

## Wellesley Townsman, The

Publication Logo  
Unavailable

Publication Name:

**Wellesley Townsman, The**

Publication URL:

**[www.wickedlocal.com/wellesley](http://www.wickedlocal.com/wellesley)**

Publication City and State:

**Wellesley, MA**

Publication County:

**Norfolk**

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Notice Popular Keyword Category:

Notice Keywords:

**Lasell**

Notice Authentication Number:

**202407292144304095805**

**1626174550**

Notice URL:

[Back](#)

Notice Publish Date:

Thursday, July 11, 2024

### Notice Content

LASELL VILLAGE INC. LEGAL NOTICE PUBLIC ANNOUNCEMENT CONCERNING A PROPOSED HEALTH CARE PROJECT LASELL VILLAGE INC. Lasell Village Inc. (the Applicant") D/B/A Lasell House located at 120 Seminary Avenue, Newton, Massachusetts intends to file an application with the Department of Public Health for a Conservation Long Term Care Project to re-design and renovate the existing facility and to decrease the number of licensed beds. The Applicant plans to decrease the number of licensed beds from thirty- eight (38) to twenty-three (23). To better meet the needs of Lasell's University-based senior living community, the decreased number of beds will allow for a private bathroom with the installation of a shower in each patient bedroom. An assessment of the facility identified opportunities to re-design and modernize for an enhanced environment. These improvements will provide a more home-like environment for patients and streamline the delivery of care for employees. Other key components of the project include upgrading outdated finishes and furnishings within patient rooms and common areas, replacing windows throughout the facility, and individual heating and cooling thermostats in each bedroom. The Applicant does not anticipate any price or service impacts on the Applicant's existing patient panel as a result of the application. The estimated capital expenditure for this project is \$6,703,239.35. Any ten taxpayers of the Commonwealth may register in connection with the application by July 25, 2024, or within 30 days after the filing date for the application, whichever is later. Such registrations or requests for hearing shall be sent to the Department of Public Health, Determination of Need Program, 67 Forest Street, Marlborough, MA 01752. The application may be inspected at such address. AD#10360787 Wellesley Townsman 7/11/2024

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**Boston Globe, The**



Publication Name:  
**Boston Globe, The**

Publication URL:  
[www.boston.com/](http://www.boston.com/)

Publication City and State:  
**Boston, MA**

Publication County:  
**Suffolk**

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**202407292146132767359**  
**1626174550**

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Notice File:



[736175\\_V1\\_B0\\_CBW\\_GL](#)[Legal Notice 2 Col\\_SLN2C07132024.PDF](#)

Notice Publish Date:

Saturday, July 13, 2024

**Notice Content**

**PLEASE NOTE:** The following text was electronically converted from the PDF document above, and may not be 100% accurate. Because of this, please view the PDF for the most accurate information.

PUBLIC ANNOUNCEMENT CONCERNING A PROPOSED HEALTH CARE PROJECT LASELL VILLAGE INC. Lasell Village Inc. (the Applicant”) D/B/A Lasell House lo- cated at 120 Seminary Avenue, Newton, Massachusetts intends to file an application with the Department of Public Health for a Conservation Long Term Care Project to re-de- sign and renovate the existing facility and to decrease the number of licensed beds. The Applicant plans to decrease the number of licensed beds from thirty- eight (38) to twen- ty-three (23). To better meet the needs of Lasell's Universi- ty-based senior living community, the decreased number of beds will allow for a private bathroom with the installation of a shower in each patient bedroom. An assessment of the facility identified opportunities to re-design and mod- ernize for an enhanced environment. These improvements will provide a

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# 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** Include all attachments as requested.

Application Number: **NONE-24030510-CL**

Original Application Date: **06/17/2024**

Applicant Name: **Lasell Village, Inc.**

Application Type: **Conservation Long Term Care Project**

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

The undersigned certifies under the pains and penalties of perjury:

1. The Applicant is the sole corporate member or sole shareholder of the Health Facility[ies] that are the subject of this Application;
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.

#### Corporation:

Attach a copy of Articles of Organization/Incorporation, as amended

Eric Turner

CEO for Corporation Name:

Signature:

Date

Jeffrey Simon

Board Chair for Corporation Name:

Signature:

Date

Save

Print form

Reset form

## Commonwealth of Massachusetts

Vendor Code

004152

Invoice Number	Description	Date	Amount	Discount	Withheld	Net Amount
041124	DON Application filing fee	04/11/2024	13,406.48	0.00	0.00	13,406.48
Check Date: 04/11/2024		Check #: 0000054162		Totals:	13,406.48	0.00
					0.00	13,406.48

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120 Seminary Avenue, Auburndale, MA 02466-2650

Bank of America  
Boston, Massachusetts 021095-13  
110 MA

April 11, 2024

Pay to the order of

\*\*\*Thirteen thousand four hundred six and 48/100 dollars .

\$\*\*\*\*13,406.48

Commonwealth of Massachusetts

~~Strategic Care Solutions~~~~92 Montvale Avenue, Suite 2300~~~~Stoneham, MA 02180~~



[https://urldefense.com/v3/\\_\\_https://lasellvillage.com/news-events/\\_\\_;!!CPANwP4y!THtjf3Us3JvrLaIPqJYAennHeche9LvLRw09WcnZvx8qPGWs5SA49OwCg1OrcMf2wlXnl2wuh7lHJREh8Mnemd2AssEVtFk\\$](https://urldefense.com/v3/__https://lasellvillage.com/news-events/__;!!CPANwP4y!THtjf3Us3JvrLaIPqJYAennHeche9LvLRw09WcnZvx8qPGWs5SA49OwCg1OrcMf2wlXnl2wuh7lHJREh8Mnemd2AssEVtFk$)

[MA Corporations Search Entity Summary \(state.ma.us\)](#)