

May 17, 2019

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Dear Massachusetts Executive Office of Health and Human Services.

Ascension Recovery Services (Ascension), in collaboration with our partners Gensler and Glenmark Holding LLC (Glenmark), appreciates the opportunity to provide you with information about our services and related opportunities for partnerships to utilize Commonwealth-owned property located on the 13-acre Lemuel Shattuck Hospital Campus (the "Campus") in Jamaica Plain, Boston. Our team is committed to continuous collaboration to serve the public health needs of the community and Commonwealth at large.

Ascension engages nationally in public-private partnerships across a broad array of health and wellness-focused initiatives. We have found that by leveraging resources from the public and private sectors through innovative approaches with sustainable financial business plans, we are able to collectively accomplish more and help a greater number of people.

Ascension, in partnership with the international architecture and design firm Gensler, is currently engaged by the City of Boston to create the Master Plan for the Long Island Recovery Center (LIRC) in Boston, Massachusetts. In addition to proposing a plan that will accomplish the goals identified by the City of Boston, including providing the highest quality clinical care, we will be developing a sustainable business model to ensure the LIRC is set up to be cash-flow positive and thriving for generations.

Ascension has identified an opportunity to partner with the Commonwealth of Massachusetts on the redevelopment of a new Campus and relocation for the Lemuel Shattuck Hospital Campus, to include new Campus design, permitting, financing and leasing, construction, and ongoing management of this new Campus, in a manner that serves public health purposes, as required by the statutory land use deed. Ascension is dedicated to providing for the existing privately-run services and programs to remain on the Campus after the hospital services relocate. Ascension will leverage its current partnerships with Gensler and Glenmark, and its current efforts with the Long Island Recovery Center development with the City of Boston to create a seamless, comprehensive, accessible, and fully-integrated recovery, treatment, and housing system at the new Shattuck Hospital Campus, including assistance with the new purpose for the existing hospital.

# **Our Team Backgrounds:**

**Ascension -** Ascension is an industry leader in developing comprehensive behavioral health and substance use disorder treatment programs, offering a full continuum of care that provides innovative high-quality clinical care as well as a sustainable business model. We have developed comprehensive programs across the country that include the following program components: withdrawal management (detox), residential, partial hospitalization, intensive outpatient, recovery residences, job training and reintegration, community engagement and outreach, prevention and harm reduction, and peer recovery coach networks. Our clients include large health systems, rural hospitals, universities, county and state governments, and departments of health and human services. Ascension is currently engaged by the City of Boston to develop the Master Plan for the Long Island Recovery Center. Ascension has a full staff of addiction professionals who have



extensive experience in the addiction services field, some of whom were clinical directors and CEOs of nationally renowned treatment centers prior to joining Ascension. The majority of our employees at Ascension are in long-term recovery.

Gensler – Gensler is a leading global architecture, design, and planning firm that partners with companies and institutions to achieve measurable business and organizational goals through the use of design. The firm has more than 5,000 active clients in virtually every industry and delivers projects as large as a city and as small as a task light for an individual's desk. Gensler has built an invaluable depth of knowledge and capacity to deliver at any scale and region. Our Boston office was established in 1993 and has grown to more than 160 employees. With more than 6,000 experienced professionals in 48 global locations, we are able to provide detailed attention and expertise while retaining the resources that only a large firm can provide. Gensler delivers specific project types that meet our clients' myriad needs around the world. Our talented staff offers a wealth of specialized knowledge across a wide breadth of industry sector coverage. This collaborative, integrated approach blends the diverse knowledge of these specialties to explore new possibilities and give clients a competitive edge through fresh ideas.

