April 14, 2022

Lara Szent-Gyorgyi, MPA

Director, Determination of Need Program Department of Public Health

250 Washington Street

Boston, MA 02108

Re: Shields Healthcare of Cambridge, Inc.; Application #22020311-RE Dear Director Szent-Gyorgyi:

We, the undersigned, write pursuant to the provisions of 105 CMR 100.100 and 100.405. We are all residents of the Commonwealth of Massachusetts and pay taxes within the Commonwealth. We hereby request recognition as a Ten Taxpayer Group and the rights associated with such a designation including notice concerning, and participation in, the review of the above-captioned Determination of Need ("DoN") Application filed with the Department of Public Health on February 3, 2022. In addition, pursuant to 105 CMR 100.445, we respectfully request that a public hearing be held with respect to the DoN Application. Additionally, we urge the Department to require an independent cost analysis to provide information as to whether the Proposed Project is consistent with the Commonwealth's cost containment goals.

The taxpayer designated to receive all written correspondence relative to the above-captioned DoN Application on behalf of the Ten Taxpayer Group is: Kevin B. Sanginario, <Redacted home address> (mailto:kevin.sanginario@gmail.com).

Respectfully submitted:

Name (printed and signature) Home Address Name and Address of Party for
which Taxpayer is acting as Agent (if applicable)

1. Kevin Sanginario <Redacted home address> N/A
<Signature on File>
2. Laura S. Peabody <Redacted home address> N/A
<Signature on File>
3. Ron M Walls <Redacted home address> N/A
<Signature on File>
4. Thomas Sequist <Redacted home address> N/A
<Signature on File>
5. Maxine Thompson <Redacted home address> N/A
<Signature on File>
6. R. Scott Gassett <Redacted home address> N/A
<Signature on File>
7. Timothy F. Galvin <Redacted home address> N/A
<Signature on File>
8. Cynthia L. Cavanaugh <Redacted home address> N/A
<Signature on File>
9. Robbie Aboukire <Redacted home address> N/A
<Signature on File>
10. John Fernandez <Redacted home address> N/A
<Signature on File>