

April 16, 2024

Dennis Renaud Director, Determination of Need Program Massachusetts Department of Public Health 67 Forest Street Marlborough, MA 01752

Submitted Via Email: DPH.Don@massmail.state.ma.us

RE: Dana-Farber Cancer Institute, Inc. – Determination of Need Application

Dear Mr. Renaud:

Over the past few months, Dana-Farber Cancer Institute representatives have informed and updated leaders of UMass Memorial Health (UMMH) about their plans to construct a new dedicated adult cancer hospital in Boston's Longwood Medical Area.

As the largest and most comprehensive provider of health services in Central Massachusetts, UMMH supports the Dana-Farber project. The Commonwealth needs more inpatient beds for cancer patients, and a new Dana-Farber cancer-only inpatient hospital will be instrumental in addressing alarming cancer incidence rates across the state, including in UMMH's region.

The UMMH Cancer Center is the leader in cancer treatment and diagnosis in Central Massachusetts. We treat every type of cancer, from the most common to the most complex, offer access to the latest research, and provide personalized, patient-centered care at multiple sites across the region. We also are proud to be a member of the Dana-Farber Cancer Care Collaborative. By partnering with Dana-Farber, UMass Memorial Medical Center's adult medical oncology clinicians and staff can share best practices, and harness knowledge and innovation to create breakthrough treatments to improve the lives of patients.

The new Dana-Farber inpatient hospital may lead to opportunities to strengthen and further our collaborations. This could benefit cancer care not only at UMMH's existing sites, but also at Milford Regional Medical Center, which is the subject of a pending UMMH Determination of Need Application for Transfer of Ownership, since it already has a relationship with Dana-Farber which operates a cancer facility adjacent to Milford Hospital.

THE RELENTLESS PURSUIT OF HEALING

Dana-Farber's singular focus on providing advanced cancer treatments and clinical trials, coupled with our shared missions of keeping care local through collaboration and clinical consultation, especially at our high-value, lower cost community hospitals, creates the synergies providers need to enhance cancer services. This collaboration allows patients to receive treatment in the most optimal center for their specific diagnosis and individual needs.

For these reasons, UMass Memorial Health recommends that the Department of Public Health approve the Dana-Farber application. Thank you for your consideration.

Sincerely,

Eric W. Dickson, MD, MHCM, FACEP President and CEO, Umass Memorial Health

| From: | |
|----------|--------------------------------------|
| То: | <u> DPH-DL - DoN Program</u> |
| Subject: | DFCI BIDMC Proposal |
| Date: | Thursday, April 18, 2024 10:33:45 AM |

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Dennis Renaud Director, Determination of Need Program Massachusetts Department of Public Health 67 Forest Street, Marlborough, MA 01752

Dear Director Renaud:

We are writing to express our support for Dana-Farber Cancer Institute's proposed cancer hospital and its new clinical collaboration with Beth Israel Deaconess Medical Center.

We feel that a new stand-alone cancer inpatient hospital would improve the patient experience, expand access, and provide more cost-effective care. All of this would ensure better care for our community, now and for generations to come.

As a long-time patient and care partner, we have experienced Dana-Farber's care up close and personal for the past 15 years. We believe that having a dedicated cancer hospital will bring that world-class, personal care that we receive to more people in Massachusetts. With this new hospital, Dana-Farber will ensure that cancer patients are seen quickly and provided with the specialized patient-centered cancer care that all patients deserve.

Dana-Farber is the only institution in the region focused exclusively on cancer, and the only one balancing research and patient care equally. Now, as cancer incidence rises at an alarming rate, the State must meet the need for more inpatient beds for cancer patients.

We all know that more inpatient beds are needed because we are all too familiar with people who have had to wait in the ER because inpatient beds were unavailable. This situation can be alleviated by this proposed new hospital. Further, Dana-Farber and BIDMC share a deep commitment to fostering a culture of diversity, equity, and inclusion and dismantling barriers to care.

All cancer patients deserve to be treated by doctors and nurses whose singular focus is cancer. Please support Dana-Farber's proposed new inpatient cancer hospital and ensure that the best care in the world will continue to be available in our region.

Thank you.

Allan & Deborah Osborne



"It was in my heart to help a little because I was helped much." Kahlil Gibran April 16, 2024

Dennis Renaud Director, Determination of Need Program Massachusetts Department of Public Health 67 Forest Street, Marlborough, MA 01752

Dear Director Renaud:

My name is Shelly Plumb and I am a resident of Brookline, Massachusetts. I am a member of the Patient and Caregiver Ten Taxpayer group and am writing to express my support of Dana-Farber Cancer Institute's proposed cancer hospital and their new clinical collaboration with Beth Israel Deaconess Medical Center.