**Glenmark** - Glenmark is a well-established, full-service real estate acquisition, development, and management company devoted to finding solutions through innovation and expertise, including providing financing and lease back options to our clients. Glenmark works diligently to transform a vision into a detailed and innovative project. Our principal objective is to meet the needs of our existing tenants and future clients. For over 30 years our expertise, foresight, and integrity have ensured client satisfaction. Glenmark's quality reputation is built on a commitment to customer service, hard work, and integrity. Whether we are developing you a new Campus, renovating an existing facility, or finding you the perfect site to develop your next project, you can be assured we will do our best to exceed your expectations. We focus our attention on the client's goals and determine the most cost-effective way to achieve them. Our team works diligently through every development detail to bring your project to completion on time and on or under budget. Glenmark is experienced in all types of projects – power centers, business parks, office, medical, hospitality, retail, warehouse, light industrial, flex, government, mixed-use, land, residential, recreational, private-public partnerships, off-balance-sheet, student housing, and build-to-suit. Our experience in maximizing property value ensures customers' objectives are met and clients are satisfied. Our priority is working with you to tailor a project structure that serves your assets, goals, and financial outcomes. Glenmark's high-quality experience, capability, credentials, financial savvy, and stability will result in a project that exceeds your expectations.

### Vision & Goals:

The Commonwealth's vision is to create an innovative and person-centered Campus designed to promote health, reduce barriers to service, and integrate care across health care and housing systems for individuals with behavioral health needs.

- Integrate Shattuck Campus with Franklin Park
- Improve access to neighborhoods with public transit, bike and pedestrian options
- Increasing green and open space
- Sustainable development shall follow Boston and Commonwealth benchmarks and be "LEED Certifiable" but do not require LEED Certification
- Provide a continuum of mental health and substance use services, permanent supportive housing (minimum of 75-100 units), emergency shelter and wraparound supportive services for those in the behavioral health system



### RFI Questions - Responses

# 1. Provide information on the types of services that could be added to the Campus. Respondents do not need to have expertise in all program or service areas.

The Campus, located at the current Shattuck Hospital, is poised to offer a number of whole-health recovery and clinical services for individuals with substance use or mental health disorders, physical illnesses, and those who may be at risk of or currently experiencing homelessness.

The services which will remain in the new Campus, according to Attachment A of the RFI, are as follows: Victory Programs, Pine Street Inn, Bay Cove Human Services, Health Care Resource Centers, and High Point Detox. This means that residential treatment and stabilization services, withdrawal management (detox), homeless shelter for men, and methadone treatment are currently available and are projected to continue to be available to patients of the Campus. These services are critically important and must be maintained to ensure continuity of care. In addition, Ascension will introduce additional services to the Campus to enhance its continuum of care, improve access and integrate with the City of Boston's plan for the Long Island Recovery Campus. Following are additional services which could be added to the new Shattuck Hospital Campus:

### • Harm reduction services

Recovery from substance use disorder happens in a series of predictable stages. It is equally as important to help people in the early stages of change, when they may still be actively drinking or using drugs, as it is to help those who have made the decision to enter treatment or recovery. Harm reduction services can achieve a number of important public health goals such as decreasing the spread of infectious diseases like Hepatitis C, HIV, and other public health problems related to illicit or IV drug use, and alcohol misuse.

### • Integrated primary and behavioral health care

Integrating behavioral health and primary health care produces cost savings by enhancing the effectiveness of treatment and making care more accessible for those who need it. Integrated care requires first that primary and behavioral health care be offered under the same roof, but also requires a cohesive treatment team environment and shared access to electronic health records. This is critical because health problems are often interrelated, thus effective treatment of the whole person is actualized through the integration of primary and behavioral health care. Offering the following basic primary care options on Campus should be considered:

- o Primary care: First contact and continuing care
- o Triage
- Dental care
- Eve care
- o OB/GYN
- o Pediatric services
- Pharmacy
- o Infectious disease screening and treatment

### • Comprehensive substance use and co-occurring disorder treatment

An array of SUD and co-occurring disorder treatment services should be offered at the Campus but must be directly coordinated with the Long Island Recovery Center (LIRC) to ensure integration, seamlessness and continuity of care. We must ensure that the services of Shattuck and LIRC are



not being duplicative in nature, but rather complementary and provide the most coordinated and comprehensive care for the City of Boston and the Commonwealth of Massachusetts. Services provided at the Campus will likely span the continuum from medically-managed withdrawal to long-term residential to supportive recovery housing, including all wraparound services.

### Job training and workforce development and reintegration

A program that Ascension has developed and successfully implemented is Reintegrate Appalachia (Reintegrate). Reintegrate creates jobs and implements programs that brings economic stability, purpose, and hope to individuals in Appalachia recovering from SUD by providing access to higher education, professional development and skills training, flexible recovery-sensitive employment opportunities, and critical recovery monitoring and support.

