

From: janem151 <janem151@aol.com>
To: janem151 <janem151@aol.com>
Subject: Merging with N.E. Deaconness
Date: Mon, Dec 11, 2017 2:45 pm

To: Department of Need Program.

I began employment at Addison Gilbert hospital in 1985 and started up the first C.T, scan for them. It was challenging, exciting and so needed for our small but excellent hospital. We finally began scanning in 1986 and became quite busy and many patients lives were literally saved and sent immediately to the Operating room for repairs such as aneurysms, burst appendix etc..

Needless to say when there was precious time available patients' whom needed Boston were sent by ambulance and air lifted for the appropriate care needed.

I had always wanted to merge ,(if need be) with Massachusetts General Hospital but alas the vote was to Beverly hospital. I felt we were the "small fish" in this merge and when all was said and done after sixteen wonderful and challenging years at Addison Gilbert hospital , I decided to work at Massachusetts General hospital in the C.T. department with the finest radiologists.

When the merge occurred with Beverly Hospital, our departments slowly disappeared and we lost the pediatrics, the nursery, and many other departments. We had been told that we did not have the patient quota to endure as a full load for those areas. A radiologist from Beverly hospital commented negatively re: our A.G.H. and I asked him why did they want to merge with us and he blatantly remarked because of our endowments and the 56 million dollars. We also had paintings that were invaluable hanging all the on the walls of the hospital and eventually they seemed to disappear, only to have found some in an employees home whom worked at Beverly hospital. Many comments were made about our art collection and so unfortunate that it all disappeared or at least most that were painted by the "masters" I actually had to sign up to acquire paintings for my C.T. room . There was dedication from employees that slowly deteriorated with such a merge. We were indeed the little "fish".

There were so many "town meetings" in Gloucester and Rockport concerning this merge. As you have heard we have been "cut off" as an island when the blizzards have occurred. I fear that if we lose any existing modalities we will not survive to remain open at all. the Cape Ann citizens wanted assurance the A.G.H. would survive as a viable local hospital.

I move to the second merge with Leahy clinic and although I had already left A.G.H.. I had always had the best interest for the hospital and thought perhaps, with the larger hospital we could incorporate new physicians to our area. I spoke with the C.E.O., Dr Grant from Leahy hospital and he agreed that it would be an excellent move and that it would be up to the individuals to move their practice more locally to us. Unfortunately, It doesn't appear to have happened. Once again we move forward and I am indeed agreeable to this proposed merger with the Deaconness hospital without fear of more losses to A.G.H.. Perhaps there will be more open forums in our communities to assure us that this will be a positive decision.

Thankyou for the opportunity to speak on the behalf of our community. I attended the open forum meeting at the Gloucester High school and listened to over 50 speakers pro and con re: merge over a period of more than 3 hours.

Respectfully,

Jane Montecalvo

Granite Street

Rockport, Massachusetts, 01966

546-3128

92

978-

December 10, 2017
Massachusetts Department of Public Health
Boston, Massachusetts

To Whom it May Concern:

My name is Martha Cooney. I am a retired teacher and live in Gloucester, which, with Rockport, makes up Cape Ann. This is the home of about 37,000 people year round, a number that doubles in summer. Public health data documents that our community has significantly older population and suffers from more serious chronic illnesses than state averages. We also have more residents without access to a car or other public transportation.

Most significantly, most of us in Gloucester, and everyone in Rockport, live on an island surrounded by the North Atlantic Ocean with just two bridges leading in and out. Both can and do become completely blocked due to weather conditions, bridge malfunctions, traffic conditions (especially in summer) and accidents. An ice storm can make the steep grade of the Route 128 Bridge impassable. Right after that bridge heading south, Route 128 falls to sea level, an area which regularly comes close to flooding with super high tides. Even greater storm surges and the inevitable rise in sea levels pose even greater risks that we will be completely isolated. We have to be self-sufficient, and so does Addison Gilbert Hospital, which can serve up to 70,000 people in the summer months. These are the reasons we say, without exaggeration, that our lives depend upon the DPH placing a binding condition on its approval of this merger stating that the new corporation be required, at a minimum, to guarantee in writing and indefinitely, what the DPH itself has ruled since 1984: that all eight "minimum services that must be in a hospital building as a precondition for the authorized provision of emergency services at that site" be provided at our hospital.

One of those services is "surgical services which are immediately available for life threatening situations". This has not been available at AGH for a long time. It is unconscionable that a Cape Ann resident with life-threatening injuries who should be in an operating room in Gloucester is instead in an ambulance trying to get to Beverly or Burlington, a trip that can take an hour even when it's not rush hour. Surgical teams cannot function appropriately in life-threatening emergencies if they do not work together on a routine basis. We need NewCo to recruit Gloucester-based surgeons and anesthesia staff, restore appropriate surgical equipment, and restore the array of services appropriate to a community hospital.

Another required service is critical care beds, physicians, and nurses. On a Friday afternoon this summer, nurses told me that managers planned to close the AGH ICU for the entire weekend because of lack of nurse staffing. Ultimately, the decision was reversed; they found nurses. We have a Cape Ann cardiologist/intensivist who staffs the AGH ICU 24/7. On the rare occasion when he needs to be away, it's difficult for him to get Beverly/Lahey to replace him.

If I were young and thinking of starting a family, I would not move here. The risk of losing a child, or a mother, or both, because of inability to reach a hospital and receive obstetrical and surgical services in a timely manner is just too high. I had a colleague at school to whom this happened, and although mother and child survived, the child will need 24 hour care forever. We had a thriving OB department for many years and I think we need it back.

This merger will include eight community hospitals. Every single one of them, even the smallest like BI/Deaconess Needham and BI/Deaconess Milton, has a broader array of acute care services, including routine surgery, than we have had at AGH for many years. At Needham, a hospital with a comparable number of beds as AGH and located closer to BI/Deaconess in Boston than AGH is to Beverly, a brand new inpatient wing is being constructed and routine surgery is performed. In Milton, even closer to Boston, BI Deaconess provides innovative robotics surgery and a state-of-the-art Spine Center. BI/Deaconess clearly sees the wisdom, both clinically and financially, of providing the highest quality care closest to where the patients live.

The owners of AGH have shown no such wisdom. All surgery and most other care, what the Health Policy Commission calls, "the relatively routine low-intensity care" best delivered in community hospitals, have been transferred out of AGH to Beverly and beyond.

This community deserves the same sense of safety that people who live in Needham, Milton, Newburyport, Winchester, and Plymouth, whose hospitals will also be in NewCo will enjoy. Consider that in every one of those communities, if access to one hospital is blocked, people can go in another direction to the next nearest facility. That is not possible for the people of Cape Ann. There's only one way out.(Those two aforementioned bridges.)

The protection and restoration of services at AGH will not be done without firm binding conditions placed on the merger by DON. As evidence of this, an AGH executive, after making assurances to a local reporter yesterday that "Services and patients will be returned to AGH", went on to say, "Hospital officials have not yet mapped out a plan for expanding services". Northeast and Lahey have had 20 years to do that and have done the opposite.

Without a binding condition of approval of this merger by DON, AGH services will continue to decline and people will suffer unnecessary harm and death.

It seems to me that health care should be at the core of every community. We all need services at some time in our lives. I urge you to make sure that the residents of Cape Ann have access to those very necessary, often life saving services.

Sincerely,


Martha L. Cooney

From: Patricia Johnson <patriciajanejohnson@gmail.com>

Date: December 15, 2017 at 8:09:19 AM EST

To: dph.don@massmail.state.ma.us

Subject: Addison Gilbert Hospital

Dear Sir,

I am writing to ask the Department of Public Health, on the approval of the Leahy/Beth Israel merger, guarantee that all eight services required to operate an emergency room be protected and restored at Addison Gilbert Hospital. My husband and I are residents of Gloucester nearing retirement age, and believe it is essential to provide a full range of health care including full emergency services to the aging and easily-isolated (by weather, traffic and tides) population of Cape Ann, as well as the large tourist population that arrives each summer.

Sincerely yours,

Patricia Johnson

Way Road, Gloucester

Sent by PJJ mobile

From: CAMERON SMITH <camerons5@verizon.net>
Date: December 15, 2017 at 12:41:52 PM EST
To: <dph.don@massmail.state.ma.us>
Subject: Addison Gilbert Hospital

As a Rockport resident, I strongly support Nurse O'Malley's opinion piece in today's *Gloucester Daily Times*. I know local friends who have been taken to Addison Gilbert by ambulance with evidence of life-threatening conditions. The 10-minute ride would have been 45 minutes – or an indeterminate time – if one of our bridges had been icy, causing the other one to back up seriously.

Please do as Nurse O'Malley asks.

Cameron Smith

These are edited comments I delivered to the staff of the Massachusetts Department of Public Health at the Dec. 6 hearing on the proposed merger of Lahey with Beth Israel Deaconess and several other organizations:

I'm a registered nurse and live in Gloucester, which, with Rockport, makes up Cape Ann, the home of 37,000 people year-round, a number that doubles in summer. Our community is significantly older and suffers from more serious chronic illnesses than state averages. We also have more residents without access to a car.

Most significantly, most of us in Gloucester, and everyone in Rockport, live on an

actual island surrounded by the North Atlantic Ocean with just two bridges leading in and out. Both can and do become completely blocked due to weather conditions, bridge malfunctions, traffic conditions and accidents. An ice storm can make the steep grade of the Route 128 bridge impassable. Near that bridge, Route 128 falls to sea level, a stretch that comes close to flooding with super high tides. Storm surges and rise in sea levels pose even greater risks that we will be completely isolated. We have to be self-sufficient. And so does our hospital, Addison Gilbert.

These are the reasons we say, without exaggeration, that our lives depend upon the Massachusetts Department of Public Health placing a binding condition on its approval of this merger that the new corporation (called NEWCO in merger documents) be required, at a minimum, to guarantee in writing and indefinitely what the DPH has ruled since 1984: that all eight "minimum services that must be in a hospital building as a precondition for the authorized provision of emergency services at that site" will be at Addison Gilbert.

