

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

Kimberley Driscoll
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Kiame Mahaniah, MD, MBA
Secretary

Robert Goldstein, MD, PhD
Commissioner

November 26, 2025

Rebecca Rodman
Senior Counsel
HUSCH BLACKWELL
One Congress Street,
Suite 3102
Boston, MA 02114

Via email: rebecca.rodman@huschblackwell.com

Notice of Final Action: UMass Memorial Health Care, Inc.
DoN #UMMHC-25080814-RE

Dear Attorney Rodman,

This shall serve as notification that, based on the information provided by the Applicant and staff analysis, and pursuant to M.G.L. c. 111, § 25C and the regulatory provisions of 105 CMR 100.000 et seq, including 105 CMR 100.630(A)(1), I hereby approve the application for Determination of Need (DoN) filed by UMass Memorial Health Care, Inc. to acquire one computed tomography ("CT") unit for operation by UMass Memorial Medical Center – Nashoba Regional Satellite Emergency Facility, located at 490 Main Street, Groton MA 01450. The capital expenditure for the Proposed Project is \$2,195,943.00 (October 2025 dollars); the Community Health Initiatives (CHI) contribution is \$109,797.15. This Notice of Final Action incorporates by reference the Staff Report concerning this Application and is subject to the conditions set forth therein.

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 include a written attestation of participation or intent to participate in MassHealth.

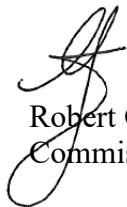
In compliance with 105 CMR 100.310(A)(12), which requires a report to the Department, at a minimum, on an annual basis, including the measures related to achievement of the DoN factors

for a period of five years from completion of the Proposed Project, the Holder shall address its assertions with respect to all of the factors.

Please notify the DoN Program at DPH.DON@mass.gov of the anticipated completion date of all the components of the DoN-approved Project once it has been established. Additionally, please send an email confirming the Project's completion (licensure/ amended licensure approval date) and the first day of operations to determine the annual DoN reporting timeline.

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,



Robert Goldstein, MD, PhD
Commissioner, Massachusetts Department of Public Health

cc:

Teryl Smith, Director, Bureau of Health Care Safety and Quality
Jaclyn K. Gagné, Chief Deputy General Counsel, Health Care Licensure
Stephen Davis, Director, Division of Health Care Facility Licensure and Certification
Judy Bernice, Division of Health Care Facility Licensure and Certification
Hilary Ward, Division of Health Care Facility Licensure and Certification
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Jennica Allen, Division of Community Health Planning and Engagement
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Christopher King, Executive Office of Health and Human Services
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