The project re-engages each participant in their community through meaningful employment, the opportunity to continue their education and grow their professional skills, and continuation of the clinical and peer-to-peer support needed to maintain sobriety, which we call the 33-6-3-PLUS model. Each participant is required to participate in full-time employment (33 hours weekly) through new social enterprises developed by Reintegrate and employment partners, higher education in the community/technical college setting (6 hours weekly), personal/professional development and mentorship (3 hours weekly), and a robust addiction recovery monitoring program (PLUS).

### • Additional forms of Medication-Assisted Treatment (MAT)

The gold standard treatment of opioid use disorder (OUD) is the combination medication of Buprenorphine/Naloxone (Suboxone). This medication reduces cravings and blocks the effects of opiates if an individual experiences relapse. Combined with behavioral therapy and counseling, MAT can significantly increase the likelihood of recovery for an individual with OUD. In addition to Buprenorphine/Naloxone, Vivitrol is another effective medication for the treatment of OUD or alcohol use disorder. Ascension would recommend multiple pathways to recovery if involved in the development, permitting, leasing, construction, and ongoing management of the new Campus.

# • Supportive housing that utilizes the housing first philosophy (minimum of 75 units)

Housing individuals experiencing homelessness saves lives and financial resources. Housing first is a philosophy that advocates for helping those experiencing homelessness to have access to safe housing resources first, and then engaging them with wraparound services after they are safely housed. Utilizing evidence-based methods such as Motivational Interviewing can enhance these efforts. Such person-centered services have proven to be key in helping those who are experiencing chronic homelessness.

### • Peer recovery support (on the Campus and in the community)

Peer recovery support involves the use of trained and certified individuals in recovery to help others initiate and sustain recovery. Peer recovery support specialists utilize both their training in evidence-based helping methods as well as their "lived experience" to help individuals engage with services and communities that support recovery. Peer recovery support can be offered both on the Campus and in the community, allowing help to be offered quickly and efficiently, as well as providing the opportunity for recovery skills to be reinforced in the individual's living environment.

Social services focused on referrals and case management, with wraparound services



Individuals often need assistance beyond what is offered at any single location. Therefore, available and accessible case management/referral services are very important. Assisting those in need of services to navigate and utilize appropriate resources can dramatically enhance well-being.

o Included in this will be a targeted outreach initiative, patient navigation and education services rooted in prevention, and community destignatization efforts.

### • Urgent psychiatric care

One of the greatest systemic problems with current mental health services is a lack of accessibility of services. Psychiatrists are in great demand, but current service models for treatment services result in longer than necessary waiting periods before receiving care. According to the Centers for Disease Control and Prevention (CDC), the rate of suicide in the United States has increased by 25% in the last 20 years<sup>1</sup>. This trend can be stopped and reversed by ensuring those individuals in need of care receive treatment in a timely and consistent manner. Offering urgent psychiatric care or same day appointments with a psychiatric prescriber will help individuals gain access to treatment and open a door into the mental health treatment system. By leveraging telehealth laws and other methods, same day urgent psychiatric care could be offered on the new Campus. Consideration for ambulatory behavioral health services similar to Assertive Community Treatment (ACT) teams will be made.

# 2. Describe any specific issues that would deter or encourage an organization from partnering with the Commonwealth.

Ascension believes a partnership with the Commonwealth would be advantageous for several reasons. Ascension is currently engaged with Gensler, a global design and architectural firm, in a partnership with the City of Boston to rebuild the Long Island Bridge and develop a comprehensive recovery Campus that will alleviate many of the mental health, substance use, and housing problems within the city. By partnering with the Commonwealth on the designing, permitting, leasing, construction, and ongoing management of the new Campus, the opportunity exists to coordinate a fully integrated continuum of care with a no wrong door approach to enter the health system. In addition, Ascension has a partnership with Glenmark, a firm that offers opportunities for largescale property development and financing.

# 3. Identify what steps an organization would need to take to partner with the Commonwealth and a rough timeline for these steps.

Ascension has extensive experience with projects such as the one described in the current RFI and would be able to begin the process immediately upon approval from the Commonwealth. Below is a general outline of a statement of work that will provide some context as to how Ascension would execute such an agreement.