One of those is "surgical services which are immediately available for life-threatening situations." This has not been available at AGH for a long time. Surgical teams cannot function appropriately in life-threatening emergencies if they do not work together on a routine basis. We need NEWCO to recruit Gloucester-based surgeons and anesthesia staff, and restore surgical equipment at AGH. It is unconscionable that a Cape Ann resident with life-threatening injuries, who should be in an operating room in Gloucester, is instead placed in an ambulance to Beverly or Burlington.

Another of the eight services is critical care beds. Our Cape Ann cardiologist/internist is the only physician available to staff our ICU 24/7. On a Friday afternoon this summer, nurses reported that managers planned to close our ICU for the entire weekend because they couldn't find nurses to staff it. Ultimately the decision was reversed but it indicated another risk Beverly/Lahey was willing to take with our lives.

This proposed merger will include eight community hospitals. All of them, even

the smallest, have a broader array of acute care services, including surgery, than have been at AGH for many years. At Beth Israel Deaconess Needham, a hospital with a comparable number of beds as AGH and located closer to Beth Israel Deaconess in Boston than AGH is to Beverly, a new inpatient wing is being constructed and surgery is routine. In Milton, even closer to Boston, Beth Israel Deaconess provides innovative robotics surgery and a state-of-the art spine center. Beth Israel Deaconess clearly sees the wisdom, both clinically and financially, of providing the highest quality care closest to where the patients live.

Cape Ann residents deserve the same sense of safety that people who live in Needham, Milton, Newburyport, Winchester, and Plymouth whose hospitals will also be in NEWCO enjoy. Consider that in every one of those communities, if access to one hospital is blocked, people can turn around and go in another direction to the next nearest facility. That's not possible for the people of Cape Ann. There's only one way out.

The protection and restoration of acute care services at AGH requires binding conditions placed by the Department of Public Health on the approval of this merger that guarantee that all eight services required to operate an emergency room be protected and restored at Addison Gilbert Hospital. Without that, AGH services will continue to decline and Cape Ann people suffer unnecessary harm and death.

Cape Ann residents should submit written comments to the state on this proposed merger. The deadline is 5 p.m. Dec. 18. Send them by mail to Massachusetts Department of Public Health, Determination of Need Program, 250 Washington St., 6th Floor, Boston, MA 02108. Or email to dph.don@state.ma.us.

Registered nurse Peggy O'Malley leads the nonprofit Partners for Addison Gilbert.

92 Granite Street
Rockport, Mass 01966
December 15, 2017

Determination of Need Program
Commonwealth of Massachusetts
Department of Public Health
250 Washington Street
Boston, MA 02108

To Whom it may Concern:

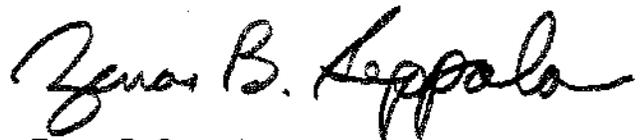
Please accept this letter in support of a proposed merger of Addison Gilbert Hospital in Gloucester Mass with Lahey Health Care System but contingent upon requiring all services provided at other comparable (i.e. community hospitals) parties to the merger be also available at Addison Gilbert.

I think it would be a miscarriage of our great constitutional system of equal protection under the law to do otherwise.

There is little need to add to the factual points detailed in the letter (enclosure 1) which I presume Peggy O'Malley will submit supplementing her oral testimony. It appeared in today's (Friday) Gloucester Daily Times, two days after my own (enclosure 2).

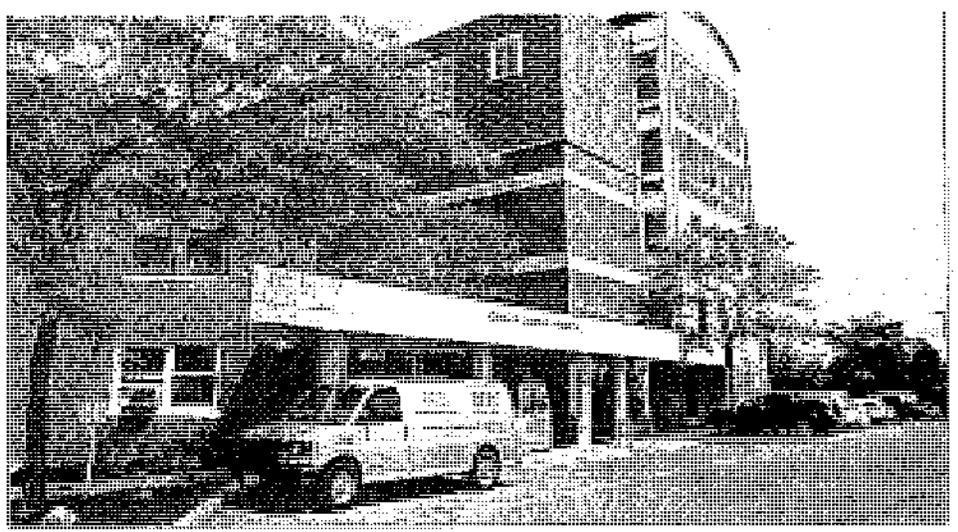
I understand other parties, Mass AG, and Federal Trade Commission are interested for the purpose of evaluating the competitive aspects of the proposed merger on a macro scale. That is as it should be, I think. However, the proponents of the merger seem to argue that our local hospital can only be competitive if merged into a larger entity. For those of us who stand to lose the most, indeed possibly our lives, competitiveness in both the the smaller and larger context is most assuredly a government obligation to regard.

As enclosure (2) suggests, I have held the findings of other state hearing and determination authorities in high regard, hope to do the same in future, and appreciate your diligent consideration in the matter.



Zenas B. Seppala

Encl: (1) P. O'Malley Letter to Editor
(2) Z. Seppala Letter to Editor



File photo

Gloucester's Addison-Gilbert Hospital is one of the North Shore facilities that would be affected by the merger of Lahey Health, Beth Israel Deaconess, New England Baptist, Mount Auburn and Seacoast Regional.

DEC 17, 2017

Lives depend on Addison Gilbert

Peggy O'Malley

These are edited comments I delivered to the staff of the Massachusetts Department of Public Health at the Dec. 6 hearing on the proposed merger of Lahey with Beth Israel Deaconess and several other organizations:

I'm a registered nurse and live in Gloucester, which, with Rockport, makes up Cape Ann, the home of 37,000 people year-round, a number that doubles in summer. Our community is significantly older and suffers from more serious chronic illnesses than state averages. We also have more residents without access to a car.

Most significantly, most of us in Gloucester, and everyone in Rockport, live on an actual island surrounded by the North Atlantic Ocean with just two bridges leading in and out. Both can and do become completely blocked due to weather conditions, bridge malfunctions, traffic conditions and accidents. An ice storm can make the steep grade of the Route 128 bridge impassable. Near that bridge, Route 128 falls to sea level, a stretch that comes close to flooding with super high tides. Storm surges and rise in sea levels pose even greater risks that we will be completely isolated. We have to be self-sufficient. And so does our hospital, Addison Gilbert.

These are the reasons we say, without exaggeration, that our lives depend upon the Massachusetts Department of Public Health placing a binding condition on its approval of this merger that the new corporation (called NEWCO in merger documents) be required, at a minimum, to guarantee

in writing and indefinitely what the DPH has ruled since 1984: that all eight "minimum services that must be in a hospital building as a precondition for the authorized provision of emergency services at that site" will be at Addison Gilbert.

One of those is "surgical services which are immediately available for life-threatening situations." This has not been available at AGH for a long time. Surgical teams cannot function appropriately in life-threatening emergencies if they do not work together on a routine basis. We need NEWCO to recruit Gloucester-based surgeons and anesthesia staff, and restore surgical equipment at AGH. It is unconscionable that a Cape Ann resident with life-threatening injuries, who should be in an operating room in Gloucester, is instead placed in an ambulance to Beverly or Burlington.

Another of the eight services is critical care beds. Our Cape Ann cardiologist/intensivist is the only physician available to staff our ICU 24/7. On a Friday afternoon this summer, nurses reported that managers planned to close our ICU for the entire weekend because they couldn't find nurses to staff it. Ultimately the decision was reversed but it indicated another risk Beverly/Lahey was willing to take with our lives.

This proposed merger will include eight community hospitals. All of them, even the smallest, have a broader array of acute care services, including surgery, than have been at AGH for many years. At Beth Israel Deaconess Needham, a hospital with a comparable number of beds as AGH and located closer to Beth Israel Deaconess in Boston than AGH is to Beverly, a

new inpatient wing is being constructed and surgery is routine. In Milton, even closer to Boston, Beth Israel Deaconess provides innovative robotics surgery and a state-of-the-art spine center. Beth Israel Deaconess clearly sees the wisdom, both clinically and financially, of providing the highest quality care closest to where the patients live.

Cape Ann residents deserve the same sense of safety that people who live in Needham, Milton, Newburyport, Winchester, and Plymouth whose hospitals will also be in NEWCO enjoy. Consider that in every one of those communities, if access to one hospital is blocked, people can turn around and go in another direction to the next nearest facility. That's not possible for the people of Cape Ann. There's only one way out.

The protection and restoration of acute care services at AGH requires hindering conditions placed by the Department of Public Health on the approval of this merger that guarantee that all eight services required to operate an emergency room be protected and restored at Addison Gilbert Hospital. Without that, AGH services will continue to decline and Cape Ann people suffer unnecessary harm and death.

Cape Ann residents should submit written comments to the state on this proposed merger. The deadline is 5 p.m. Dec. 18. Send them by mail to Massachusetts Department of Public Health, Determination of Need Program, 250 Washington St., 6th Floor, Boston, MA 02108. Or email to dph.don@state.ma.us.

