicant is a hospital licensed by the Department. This standard is not applicable to this application because the Applicant is not a hospital.

This Determination is effective upon receipt of this Notice.

To proceed with original licensure of Boston Out-Patient Surgical Suites, LLC, please contact in writing:

Mr. Sherman Lohnes  
Department of Public Health  
Division of Health Care Quality  
99 Chauncy Street, 2nd Floor  
Boston, MA 02111

FOR THE PUBLIC HEALTH COUNCIL



Linda M. Hopkins  
Secretary to the Council

LH/JG/jp

cc: Sherman Lohnes, Division of Health Care Quality  
Jill Mazzola, Division of Health Care Quality  
Steve McCabe, Division of Health Care Finance and Policy  
Terri Yannetti, Division of Medical Assistance  
Decision Letter File  
Public File  
MIS

DON Application #BOSS - 22051213 - AS

From: gregd@bostonoutpatient.com  
Subject: FW: Thank you for placing your order with us.  
Date: September 29, 2023 at 10:52 AM  
To: [REDACTED]

## Notice of Intent



Good morning  
This is running in the Globe today  
The Metro section couldn't go until Monday... I will forward that  
Thanks

Boston  
Herald.  
Legal  
9/29/23

Gregory P. DeConciliis, PA-C, CASC  
Administrator  
Boston Out-Patient Surgical Suites, LLC  
(781) 895-4901

NOTICE: This e-mail may contain PRIVILEGED and CONFIDENTIAL information. It may be protected by the attorney-client privilege or the work product doctrine. Please treat it as a confidential message. This email is intended for the use of the person to whom it is addressed. If you are not the intended recipient, any disclosure, copying, distribution or use of the contents of this message is strictly prohibited. If you have received this e-mail in error, please destroy this message and immediately contact Boston Outpatient Surgery Suites at 781-895-4901, extension 8.

From: legals@bostonherald.com  
Sent: Thursday, September 28, 2023 7:59 AM  
To: gregd@bostonoutpatient.com  
Subject: Thank you for placing your order with us.

**THANK YOU for your ad submission!**

This is your confirmation that your order has been submitted. Below are the details of your transaction. Please save this confirmation for your records.

### Job Details

Order Number: NY0093532  
Classification:  
General Legal Notices & Bids  
Package:  
Legals MA 1x Only  
Order Cost:  
\$248.07  
Payment Type:  
Visa

### Account Details

Gregory DeConciliis  
28 Bemis St  
Newton, MA 02460  
781-895-4908  
gregd@bostonoutpatient.com  
Boston Out-Patient Surgical Suites  
Credit Card - [REDACTED]

### Schedule for ad number NY00935320

→ Fri Sep 29, 2023  
Boston Herald Legals  
All Zones

#### Public Announcement Concerning a Proposed Health Care Project

Boston Outpatient Surgical Suites, LLC ("Applicant") located at 840 Winter Street, Waltham, MA 02451, intends to file an application for a Notice of Determination of Need with the Massachusetts Department of Public Health for a substantial change in service and substantial capital expenditure in connection with its proposed relocation to leased space in a newly constructed building located at 71 Border Road, Waltham, MA 02451. The Application includes the expansion of the Applicant's current operating room capacity from its current three operating rooms to eight operating rooms. The Application also includes thirty (30) pre/post procedure beds and necessary administrative, sterilization and storage capacity. The total value of the project based on the maximum capital expenditure is \$13.1 million. The Applicant does not anticipate any price or service impacts on the Applicant's existing patient panel as a result of the proposed project. Any ten taxpayers of Massachusetts may register in connection with the intended application by no later than 11/13/23, or 30 days from the filing date, whichever is later, by contacting the Department of Public Health, Determination of Need Program, 67 Forest Street, Marlboro, MA 01752

#NY0093532

09/29/23

DON Application #BOSS-22051213-AS

Notice of Intent

RECEIPT

09/28/23

NORTHEAST CLUSTER  
NORTH EAST CLUSTER

MediaNews Group

Account: **1434778**  
Name: **GREGORY DECONCILIIS**  
Company: **BOSTON OUT-PATIENT SURGICAL SU**