#### Phase 1 - Understand

We will begin with analysis of the information and insights gathered through the Commonwealth's current assessment being conducted by Health Resources in Action (HRiA), Request for Information (RFI) stakeholder engagements, review of existing services, and provider dialogues. This Systems Analysis will synthesize these findings, providing a complete picture of current gaps in the recovery services continuum, as well as potential future gaps in services, that will guide the strategic development of the New Campus. We will work to seamlessly integrate the work being done for the Long Island Recovery Campus with the work being done at the new Shattuck Hospital

<sup>&</sup>lt;sup>1</sup> https://www.cnn.com/2018/06/07/health/suicide-report-cdc/index.html



Campus for the Commonwealth of Massachusetts. Let it be noted, we would like to begin this process as soon as practical and ideally before the finalization of the Campus Plan in September 2019.

Timeline: Begin ASAP with a duration of 2 months

#### Phase 2 - Ideate

Next, we will develop the core deliverable of the project, the Strategic Plan, which will translate the Systems Analysis and Service Model into a short-term and long-term vision for development of a new Campus. Once the programmatic requirements are developed, the team can apply those requirements to the existing Campus and develop options for a new Campus Master Plan. The Master Plan would be focused on development of an easily accessible, efficient, financially sustainable, and comprehensive continuum of care that is integrated and coordinated with the development of the Long Island Recovery Campus.

Timeline: Begin at completion of Phase 1, this phase will last 3 months

### Phase 3 & 4 – Materialize and Manage

The final pair of deliverables will be comprised of a Cost Analysis and Implementation Plan. The former will estimate the capital expenses and operational-related expenses necessary to see the development of the new Campus through the final stages of implementation. The latter will serve as an action plan for implementing the vision created in the Strategic Plan. This will include both a high-level timeline with milestones for keeping the project on track, as well as a more detailed description of the different phases of development and corresponding infrastructure and permitting needs/requirements. This phase will be ongoing and will culminate in the offering of long-term management of the facility by Ascension to ensure the success and ongoing viability of the development.

Timeline: Begin at completion of Phase 2, this phase will last 4 months

4. Describe what resources, including funding and financing models, are necessary to enable a partner(s) to finance the design, permitting, leasing, and construction of the project and ongoing management of the site.

Ascension would partner with Gensler and Glenmark to design, facilitate permitting, financing, lease, and construction of the project. Gensler is a worldwide architectural and design firm, and Glenmark has experience with development, financing, and management of healthcare and other facilities of this nature throughout the country. Through these partnerships, Ascension would facilitate a public-private partnership for not only the design, permitting, leasing, construction, and ongoing management of the new Campus, but would also be willing to finance the total project cost for the Commonwealth, which we estimate to be in the hundreds of millions of dollars, and lease back the facility to the Commonwealth. With the Commonwealth signing a long-term lease with Ascension, we will be able to finance the entire project cost which will eliminate the need for the Commonwealth to fund extensive up-front capital and/or incur debt. We can reduce the financial burden down to a fixed monthly payment for the life of the lease that has the ability to be paid by the operational revenue of the project/hospital Campus. We have implemented this financial mechanism in a number of large-scale health care development projects with great success. As a capital partner, we will be vested in ensuring the long-term viability of the new Campus and will heavily utilize our behavioral healthcare consulting expertise to design and implement a



comprehensive continuum of care that will be innovative, best-in-class care, and a model for others to follow, as well as being a financially sustainable enterprise.

Ascension has extensive experience managing operations of a program such as the one proposed, ensuring the long-term viability of the program, and adherence to the mission and goals set forth in the master plan to be developed.

### **Our Commitment:**

Ascension, in partnership with Gensler and Glenmark, is prepared to submit a full and detailed proposal for all of these services outlined herein. If we are awarded this contract after a competitive bidding process, we will be prepared to complete all deliverables identified in the RFP, and would facilitate successful execution of all phases of design, permitting, financing, leasing, construction, and ongoing management, in a manner that is on time, on or under budget, and of the highest quality to meet all the goals of the Commonwealth. Our commitment is to deliver high-quality, financially viable, and effective treatment and recovery resources, thereby increasing access to comprehensive care for individuals who need it most. We will comply with all local, state and federal requirements, are prepared to participate in a competitive procurement process, are willing to explore, develop and entertain new ideas, and have the desire and resources for a long-term partnership. We are certain that with the unique qualifications and experience of the team here assembled, we will be able to execute on our commitment and build a long-term partnership with the Commonwealth to develop a model of care that will be replicated around the country.