A new stand-alone cancer inpatient hospital would improve the patient experience, expand access, and could provide more cost-effective care—ensuring better care for our community, now and for generations to come.

As a patient I have experienced care from Dana-Farber up close and personal. I believe that having a dedicated cancer hospital will bring that world-class, personal care that I receive to more people in Massachusetts. With this new hospital, Dana-Farber will work to ensure that cancer patients are seen quickly and provided with the specialized patient centered cancer care that all patients deserve.

Almost everyone in Massachusetts has a story about a loved one who received outstanding care at Dana-Farber. It is the only institution in the region focused exclusively on cancer, and the only one balancing research and patient care equally. Now, as cancer incidence rises at an alarming rate, it's imperative that the State meets the need for more inpatient beds for cancer patients.

We know that we need more inpatient beds because of the many stories from people who have had to wait in the ER because no inpatient beds were available—a situation that can be alleviated by this proposed new hospital. Further, both Dana-Farber and BIDMC share a deep commitment to fostering a culture of diversity, equity and inclusion and dismantling barriers to care.

All cancer patients deserve to be treated by doctors and nurses whose singular focus is cancer. Please support Dana-Farber's proposed new inpatient cancer hospital and ensure that the best care in the world will be available in our region.

Shelly Plumb

Colon Cancer Patient and Volunteer (Dana Farber Patient and Advisory Council member)





April 17, 2024

Dennis Renaud Director, Determination of Need Program Massachusetts Department of Public Health 67 Forest Street, Marlborough, MA 01752

Subject: Endorsement for the Establishment of a Designated Cancer Hospital

Dear Director Renaud:

My name is Elizabeth Browne, and I am the CEO at Charles River Community Health (CRCH). I am writing to express my support of Dana-Farber Cancer Institute's (DFCI) proposed cancer hospital and their new clinical collaboration with Beth Israel Deaconess Medical Center (BIDMC).

Charles River Community Health is a nonprofit Federally Qualified Health Center in Allston-Brighton and Waltham, providing care to patients in need for 50 years. Our mission is to partner with individuals and families so they can thrive and lead healthier lives by delivering the comprehensive, integrated, and equitable primary healthcare that matters most to them. In 2023, CRCH served 13,518 patients. The families we serve are some the most vulnerable in our community, with 93% of our patients living at or below 200% of the Federal Poverty Level, 31% uninsured, 81% from communities of color, and 76% needing services in a language other than English, one of the highest rates for community health centers in the Commonwealth. We provide care to patients of all backgrounds, regardless of insurance or immigration status, or ability to pay. CRCH has been a clinical partner with both Dana Farber and Beth Israel Deaconess Medical Center for over 20 years, in large part due to their demonstrated commitment to mission and providing care to all patients.

DFCI is one of the world's leading providers of cancer care and is committed to both expanding access to cancer care in our communities, and closing health equity gaps in cancer treatment. In collaboration with Beth Israel Deaconess Medical Center, DFCI proposes to offer the entire continuum of cancer care in one 300-bed, freestanding hospital that will help meet the treatment needs associated with the rapidly rising rates of cancer in Massachusetts, which this year are projected to be 28% higher than 2020. At Charles River, we are seeing similar trends, with a projected 31% increase in breast cancer diagnoses in 2024 over last year.

The presence of a modern hospital can attract top-tier healthcare professionals to our community, fostering a dynamic healthcare ecosystem and stimulating economic growth. It could also serve as a hub for medical research and innovation, positioning our community as a leader in healthcare excellence. Further, both Dana-Farber and BIDMC share a deep commitment to fostering a culture of diversity, equity and inclusion and dismantling barriers to care. These commitments align well with our mission.

The establishment of a designated cancer hospital will address also several critical needs in our community:

Specialized Expertise: A dedicated cancer hospital will provide access to highly specialized medical professionals, including oncologists, surgeons, radiologists, and supportive care teams with extensive experience and expertise in managing several types of cancers. This expertise is crucial for accurate diagnosis, personalized treatment planning, and ongoing support throughout the cancer journey.

Comprehensive Treatment Modalities: Cancer care is multifaceted and often requires a combination of treatment modalities, including surgery, chemotherapy, radiation therapy, immunotherapy, and targeted therapy. A designated cancer hospital will offer a comprehensive range of treatment options tailored to the specific needs of each patient, ensuring optimal outcomes and improved quality of life.

Advanced Technology and Facilities: Investing in state-of-the-art medical technology and facilities is essential for delivering innovative cancer care. A designated cancer hospital can prioritize the acquisition of advanced diagnostic tools, imaging equipment, radiation therapy machines, and surgical instruments, enabling precise and effective treatment delivery while minimizing side effects and complications.

