



The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Public Health
250 Washington Street, Boston, MA 02108-4619

MAURA T. HEALEY
Governor

KIMBERLEY DRISCOLL
Lieutenant Governor

KATHLEEN E. WALSH
Secretary

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Commissioner

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April 21, 2023

VIA EMAIL: Crystal.Bloom@huschblackwell.com

Crystal Bloom, Esq.
Partner
Husch Blackwell LLP
One Beacon Street,
Suite 1320
Boston, MA 02108

RE: Navigator Homes of Martha's Vineyard
Notice of Final Action DoN # # NHMV-22090717-LE

Dear Attorney Bloom,

At their meeting of April 19, 2023, the Commissioner and the Public Health Council, acting together as the Department, voted pursuant to M.G.L. c.111, §51 and 105 CMR 100.000, to approve the Determination of Need application filed by Navigator Homes of Martha's Vineyard, Inc. at 490 Vineyard Haven Road, Edgartown, MA 02539 for substantial capital expenditure for the following:

1. Relocation and New Construction of a replacement facility comprising a total of 70 licensed beds including 9 additional beds (pursuant to G.L. c. 111, § 25B and 105 C.M.R. 153.028(B)).
2. The new facility will consist of five 14 Level II-bed homes. Four homes (totaling 56 beds) will be dedicated to long-term care residents; and one home (14 beds), will be dedicated to short-term rehabilitation residents.

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

This Determination of Need Application was reviewed pursuant to M.G.L. c. 111, § 25(c), and the regulatory provisions of 105 CMR 100.000 et seq. Based upon a review of the materials, the Department found that the Applicant has met each DoN factor with

additional conditions and approves this Determination of Need application for a substantial capital expenditure for the Proposed Project of \$53,530,459; the total Community Health Initiatives (“CHI”) contribution is \$1,605,913.77.

In compliance with the provisions of 105 CMR 100.310(A)(2) and (11) the Holder shall submit an acknowledgment of receipt to the Department (attached) and also include a written attestation of participation or intent to participate in MassHealth.

In compliance with the provisions of 105 CMR 100.310(A)(12), which require a report to the Department, at a minimum on an annual basis, including the measures related to achievement of the DoN factors for a period of five years from completion of the Proposed Project, the Holder shall address its assertions with respect to all the factors.

In Compliance with the provisions of 105 CMR 100.360 the Department has prescribed the following Other Conditions:

1. Half of the total required CHI contribution, \$802,956.89 will be directed to the Massachusetts Statewide Community Health and Healthy Aging Funds.
2. To comply with the Holder’s obligation to contribute to the Massachusetts Statewide Community Health and Aging Funds, the Holder must submit the payment, a check for \$802,956.89, to Health Resources in Action (HRiA) (the fiscal agent for the CHI Statewide Initiative).
 - a. The Holder must submit the funds to HRiA within 14 days of receipt of financing from the USDA
 - b. The Holder must promptly notify DPH (CHI contact staff) when payment has been made.
 - c. Payment should be sent to:
Health Resources in Action, Inc., (HRiA)
2 Boylston Street, 4th Floor
Boston, MA 02116
Attn: Ms. Bora Toro
3. To comply with the remaining Workforce housing program commitment (the remaining \$802,956.89), the Applicant must comply with the following:
 - a. within 6 months of the Notice of Approval date, the Applicant must provide DPH with an accountability and sustainability plan that includes a process of funding from Navigator’s ongoing operations as well as tracking all CHI investments in the program.
 - b. the Applicant will report to DPH annually until such time as the total commitment has been satisfied on the anniversary date of project implementation to provide documentation and reporting related to the housing investment.

- c. Any deviation to this payment and tracking schedule will require DPH approval.
- 4. To ensure that the Proposed Project is addressing the needs of the Patient Panel, on Martha's Vineyard, and that off Island private pay residents are not prioritized over Island residents, and Medicaid residents, the Holder must demonstrate that Island Residents are prioritized over off Island residents. To monitor this the Applicant must track on monthly and begin reporting the following information as part of the annual report required by 105 CMR 100.310(A)(12):
 - a. the number of Navigator admissions: differentiating short-term rehab and long-term care by payer whose home prior to admission originated on the Island;
 - b. and the number of Navigator admissions: differentiating short-term rehab and long-term care by payer who whose home prior to admission was off the Island.

Ongoing compliance with the conditions and all terms of the DoN is, pursuant to the Regulation, a precondition to the filing of any future DoN by the Holder.

Sincerely,

Dennis Renaud

Dennis Renaud
Director, Determination of Need Program

cc:

Elizabeth Kelley, Director Bureau of Health Care Safety and Quality
Rebecca Kaye, General Council Office
Stephen Davis, Director, Division of Health Care Facility Licensure and Certification
Judy Bernice, Division of Health Care Facility Licensure and Certification
Daniel Gent, Health Care Facility Licensure and Certification
Samuel Louis, Office of Health Equity
Jennica Allen, Division of Community Health Planning and Engagement
Elizabeth Maffei, Division of Community Health Planning and Engagement
Katelyn Teague, Division of Community Health Planning and Engagement
Suzanne Barry, Center for Health Information Analysis
Katherine Mills, Health Policy Commission
Eric Gold, Office of the Attorney General
Tomaso Calicchio, Executive Office of Health and Human Services
Hai Nguyen, Executive Office of Health and Human Services
Karina Mejias, Executive Office of Health and Human Services

Priscilla Portis, Executive Office of Health and Human Services
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