Registered nurse Peggy O'Malley leads the non-profit Partners for Addison Gilbert.

RECEIVED ADDRESS - 11/17/17

ENCLOSURE (1)

encl (2) to DON
Letter
Letters to the editor
should have read
brief of citizens on
LDR
"NON-WATER-DEPENDENT
COMMERCIAL DEVELOPMENT"

Making a voice heard on hospital merger

DEC 15, 2017

To the editor:

At an informational forum in Rockport, two days before the state hearing concerning the proposed merger of the Addison Gilbert Hospital into the Lahey Health System, I became acquainted for the first time with Peggy O'Malley, Lee Swekla, Patti Page and a few other concerned citizens. As a result, two days later, I attended the state's 5 p.m. public hearing, grateful for the comfortable chairs of the Gloucester High School auditorium. I had signed the speaker sheets at the hearing, with every intention of commenting, but a prior commitment to attend the always interesting and informative Rockport Department of Public Works commissioners meeting in Rockport at 7 p.m. and the fact of being 41st in the speaker succession line with an estimated 8:15 p.m. speaking time precluded my opportunity to speak. I should mention that I appreciate the state's hearing procedures which truly facilitate individuals being able to estimate when they may speak, so you don't wait around for an opportunity that may never come.

I consider myself fortunate, however, to have been present when state Sen. Bruce Tarr spoke. Whatever the situation, I find his remarks thought-provoking and illustrative of a high-caliber public servant. In this instance, for example, he spoke of the economies of scale such a merger should provide as means of ensuring not just the survival of the local Addison Gilbert Hospital, but a strengthening of its services. He also suggested the community might be better informed by having the representatives of Lahey Health further detail what some of those economies might be

Living in Rockport, a home-rule town where a quest for even non-binding public opinion has less importance to elected decision makers than the recommendations of their sometimes questionably qualified appointed advisory committees, it's the extra step of inclusiveness that Bruce always seems so ready to facilitate that continues to impress me about him.

It will be up to an executive branch of the commonwealth to make the decision on the proposed merger in behalf of the citizens with overall lowered health care costs one desired result. During a similar state executive department (Department of Environmental Protection) hearing for the Chapter 91 approval for the Cape Ann Tool Company property, Sen. Tarr offered the use of his office in an attempt to get the long-stalled (now 30 years) project moving in some favorable direction. That was five or six years ago, was not pursued by the current owner or the town, and judging from the Rockport Board of Health meeting Tuesday night, it looks like the best we might remotely expect in the near future is the removal of the ugly lead-paint-encapsulating foam that has graced the walls for better than 15 years. All that, of course, while settling for a final project that some relevant studies show offer the least long-term comparative municipal tax revenues. Note: An impartial academic study performed for the city of Newport, R.I., showed it existing water-dependent uses for harbor areas typically returned three times as much municipal revenue per acre as residential housing; and nothing has been done to further consider Rockport zoning bylaws the more recently town-commissioned

and local taxpayer funded Economic Development Self Assessment Test report identified as harmful to any future water-dependent or non-commercial development.

In the case of the tool company, the only roadblock preserving those types of possibilities for future consideration have been rulings from the state agencies who have jurisdiction over portions of the tool company land. And their rulings depend in some part on the input of concerned citizens who hold them accountable to complying with the administrative regulations, they use to enact our laws.

Similarly, in regard to the proposed merger, most of us, including myself, have no expertise in hospital licensing, etc. In the normal routine of daily life, a hospital, after all, is a place most of us make every effort to avoid. But that can not undermine the real needs we have for their thriving existence and particularly emergency services when contingencies of fate might drive us to their doors.

After the oral hearing I contacted Peggy for a copy of the testimony she read at the public hearing, which I was unable to hear. It was a superb letter that I forwarded to one of our Rockport selectmen for official and/or personal consideration.

I'll be writing to add my comments. For others who wish to do the same, written testimony concerning the proposed merger will be accepted until 5 p.m. Monday, Dec. 18. The address is: Massachusetts Department of Public Health, Determination of Need Program, 250 Washington St., 6th Floor, Boston, MA 02108.

ZENAS SEPPALA
Rockport

December 5, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

I am writing to express my support for the application of the Beth Israel Deaconess Medical Center system, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital, to create a new, lower cost, high quality non-profit health care system in Eastern Massachusetts.

New England Baptist Hospital (NEBH) brings a unique strength as a specialized orthopedic and musculoskeletal institution and, combining that with the strengths of these great institutions will improve health care for those living within their communities. As a specialty referral hospital, NEBH needs the support of these major institutions in order to care for patients that need/will need orthopedic care. It is critical that NEBH join a network of hospitals that have a large group of primary care physicians, otherwise its future will be limited with all of the changes taking place in healthcare.

As a resident of Mission Hill and neighbor to NEBH, I know firsthand that they are committed to improving the health and well-being of those living throughout their community. NEBH provides programs for the community as well as significant support to the residents and agencies in the Mission Hill community. Including; the Mission Hill Legacy Project, Roxbury Tenants of Harvard (RTH), Sociedad Latina, Mission Hill Main Streets, Tobin Community Center, Mission Main Housing Development, ABCD, Parker Hill/Fenway Service Center, Mission Hill Neighborhood Housing Services, Mission Link, and Mission Hill Little League.

This project is essential to the future of NEBH, and to ensure continued access to affordable health care in the communities they serve.

I thank you for your consideration, and urge the Department's support and approval of this application.

Very truly yours,



Mort Ahmadifar, treasurer, Mission Hill Little League

cc: Nora Mann, Esq., Director, Determination of Need Program

From: Peggy Cullen Matlow [mailto:peggycullenmatlow@gmail.com]
Sent: Saturday, December 16, 2017 2:40 PM
To: DPH-DL - DoN Program
Subject: Fwd: Addison Gilbert

Sent from my iPhone

Begin forwarded message:

Date: December 16, 2017 at 9:11:30 AM EST
To: dph.don@state.ma.us
Subject: Addison Gilbert

I am writing to strongly urge you to enforce binding conditions regarding the Addison Gilbert merger.

37,000 lives literally depend on it!

In 1984, DPH ruled "minimum services must be in a hospital building as a precondition for the authorized provision of emergency services" at AGH.

Having proper medical--especially emergency--treatment is a right, not a privilege to our citizens.

You can require binding conditions on this merger. Please make sure to hold the parties in this merger responsible.

Thank you very much.

Peggy Matlow

From: Andy Matlow [mailto:andymatlow@gmail.com]
Sent: Saturday, December 16, 2017 9:12 AM
To: DPH-DL - DoN Program
Subject: Addison Gilbert

I am writing to strongly urge you to enforce binding conditions regarding the Addison Gilbert merger.

37,000 lives literally depend on it!

In 1984, DPH ruled "minimum services must be in a hospital building as a precondition for the authorized provision of emergency services" at AGH.

Having proper medical--especially emergency--treatment is a right, not a privilege to our citizens.

You can require binding conditions on this merger. Please make sure to hold the parties in this merger responsible.

Thank you very much.

~Andy

*Don't believe everything you think.
Believe your dreams
www.dreamsandthesoul.com*

DONALD J. CAMPBELL, JR.
PAUL F. MURPHY

SARAH J. WILKINSON, CHAIRPERSON

WILHELMINA SHEEDY MOORES
DENISE DONNELLY

BOARD OF SELECTMEN

TOWN OF ROCKPORT

MASSACHUSETTS 01966-1537

TOWN OFFICE BUILDING
34 BROADWAY

PHONE (978) 546-6786
FAX (978) 546-2881

LINDA SANDERS
TOWN ADMINISTRATOR

December 13, 2017

Ms. Monica Bharel, Commissioner
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, Massachusetts 02108

Re: Proposed Merger of the Lahey Health System with Beth Israel Deaconess Medical Center, New England Baptist Hospital, Mount Auburn Hospital, and the Seacoast Regional Health Systems

Dear Commissioner Bharel,

On behalf of the citizens of Rockport, we appeal to you to ensure that the Addison Gilbert Hospital, a member of the Lahey Health System, is required to continue to provide the eight essential services necessary to retain an emergency room at its site.

As your Department has ruled as pre-conditions, these services are:

1. Inpatient medical surgical beds;
2. Critical care beds with adequate monitoring and therapeutic equipment;
3. 24-hour availability of qualified physicians and other appropriately qualified professional staff;
4. Laboratory service with capability of performing blood gas analysis and routine hematology and chemistry;
5. Radiological services capable of providing the necessary support for the emergency services;
6. Surgical services including adequate operating room facilities which are immediately available to treat life threatening situations;
7. Post anesthesia recovery services; and
8. The readily available services of a blood bank.

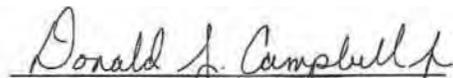
Because Rockport is an island community connected to the mainland by only two bridges, one of which is a drawbridge, it is essential that emergency services at the Addison Gilbert Hospital remain viable for the safety of the Town's residents and visitors.

As a result of the will of our citizens and our own convictions this Board strongly supports and requests a requirement of this merger to be the continued provisions of all necessary services at the Addison Gilbert Hospital in Gloucester.

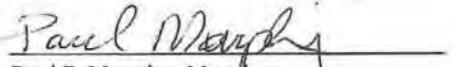
We thank you for seriously considering our appeal before you decide to approve an affiliation agreement among the above mentioned health care systems.

