

EXHIBIT 1

F.1.a.i Patient Panel:

Describe your existing Patient Panel, including incidence or prevalence of disease or behavioral risk factors, acuity mix, noted health disparities, geographic breakdown expressed in zip codes or other appropriate measure, demographics including age, gender and sexual identity, race, ethnicity, socioeconomic status and other priority populations relevant to the Applicant's existing patient panel and payer mix.

The Applicant's patient panel comprises the USA East Province, which includes 664 men. The average age of the patient panel is 69 and the median age is 72.

Age	Number of Priests
33-39	17
40-49	33
50-59	66
60-64	58
65-69	74
70-74	104
75-79	96
80-84	88
85-89	74
90-94	46
95-99	8

The Applicant operates at or near capacity most of the time and at certain times there is a waitlist. Campion operates the only licensed, skilled nursing facility servicing the USA East Province. From June 2017 to May 2019, the Applicant served 243 unique men with an average of age of 81.5 years old for a total of 58,974 resident days as follows:

Resident Days By Year	Resident Days Level II	Resident Days Level IV	Total
6/1/17 - 5/31/18	11,212	8,559	19,771
6/1/18 - 5/31/19	10,751	9,354	20,105
6/1/19 - 5/31/20	11,069	8,029	19,098

The average length of stay is at Campion is 271 days for long-term skilled nursing and 297 days for residential care. The average length of stay for short-term skilled nursing is 46 days and the average length of stay for short term residential care is 23 days. As the Priests age and need more assistance, they can transition from the rest home to skilled nursing. For example, there is currently a few men who they anticipate will need to make this transition in the near future but there are currently no skilled beds are available.

The Applicant determined that as the Priests age that there is more need for skilled nursing beds to provide them the necessary care as described herein. The Priest are generally high functioning but receive fragmented care prior to arriving at Campion. The top four diagnosis are

cardiac, diabetes, dementia and hypertension. On the skilled unit, 50-60% of the Patient receive assistance with one activity of daily living and 40-50% receive assistance with two more activities of daily living.

Factor 5: Relative Merit

F5.a.i Describe the process of analysis and the conclusion that the Proposed Project, on balance, is superior to alternative and substitute methods for meeting the existing Patient Panel needs as those have been identified by the Applicant pursuant to 105 CMR 100.210(A)(1). When conducting this evaluation and articulating the relative merit determination, Applicant shall take into account, at a minimum, the quality, efficiency, and capital and operating costs of the Proposed Project relative to potential alternatives or substitutes, including alternative evidence-based strategies and public health interventions.

Proposal: The Proposed Project is a request to upgrade the classification of 12 Level IV beds on the third Floor to 12 Level II beds, and substantial capital expenditure to complete renovations to convert the third floor to a 12-bed level II skilled nursing unit and a 6-bed level IV residential care unit. There is no change in the GSF of the facility or the Applicant's licensed bed capacity.

Quality: The Proposed Project would enable the Applicant to upgrade the level of care so that it can continue to care for the aging Patient Panel with increasing acuity. The Proposed Project would also add efficient mechanical upgrades to the facility.

Efficiency: The Proposed Project would allow the Applicant to be more efficient and operate in a more cost effective manner.

Capital Expense: The cost of the Proposed Project, which will be funded entirely by the Jesuits.

Operating Costs: Operating costs will increase as additional clinical staff will need to be hired to manage the new skilled nursing unit.

Option 1:

Alternative Proposal: Maintain the status quo by continuing to operate with the existing complement of Level II and Level IV beds.

Alternative Quality: This is not a feasible solution as demand for skilled nursing services exists with the Patient Population and the alternative would be to place a Patient in an outside facility until a bed becomes available at Campion. This would lead to more transitions of care.

Alternative Efficiency: This alternative would be inefficient.

Alternative Capital Expense: This alternative would allow the Applicant to forgo certain construction costs; however, it would have an overall negative impact on access, quality of care, patient satisfaction and cost effective and efficient operations.

Alternative Operating Costs: There would be no operating costs associated with sustain the current complement of long-term care beds and forgoing the renovation. However, this alternative would not afford the Applicant with any operational efficiencies since it continues to operate at near capacity which has limited or delayed access to the Patient Panel.