Supportive Services: Beyond medical treatment, cancer patients and their families often require access to a range of supportive services, including patient navigation, psychological counseling, nutritional guidance, pain management, and palliative care. This is especially true of Charles River Community Health's patients who face social drivers of health challenges such as food insecurity that become more acute to address with a cancer diagnosis. A designated cancer hospital can integrate these supportive services seamlessly into the patient care continuum, promoting holistic well-being and enhanced quality of life for individuals affected by cancer.

Research and Innovation: Collaboration with academic institutions and research organizations is essential for advancing our understanding of cancer biology, developing novel treatment strategies, and improving patient outcomes. A designated cancer hospital can serve as a hub for research and innovation, facilitating clinical trials, translational research projects, and knowledge exchange initiatives aimed at accelerating progress in the fight against cancer.

We know that we need more inpatient beds because of the many stories from people who have had to wait in the ER because no inpatient beds were available—a situation that can be alleviated by this proposed new hospital. All cancer patients deserve to be treated by doctors and nurses whose singular focus is cancer. Please support Dana-Farber's proposed new inpatient cancer hospital and assure that the best care in the world will be available in our region.

Sincerely,

Clabeth Brome

Elizabeth Browne Chief Executive Officer <u>ebrowne@charlesriverhealth.org</u> 617-208-1511

Jenny Dahlstein 73 Jamaica Street #1 Jamaica Plain, MA 02130

April 15, 2024

Dennis Renaud Director, Determination of Need Program Massachusetts Department of Public Health 67 Forest Street, Marlborough, MA 01752

Dear Director Renaud:

My name is Jenny Dahlstein and I am a resident of Jamaica Plain, Massachusetts. I am a member of the Patient and Caregiver Ten Taxpayer group and am writing to express my support of Dana-Farber Cancer Institute's proposed cancer hospital and their new clinical collaboration with Beth Israel Deaconess Medical Center (BIDMC).

A new stand-alone cancer inpatient hospital would improve the patient experience, expand access, and could provide more cost-effective care—ensuring better care for our community, now and for generations to come. I believe that having a dedicated cancer hospital will bring that world-class, personal care that I receive to more people in Massachusetts. With this new hospital, Dana-Farber will work to ensure that cancer patients are seen quickly and provided with the specialized, patient-centered cancer care that all patients deserve.

Almost everyone in the Boston area has a story about a loved one who received outstanding care at Dana-Farber. I am one of them – I am a patient at Dana-Farber and also a volunteer on the Institute's Adult Patient and Family Advisory Council (PFAC), which works on a variety of initiatives that help Dana-Farber provide the best possible patient experience for all patients, no matter where they come from or who they are. Through my years doing this volunteer work, I have been impressed to see how consistently and genuinely clinicians and staff across the many departments seek to build on the excellent care DFCI already provides yet also always with a view to improve care for all patients.

Dana-Farber is the only institution in the region focused exclusively on cancer, and the only one balancing research and patient care equally. Now, as cancer incidence rises at an alarming rate, it's imperative that Boston meets the need for more inpatient beds for cancer patients.

We know that we need more inpatient beds because of the many stories from people who have had to wait in the ER because no inpatient beds were available—a situation that can be alleviated by this proposed new hospital. Further, Dana-Farber and BIDMC share a deep commitment to fostering a culture of diversity, equity and inclusion, and dismantling barriers to care.

All cancer patients deserve to be treated by doctors and nurses whose singular focus is cancer. Please support Dana-Farber's proposed new inpatient cancer hospital and assure that the best care in the world will be available in our region.

Jenny Dahlae

Jenny Dahlstein Volunteer, DFCI Adult Patient and Family Advisory Council (PFAC) Co-Chair, 2022-2023 Member, 2020-2026



| From: | |
|----------|------------------------------------|
| To: | DPH-DL - DoN Program |
| Subject: | Dana-Farber"s proposed hospital |
| Date: | Friday, April 19, 2024 10:19:17 AM |

CAUTION: This email originated from a sender outside of the Commonwealth of Massachusetts mail system. Do not click on links or open attachments unless you recognize the sender and know the content is safe.

Dear Director Renaud:

As a resident of Brookline, Massachusetts. I am writing to express my support of Dana-Farber Cancer Institute's proposed cancer hospital and their new clinical collaboration with Beth Israel Deaconess Medical Center.

A new stand-alone cancer inpatient hospital would improve the patient experience, expand access, and could provide more cost-effective care—ensuring better care for our community, now and for generations to come.