Respectfully,


Sarah J. Wilkinson, Chairperson
Rockport Board of Selectmen


Donald J. Campbell, Vice Chair
Rockport Board of Selectmen


Wilhelmina Sheedy, Member
Rockport Board of Selectmen


Paul F. Murphy, Member
Rockport Board of Selectmen


Denise Donnelly, Member
Rockport Board of Selectmen

cc: Partners for Addison Gilbert Hospital
50 Washington Street, Gloucester, MA 01930

Congressman Seth Moulton
Senator Bruce E. Tarr
Representative Ann-Margaret Ferrante



The Commonwealth of Massachusetts

HOUSE OF REPRESENTATIVES
STATE HOUSE, BOSTON 02133-1054

KENNETH I. GORDON
STATE REPRESENTATIVE
21ST MIDDLESEX DISTRICT

Vice Chairman
Joint Committee on Election Laws

Committees:
Transportation
Community Development and Small Businesses
Bonding, Capital Expenditures and State Assets

STATE HOUSE, ROOM 466
TEL. (617) 722-2017
FAX. (617) 722-2837
Kenneth.Gordon@MAhouse.gov

December 14, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

Re: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

I am writing to express my support for the application proposed by Beth Israel Deaconess Medical Center, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital, to create a new high quality, lower cost, non-profit health care system in Eastern Massachusetts.

Lahey Hospital and Medical Center in Burlington is essential to the health of our district, providing high quality healthcare services to the residents of our communities in Bedford, Burlington, and Wilmington. Further, Lahey is an integral part of the region's economy as it provides hundreds of jobs.

The creation of this new system is essential to improving the health of the communities I represent, and to ensuring patients have access to comprehensive, high quality and affordable healthcare close to home. I thank you for your consideration, and respectfully urge the Department's approval of this application.

Sincerely,

Kenneth I. Gordon

cc: Nora Mann, Esq., Director, Determination of Need Program

December 15, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TOBoston, MA 02108

Dear Commissioner Bharel,

Cambridge Public Health Commission, d/b/a Cambridge Health Alliance (“CHA”), is writing to express its support for the application of the Beth Israel Deaconess Medical Center system, Lahey Health System, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital, to create a new, lower cost, high quality non-profit health care system in eastern Massachusetts (the “New System”).

As the sole acute care public hospital in Massachusetts, CHA plays an important role in the Commonwealth, delivering accessible high-value care to patients and serving as a safety net for complex, diverse, and needy populations in eastern Massachusetts. CHA’s primary service area, which consists of the metro north communities of Malden, Chelsea, Revere, Everett, and Winthrop as well as Cambridge and Somerville, is proximate to and in part overlaps the service areas of the New System. Under its single hospital license, CHA provides community level inpatient medical surgical services and extensive inpatient psychiatric services at its CHA Cambridge Hospital and CHA Everett Hospital campuses. In addition, it operates a network of primary care, behavioral health and other ambulatory clinics across its hospital campuses and 17 satellite locations.

Since 2014, CHA has been clinically affiliated with Beth Israel Deaconess Medical Center (“BIDMC”) and has been a member of and participant in the Beth Israel Deaconess Care Organization (“BIDCO”). The relationships with BIDMC and BIDCO have enabled CHA to provide comprehensive care to its patients while better controlling total medical expense. This is consistent with the statewide imperative to control medical expense and is especially important for our growing population of patients cared for under risk-based contracts. Under the clinical affiliation, BIDMC has made a commitment to CHA as a safety net provider, and, as a high value provider, BIDMC has provided the necessary access for CHA patients to specialized services and tertiary and quaternary care.

BIDMC’s continued commitment and the concomitant commitment of the New System will help ensure the continued viability of CHA and its associated vital safety net

AFFILIATED WITH:



Beth Israel Deaconess
Medical Center



Mass General Hospital
for Children



HARVARD MEDICAL SCHOOL
TEACHING HOSPITAL



HARVARD
SCHOOL OF
DENTAL MEDICINE



HARVARD
SCHOOL OF
PUBLIC HEALTH

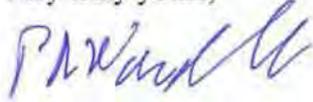


Tufts
UNIVERSITY
School of
Medicine

mission. CHA believes that, especially with the inclusion of Mount Auburn Hospital, the high value, lower cost New System is essential to improving the health of the communities CHA serves. It can ensure continued access for our vulnerable populations to high value care close to home and seamless access to tertiary and quaternary care when needed.

We respectfully urge the Department's approval of this application, and thank you for your consideration.

Very truly yours,



Patrick R. Wardell
Chief Executive Officer
Cambridge Health Alliance

Cc: Nora Mann, Esq., Director, Determination of Need Program

David and Jane Beddus
23 King Street, Rockport MA 01966

Dec 10, 2017
Dept of Public Health,
Determination of Need Program,
250 Washington Street,
6th Floor,
Boston Mass 02108

Proposed Merger Lahey/Beth Israel et al, Addison Gilbert Hospital, Gloucester

Ladies and Gentlemen,

Thank you for holding the public hearing at the Gloucester High School on Wednesday 6th December about this proposed merger.

We are Rockport residents and have many worries about this proposed merger.

1. We (the residents) have no idea what services are going to be kept or improved upon at AGH.

The Lahey CEO and paid Lahey workers, waxed lyrically about cost savings, beatification of it's workers etc. but not one word of substance about the services.

2. Any bad road condition (snow, summer traffic) slows emergency response time ... sometimes to a dead stop. In particular we need the Emergency Services to serve our fishing industry, young families, geriatrics and tourist industry.

3. Senator Bruce Tarr, Mayor Romeo Thaken (Gloucester) and Peg O'Malley all spoke eloquently about our worries at the public hearing.

4. Why are the services offered in Ipswich and Newburyport so much better than those that appear to be offered in Gloucester?

Please, on behalf of 36,000 all-year-round residents and the 20,000 summer residents, ask Lahey/Beth Israel just what services are going to be provided at AGH and ask them to write them down.

If we will receive service parity with the other hospitals, I think the merger will be good for our island.

We have faith that your Department will look after our health and safety.



David and Jane Beddus 23 King Street, Rockport, MA 01966. Beddus@aol.com Tel: 978-223-0340

SAT. 12/16/17



Lou Zimon
10 Dale Ave Apt 506
Gloucester, MA 01930

TO THE MASS. DEPT. OF
PUBLIC HEALTH:

DO NOT ABANDON ADDISON
GILBERT HOSPITAL IN GLOUCESTER IN
YOUR UPCOMING MERGER.

I AM A 87 YEAR OLD MALE
RESIDENT OF GLOUCESTER ON A FIXED
INCOME (WITHOUT A CAR).

WHEN I NEEDED SURGERY,
I HAD TO PAY FOR A TAXI TO
BEVERLY HOSPITAL.

THIS WAS A NEEDLESSLY
STRESSFUL AND EXPENSIVE SITUATION
ON TOP OF THE SURGERY ITSELF.

PLEASE DO THE RIGHT THING.
DON'T THROW US UNDER THE BUS.

SINCERELY

Lou Zimon

LOU ZIMON

December 14, 2017

Determination of Need Program
Massachusetts Department of Public Health
250 Washington Street, 6th Floor
Boston, MA 02108-4603

Hello, my name is Susan Hall I am a resident of Gloucester and a Registered Nurse who has worked at Addison Gilbert Hospital. I recently went to the meeting at GHS regarding the merger being planned by Lahey. There were many management people and leaders of local programs urging that the merger be allowed, that it will be great for the community, but in no way were they able to tell us why.

I have worked at AGH since 1977 when it was a full service hospital over 130 beds multiple services. After the merger with Beverly hospital we lost obstetrics and pediatrics. Next with our merger with Lahey our surgical services have dwindled to occasional endoscopies on a monthly basis. We now only have one inpatient floor that holds 30 patients and a 4 bed ICU.

A lot of our patients are elderly with multiple issues and are in multiple times which means frequent admissions, with insurance restrictions there is financial loss in their care as repeat admissions are not covered. The more money making patients are sent up the line. Many times they are sent because they "may need" surgery but then many times they never do. This is what happened with my mother and more than once they attempted to send her up the line. This shuffling of patients makes us worry that our institution will be looked upon as unable to support its self and be closed.

I ask that any state approval of a merger between Lahey Health Systems and other health care organizations be conditional on a written condition that all eight services which must be present in the AGH building in order for it to operate a licensed emergency room must be protected and enhanced so that the people of Cape Ann and our hospital are safe in the future.

Thank you.

Sincerely,

A handwritten signature in cursive script that reads "Susan E. Hall RN". The signature is written in black ink and is positioned to the right of the word "Sincerely,".

Susan Hall, RN
43 Langsford Street
Gloucester, MA 01930

R. Scott Memhard
Gloucester City Councilor - Representing Ward 1
9 Graystone Road, Gloucester MA 01930

December 11, 2017

Massachusetts Department of Public Health
Determination of Need Program
240 Washington Street, 6th Floor
Boston, MA 02108

RE: Addison Gilbert Hospital Consolidation/Merger

Dear Sir or Madam:

The discussion regarding Addison Gilbert Hospital's Consolidation into the Lahey Health System provides an occasion to again advocate for important Cardiac Rehabilitation Services being offered here on Cape Ann.

After a very successful term, our Cardiac Rehab at AGH was sadly closed in 2010. Please see the attached correspondence to our physicians, elected officials and the press about this unfortunate termination of important, life-sustaining cardiac rehabilitation services. The only remaining option for cardiac supervised rehab & exercise is a 30 – 40 minute drive to the Lahey Outpatient Clinic in Danvers.

Thank you for your consideration at this consolidation is explored.

Sincerely,



R. Scott Memhard
Gloucester City Council- Representing Ward 1

September 20, 2010

To: Dr. Michael Arsenian & Dr. Janet Doran
Cape Ann Medical Drive
One Blackburn Center, Gloucester, MA 01930

RE: Sad Shuttering of Community Cardiac Rehab Clinic at AGH

A community of health-conscious cardiac survivors here on Cape Ann was deeply saddened by Northeast Health Systems' decision to shutter the Cardio-Pulmonary Rehab Clinic at the Addison Gilbert Hospital. We have all benefited from this program and it is a further degradation of our community hospital that it is being closed. We are writing to put a public face on its impact, as it comes upon us like a death in our collective family.