Option 2:

Alternative Proposal: Complete the Proposed Project but license the 12-Level II bed skilled nursing facility unit at a Dementia Special Care Unit.

Alternative Quality: This alternative proposal would allow the Applicant to create a dedicated skilled unit for dementia care.

Alternative Efficiency: Based on the Jesuits research, the need for general long-term and short-term skilled care for the Patient Panel outweighs the need for a dedicated skilled unit for dementia care.

Alternative Capital Expense: This alternative would be more expensive for the Applicant as it would need to meet the specific physical plant requirements for a dementia special care unit and the applicant could not use the beds for patients who do not require dementia care.

Alternative Operating Costs: The operating costs would be similar to the Proposed Project. This alternative would require additional clinical staff w be hired to manage and provide care in the dementia special care unit.

F5.a.ii Describe the process of analysis and the conclusion that the Proposed Project, on balance, is superior to alternative and substitute methods for meeting the existing Patient Panel needs as those have been identified by the Applicant pursuant to 105 CMR 100.210(A)(1). When conducting this evaluation and articulating the relative merit determination, Applicant shall take into account, at a minimum, the quality, efficiency, and capital and operating costs of the Proposed Project relative to potential alternatives or substitutes, including alternative evidence-based strategies and public health interventions.

The Applicant and the Jesuits considered the above options to meet its Patient Panel's need. Renovating the existing facility to upgrade the classification of the Level IV beds to Level II beds was found to be the most acceptable option based on the access to services and cost effectiveness compared to the other options.

EXHIBIT 4

F4.a.i

Capital Costs Chart

		Existing		Reno													
		Number of Beds:		18		18											
		Gross SF Per bed:		613		601											
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)					
Present Square Footage		Square Footage Involved in Project				Resulting Square Footage				Total Cost		New Const.		Renov.			
		New Construction		Renovation Area													
Functional Areas	Net	Gross	Net	Gross	Net	Gross	Net	Gross	New Construction	Renovation	Cost/SF	Cost/SF					
Third Floor - North Wing																	
Rest Home																	
Day Room	510	557	0	0	141	165	141	165									
Dining	0	0	0	0	98	115	98	115									
Activities	301	329	0	0	0	0	0	0									
Residents Rooms	5,438	5,936	0	0	1,718	2,015	1,718	2,015									
Nursing & Support, etc.	590	644	0	0	391	459	391	459									
Support / Storage, Mech, etc.	381	416	0	0	32	38	32	38									
Subtotal - Departmental SF	7,220	7,881	0	0	2,380	2,791	2,380	2,791									
Circulation	2,450	2,675	0	0	954	1,119	954	1,119									
Elevator / Stairs	443	485	0	0	232	253	232	253									
Total - Departmental SF	10,113	11,040	0	0	3,566	4,182	3,566	4,182									
Exterior wall		827		0		295		295									
Skilled Nursing																	
Day Room	0	0	0	0	608	713	608	713									
Dining	0	0	0	0	391	459	391	459									
Activities	0	0	0	0	0	0	0	0									
Residents Rooms	0	0	0	0	2,801	3,058	2,801	3,058									
Nursing & Support, etc.	0	0	0	0	520	610	520	610									
Support / Storage, Mech, etc.	0	0	0	0	168	197	168	197									
Subtotal - Departmental SF	0	0	0	0	4,488	5,036	4,488	5,036									
Circulation	0	0	0	0	1,414	1,658	1,414	1,658									
Elevator / Stairs	0	0	0	0	217	237	217	237									
Total - Departmental SF	0	0	0	0	6,119	6,639	6,119	6,639									
Exterior wall		0		0		751		751									
Total Third Floor - North Wing	10,113	11,040	0	0	9,685	10,821	9,685	10,821									
Total including the exterior wall		11,867		0		11,867		11,867									
Fourth Floor - North Wing																	
Rest Home																	
Day Room	510	557	0	0	0	0	510	557									
Dining	0	0	0	0	0	0	0	0									
Activities	511	558	0	0	0	0	511	558									
Residents Rooms	5,228	5,707	0	0	0	0	5,228	5,707									
Nursing & Support, etc.	590	644	0	0	58	68	581	634									
Support / Storage, Mech, etc.	381	416	0	0	49	57	390	426									
Subtotal - Departmental SF	7,220	7,881	0	0	107	125	7,220	7,881									
Circulation	2,450	2,675	0	0	0	0	2,450	2,675									
Elevator / Stairs	443	485	0	0	0	0	443	485									
Total - Departmental SF	10,113	11,040	0	0	107	125	10,113	11,040									
Exterior wall		827		0		0		827									
Total Fourth Floor - North Wing	10,113	11,040	0	0	107	125	10,113	11,040									
Total including the exterior wall		11,867		0		125		11,867									
Second Floor - North Wing																	
Skilled Nursing																	
Day Room	318	347	0	0	318	347	318	347									
Dining	327	357	0	0	0	0	327	357									
Activities	175	191	0	0	0	0	175	191									
Residents Rooms	4,743	5,178	0	0	1,662	1,814	4,743	5,178									
Nursing & Support, etc.	865	944	0	0	650	710	865	944									
Support / Storage, Mech, etc.	137	150	0	0	137	150	137	150									
Subtotal - Departmental SF	6,565	7,167	0	0	2,767	3,021	6,565	7,167									
Circulation	2,466	2,692	0	0	285	311	2,466	2,692									
Elevator / Stairs	413	452	0	0	0	0	413	452									
Total - Departmental SF	9,444	10,427	0	0	3,052	4,065	9,444	10,427									
Exterior wall		1,018		0		0		1,018									
Total Second Floor - North Wing	9,444	10,427	0	0	3,052	4,065	9,444	10,427									
Total including the exterior wall		11,445		0		4,065		11,445									

