Massachusetts Department of Public Health
Determination of Need
Affiliated Parties

Version: DRAFT 3-15-17

DRAFT

Application Date: 04/26/2019 Application Number: PHS-19040915-HE

Applicant Information

Applicant Name: Partners HealthCare System, Inc.

Contact Person: Andrew Levine Title: Attorney

Phone: 6175986700 Ext: E-mail: alevine@barrettsingal.com

Affiliated Parties

1.9 **Affiliated Parties:**
List all officers, members of the board of directors, trustees, stockholders, partners, and other Persons who have an equity or otherwise controlling interest in the application.

Add/ Del Rows	Name (Last)	Name (First)	Mailing Address	City	State	Affiliation	Position with affiliated entity (or with Applicant)	Stock, shares, or partnership	Percent Equity (numbers only)	Convictions or violations	List other health care facilities affiliated with	Business relationship with Applicant
+ -	Colson, M.D.	Yolanda	65 Wilsondale Street	Dover	MA	Partners HealthCare System, Inc.	Director		0%	No		No
+ -	Cowan	William	3 Stonegate Drive	Westwood	MA	Partners HealthCare System, Inc.	Director		0%	No		No
+ -	Finucane	Anne	20 Trapelo Road	Lincoln	MA	Partners HealthCare System, Inc.	Director		0%	No	CVS (MinuteClinic) in Rhode Island (Director)	Yes
+ -	Fish	John	776 Boylston Street, PH2A	Boston	MA	Partners HealthCare System, Inc.	Director		0%	No		No
+ -	Goggin	Maureen	730 Adams Street Apartment #1	Dorchester	MA	Partners HealthCare System, Inc.	Officer		0%	No		No
+ -	Grousbeck	Wycliffe	226 Causeway Street 4th Floor	Boston	MA	Partners HealthCare System, Inc.	Director		0%	No		No
+ -	Hockfield	Susan	4 Berkeley Place	Cambridge	MA	Partners HealthCare System, Inc.	Director		0%	No		No
+ -	Holbrook	Richard	43 Vine Brook Road	Medfield	MA	Partners HealthCare System, Inc.	Director		0%	No		No
+ -	Holman, III	Albert	29A Chestnut Street	Boston	MA	Partners HealthCare System, Inc.	Director		0%	No		No
+ -	Kaplan	James	32 Cart Path Road	Weston	MA	Partners HealthCare System, Inc.	Director		0%	No		No
+ -	Markell	Peter	73 Churchill Street	Milton	MA	Partners HealthCare System, Inc.	Officer		0%	No		No

Add/ Del Rows	Name (Last)	Name (First)	Mailing Address	City	State	Affiliation	Position with affiliated entity (or with Applicant)	Stock, shares, or partnership	Percent Equity (numbers only)	Convictions or violations	List other health care facilities affiliated with	Business relationship with Applicant
+ -	Martignetti	Carl	164 Chestnut Hill Road	Chestnut Hill	MA	Partners HealthCare System, Inc.	Director		0%	No		No
+ -	Minehan	Cathy	128 Beacon Street	Boston	MA	Partners HealthCare System, Inc.	Director		0%	No		No
+ -	Patrick	Diane	472 Beacon Street, Apartment 2	Boston	MA	Partners HealthCare System, Inc.	Director		0%	No		No
+ -	Rattner, M.D.	David	28 Clovelly Road	Wellesley	MA	Partners HealthCare System, Inc.	Director		0%	No		No
+ -	Reeve	Pamela	35 Swan Road	Winchester	MA	Partners HealthCare System, Inc.	Director		0%	No		No
+ -	Schoen	Scott	51 Essex Road	Chestnut Hill	MA	Partners HealthCare System, Inc.	Director		0%	No		No
+ -	Sperling	Scott	4 Moore Road	Wayland	MA	Partners HealthCare System, Inc.	Director/Officer		0%	No		Yes
+ -	Thorndike	Alexander	215 Warren Street	Brookline	MA	Partners HealthCare System, Inc.	Director		0%	No		No
+ -	Torchiana, M.D.	David	790 Boylston Street, Apartment #21H	Boston	MA	Partners HealthCare System, Inc.	Director/Officer		0%	No		No
+ -	York	Gwill	16 Fayerweather Street	Cambridge	MA	Partners HealthCare System, Inc.	Director		0%	No		No
+ -					MA							
+ -					MA							

Document Ready for Filing

When document is complete click on "document is ready to file". This will lock in the responses and date and time stamp the form. To make changes to the document un-check the "document is ready to file" box. Edit document then lock file and submit Keep a copy for your records. Click on the "Save" button at the bottom of the page.

To submit the application electronically, click on the"E-mail submission to Determination of Need" button.

This document is ready to file: ☒ Date/time Stamp: 04/26/2019 3:58 pm

E-mail submission to Determination of Need