Address: **840 WINTER STREET**  
**Ste 400A**  
**WALTHAM, MA 02451**

Telephone: **(781) 895-4908**  
Fax:  
Description:

Date: **09/28/23**  
Start Date: **10/02/23** ← Stop Date: **10/02/23**  
Class: **0 - 0**  
Ad ID: **2521873**  
Ad Taker: **CRASTAMAS**  
Sales Person: **Amanda Stamas (LFC301)**  
Words: **0**  
Lines: **0**  
Agate Lines: **42**  
Depth: **3.0**  
Inserts: **2**  
Blind Box:  
PO Number:

Ad sample

Boston Herald  
Metro Northeast Cluster  
10/2/23

Total: **\$134.22**  
Paid Amount: **\$0.00**  
Amount Due: **\$134.22**

Publication

Boston Herald, BostonHerald.com

We Appreciate Your Business!  
Thank You GREGORY DECONCILIIS!


**Public Announcement Concerning a  
Proposed Health Care Project**

Boston Outpatient Surgical Suites, LLC ("Applicant") located at 840 Winter Street, Waltham, MA 02451, intends to file an application for a Notice of Determination of Need with the Massachusetts Department of Public Health for a substantial change in service and substantial capital expenditure in connection with its proposed relocation to leased space in a newly constructed building located at 71 Border Road, Waltham, MA 02451. The Application includes the expansion of the Applicant's current operating room capacity from its current three operating rooms to eight operating rooms. The Application, also includes thirty (30), pre/post procedure beds and necessary administrative, sterilization and storage capacity. The total value of the project based on the maximum capital expenditure is \$13.1 million. The Applicant does not anticipate any price or service impacts on the Applicant's existing patient panel as a result of the proposed project. Any ten taxpayers of Massachusetts may register in connection with the intended application by no later than 11/13/23, or 30 days from the filing date, whichever is later, by contacting the Department of Public Health, Determination of Need Program, 67 Forest Street, Marlboro, MA 01752

DON Application # BOSS - 22051213 - AS Notice of Intent.

BOSS website.

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 [Request An Appointment](#)



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[Find a Physician](#)

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[For Physicians](#)

[About Us](#)

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| [Billing Disclosure](#) | [Notices](#)

Boston Out-Patient Surgical Suites  
840 Winter Street,  
Waltham, MA 02451

© 2023 Boston Out-Patient Surgical Suites





128 WALTHAM SURGERY CENTER, LLC

130 RUMFORD AVE SUITE 116

AUBURNDALE, MA 02466

101

57-85/115

116

10/19/23

Date

CHECK ARMOR  
FRAUD PROTECTION

PAY to the  
order of

Commonwealth of Massachusetts \$ 26,200.00

Twenty six thousand two hundred and <sup>00</sup>/<sub>100</sub>

Dollars



Photo  
Safe  
Deposit  
Details on back



WASHINGTON TRUST®

*[Signature]*

FOR BOSS-22051213-AS

0101



ORIGIN ID:OWDA (617) 663-5768  
PAUL FERREIRA  
BLUE HAWK INVESTMENTS, LLC  
130 RUMFORD AVE  
SUITE 116  
NEWTON, MA 02466  
UNITED STATES US

SHIP DATE: 19OCT23  
ACTWGT: 0.50 LB  
CAD: 112301898/INET4535

BILL SENDER

TO DENNIS RENAUD, DIRECTOR  
DETERMINATION OF NEED PROGRAM  
67 FOREST ST

MARLBOROUGH MA 01752  
REF: (617) 233-6804

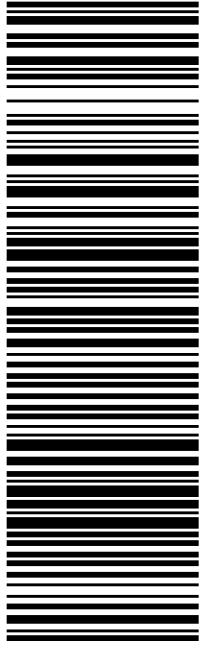
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**TO:** Lucy Clarke, Analyst, Determination of Need Program  
**FROM:** Chris Fenore, Director, Operations  
**DATE:** 1/5/2024  
**SUBJECT:** Technical edits/corrections made to BOSS-22051213-AS DoN filing as requested in 1/3/24 email