EXHIBIT 2

Fentanyl disguised as prescription meds

Rhode Island issues warning about counterfeit lookalike pills

By SEAN PHILIP COTTER

Rhode Island authorities are warning of fake pills that may look like prescription drugs — but are actually full of the dangerous and potent fentanyl.

“Some counterfeit, or fake, pills are made to look like prescription opioids & benzodiazepines (“benzos”),” the Rhode Island Department of Health tweeted Wednesday. “They are unsafe and can contain unknown amounts of illegally made fentanyl. One pill can cause a fatal overdose.”

Benzodiazepines are more commonly known by the drug’s brand names, which include Valium and Xanax.

Fentanyl is an extremely

strong synthetic opioid that’s frequently bought and sold illegally.

Over the past few years, it’s become an increasingly common street drug, a more potent cousin to heroin.

Fentanyl and heroin, which it’s often cut into, have led to increasing numbers of overdose deaths over the past decade. Massachusetts, as is the case with many parts of the country, continues to battle the source of opioid abuse.

The Rhode Island authorities further note that signs of an opioid overdose include “Breathing slowly; can’t be woken up; turning blue with a pale look; blue fingernails and lips.”

The Massachusetts Department of Health this year switched from quarterly reports of opioid

overdose deaths to semi-annual public analyses, so there’s no new data since June. The state last year

reported 2,015 opioid-related overdose deaths, continuing a trend of edging down lightly since the

2016 peak of 2,102 — but still far more than the 500-700 such deaths reported a year in the 2000s.

Public Announcement Concerning a Proposed Health Care Project

Campion Health & Wellness, Inc.

Campion Health & Wellness, Inc. (“Applicant”), a licensed skilled nursing facility (“Facility”) dedicated to serving Jesuits priests, located at 319 Concord Rd., Weston, MA 02493 intends to file a Notice of Determination of Need (“Application”) with the Massachusetts Department of Public Health to perform substantial renovations to the third floor and related renovations to the Facility’s key building systems, and will seek approval to upgrade the classification of 12 Level IV rest home beds to Level II skilled nursing beds (the “Proposed Project”). The Proposed Project does not result in any expansion of gross square feet of the Facility or change to the Applicant’s licensed bed capacity. At the completion of the Proposed Project, if its request to upgrade the classification of beds is approved and other requirements are met, the third floor, which now consists of 18 Level IV rest home beds, would consist of a 12 bed Level II bed skilled nursing unit and a 6 bed Level IV rest home unit. The Applicant does not anticipate any price or service impacts on the Applicant’s existing Patient Panel as a result of the Proposed Project. The total value of the Proposed Project based on the maximum capital expenditure is \$3,738,853. Any ten Taxpayers of Massachusetts may register in connection with the intended Application by no later than December 1, 2020 or 30 days from the Filing Date, whichever is later, by contacting the Department of Public Health Determination of Need Program, 250 Washington Street, 4th Floor, Boston, MA 02108 or by email at dph.don@massmail.state.ma.us.

