The Commonwealth of Massachusetts

Executive Office of Health and Human Services

Department of Public Health

Bureau of Health Care Safety and Quality

Division of Health Care Facility Licensure and Certification

67 Forest Street, Marlborough, MA 01752



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July 22, 2022

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BY EMAIL ONLY

**Re: Essential Services Finding**

**Facility:** MetroWest Medical Center – Framingham Union Hospital

**Services:** Oncology Infusion

Radiation Oncology

**Ref. #:** 2020-520

Dear Attorney Bloom:

On July 6, 2022, the Department of Public Health (the "Department") held a public hearing in response to the notification received from MetroWest Medical Center regarding their proposed plans to discontinue Oncology Infusion and Radiation Oncology services at its Framingham Union Campus (the “Hospital) in Framingham, MA. The target closure dates are August 9, 2022, for Oncology Infusion and October 31, 2022, for Radiation Oncology. As a result of its review, the Department has made a finding that the services provided by the Hospital are in fact necessary for preserving access and health status within the Hospital’s service area.

Accordingly, pursuant to 105 CMR 130.122(F), the Hospital is required to prepare a plan that details how access to Oncology Infusion services and Radiation Oncology Services will be maintained for the residents of the service area. The plan must be submitted to the Department no later than 15 calendar days of receipt of this letter. The Hospital’s plan must include the elements specified in 105 CMR 130.122(F) as listed below:

1. Information on utilization of the services prior to proposed closure;
2. Information on the location and service capacity of alternative delivery sites. Include an explanation of the basis for the Hospital’s determination that the alternative delivery sites ***do*** or ***do*** ***not*** have the capacity (necessary space, resources, etc.) to handle the increased patient volume at the identified sites. To support that assertion, please provide the following specific details:
3. Current utilization at these alternative sites;
4. Type of services available at the alternative sites;
5. Type of medical diagnoses accepted; and
6. Adequacy of space and resources at the alternative sites.
7. Travel times to alternative service delivery sites, for both peak and non-peak travel times, and an explanation as to the source for this information or what these estimates are based on;
8. An assessment of transportation needs post discontinuance and a plan for meeting those needs;
9. A protocol that details mechanisms to maintain continuity of care for current patients of the discontinued service; and
10. A protocol that describes how patients in the Hospital’s service area will access the services at alternative delivery sites. The protocol should specifically address the following:
11. The process that will be employed to effectively refer patients to other facilities or providers;
12. The impact that this may have on the current occupancy rates at alternative delivery sites;
13. The ability of the alternative delivery sites to meet the needs of these patients; and
14. Other alternatives if medical needs cannot be accommodated at the proposed alternative sites.

In addition to the regulatory elements listed above, and in light of the Department’s review of comments on the proposed closure, your plan must also address the following:

1. **Increased Costs and Acceptance of Insurance Plans:** Based on testimony submitted to the Department and presented at the hearing on July 6, 2022, concern was expressed regarding the additional expenses associated with receiving care from Tufts Medical Center in the event they step in as a successor provider at Framingham Union Campus. Additionally, concern was raised over insurance plans being accepted by alternate care sites once MetroWest Medical Center stops providing Oncology Infusion and Radiation Oncology services. The plan which you are required to submit must provide information on what will be done to ensure patients receive services where the cost sharing required of them is at the same, or discounted rates, to what was received through the Hospital.
2. **Continuity of Care:** Based on testimony submitted to the Department and presented at the hearing on July 6, 2022, concern was expressed regarding how patients currently at the Hospital will maintain a continuity of care in the event Oncology Infusion and Radiation Oncology services are discontinued or Tufts Medical Center steps in as a successor provider. The plan which you are required to submit must address both scenarios and include details on what will be done to ensure transition plans are in place for affected patients. Additionally, the plan must provide details on how aftercare will be provided for patients using services that will still be provided by the Hospital, such as cancer-related imaging services and surgical procedures.
3. **Transportation:** Based on testimony submitted to the Department and presented at the hearing on July 6, 2022, concern was expressed regarding the need for sick patients to travel long distances to alternate providers once the Hospital discontinues Oncology Infusion and Radiation Oncology services. The plan which you are required to submit must include details on how this will be addressed in the event Oncology Infusion and Radiation Oncology services are discontinued or Tufts Medical Center steps in as a successor provider.
4. **In-Person Translation Services:** Based on testimony submitted to the Department and presented at the hearing on July 6, 2022, concern was expressed regarding the elimination in-person translation services at Framingham Union Hospital. The plan which you are required to submit must include information regarding the Hospital’s plans to ensure the health needs of culturally and linguistically diverse patients and communities of color will be met once in-person translation services are eliminated.
5. **Continuing Cutbacks:** Based on testimony submitted to the Department and presented at the hearing on July 6, 2022, concern was expressed regarding continuing cutbacks and the erosion of services at the Hospital including community relations. The plan which you are required to submit must include specific details on continued access to the remaining medical oncology services, cancer screening, imaging services and cancer-related surgical procedures. Additionally, the plan must address plans to ensure the ongoing provision of community relation services throughout the Hospital.

Under the provisions of 105 CMR 130.122(G), the plan the Hospital submits to the Department will be reviewed to determine if it appropriately assures access to the essential services in question following the plans to discontinue operation of Oncology Infusion and Radiation Oncology services at Framingham Union Campus.

Thank you for your continued cooperation in this process. If you have any questions, please contact me at [Stephen.Davis@Mass.Gov](mailto:Stephen.Davis@Mass.Gov).

Sincerely,



Stephen Davis

Division Director

cc: E. Kelley, DPH

J. Bernice, DPH

A. Mehlman, DPH

M. Callahan, DPH

A. Levine, Husch Blackwell