---

1. Please provide the pdf version of the updated CPA report so that it can be posted alongside the word version.
  - **Applicant Response:** Please see attached pdf of corrected CPA report
2. On Form F4.a., include the Cost/Square Footage for New Construction, and make sure the bottom of the form is not cut off.
  - **Applicant Response:** The cost/square footage for new construction has been added to the form. The DPH pdf form does not populate totals at the bottom of the page and cannot be edited to correct formatting.
3. Per the instructions, the Affiliated Parties Form should *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.* The form still includes corporations.
  - **Applicant Response:** The Affiliated Parties Form includes all of the names requested by DPH. The Applicant has included the corporations on the form to afford the Department the full picture of which individuals' names are associated with which of the corporations/entities.
4. Describe the role/relationship on the Affidavit Form.
  - **Applicant Response:** The Applicant, Boston Out-Patient Surgical Suites, LLC actually is the member/owner/operator of the facility. The Affidavit Form has been corrected with the "Yes" box checked and the "Describe the role/relationship," has been updated with "The Applicant is the sole member/owner/operator of the Health Facility that is the subject of the Application."



**TO:** Lucy Clarke, Analyst, Determination of Need Program  
**FROM:** Chris Fenore, Director, Operations  
**DATE:** 12/29/2023  
**SUBJECT:** Technical edits/corrections made to BOSS-22051213-AS DoN filing as requested in 12/11/23 email

---

1. Please confirm that the application submission was sent to all Parties of Record.
  - **Applicant Response:** In an abundance of caution the Applicant has re-sent the application to all Parties of record, as follows. A pdf of the emails sent is included with this memo:
    1. AG: [HCD-DON-Filings@state.ma.us](mailto:HCD-DON-Filings@state.ma.us)
    2. DPH-DL - DoN Program: [dph.don@state.ma.us](mailto:dph.don@state.ma.us)
    3. HPC: [HPC-DPHFilings@mass.gov](mailto:HPC-DPHFilings@mass.gov)
    4. CHIA: [data@chiamass.gov](mailto:data@chiamass.gov)
    5. Christopher King (EHS): [christopher.king@mass.gov](mailto:christopher.king@mass.gov)
    6. Tomaso Calicchio (EHS-MassHealth): [Tomaso.Calicchio@mass.gov](mailto:Tomaso.Calicchio@mass.gov)
    7. Hai Nguyen (EHS-MassHealth): [Hai.Nguyen@mass.gov](mailto:Hai.Nguyen@mass.gov)
    8. Karina Mejias (EHS): [Karina.Mejias@mass.gov](mailto:Karina.Mejias@mass.gov)
    9. Priscilla Portis, (EHS): [priscilla.portis@mass.gov](mailto:priscilla.portis@mass.gov)
    10. Judy Bernice (DPH): [judy.bernice@mass.gov](mailto:judy.bernice@mass.gov)
    11. Stephen Davis (DPH): [stephen.davis@mass.gov](mailto:stephen.davis@mass.gov)
    12. Katherine Mills (HPC): [katherine.mills@mass.gov](mailto:katherine.mills@mass.gov)
    13. Elizabeth Almanzor (CHIA): [Elizabeth.Almanzor@chiamass.gov](mailto:Elizabeth.Almanzor@chiamass.gov)
    14. Sam Louis (DPH-OHE): [Samuel.louis@mass.gov](mailto:Samuel.louis@mass.gov)
    15. Eric Gold (AGO): [Eric.gold@mass.gov](mailto:Eric.gold@mass.gov)
    16. Daniel Gent (DPH): [daniel.gent@mass.gov](mailto:daniel.gent@mass.gov)
    17. Rebecca Kaye: [rebecca.kaye@mass.gov](mailto:rebecca.kaye@mass.gov)
    18. Elizabeth Maffei (DPH): [elizabeth.maffei@mass.gov](mailto:elizabeth.maffei@mass.gov)
    19. Jennica Allen (DPH): [jennica.f.allen@mass.gov](mailto:jennica.f.allen@mass.gov)
    20. Katelyn Teague (DPH): [katelyn.teague@mass.gov](mailto:katelyn.teague@mass.gov)
    21. Pavel Terpelets: [pavel.terpelets@mass.gov](mailto:pavel.terpelets@mass.gov)
    22. Medicare Region 1contact: [ROBOSORA@cms.hhs.gov](mailto:ROBOSORA@cms.hhs.gov)
2. For patient privacy and confidentiality, please combine the counts in the category Self Pay with the category VA/Workers Comp/Other and label accordingly.
  - **Applicant Response:** The Applicant has made the technical edit as requested. Please see insurance table on page 6 of narrative document attached.
3. Affidavit of Truthfulness – the Original Application Date on the Affidavit of Truthfulness is different than the date listed on the Affiliated Parties Form and Change in Service Form. Please update so the dates match.
  - **Applicant Response:** The Applicant has updated the date at the top of the Affidavit of Truthfulness to 11/21/2023 filing date as requested.
4. Please provide race/ethnicity information for the Patient Panel for FY19 through Jan-June Annualized.
  - **Applicant Response:** The Applicant has not historically and does not currently collect race/ethnicity information for its patients.