### Our team leaders working on this project:

### Douglas M. Leech

Founder & CEO, Ascension

Mr. Leech has a B.S. degree in Accounting from Pennsylvania State University and worked at Ernst & Young in Pittsburgh before founding Ascension Recovery Services and West Virginia Sober Living (WVSL). Through his own struggles with addiction and subsequent recovery, Mr. Leech developed a passion for helping those suffering from the disease of addiction and set out to increase access to substance use disorder (SUD) treatment across the country. Ascension has two main divisions: Clinical Services and Program Development Services. Ascension's Clinical Services division offers premier addiction services across the entire continuum of care. Ascension's Program Development division is a national leader for developing comprehensive SUD treatment programs that provide the highest quality clinical care with a sustainable business model. Over the past 12 months, Ascension has opened programs in 10 states, created 154 jobs, written and received \$7.72M in grant funding for small start-up programs, and participated in large development projects with a cumulative project cost in excess of \$100M. Mr. Leech also founded West Virginia Sober Living (WVSL), a self-sustaining 501(c)(3) non-profit, operating recovery residences, job creation and reintegration programming, and a network of peer recovery coaches providing broad community support for SUD in West Virginia.

### Bill Coleman, LCSW

Clinical Director, Ascension

Mr. Coleman is a Licensed Clinical Social Worker (LCSW) with over 36 years of experience in behavioral health services. He received his B.A. degree from Rollins College in Winter Park, Florida and his MSW from Fordham University in New York. Mr. Coleman's professional and personal life is purpose-driven with a clear intention and commitment to partner with people, agencies, and communities to help transform lives. He is recognized in this community as a leader and contributor to evidence-based treatment services, with a clear focus on mindfulness, resilience, and motivational building strategies.



Prior to joining Ascension, Mr. Coleman served as the Director of Clinical Services at Hazelden Betty Ford Foundation in Naples, Florida. Prior to that, he managed substance abuse and mental health services for Dakota County Social Services in St. Paul, Minnesota. In addition, he was Chief Clinical Officer and also Chief Executive Officer at Valley View House, a 300-bed specialty hospital in New York, providing addiction and accompanying co-occurring disorders' treatment services to adults and adolescents. Further, in the 90's, Mr. Coleman opened IOPs and PHPs in New York and New Jersey, providing needed care to many.

Mr. Coleman has always had a keen interest in quality improvement and improving clinical outcomes. Because of his interests and recognized experience, he was also Quality Improvement Director for Magellan Behavioral Health in Montana, where he developed collaborative relationships with high volume providers and helped introduce strategies to more effectively communicate with various HMO and PPO payers.

### Dr. David Mee-Lee, M.D.

Director of Innovation & Best Practices, Ascension

David Mee-Lee, M.D. is a board-certified psychiatrist and is certified by the American Board of Addiction Medicine. He trains and consults both nationally and internationally. Dr. Mee-Lee has been the Chief Editor of all editions of the American Society of Addiction Medicine (ASAM), ASAM's criteria, including *The ASAM Criteria – Treatment Criteria for Addictive, Substance-Related, and Co-Occurring Conditions, Third Edition* (2013). Dr. Mee-Lee has over 40 years of experience in person-centered treatment and program development for people with co-occurring mental health and substance use conditions. He is co-founder of the Institute for Wellness Education (IWE).

# Kenneth I Fisher, FAIA, Principal-in-Charge

Principal, Gensler

Ken brings more than 30 years of experience to his role as a Firmwide Strategic Advisor of Gensler's Education Practice Area and the Community Sector Leader of the Boston office focused on science and higher education. In this capacity, he has led the creation of forward-thinking learning environments that recognize the breadth of pedagogical philosophies and the evolution of today's college student.

