



The Commonwealth of Massachusetts  
Executive Office of Health and Human Services  
Department of Public Health  
250 Washington Street Boston, MA 02108

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November 14, 2017

VIA EMAIL

Andrew Rusczek, Esq.  
Verrill Dana, LLP  
One Boston Place  
Boston, MA 02108

RE: Notice of Final Action  
B.U. Goldman School of Dental Medicine GSDM-17040515-RE

Dear Mr. Rusczek:

At their meeting of November 8, 2017, the Commissioner and the Public Health Council, acting together as the Department, voted pursuant to M.G.L. c.111, §25C and the regulations adopted thereunder, to approve with conditions the Determination of Need application filed by B.U. Goldman School of Dental Medicine (BUGSDM) in connection with a substantial capital expenditure for renovations including the renovation of 19,767 GSF and new construction of 13,717 GSF for a total of 33,484 GSF affecting its licensed dental clinic at 100 East Newton Street, Boston, MA 02118.

This Notice of Final Action incorporates by reference the Staff Report as amended, and the Public Health Council proceedings concerning this application.

This Application was reviewed pursuant to M.G.L. c. 111, § 25C and the regulatory provisions of 105 CMR 100.000 et seq. Based upon a review of the materials submitted, the Department finds that the Applicant has met each DoN factor and approves this Determination of Need application for new construction of 13,717 gross square feet (GSF) and renovation of 19,767 GSF of GSDM's licensed dental clinic, subject to all standard conditions (105 CMR 100.301) and subject to the other conditions set out below, pursuant to 105 CMR 100.360.

Other Conditions

1. GSDM's annual reporting of measures related to the project's achievement of the DoN factors, pursuant to 105 CMR 100.310(L), must specifically include the following:
  - a. How implementation of the integrated care model has had an impact on health outcomes and quality of life for the patient panel; and
  - b. Documentation that clinician use of CBCT is in line with the FDA and ADA recommendations.
2. In its first report to the Department, the Applicant shall provide the number of CBCT scans provided in each of the last three years, the payer mix for reimbursement for the cost of the scan, and the service(s)

for which it was provided. The Applicant commits, as a condition of this DoN, that (1) the volume of CBCT scans provided at the Pre-Doctoral Treatment Center will not appreciably increase except to the extent that the number of implant evaluations in the Pre-Doctoral Treatment Center increases or FDA and/or ADA recommendations are revised to support additional uses for CBCT scans and (2) the payer mix for CBCT scans provided at the Pre-Doctoral Treatment Center will not appreciably change year to year unless the overall payer mix of the Pre-Doctoral Treatment Center changes.

Sincerely,

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Nora J. Mann, Esq.  
Director  
Determination of Need Program

cc: Sherman Lohnes, Director, Division of Health Care Facility Licensure and Certification  
Rebecca Rodman, Deputy General Counsel  
Samuel Louis, Office of Health Equity  
Mary Byrnes, Center for Health Information and Analysis  
Steven Sauter, MassHealth  
Katherine Mills, Health Policy Commission  
Ben Wood, Office of Community Health Planning