5. CPA Report –
  - Include the start and end years for the forecasted period.  
<https://www.mass.gov/doc/cpa-report-guidelines-march-2021/download>
  - Please update the definition of Feasibility on page 4 of the report to include operating costs to support the Proposed Project without negative impacts or consequences *to the Applicant's Patient Panel*. DoN Regulation 100.210(A)(4)
  - Please provide a Word version of the CPA report that can be reviewed for accessibility.
    - **Applicant Response:** The Applicant has updated the CPA report as requested to meet the CPA report guidelines as well as the accessibility guidelines.
6. Change in Service Form: Please include the pre/post procedure beds and procedure rooms on the form in the section that lists ORs.
  - **Applicant Response:** The Applicant has updated the Change in Service Form to reflect the pre/post procedure beds and procedure rooms on the form in the section that lists ORs for Applicant's existing and proposed sites as requested.
7. Narrative: Most, if not all, of the tables provided in the narrative are pictures, which means they are inaccessible. Please resubmit with the tables embedded into the Word document. Please refer to point #5 on the DoN [accessibility guidelines](#) for what we're looking for.
  - **Applicant Response:** The Applicant has updated the formatting of all the tables in the narrative document as embedded Word tables in compliance with point #5 in the DoN accessibility guidelines as requested.
8. Affiliated Parties: Corporations are listed. Please only include corporate board members.
  - **Applicant Response:** The Applicant has updated the Affiliated Parties form as requested. The Applicant also updated the following sentence on page 1 of the Narrative to more accurately reflect Dr. Brian McKeon's 1% direct ownership of the Applicant. " Current ownership consists of AmSurg Holdings, LLC ("AmSurg"), which owns 51% of the Applicant, Atrius Health ("Atrius"), which owns 10% of the Applicant, BOSS Holdings, LLC ("Holdings"), which owns 38% of the Applicant, and Dr. Brian McKeon, who owns the remaining 1% of the Applicant."
9. Articles of Organization: Provide the link to the Articles of Organization and not the full corporate documents.
  - **Applicant Response:** The Entity was formed in Tennessee, and Tennessee does not offer a link to the Articles of Organization as requested.