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NOTICE OF PUBLIC HEARING

The Boston Redevelopment Authority d/b/a the Boston Planning and Development Agency ("BPDA"), pursuant to Sections 80A-2, 80B-5, 80B-7 and 80D-5 of the Boston Zoning Code ("Code"), hereby gives notice that it will hold a virtual Public Hearing on Thursday, November 12, 2020 at 5:30 p.m., televised on Boston City TV (Xfinity Channel 24, RCN Channel 13, and Verizon Fios Channel 1962) and live streamed on boston.gov, to consider the proposed Simmons University 2020 Institutional Master Plan ("Proposed IMP") and to consider the IMP Projects ("Proposed Project") as a Development Impact Project. The Proposed IMP covers the development of the University's campus over the next ten years, with the goal of consolidating all on-campus housing and student activities onto the University's Academic Campus. The Proposed Project consists of significant renovations to the existing Lefavour Hall and Main College Building, as well as the construction of the Living and Learning Center, a proposed tower containing athletics, dining, and approximately 1,100 student housing beds. You may participate in this Public Hearing by registering at <https://bit.ly/35ECG2D>. The Proposed IMP may be viewed at <https://bit.ly/3juXz2l>. The Proposed Project, explained in the University's Draft Project Impact Report ("DPIR"), may be viewed at <https://bit.ly/34o4sBj>.
Teresa Polhemus, Executive Director/Secretary
Boston Redevelopment Authority

Oct 29

NOTICE OF PUBLIC HEARING

The Boston Redevelopment Authority d/b/a the Boston Planning and Development Agency ("BPDA"), pursuant to Sections 80A-2 and 80D-5 of the Boston Zoning Code ("Code"), hereby gives notice that it will hold a virtual Public Hearing on Thursday, November 12, 2020 at 5:40 p.m., televised on Boston City TV (Xfinity Channel 24, RCN Channel 13, and Verizon Fios Channel 1962) and live streamed on boston.gov, to consider the proposed Sixth Amendment to the Boston University Charles River Campus 2013-2023 Institutional Master Plan ("Proposed IMP Amendment"). With the Proposed IMP Amendment, Boston University intends to lease and occupy approximately 16,000 square feet of the existing building at 540 Commonwealth Avenue on a long-term basis for academic and administrative use. The lease of this space will include minor interior reconfigurations only. You may participate in this Public Hearing by registering at <https://bit.ly/35ECG2D>. The Proposed IMP Amendment may be viewed at <https://bit.ly/37AiWzK>.
Teresa Polhemus, Executive Director/Secretary
Boston Redevelopment Authority

Oct 29

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NOTICE OF PUBLIC HEARING

The Boston Redevelopment Authority d/b/a the Boston Planning and Development Agency ("BPDA"), pursuant to Sections 80A-2 and 80D-5 of the Boston Zoning Code ("Code"), hereby gives notice that it will hold a virtual Public Hearing on Thursday, November 12, 2020 at 6:00 p.m., televised on Boston City TV (Xfinity Channel 24, RCN Channel 13, and Verizon Fios Channel 1962) and live streamed on boston.gov, to consider the (i) Second Amended & Restated Master Plan for Planned Development Area No. 94 (the "Revised Master Plan"), (ii) Second Amended & Restated Phase 1 Development Plan for Planned Development Area No. 94 (the "Revised Phase 1 Development Plan"), and (iii) Phase 4 Development Plan for Planned Development Area No. 94 (the "Phase 4 Development Plan"). The Proponent proposes to construct two new mixed-use buildings, including residential, health/fitness club and retail uses. Phase 1A will be located on an approximately 78,000 square foot lot (including the new roadway) at the corner of Bartlett Street and Washington Street. Phase 1A will reach a maximum building height of up to 70 feet and will include up to 110,000 square feet of Gross Floor Area, consisting of approximately 12,000 square feet of commercial space and retail space, and up to 63 Dwelling Units. Phase 1B will consist of a second new building and will reach a maximum building height of up to 70 feet and will be located on an approximately 67,000 square foot lot adjacent to Phase 1A on Washington Street, and is anticipated to include a new publicly accessible plaza and a total of up to 110,000 square feet of Gross Floor Area, consisting of approximately 13,300 square feet of commercial and retail space and up to 63 Dwelling Units. Phase 4 consists of a new six-story, up to 52-unit residential building to be situated on the approximately 31,000 square-foot "Lot D" within Planned Development Area No. 94, which is currently cleared and vacant. The Proposed Project is programmed and designed as a senior housing component. Members of the public may participate in this Public Hearing by registering at <https://bit.ly/35ECG2D> or by emailing your testimony to BRABoard@boston.gov. Emailed testimony will be read aloud during the hearing. The Proposed Notice of Project Change, Second Amended and Restated Plan and Amended Development Plan may be viewed at the following link:
<http://www.bostonplans.org/projects/development-projects/bartlett-place>