We have been grateful patients at this Clinic for years, based on referrals from our primary care physicians and cardiologists. Some members of the Clinic have been attending for ten, twelve and more years, forming lasting bonds with medical staff and other patients. The resource that the clinic at AGH has provided, with a qualified exercise physiologist overlooking our exercise regimens, checking blood pressure and heart rates, is a safe, structured environment for us to recover under supervision from heart procedures and other challenging medical issues, rebuilding strength and health. Ages at the Clinic group range from forties right through eighties, some needing oxygen while exercising, and others having blood sugar monitored due to diabetes.

Most of us at the Cardiac Rehab Clinic come at the same time of day, with a group of eight to ten others, on the same schedule three times a week for an hour or more of safe, structured, healthy workout. Good diet, reduction of stress, and weight control are all regular goals and topics. Sometime the supervising exercise physiologist will send one of us home, to the doctor, or right downstairs to the emergency room because we haven't taken our prescribed medications, or our blood pressure, heart rate, or blood sugar level is not on par. Occasionally one in the group has had a cardiac event while on the exercise bike or treadmill - Code Red! - and fortunately the AGH hospital ER staff was close at hand, and in the exercise room within minutes.

This clinic truly has been a health community, especially important for those living alone or struggling with fading health and aging bodies. It occupies one small room at the hospital, with a dozen pieces of equipment, placed so that we face each other and can talk as we exercise. An important, life-supporting element of the Clinic has been the friendships, lively conversation about art, music, travel and current events, social activities and performances in the local community, and personal support, sharing home garden produce, fresh eggs, favorite recipes, and family news, as well as concerns about health care, doctors, flu and coumadin clinics. Such conversations make the treadmill miles fly by more quickly than any TV station.

Why is this beneficial health maintenance program in our community hospital being closed? If only it was because we were all so healthy

as we age that we did not need it any longer - but no, it is because of needed "financial efficiencies", and because the doctors and medical professionals don't have incentives to actively refer candidate patients to the Rehab program, keeping the enrollment up, and the hospital consequentially doesn't make enough money with it, like they do with medical procedures such as coronary bypass surgeries, angioplasty and defibrillator implants. Paradoxically, we live in an isolated community where the Cape Ann Medical Center physicians are employees of one health care provider, Partners Community Healthcare, that financially competes against Addison Gilbert Hospital's parent Northeast Health Systems corporation, undermining any financial incentive to promote and maintain our local Cardiac Rehab program.

There was an article in the Boston Globe in January, "The Beat Goes On" by reporter Kay Lazar, documenting how programs like our Cardiac Rehab at AGH really work, significantly increasing patients' health and survival rates, but are being closed down nonetheless. We posted this article on the wall in our clinic, and discussed it as we exercised. Our staying healthy saves the "system" money in the big picture, but the hospital, health insurance companies, and politics of state and federal government subsidies don't, apparently, see enough profits to keep us and such health programs alive. It's a shame to lose it.

Signed: Scott Memhard, Graystone Road, Gloucester
Angela Libro, 16 Commonwealth Avenue, Gloucester
Adele Q Ervin, Manchester, MA
Stanley Feener, 16 Macomber Road, Gloucester
Seraphina Cranston, 9 Brightside Avenue, Gloucester
Norman Hersey, Normand Ave, Manchester
Lucy Russo, Gloucester
Charlotte U. Smith, Rockport
Oliver Balf, Cove Hill Lane, Rockport
Adam Pool, 16 Story Street, Rockport
Robert A. Walters, Jr, Rockport
Frederick H. Brigham, Essex
Clif Hayes, Rockport
Muriel A Lovasco, 8 High Popplies, Gloucester
Catherine Talty, Gloucester
Bill Chapin, Gloucester
Nancy Rossi, 177 Thatcher Road, Rockport

To:
Boston Globe, Kay Lazar
Globe North - Steve Rosenberg
Gloucester Daily Times, Ray Lamont, Jonathan L'Ecuyer
Cape Ann Beacon
Good Morning Gloucester Blog
CA Chamber

Mayor Kirk, mkirk@gloucester-ma.gov ; sduggan@gloucester-ma.gov
City Council, sefigiam62@aol.com cefigiam62@aol.com
pxhymott@gloucester-ma.gov pxhymott@gloucester-ma.gov
weather.vano@verizon.net weather.vano@verizon.net
btobey@gloucester-ma.gov btobey@gloucester-ma.gov
pmooney@gmail.com pmooney@gmail.com

scott.brown@concast.net <scott.brown@concast.net>
jack.ferrante@verizon.net <jack.ferrante@verizon.net>
greg@gregkerry.com <greg@gregkerry.com>

Sen. Tarr, Rep. Ferrante, Bruce.Tarr@state.ma.us
Rep. Rep.Ann-MargaretFerrante@state.ma.us

Sen. Brown <http://scottbrown.senate.gov/public/index.cfm/contactme>

The Honorable Scott Brown
United States Senate
317 Russell Senate Office Building
Washington, D.C. 20510-2102

Senator John Kerry,
One Bowdoin Square
Tenth Floor
Boston, MA 02114
(617) 565-8519

Rep. Tierney Peabody Office
17 Peabody Square
Peabody, MA 01960

Dr. Janet Doran, Dr. Michael Arsenian, Jennifer Sauchuk
Liz Casinari NEHS
NEHS President Ken Hanover
Cynthia Cafasso Donaldson, VP Ancillary Services at AGE

Massachusetts Department of Public Health

Dear concerned people:

I would like to express my thoughts about the proposed hospital mergers on the North Shore. I have been a Family Physician for more than 40 years, all of it in NY State. I moved to Gloucester in 2015. My experience in New York may help guide our plans moving forward.

I started my own practice in Trumansburg, NY in 1979. Tburg is a rural village of 2000 people, 10 miles from Ithaca NY. There is only one hospital serving Ithaca and the surrounding area. The closest larger, teaching hospitals are in Binghamton and Rochester.

When I first moved, I obtained hospital admitting privileges. At that time, the hospital was called Tompkins County Hospital. It was a public hospital, owned and operated by Tompkins County and administered by the Public Health Department. At some point, perhaps 5 years later, it was privatized, changed its name to Tompkins Community Hospital, and was bought by a company for a large sum of money, and gradually transformed. The hospital was never closed, but it underwent a major transformation, and was ultimately replaced by a more modern facility.

The transition was difficult in many ways, which I needn't describe here. But there is much that is relevant. The first CEO was a highly respected surgeon who had an MPH, and resigned from the staff in order to work in administration full-time. When he was replaced by CEOs with careers in hospital administration, morale went downhill. So whoever does administration on the North Shore would do well to keep a

pulse on the wants and needs of the people who provide the care, and ease the unfortunately necessary bureaucratic demands upon the nurses and doctors. "Quality assurance" should not necessitate extra work for clinical nurses, who already work long hours for inadequate pay, and are often persuaded to give, give, give. The ICU nurses sued the corporation successfully for union-busting, but unfortunately many of the best nurses had already left to find better positions elsewhere.

The heart of the matter here on the North Shore seems to be the issue of hospital services. There are some services which should clearly remain at AGH, (where I am a regular patient, but not a provider). If AGH is to remain the community hospital for Gloucester and Rockport, and not become just an outpatient clinic, some services clearly need to be maintained. Proximity to family for visiting must be taken into account. Basic inpatient medicine, surgery, pediatrics, and OB-GYN are all necessary to the provision of quality care within our community. Some other services could reasonably be consolidated. For example, MRIs are not emergency procedures, and could be done in one or two facilities only, while AGH should have a CT scanner on site.

The ICU is a more difficult issue to grapple with. It can provide very sophisticated care, which need not be duplicated. Patients on mechanical ventilation might be a case in point. On the other hand, a "step-down unit," when patients come off the machine, but are not yet ready for a regular medical floor, could safely be closer to their loved ones, at AGH.

Yet another conundrum would be how to keep a few beds available for special services which could be provided in various different places. I am thinking of Hospice and Palliative

Care, which is a particular interest of mine. These could be "swing beds," available for the basic med/surg/peds /OB services if and when there are no hospice patients in house.

There's a lot to think about. Obviously my main concern is what's best for my patients. There are other considerations, logistical and financial, which must be taken into account. But it's important to prevent those issues from becoming the major, or heaven forbid, the only focus in this process.

If you think it would be helpful, I would be happy to speak with you in person about these issues.

Yours truly,

Eric Lessinger, MD

Eric Lessinger MD

JCHE

JEWISH COMMUNITY
HOUSING FOR THE ELDERLY

December 5, 2017

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President & CEO
Amy Scheetman

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Irma Schretter
Bill Shaevel

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Paul Rosenberg
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Harold Stahler
Harold Tubman

30 Wallingford Road
Brighton, MA
02135-4753

Tel 617-912-8400
Fax 617-912-8489

jche.org

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-

Dear Commissioner Bharel,

I am writing to express my support for the application of the Beth Israel Deaconess Medical Center system, Lahey Health System, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital, to create a new, lower cost, high quality non-profit health care system in Eastern Massachusetts.

I am President & CEO of Jewish Community Housing for the Elderly (JCHE). We own and operate 1200 units of affordable housing for seniors, with an extensive array of programs and services designed to give our residents the opportunity for a full life of connection and purpose in a dynamic, supportive environment. A key element of our strategic plan is to integrate housing and healthcare to better support our residents in their desire to remain in housing for their full lives. We see an integrated BIDMC network as supportive of that goal.

We have 4 campuses—one in Brighton, two in Newton, and one in Framingham. We are under construction for an addition 61 units adjacent to our Brighton campus, and next year we expect to begin construction on a new 62-unit building in Brookline for our fifth campus. Many of our current (and no doubt future) residents are patients of BIDMC and are extremely happy with the quality of care at the hospital. They depend on it.