In addition to the above, as requested, the Factor 4.a.i. and 4.a.ii forms have been updated/clarified as follows:

- **4.a.ii.** as requested, the Fair Market Value of the leased space that will house the ASC is reflected under "Building Acquisition Cost" under "New Construction," and 0 is entered for all other costs listed.
- **4.a.i.** the Fair Market Value/Building Acquisition Cost is included under "Total Cost" (New Construction) and reflects the cost/square footage for New Construction.



Greg DeConciliis <gregd@bostonoutpatient.com>

---

## BOSS DoN files for submission (Zip folder) Application Number: BOSS-22051213-AS

---

gregd@bostonoutpatient.com <gregd@bostonoutpatient.com>

Tue, Nov 21, 2023 at 12:32 PM

To: dph.don@state.ma.us

TO: Dennis Renaud, Program Director, Determination of Need

Please see attached documents for Boston Out-Patient Surgical Suites Determination of Need Application, number BOSS-22051213-AS.

Please feel free to reach out to me with any questions or additional requests for information.

Christopher Fenore

Director, Operations

[Chris.Fenore@amsurg.org](mailto:Chris.Fenore@amsurg.org)

781-895-4901

---

**Gregory P. DeConciliis, PA-C, CASC**

Administrator

**Boston Out-Patient Surgical Suites, LLC**

840 Winter St., Waltham, MA 02451

(781) 895-4901

Fax: (781) 895-4902

Direct: (781) 895-4908

Cell: (617) 233-6804

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**Files for BOSS DON Application 112123.zip**

10823K

**From:** Chris Fenore Chris.Fenore@amsurg.com

**Subject:** FW: BOSS-22051213-AS DoN filing

**Date:** December 21, 2023 at 1:50 PM

**To:** Libby Wylie Libby.Wylie@amsurg.com, Alan H. Einhorn AEinhorn@foley.com, Deborah Fiumedora dfiumedora@yahoo.com

CF

Thanks,  
Chris

**Chris Fenore**

Director of Operations - Massachusetts

W: 615-240-3849 | [AMSURG.com](https://www.amsurg.com)



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---

**From:** Chris Fenore

**Sent:** Wednesday, December 20, 2023 5:08 PM

**To:** HCD-DON-Filings@state.ma.us

**Subject:** BOSS-22051213-AS DoN filing

Please see attached documents for Boston Out-Patient Surgical Suites Determination of Need Application, number BOSS-22051213-AS.

Please feel free to reach out to me with any questions or additional requests for information.

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**From:** Chris Fenore Chris.Fenore@amsurg.com

**Subject:** FW: BOSS-22051213-AS DoN filing

**Date:** December 21, 2023 at 1:50 PM

**To:** Libby Wylie Libby.Wylie@amsurg.com, Alan H. Einhorn AEinhorn@foley.com, Deborah Fiumedora dfiumedora@yahoo.com

CF

Thanks,  
Chris

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Director of Operations - Massachusetts

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**From:** Chris Fenore

**Sent:** Wednesday, December 20, 2023 5:09 PM

**To:** dph.don@state.ma.us

**Subject:** BOSS-22051213-AS DoN filing

Please see attached documents for Boston Out-Patient Surgical Suites Determination of Need Application, number BOSS-22051213-AS.

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Thanks,  
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**From:** Chris Fenore

**Sent:** Wednesday, December 20, 2023 5:09 PM

**To:** HPC-DPHFilings@mass.gov

**Subject:** BOSS-22051213-AS DoN filing

Please see attached documents for Boston Out-Patient Surgical Suites Determination of Need Application, number BOSS-22051213-AS.

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**To:** Libby Wylie Libby.Wylie@amsurg.com, Alan H. Einhorn AEinhorn@foley.com, Deborah Fiumedora dfiumedora@yahoo.com

---

CF

Thanks,  
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**From:** Chris Fenore

**Sent:** Wednesday, December 20, 2023 5:10 PM

**To:** [data@chiamass.gov](mailto:data@chiamass.gov)

**Subject:** BOSS-22051213-AS DoN filing

Please see attached documents for Boston Out-Patient Surgical Suites Determination of Need Application, number BOSS-22051213-AS.