Ken has spoken on the national and regional levels before the Society of College and University Planners where he also serves on their Planning Academy. He is a member of the Boston Society of Architects (BSA) where he currently is a member of the BSA Foundations Public Programs Committee. Ken has served as the co-chair for the BSA's Committee for the Advancement of Sustainability and as the Chairperson for the Committee on the Environment (COTE) for over ten years. He was invited by two Governors and served as a sub-committee chair for the Governor of the Commonwealth of Massachusetts' Zero Net Energy Building Task Force and on the steering committee for Roundtable on Sustainability.

Ken holds undergraduate and graduate degrees in physics and received his Master of Architecture from the University of Oregon. In 2014, he was elected into the American Institute of Architects College of Fellows.

### Patricia Nobre, Chief Strategist

Senior Associate, Gensler

Patricia is a multi-cultural and multitalented strategist who believes in the power of design to create positive social, economic and environmental change for all people. She leads both design and research projects in education, health, and equity. She brings over 15 years of experience designing projects that promote meaningful social impact on multiple scales and across the globe, including Latin America, the Middle East, and the United States.



Patricia has dedicated her career to helping diverse communities and cultures reimagine the spaces in which we live, work and learn. Drawing on advanced degrees in both architecture and education, she works with clients across industries to realize projects that further their mission and contribute to building healthier, wiser, and more equitable communities. Patricia's work is rooted in the firm belief that design is a cocreation, and she is steadfast in balancing research and data with real voices through proactive community engagement and user feedback.

A seasoned facilitator and strategist, Patricia has expertise in engaging a wide spectrum of users to jointly reimagine their built environment. Patricia is committed to helping groups across industries leverage their investments in space to achieve their missions and foster the passion for lifelong learning.

Patricia holds undergraduate degrees in architecture and urban planning from the University of Sao Paulo and received her Masters of Architecture from the University of Massachusetts and her Master of Education from Harvard University.

## Mark R. Nesselroad

Founder, CEO and Co-Owner, Glenmark

As CEO, Mr. Nesselroad has overall management responsibility for the company, its operating divisions, affiliates, and subsidiaries. He launched his first business venture in 1984 with the purchase of The Willows Nursing Home in Parkersburg, WV. By 1995, as CEO and co-founder, Mark had grown Glenmark Associates, Inc. into the largest nursing home and related ancillary service company in West Virginia. In addition to the operation of these facilities, Glenmark was a pioneer in West Virginia healthcare with over \$100M in construction, renovation, and operation of health-related assets. Glenmark expanding their nursing home and related ancillary service company around the country, including into Massachusetts. Furthermore, Mr. Nesselroad was a leader in the development of state and national reimbursement policy and payment for Medicare and Medicaid.

In 1995, Glenmark Associates, Inc. merged its healthcare holdings with The Multicare Companies, Inc. (NYSE: MUL), while retaining its real estate development and construction arms, Glenmark Holding LLC and Glenmark Corp. During the two-year time span from 1995 through 1997, Mr. Nesselroad served as both CEO of Glenmark Holding LLC and Sr. Vice President of Acquisition and Development for The Multicare Companies, Inc., a NASDAQ Exchange Company. In 1997, Multicare sold its stock to Genesis Health Ventures. This sale allowed Mr. Nesselroad to focus and devote all his talents on the growth and expansion of Glenmark and its development, acquisition, leasing, and consulting ventures.

Mr. Nesselroad's visionary approach and innate ability to always move forward have transpired into the continued success of the company. Glenmark's healthcare background and operational experience facilitated the development of WVU Medicine's Ruby Office Complex (with data center), Sleep Evaluation Center, and Healthy Minds Center, plus Med Express' original national headquarters (including data center), original urgent care facility, and additional urgent care facilities as Med Express expanded nationally. In addition, Glenmark and Mr. Nesselroad have developed, owned, and managed numerous buildings and complexes of all types (power centers, business parks, Class A & B office, hospitality, retail, warehouse, light industrial, flex, governmental, mixed-use, land, medical office-labs-pharmacies, data centers, mixed-use, residential, educational, recreational, private-public-partnerships, off-balance sheet, and build-to-suit.).

Over the course of 10 years (2008-2018), Mr. Nesselroad served on the Board of Directors, Executive Committee, and as Chairman of the Finance Committee for the West Virginia United Health System (WVU Medicine). He currently serves on the Board of Directors and Executive Committee, while chairing the Risk Committee, of United Bankshares Inc. (NASDAQ: UBSI)