We believe that the creation of this high value health care system is essential to preserving the health of our community, and to ensuring continued access to high quality, affordable health care close to home and seamless access to care when needed.

We respectfully urge the Department's approval of this application, and thank you for your consideration.

Very truly yours,


Amy Scheetman
President & CEO

cc: Nora Mann, Esq., Director, Determination of Need Progra



Ulin House Leverthal House Kurlat House Golda Meir House Coleman House Shillman House



The Commonwealth of Massachusetts
MASSACHUSETTS SENATE

SENATOR JOSEPH A. BONCORE
First Suffolk and Middlesex District

STATE HOUSE, ROOM 112
BOSTON, MA 02133-1053
TEL. (617) 722-1634
FAX (617) 722-1076

JOSEPH.BONCORE@MASENATE.GOV
WWW.MASENATE.GOV

Chairman
JOINT COMMITTEE ON HOUSING
Vice Chairman
JOINT COMMITTEE ON HEALTHCARE FINANCING
AND
JOINT COMMITTEE ON TRANSPORTATION
FINANCIAL SERVICES
GLOBAL WARMING AND CLIMATE CHANGE
REVENUE

December 5, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

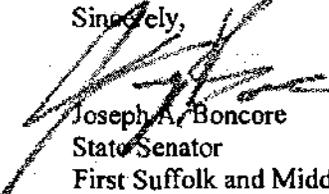
Dear Commissioner Bharel,

I am writing to express my support for the application of the Beth Israel Deaconess Medical Center system, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital, to create a new, lower cost, high quality non-profit health care system in Eastern Massachusetts.

The approval of this application is essential to the future of Beth Israel, and to ensure continued access to affordable health care in the communities I represent.

The project is consistent with the Commonwealth's goals of improving the health status and quality of life for individuals and families throughout our Commonwealth; of ensuring continued access to affordable, high quality care close to home, and seamless access to tertiary and quaternary care when needed; and assisting the Commonwealth in meeting its short and long-term cost containment goals. I thank you for your consideration, and respectfully urge the Department's approval of this application.

Sincerely,


Joseph A. Boncore
State Senator
First Suffolk and Middlesex

cc: Nora Mann, Esq., Director, Determination of Need Program



The Commonwealth of Massachusetts

HOUSE OF REPRESENTATIVES
STATE HOUSE, BOSTON 02133-1054

THOMAS J. CALTER
STATE REPRESENTATIVE
12TH PLYMOUTH DISTRICT

STATE HOUSE, ROOM 448
Tel: (617) 722-2450
Fax: (617) 722-2353

DISTRICT OFFICE
10 CORDAGE PARK CIRCLE, SUITE 233
PLYMOUTH, MA 02360
TEL: (508) 732-0034

December 6, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

I am writing to express my support for the application of the Beth Israel Deaconess Medical Center system, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jacques Hospital, to create a new, lower cost, high quality non-profit health care system in Eastern Massachusetts.

As you know, Beth Israel Deaconess Hospital-Plymouth is a critical provider in my community, providing a full-range of acute hospital care, 24/7 emergency department care, and a range of important outpatient and community health care services for the benefit of all patients in the Greater Plymouth area – regardless of their insurance status or ability to pay. In addition, BID-Plymouth is an important employer, providing more than 1,800 jobs in our region.

The approval of this application is essential to the future of BID-Plymouth and to ensure continued access to affordable health care in the communities I represent. This new system will support the Commonwealth's goals of improving the health status and quality of life for individuals and families and of ensuring continued access to affordable, high quality care close to home, and seamless access to tertiary and quaternary care when needed.

I thank you for your consideration, and respectfully urge the Department's approval of this application.

Sincerely,

Thomas J. Calter
State Representative
12th Plymouth District

cc: Nora Mann, Esq., Director, Determination of Need Program



Beth Israel Deaconess Hospital
Plymouth

December 5, 2017

275 Sandwich Street
Plymouth, MA 02360

508-746-2000 Phone

508-830-1131 Fax

bidplymouth.org

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

I'm writing to express my support for the application of the Beth Israel Deaconess Medical Center system, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jacques Hospital to create a new, lower cost, high quality non-profit healthcare system in Eastern Massachusetts.

In January 2014, the former Jordan Hospital, now BID-Plymouth, joined the Beth Israel Deaconess family of hospitals to provide more than 250,000 individuals in our service area with new and enhanced clinical services, programs, and access, when needed, to specialists at Beth Israel Deaconess Medical Center.

Our strong partnership with the BID system has resulted in a number of benefits to the community of patients we serve as well as our hospital.

Almost immediately upon joining with BIDMC, specialists from Boston began working side-by-side with our physicians, nurses, and employees to provide clinical support and collaboration in Cardiology, Critical Care, Emergency Medicine, Neonatology, Radiation Oncology, and TeleStroke care, to name a few.

For our patients, this means that they receive high-quality, low cost care without the drive to Boston.

And, as a direct result of being part of the Beth Israel Deaconess system of care, we have seen a steady increase over the last three years in patients coming to BID-Plymouth for inpatient and outpatient care.

Since 2014, our inpatient volume has grown by 23% and our outpatient volume has grown by 10%. The growth is from patients who were going to other high cost hospitals and healthcare providers outside of our service area.

Looking ahead to the near future, the creation of the new healthcare system is essential to the future of Beth Israel Deaconess Hospital-Plymouth and to ensure continued access to affordable healthcare in the communities we serve throughout the South Shore and Cape Cod.

It is our view at Beth Israel Deaconess Hospital-Plymouth that the proposed new healthcare system is consistent with the Commonwealth's goals of improving the health status and quality of life for individuals and families throughout Massachusetts; of ensuring continued access to affordable, high quality care close to home, and seamless access to tertiary and quaternary care

when needed; and assisting the Commonwealth in meeting its short- and long-term healthcare cost containment goals.

I thank you for your time, your consideration, and I ask the Massachusetts Department of Public Health to support and approve the application.

Very truly yours,



Kevin Coughlin
President & CEO

cc: Nora Mann, Esq., Director, Determination of Need Program



Beth Israel Deaconess Hospital
Plymouth

December 5, 2017

275 Sandwich Street
Plymouth, MA 02360

508-746-2000 Phone

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bidplymouth.org

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

I'm writing to express my support for the application of the Beth Israel Deaconess Medical Center system, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jacques Hospital to create a new, lower cost, high quality non-profit healthcare system in Eastern Massachusetts.

Thousands of patients and their family members come through our doors to receive outstanding, safe, and high-quality healthcare that is also affordable. For us, joining the BID family of hospitals has been a huge benefit for the patients we care for every day.

Our nurses and physicians collaborate with BIDMC physicians on a daily basis to provide life-saving interventions for patients. From TeleStroke with BIDMC neurologists to BIDMC specialists in cardiology, radiation oncology, critical care, and neonatology, the collaboration with Beth Israel Deaconess Medical Center has transformed how we deliver care to the region and continues to make a positive difference in the thousands of lives we care for at BID-Plymouth.

Regarding community outreach, we implemented a unique behavioral health and substance use collaborative that is saving lives and families impacted by the Commonwealth's opioid crisis. Our program at BID-Plymouth serves as a best-practice for how other hospitals and healthcare systems across Massachusetts, and the nation, can develop similar programs.

In terms of patient care, our patient satisfaction scores have increased dramatically over the last three years. Much of the success of our patient satisfaction scores is connected to being part of Beth Israel Deaconess Medical—a teaching affiliate of Harvard Medical School.

Daily, we hear from our patients and their family members how different the former Jordan Hospital is now that we are part of Beth Israel Deaconess. We've always provided our community with great care. Being part of a larger system offers our patients access to even greater care with top-notch specialists from Boston all provided close to where our patients live and work.

Patients across Massachusetts want high-quality, affordable healthcare that's provided close to home. The creation of the proposed health system will further benefit patients beyond Boston with more clinical options provided by a system that is focused on its patients and providing great care, with high patient satisfaction scores, and at an affordable price.

We believe that the proposed new healthcare system is consistent with the Commonwealth's goals of improving the health status and quality of life for individuals and families throughout Massachusetts; of ensuring continued access to affordable, high quality care close to home, and

seamless access to tertiary and quaternary care when needed; and assisting the Commonwealth in meeting its short- and long-term healthcare cost containment goals.

I thank you for your time, your consideration, and I ask the Massachusetts Department of Public Health to support and approve the application.

Very truly yours,

A handwritten signature in black ink that reads "Donna Doherty". The signature is written in a cursive style with a long horizontal stroke at the end.

Donna Doherty, RN, BSN, MM
Vice President of Patient Care Services and Chief Nursing Officer

cc: Nora Mann, Esq., Director, Determination of Need Program



Beth Israel Deaconess Hospital
Plymouth

December 5, 2017

275 Sandwich Street
Plymouth, MA 02360

508-746-2000 Phone

508-830-1131 Fax

bidplymouth.org

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

I am writing to express my support for the application of the Beth Israel Deaconess Medical Center system, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital, to create a new, lower cost, high quality non-profit health care system in Eastern Massachusetts.

As you know, Beth Israel Deaconess Hospital-Plymouth joined the BIDMC family of hospitals in January 2014, and our partnership has resulted in a number of benefits to our hospital and the larger community. We provide 24/7 emergency care, acute care, and a range of important health care services for the benefit of our patients – regardless of their insurance status or ability to pay. The relationship has allowed us to expand our Cancer, Cardiology, Critical Care, Neonatology, and TeleStroke programs, to name a few, for the benefit of those in our service area. In addition, we are proud to employ more than 1,800 employees and clinicians and other staff.

This project is essential to the future of BID-Plymouth and to ensure continued access to affordable health care in the communities we serve.

It is consistent with the Commonwealth's goals of improving the health status and quality of life for individuals and families throughout our Commonwealth; of ensuring continued access to affordable, high quality care close to home, and seamless access to tertiary and quaternary care when needed; and assisting the Commonwealth in meeting its short and long-term cost containment goals.