Please feel free to reach out to me with any questions or additional requests for information.

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**Date:** December 21, 2023 at 1:50 PM

**To:** Libby Wylie Libby.Wylie@amsurg.com, Alan H. Einhorn AEinhorn@foley.com, Deborah Fiumedora dfiumedora@yahoo.com

---

CF

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**From:** Chris Fenore

**Sent:** Wednesday, December 20, 2023 5:10 PM

**To:** christopher.king@mass.gov

**Subject:** BOSS-22051213-AS DoN filing

Please see attached documents for Boston Out-Patient Surgical Suites Determination of Need Application, number BOSS-22051213-AS.

Please feel free to reach out to me with any questions or additional requests for information.

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**From:** Chris Fenore Chris.Fenore@amsurg.com 

**Subject:** FW: BOSS-22051213-AS DoN filing

**Date:** December 21, 2023 at 1:51 PM

**To:** Libby Wylie Libby.Wylie@amsurg.com, Alan H. Einhorn AEinhorn@foley.com, Deborah Fiumedora dfiumedora@yahoo.com

---

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Thanks,  
Chris

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**From:** Chris Fenore

**Sent:** Wednesday, December 20, 2023 5:11 PM

**To:** [Tomaso.Calicchio@mass.gov](mailto:Tomaso.Calicchio@mass.gov)

**Subject:** BOSS-22051213-AS DoN filing

Please see attached documents for Boston Out-Patient Surgical Suites Determination of Need Application, number BOSS-22051213-AS.

Please feel free to reach out to me with any questions or additional requests for information.

**Chris Fenore**

Director of Operations - Massachusetts

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**Subject:** FW: BOSS-22051213-AS DoN filing

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**To:** Libby Wylie Libby.Wylie@amsurg.com, Alan H. Einhorn AEinhorn@foley.com, Deborah Fiumedora dfiumedora@yahoo.com

---

CF

Thanks,  
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**From:** Chris Fenore

**Sent:** Wednesday, December 20, 2023 5:11 PM

**To:** [Hai.Nguyen@mass.gov](mailto:Hai.Nguyen@mass.gov)

**Subject:** BOSS-22051213-AS DoN filing

Please see attached documents for Boston Out-Patient Surgical Suites Determination of Need Application, number BOSS-22051213-AS.

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**Date:** December 21, 2023 at 1:51 PM

**To:** Libby Wylie Libby.Wylie@amsurg.com, Alan H. Einhorn AEinhorn@foley.com, Deborah Fiumedora dfiumedora@yahoo.com

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**From:** Chris Fenore

**Sent:** Wednesday, December 20, 2023 5:12 PM

**To:** [Karina.Mejias@mass.gov](mailto:Karina.Mejias@mass.gov)

**Subject:** BOSS-22051213-AS DoN filing

Please see attached documents for Boston Out-Patient Surgical Suites Determination of Need Application, number BOSS-22051213-AS.

Please feel free to reach out to me with any questions or additional requests for information.

**Chris Fenore**

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**From:** Chris Fenore Chris.Fenore@amsurg.com 

**Subject:** FW: BOSS-22051213-AS DoN filing

**Date:** December 21, 2023 at 1:51 PM

**To:** Libby Wylie Libby.Wylie@amsurg.com, Alan H. Einhorn AEinhorn@foley.com, Deborah Fiumedora dfiumedora@yahoo.com

---

CF

Thanks,  
Chris

**Chris Fenore**

Director of Operations - Massachusetts

W: 615-240-3849 | [AMSURG.com](http://AMSURG.com)



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---

**From:** Chris Fenore

**Sent:** Wednesday, December 20, 2023 5:12 PM

**To:** priscilla.portis@mass.gov

**Subject:** BOSS-22051213-AS DoN filing

Please see attached documents for Boston Out-Patient Surgical Suites Determination of Need Application, number BOSS-22051213-AS.