Teresa Polhemus, Executive Director/Secretary
Boston Redevelopment Authority

Oct 29

LEGAL NOTICES

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The University of Massachusetts Building Authority, Barbara J. Roncke Executive Director, request Bids from Trade Contractors interested in providing HVAC for the Quad Development Project located in the main University of Massachusetts Boston campus on 100 Morrissey Boulevard (Project #UMBA 17-B1). The Awarding Authority invites DCAMM Qualified Trade Contractors pursuant to M. G. L. Chapter 149A to submit bids. The Construction Manager is Gilbane Construction Co.

Plans and Specifications will be available free of charge via electronic download starting October 28, 2020 10:00 AM at www.biddocsonline.com. All bidders must register at www.biddocsonline.com in order to submit bids and receive notification of any addenda.

Trade Contractors may obtain hard copies of the Construction Document from Nashoba Blue, Inc., 433 Main Street, Hudson, MA 01749 (978-568-1167) via UPS Ground Delivery only. A refundable deposit of \$300.00 per set (up to two sets), in the form of a certified or cashier's check to the order of "BidDocs Online Inc.", is required. Deposits may be paid electronically. Additional sets may be purchased for \$300.00. Bidders requesting Bid Documents to be mailed to them shall include a separate check for \$70.00 per set for UPS Ground delivery payable to BidDocs Online Inc. No personal or corporate checks nor cash can be accepted as deposits for the Construction Documents.

Bids shall be submitted electronically on the "Bid Forms" at www.biddocsonline.com, on or before November 12, 2020, 2:00 PM. A DCAMM Update Statement, a Certificate of Eligibility, and a bid deposit in the amount of 5% of the total bid price must accompany each bid. The estimated cost of construction is \$53,385,000. The project is funded by the UMass Building Authority.

Oct 29

LEGAL NOTICES

Auction sale of unredeemed pledges of Empire Loan Co. of Lynn on the premises 1130 Washington St., Boston, MA, on Nov 4 2020 @ 10:00 am by Harvey Cohen, Auctioneer. MA Lic. #353

LEGAL NOTICES

Auction sale of unredeemed pledges of Empire Loan Co. of Lynn on the premises 1130 Washington St., Boston, MA, on Nov 7 2020 @10:00 am by Harvey Cohen, Auctioneer. MA Lic.

LEGAL NOTICES

Auction sale of unredeemed pledges of Empire Loan Co. of Stoughton on the premises 1130 Washington St., Boston, MA, on Nov 7 2020 @10:00 am by Harvey Cohen, Auctioneer. MA Lic. #353

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9	6	7	2	1	8	5	4	3
8	9	2	1	3	7	4	5	6
5	7	6	8	4	9	1	3	2
4	1	3	5	2	6	9	8	7

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021261

11/12/2020

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CHECK NUMBER:

DATE:

DATE	REF. NO.	DESCRIPTION	GROSS AMOUNT	DISCOUNT	NET AMOUNT
11/11/2020	11/11/20	PROJ 2020-003, Filing Fee for DoN	\$7,477.71	\$0.00	\$7,477.71
TOTALS			\$7,477.71	\$0.00	\$7,477.71

THIS DOCUMENT CONTAINS A COLORED BACKGROUND WITH A VOID FEATURE ON THE FACE AND A MICROPRINTED SIGNATURE LINE.

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PAY Seven Thousand Four Hundred Seventy Seven Dollars and 71 Cents

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