I thank you for your consideration, and urge the Department's support and approval of this application.

Very truly yours,

A handwritten signature in black ink, appearing to read "Clark Hinkley".

Clark Hinkley

Chair

BID-Plymouth Board of Directors

cc: Nora Mann, Esq., Director, Determination of Need Program



The Commonwealth of Massachusetts
MASSACHUSETTS SENATE

SENATOR VINNY DEMACEDO
Plymouth and Barnstable District

STATE HOUSE, ROOM 313C
BOSTON, MA 02133-1053
TEL: (617) 722-1330
FAX: (617) 722-1010

VINNY.DEMACEDO@MASENATE.GOV
WWW.MASENATE.GOV

Ranking Member
SENATE WAYS AND MEANS

DISTRICT OFFICE
SUITE 229
10 CORDAGE PARK CIRCLE
PLYMOUTH, MA 02360
TEL (508) 747-6500

December 8, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

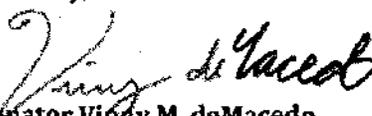
Dear Commissioner Bharel

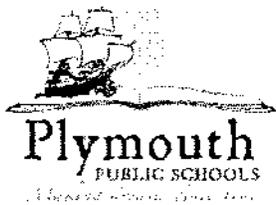
I am writing to express my support for the application of the Beth Israel Deaconess Medical Center system, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jacques Hospital to create a new, lower cost, high quality non-profit health care system in Eastern Massachusetts.

As you know, Beth Israel Deaconess Hospital-Plymouth is a critical provider in my community, providing a full-range of acute hospital care, 24/7 emergency department care, and a range of important outpatient and community health care services for the benefit of all patients in the Greater Plymouth area – regardless of their insurance status or ability to pay. In addition, BID-Plymouth is an important employer, providing more than 1,800 quality jobs in this region. I believe that my constituents stand to benefit greatly from the services that this new health care system will make accessible in our communities. This new system will allow BID-Plymouth to build on the already outstanding care they provide to the region in addition to providing streamlined access to tertiary and quaternary care when needed.

The approval of this application will provide BID-Plymouth with the opportunity to improve the quality of care available to the communities I represent and ensure continued access to excellent, affordable health care for them. I thank you for your consideration, and hope that your department will look favorably on this application. Please do not hesitate to contact me should you have any questions.

Sincerely,


Senator Vinny M. deMacedo
Plymouth & Barnstable District



Plymouth Public Schools

*Administration Offices
253 South Meadow Road
Plymouth, MA 02360*

Telephone: 508-830-4300

Fax: 508-746-1873

Web: www.plymouth.k12.ma.us



GARY E. MAESTAS, Ed.D.
Superintendent of Schools

CHRISTOPHER S. CAMPBELL, Ed.D.
*Assistant Superintendent
Administration and Instruction*

PATRICIA C. FRY
*Assistant Superintendent
Human Resources*

GARY L. COSTIN, R.S.B.A.
School Business Administrator

December 7, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel:

I am writing to express my support for the application of the Beth Israel Deaconess Medical Center system, Lahey Health System, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital, to create a new, lower cost, high quality non-profit health care system in Eastern Massachusetts.

As you know, Beth Israel Deaconess Hospital-Plymouth is a critical provider in my community, providing a full-range of acute hospital care, 24/7 emergency department care, and a range of important outpatient and community health care services for the benefit of all patients in the Greater Plymouth area – regardless of their insurance status or ability to pay. In addition, BID-Plymouth is an important employer, providing more than 1,800 jobs in our region.

The Plymouth Public Schools and BID-Plymouth partner on a variety of health and wellness programs for the thousands of school children in Plymouth. From healthy eating options, to after school wellness programs, and combating the opioid epidemic through awareness and prevention programs, our partnership is critical to our school system and students. The new, expanded healthcare system will further strengthen our shared commitment to providing services and programs that best meet the needs of our schoolchildren and their families.

The creation of this high value health care system is essential to improving the health of our community, and to ensuring continued access to high quality, affordable health care close to home and seamless access to tertiary and quaternary care when needed.

We respectfully urge the Department's approval of this application, and thank you for your consideration.

Sincerely,

Gary E. Maestas, Ed.D.
Superintendent of Schools



south cove
community health center
華人醫務中心

December 5, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108
RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

I am writing to express my support for the application of the Beth Israel Deaconess Medical Center system, Lahey Health System, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital, to create a new, lower cost, high quality non-profit health care system in Eastern Massachusetts.

For more than 45 years, South Cove Community Health Center (SCCHC) has provided exemplary care to all medically underserved in Massachusetts with a focus special focus on non-English speaking immigrant Asians. Since 1997, SCCHC has been a member of the Community Care Alliance (CCA), a health center network comprised of six community health centers that are licensed or have a clinical affiliation with Beth Israel Deaconess Medical Center.

BIDMC has been and continues to be a strong community and medical partner of the health center. There is a long history of collaboration including initiatives to improve how patient data is shared, interpreter services and efforts to improve culturally-focused and linguistically appropriate care. Our partnership is a great example of patients getting the right care, at the right time in the right location

The creation of this high value health care system is essential to improving the health of our community, and to ensure continued access to high quality, affordable health care close to home and seamless access to tertiary and quaternary care when needed.

On behalf of South Cove Community Health Center, I support and urge the Massachusetts Department of Public Health to approve this application. Thank you for your consideration.

Sincerely,

Eugene Welch
Executive Director
cc: Nora Mann, Esq., Director, Determination of Need Program

Boston Campus
Administration
145 South Street
Boston, MA 02111-2826
617.521.6713
(fax) 617.521.6799

South Street Clinic
145 South Street
Boston, MA 02111-2826
617.521.6730
(fax) 617.457.6600

Washington Street Clinic
885 Washington Street
Boston, MA 02111-1415
617.482.7555
(fax) 617.457.6600

Quincy Campus
Hancock Street Clinic
435 Hancock Street
Quincy, MA 02171-2428
617.318.3300
(fax) 617.457.6600

Holmes Street Clinic
88 Holmes Street
Quincy, MA 02171-2431
617.318.3200
(fax) 617.457.6600

Brighton/Allston
After-school
Enrichment Program
640 Washington Street
Brighton, MA 02135
617.787.1087
(fax) 617.254.4834



The Commonwealth of Massachusetts
House of Representatives
State House, Boston 02133-1054

MATHEW J. MURATORE
STATE REPRESENTATIVE
1ST PLYMOUTH DISTRICT

STATE HOUSE, ROOM 39
TEL (617) 722-2014
Mathew.Muratore@MAhouse.gov

Committees:
Tourism, Arts and Cultural Development
Health Care Financing
State Administration and Regulatory Oversight

December 6, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

I am writing to express my support for the application of the Beth Israel Deaconess Medical Center system, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jacques Hospital, to create a new, lower cost, high quality non-profit health care system in Eastern Massachusetts.

As you know, Beth Israel Deaconess Hospital-Plymouth is a critical provider in my community, providing a full-range of acute hospital care, 24/7 emergency department care, and a range of important outpatient and community health care services for the benefit of all patients in the Greater Plymouth area – regardless of their insurance status or ability to pay. In addition, BID-Plymouth is an important employer, providing more than 1,800 jobs in our region.

As a long-term Plymouth resident, former Selectman, and business owner, I have many friends and colleagues in this community. As their State Representative, I support the proposed healthcare system currently being discussed. For my constituents, they will benefit from the expanded services that will be accessible to them locally, as well as streamlined access to tertiary and quaternary care when needed.

The approval of this application is essential to the future of BID-Plymouth, to the communities I represent, ensuring continued access to excellent, affordable health care.

I thank you for your consideration, and respectfully urge the Department's approval of this application.

Very truly yours,

Representative Mathew J. Muratore

cc: Nora Mann, Esq., Director, Determination of Need Program



The Commonwealth of Massachusetts
MASSACHUSETTS SENATE

SENATOR SAL DiDOMENICO
Middlesex and Suffolk District

STATE HOUSE, ROOM 208
BOSTON, MA 02133-1053
TEL. (617) 722-1650
FAX (617) 722-1323

SAL.DiDOMENICO@MASENATE.GOV
WWW.MASENATE.GOV

December 14, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108
RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

I am writing to express my support for the application of the Beth Israel Deaconess Medical Center system, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital, to create a new, lower cost, high quality non-profit health care system in Eastern Massachusetts.

The approval of this application is essential to the future of BIDMC-Chelsea, which is an important provider in my district, and to ensure continued access to affordable health care in the communities I represent.

The project is also consistent with the Commonwealth's goals of improving the health status and quality of life for individuals and families throughout our Commonwealth and of ensuring continued access to affordable, high quality care close to home.

I thank you for your consideration, and respectfully urge the Department's approval of this application.

Sincerely,

Sal N. DiDomenico
State Senator, Middlesex and Suffolk District

cc: Nora Mann, Esq., Director, Determination of Need Program

Vice Chairman
SENATE WAYS AND MEANS
Chairman
INTERGOVERNMENTAL AFFAIRS

COMMUNITY DEVELOPMENT AND
SMALL BUSINESS
CONSUMER PROTECTION AND
PROFESSIONAL LICENSURE
FINANCIAL SERVICES
LABOR AND WORKFORCE DEVELOPMENT
ETHICS



The Commonwealth of Massachusetts

HOUSE OF REPRESENTATIVES
STATE HOUSE, BOSTON 02133-1020

DANIEL J. RYAN
STATE REPRESENTATIVE

2ND SUFFOLK DISTRICT
STATE HOUSE, ROOM 33
TEL. (617) 722-2060
DAN.RYAN@MAhouse.gov

December 15, 2017

VICE CHAIR
JOINT COMMITTEE ON MENTAL HEALTH,
SUBSTANCE USE AND RECOVERY

COMMITTEES:
JOINT COMMITTEE ON VETERANS
AND FEDERAL AFFAIRS
JOINT COMMITTEE ON TRANSPORTATION
HOUSE COMMITTEE ON POST AUDIT
AND OVERSIGHT

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

I write in support of Beth Israel Deaconess Medical Center System, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital and their application to create a new, lower cost, high quality non-profit health care system in Eastern Massachusetts.