As a close relative of Dana-Farber patients with prostate and breast cancer, I have experienced care from Dana-Farber up close and personal. The Dana-Farber's recommendations and care far exceeded those of other nationally prominent cancer centers across several states that my family members visited, with recommendations that were more clearly tailored to their circumstances (and generated less revenue for the Dana-Farber relative to the recommendations of the other centers). I believe that having a dedicated cancer hospital will bring that world-class, personal care that my family members receive to more people in Massachusetts. With this new hospital, Dana-Farber will work to ensure that cancer patients are seen quickly and provided with the specialized patient centered cancer care that all patients deserve.

I am also a provider and researcher at the Dana-Farber Cancer Institute. Our patients regularly comment on the high quality of our care, and come to see us from all corners of the country and, indeed, the world. We have been fortunate to provide absolutely world-class outpatient care, but unfortunately our inpatient care has lagged with the lack of a dedicated cancer hospital and, frankly, a lack of inpatient beds. We frequently cannot accept our own patients who show up at other hospitals and need inpatient care, because we have no beds to offer. Their care suffers with the lack of continuity of care and, often, a lack of specialists at the other hospitals that we are fortunate to have.

Almost everyone in Massachusetts has a story about a loved one who received outstanding care at Dana-Farber. It is the only institution in the region focused exclusively on cancer, and the only one balancing research and patient care equally. Now, as cancer incidence rises at an alarming rate, it's imperative that the State meets the need for more inpatient beds for cancer patients.

We know that we need more inpatient beds because of the many stories from people who have had to wait in the ER because no inpatient beds were available—a situation that can be alleviated by this proposed new hospital. Further, both Dana-Farber and BIDMC share a deep commitment to fostering a culture of diversity, equity and inclusion and dismantling barriers to care.

All cancer patients deserve to be treated by doctors and nurses whose singular focus is cancer. Please support Dana-Farber's proposed new inpatient cancer hospital and ensure that the best care in the world will be available in our region.

Rameen Beroukhim, MD PhD





April 11, 2024



Mary-Ellen Taplin, MD The Lank Center for Genitourinary Oncology Department of Medical Oncology Professor of Medicine Harvard Medical School

Dana-Farber Cancer Institute 450 Brookline Avenue, Suite D1230 Boston, Massachusetts 02215-5450 617.632-7221 tel 617.632.2165 fax www.dana-farber.org

Dennis Renaud Director, Determination of Need Program Massachusetts Department of Public Health 67 Forest Street, Marlborough, MA 01752

Dear Director Renaud:

My name is Mary-Ellen Taplin, and I am a resident of Boston, Massachusetts. I am writing to express my support of Dana-Farber Cancer Institute's proposed cancer hospital and their new clinical collaboration with Beth Israel Deaconess Medical Center.

BRIGHAM AND

WOMEN'S HOSPITAL

A new stand-alone cancer inpatient hospital would improve the patient experience, expand access, and could provide more cost-effective care—ensuring better care for our community, now and for generations to come.

As a medical oncologist at Dana-Farber, I believe that we have an opportunity with our future cancer hospital to create a facility that will provide integrated, specialty cancer care in an environment that will ensure that our patients and their loved ones are provided for in a setting that addresses their specific needs. Our multidisciplinary model that includes specialty trained oncology nurses and expert physicians provides cancer patients and their loved ones with world-class cancer and subspecialty care.

Almost everyone in Massachusetts has a story about a loved one who received outstanding care at Dana-Farber. I personally had my breast cancer treated at Dana-Farber (with surgery at BIDMC) and my deceased husband had his brain tumor expertly treated at Dana-Farber. Thus, I know from both sides of the white coat that the importance of the expert care provided by Dana-Faber. It is the only institution in the region focused exclusively on cancer, and the only one balancing research and patient care equally. Now, as cancer incidence rises at an alarming rate, it's imperative that the State meets the need for more inpatient beds for cancer patients.

We know that we need more inpatient beds because of the many stories from people who have had to wait in the ER because no inpatient beds were available—a situation that can be alleviated by this proposed new hospital. With the current situation, I'm not able to transfer my patients from outside hospitals to get their care with the Dana-Farber team whom they know and trust because of the current limited inpatient bed situation. Further, both Dana-Farber and BIDMC share a deep commitment to fostering a culture of diversity, equity and inclusion and dismantling barriers to care.

All cancer patients deserve to be treated by doctors and nurses whose singular focus is cancer. That is what I wanted for myself and my family. Please support Dana-Farber's proposed new inpatient cancer hospital and assure that the best care in the world will be available in our region.

Sincerely,

Mary-Ellen Taplin

Mary-Ellen Taplin, MD





Teaching Affiliates of Harvard Medical School









The Lank Center for Genitourinary Oncology Department of Medical Oncology

Dana-Farber Cancer Institute 450 Brookline Avenue, Suite D1230 Boston, Massachusetts 02215-5450 617.632.3466 tel 617.632.2165 fax www.clana-farber.org



Teaching Affiliates of Harvard Medical School