Please feel free to reach out to me with any questions or additional requests for information.

**Chris Fenore**

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**From:** Chris Fenore Chris.Fenore@amsurg.com 

**Subject:** FW: BOSS-22051213-AS DoN filing

**Date:** December 21, 2023 at 1:52 PM

**To:** Libby Wylie Libby.Wylie@amsurg.com, Alan H. Einhorn AEinhorn@foley.com, Deborah Fiumedora dfiumedora@yahoo.com

---

CF

Thanks,  
Chris

**Chris Fenore**

Director of Operations - Massachusetts

W: 615-240-3849 | [AMSURG.com](http://AMSURG.com)



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---

**From:** Chris Fenore

**Sent:** Wednesday, December 20, 2023 5:13 PM

**To:** [judy.bernice@mass.gov](mailto:judy.bernice@mass.gov)

**Subject:** BOSS-22051213-AS DoN filing

Please see attached documents for Boston Out-Patient Surgical Suites Determination of Need Application, number BOSS-22051213-AS.

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**Chris Fenore**

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**Date:** December 21, 2023 at 1:52 PM

**To:** Libby Wylie Libby.Wylie@amsurg.com, Alan H. Einhorn AEinhorn@foley.com, Deborah Fiumedora dfiumedora@yahoo.com

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image001.png  
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---

**From:** Chris Fenore

**Sent:** Wednesday, December 20, 2023 5:13 PM

**To:** [stephen.davis@mass.gov](mailto:stephen.davis@mass.gov)

**Subject:** BOSS-22051213-AS DoN filing

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**From:** Chris Fenore

**Sent:** Wednesday, December 20, 2023 5:14 PM

**To:** katherine.mills@mass.gov

**Subject:** BOSS-22051213-AS DoN filing

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**Subject:** FW: BOSS-22051213-AS DoN filing

**Date:** December 21, 2023 at 1:52 PM

**To:** Libby Wylie Libby.Wylie@amsurg.com, Alan H. Einhorn AEinhorn@foley.com, Deborah Fiumedora dfiumedora@yahoo.com

CF

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**From:** Chris Fenore

**Sent:** Wednesday, December 20, 2023 5:14 PM

**To:** [rebecca.kaye@mass.gov](mailto:rebecca.kaye@mass.gov)

**Subject:** BOSS-22051213-AS DoN filing

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---

**From:** Chris Fenore

**Sent:** Wednesday, December 20, 2023 5:18 PM

**To:** Louis, Samuel (DPH) <[samuel.louis@mass.gov](mailto:samuel.louis@mass.gov)>

**Subject:** BOSS-22051213-AS DoN filing

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---

**From:** Chris Fenore

**Sent:** Wednesday, December 20, 2023 5:14 PM

**To:** [katherine.mills@mass.gov](mailto:katherine.mills@mass.gov)

**Subject:** BOSS-22051213-AS DoN filing

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**Date:** December 21, 2023 at 1:53 PM

**To:** Libby Wylie Libby.Wylie@amsurg.com, Alan H. Einhorn AEinhorn@foley.com, Deborah Fiumedora dfiumedora@yahoo.com

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**From:** Chris Fenore

**Sent:** Wednesday, December 20, 2023 5:19 PM

**To:** elizabeth.almanzor@chiamass.gov

**Subject:** BOSS-22051213-AS DoN filing

Please see attached documents for Boston Out-Patient Surgical Suites Determination of Need Application, number BOSS-22051213-AS.

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**From:** Chris Fenore  
**Sent:** Wednesday, December 20, 2023 5:14 PM  
**To:** [katherine.mills@mass.gov](mailto:katherine.mills@mass.gov)  
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**From:** Chris Fenore Chris.Fenore@amsurg.com

**Subject:** FW: BOSS-22051213-AS DoN filing

**Date:** December 21, 2023 at 1:53 PM

**To:** Libby Wylie Libby.Wylie@amsurg.com, Alan H. Einhorn AEinhorn@foley.com, Deborah Fiumedora dfiumedora@yahoo.com

CF

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**From:** Chris Fenore

**Sent:** Wednesday, December 20, 2023 5:20 PM

**To:** pavel.terpelets@mass.gov

**Subject:** BOSS-22051213-AS DoN filing

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**From:** Chris Fenore Chris.Fenore@amsurg.com

**Subject:** FW: BOSS-22051213-AS DoN filing

**Date:** December 21, 2023 at 1:53 PM

**To:** Libby Wylie Libby.Wylie@amsurg.com, Alan H. Einhorn AEinhorn@foley.com, Deborah Fiumedora dfiumedora@yahoo.com

CF

Thanks,  
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**From:** Chris Fenore

**Sent:** Wednesday, December 20, 2023 5:20 PM

**To:** katelyn.teague@mass.gov

**Subject:** BOSS-22051213-AS DoN filing

Please see attached documents for Boston Out-Patient Surgical Suites Determination of Need Application, number BOSS-22051213-AS.

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**From:** Chris Fenore Chris.Fenore@amsurg.com

**Subject:** FW: BOSS-22051213-AS DoN filing

**Date:** December 21, 2023 at 1:53 PM

**To:** Libby Wylie Libby.Wylie@amsurg.com, Alan H. Einhorn AEinhorn@foley.com, Deborah Fiumedora dfiumedora@yahoo.com

CF

Thanks,  
Chris

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**From:** Chris Fenore

**Sent:** Wednesday, December 20, 2023 5:21 PM

**To:** eric.gold@mass.gov

**Subject:** BOSS-22051213-AS DoN filing

Please see attached documents for Boston Out-Patient Surgical Suites Determination of Need Application, number BOSS-22051213-AS.

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**Subject:** FW: BOSS-22051213-AS DoN filing

**Date:** December 21, 2023 at 1:54 PM

**To:** Libby Wylie Libby.Wylie@amsurg.com, Alan H. Einhorn AEinhorn@foley.com, Deborah Fiumedora dfiumedora@yahoo.com

---

CF

Thanks,  
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image001.png  
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**From:** Chris Fenore

**Sent:** Wednesday, December 20, 2023 5:21 PM

**To:** [daniel.gent@mass.gov](mailto:daniel.gent@mass.gov)

**Subject:** BOSS-22051213-AS DoN filing

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**To:** Libby Wylie Libby.Wylie@amsurg.com, Alan H. Einhorn AEinhorn@foley.com, Deborah Fiumedora dfiumedora@yahoo.com

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**From:** Chris Fenore

**Sent:** Wednesday, December 20, 2023 5:22 PM

**To:** [elizabeth.maffei@mass.gov](mailto:elizabeth.maffei@mass.gov)

**Subject:** BOSS-22051213-AS DoN filing

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Thanks,  
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**From:** Chris Fenore

**Sent:** Wednesday, December 20, 2023 5:22 PM

**To:** jennica.f.allen@mass.gov

**Subject:** BOSS-22051213-AS DoN filing

Please see attached documents for Boston Out-Patient Surgical Suites Determination of Need Application, number BOSS-22051213-AS.

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**From:** Chris Fenore

**Sent:** Wednesday, December 20, 2023 5:22 PM

**To:** robosora@cms.hhs.gov

**Subject:** BOSS-22051213-AS DoN filing

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**Subject:** FW: BOSS-22051213-AS DoN filing

**Date:** December 21, 2023 at 1:55 PM

**To:** Libby Wylie Libby.Wylie@amsurg.com, Alan H. Einhorn AEinhorn@foley.com, Deborah Fiumedora dfiumedora@yahoo.com

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**From:** Chris Fenore

**Sent:** Wednesday, December 20, 2023 5:25 PM

**To:** HCD-DON-Filings@state.ma.us

**Subject:** BOSS-22051213-AS DoN filing

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**Work cross-functionally, break down walls, develop others, be inclusive, and unite to improve patient health**

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**Files for BOSS DON Application**  
**112123.zip**  
11.1 MB