In Chelsea, Beth Israel Deaconess Healthcare offers access to important services including: urgent care, primary care, and outpatient services. Patients can also receive physical therapy; cardiovascular, bone density, and gynecologic care right in their own community. A merger amongst the entities mentioned, will provide an opportunity to further strengthen our community hospitals. Locations such as Beth Israel Deaconess Healthcare-Chelsea, will be able to further extend patient access to primary and specialty care, regardless of insurance status or ability to pay. By providing another alternative to employers and consumers in the health care market, this merger would also help the Commonwealth meet its health care cost-containment goals.

The approval of this application is essential to the future of Beth Israel Deaconess Healthcare-Chelsea. This project will ensure continued access to affordable, high quality health care close to home, and seamless access to tertiary and quaternary care when needed. Meeting these needs will assist the Commonwealth in meeting its short and long-term cost containment goals.

Thank you for your attention to this matter. If I can be of any further assistance please do not hesitate to contact me, or Sean Getchell in my office (sean.getchell@mahouse.gov), (617) 722-2060.

Respectfully,

Representative Daniel J. Ryan
2nd Suffolk District

cc: Nora Mann, Esq., Director, Determination of Need Program

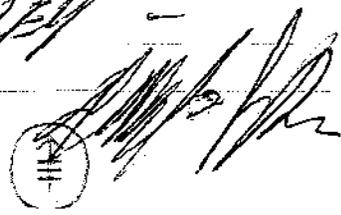
Mr. Douglas J. Ross

10 CHARLESTON ST.

BROUDESTER MA.

REGARDING THE
ADDISON WILBERT
MERBER -

I AM A SENIOR
CITIZEN AND
HAVE WORKED
WITH MS. PERRY
O'MALLEY -





file photo

Gloucester's Addison-Gilbert Hospital is one of the North Shore facilities that would be affected by the merger of Lahey Health, Beth Israel Deaconess, New England Baptist, Mount Auburn and Seacoast Regional.

Lives depend on Addison Gilbert

Peggy O'Malley

These are edited comments I delivered to the staff of the Massachusetts Department of Public Health at the Dec. 6 hearing on the proposed merger of Lahey with Beth Israel Deaconess and several other organizations:

I'm a registered nurse and live in Gloucester, which, with Rockport, makes up Cape Ann, the home of 37,000 people year-round, a number that doubles in summer. Our community is significantly older and suffers from more serious chronic illnesses than state averages. We also have more residents without access to a car.

Most significantly, most of us in Gloucester, and everyone in Rockport, live on an actual island surrounded by the North Atlantic Ocean with just two bridges leading in and out. Both can and do become completely blocked due to weather conditions, bridge malfunctions, traffic conditions and accidents. An ice storm can make the steep grade of the Route 128 bridge impassable. Near that bridge, Route 128 falls to sea level, a stretch that comes close to flooding with super high tides. Storm surges and rise in sea levels pose even greater risks that we will be completely isolated. We have to be self-sufficient. And so does our hospital, Addison Gilbert.

These are the reasons we say, without exaggeration, that our lives depend upon the Massachusetts Department of Public Health placing a binding condition on its approval of this merger that the new corporation (called NEWCO in merger documents) be required, at a minimum, to guarantee

in writing and indefinitely what the DPH has ruled since 1984: that all eight "minimum services that must be in a hospital building as a precondition for the authorized provision of emergency services at that site" will be at Addison Gilbert.

One of those is "surgical services which are immediately available for life-threatening situations." This has not been available at AGH for a long time. Surgical teams cannot function appropriately in life-threatening emergencies if they do not work together on a routine basis. We need NEWCO to recruit Gloucester-based surgeons and anesthesia staff, and restore surgical equipment at AGH. It is unconscionable that a Cape Ann resident with life-threatening injuries, who should be in an operating room in Gloucester, is instead placed in an ambulance to Beverly or Burlington.

Another of the eight services is critical care beds. Our Cape Ann cardiologist/intensivist is the only physician available to staff our ICU 24/7. On a Friday afternoon this summer, nurses reported that managers planned to close our ICU for the entire weekend because they couldn't find nurses to staff it. Ultimately the decision was reversed but it indicated another risk Beverly/Lahey was willing to take with our lives.

This proposed merger will include eight community hospitals. All of them, even the smallest, have a broader array of acute care services, including surgery, than have been at AGH for many years. At Beth Israel Deaconess Needham, a hospital with a comparable number of beds as AGH and located closer to Beth Israel Deaconess in Boston than AGH is to Beverly, a

new inpatient wing is being constructed and surgery is routine. In Milton, even closer to Boston, Beth Israel Deaconess provides innovative robotics surgery and a state-of-the-art spine center. Beth Israel Deaconess clearly sees the wisdom, both clinically and financially, of providing the highest quality care closest to where the patients live.

Cape Ann residents deserve the same sense of safety that people who live in Needham, Milton, Newburyport, Winchester, and Plymouth whose hospitals will also be in NEWCO enjoy. Consider that in every one of those communities, if access to one hospital is blocked, people can turn around and go in another direction to the next nearest facility. That's not possible for the people of Cape Ann. There's only one way out.

The protection and restoration of acute care services at AGH requires binding conditions placed by the Department of Public Health on the approval of this merger that guarantee that all eight services required to operate an emergency room be protected and restored at Addison Gilbert Hospital. Without that, AGH services will continue to decline and Cape Ann people suffer unnecessary harm and death.

Cape Ann residents should submit written comments to the state on this proposed merger. The deadline is 5 p.m. Dec. 18. Send them by mail to Massachusetts Department of Public Health, Determination of Need Program, 250 Washington St., 6th Floor, Boston, MA 02108. Or email to dph.don@state.ma.us.

Registered nurse Peggy O'Malley leads the non-profit Partners for Addison Gilbert.

12-16-2017

Massachusetts Department of Public Health,
Determination of Need Program
250 Washington Street
6th Floor
Boston, Ma 02108

I'm a concerned Cape Ann resident, living in Gloucester, and I presently use Lahey Health, through Addison Gilbert Hospital and their clinic in Peabody.

My concerns are as follows; often my experience with healthcare provider mergers cause me great anxiety, because the bean counters only look at what's good for them, not what's necessarily good for the community. If the community is to benefit at all, it's usually by happenstance not by design. After the last merger North shore Healthcare with Lahey, several years ago, Lahey's CEO promised that Addison Gilbert would be made stronger, and he for the most part delivered on that promise. However that was because we in Gloucester had to insist through our primary care providers that we be allowed to receive procedures available at Addison Gilbert, at Addison Gilbert, rather than being sent to Beverly, Peabody or Burlington. You see during that merger all of a sudden simple things like a blood test were being scheduled out of town even though Addison Gilbert had it's own Lab. Then when Lahey started scaling back services that were always available locally, they (Lahey), justified it by saying everyone was going to Beverly, Peabody and Burlington. It was only because they were scheduling these procedures out of town for patients with no input from the patient, or advising the patient those services were available locally. Only talking with and complaining to my doctor did I find out that I could request the procedures locally, that information was never given voluntarily.

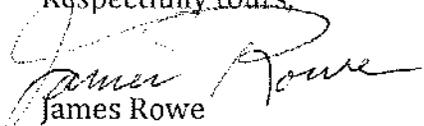
We have no bus service off the Cape to Beverly, Peabody or Burlington hospitals; we have no trains or subways that bring you to those locations. This Cape is total gridlock in the summer months, one bridge the Blyman Canal Bridge, is a draw bridge and priority is given to boat traffic by federal regulation. The 128 Bridge over the Annisquam River is impassable sometimes even in the winter. The Blyman Bridge is out for hours a lot, and on one occasion recently the Blyman Bridge was broken, all traffic was routed over 128, and that bridge caught fire and no one could get on or off the island. Does it make sense to diminish services for an Island community?

Often no consideration is given to the transportation hardships, financial stress or other factors as it relates to the patients, yes the customers of these hospitals. This is a mega merger, I would hope and I will most certainly pray that you people in a position to represent we the people during this review process, will offer due diligence on our behalf, and place restrictions, conditions or other remedies to ensure our community hospital remains viable, and services are continued and enhanced should you allow this merger.

We here on Cape Ann deserve no less than what Boston has to offer. Look around and you can only be mystified, and mesmerized by the concentration of services, as it relates to our Health care. There seems to be little diversification of services and locations as these mergers continue to shutter doors of hospitals and clinics so vital to the wellness of our communities.

Thank you for your time and thank you for taking our comments, serious.

Respectfully yours,


James Rowe
58 Cherry St
Gloucester M.A



The Commonwealth of Massachusetts
MASSACHUSETTS SENATE

SENATOR CINDY F. FRIEDMAN
Fourth Middlesex District

STATE HOUSE, ROOM 413D
BOSTON, MA 02133-1053

TEL: (617) 722-1432
FAX: (617) 722-1004

CINDY.FRIEDMAN@MASENATE.GOV
WWW.MASENATE.GOV

Chair
JOINT COMMITTEE ON PUBLIC SERVICE

JOINT COMMITTEE ON LABOR AND
WORKFORCE DEVELOPMENT

JOINT COMMITTEE ON MENTAL HEALTH,
SUBSTANCE USE AND RECOVERY

November 17, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel:

On behalf of the communities in the Fourth Middlesex district, including Arlington, Billerica, Burlington, Lexington, and Woburn, I am writing to express my support for the application proposed by Beth Israel Deaconess Medical Center, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital to create a new non-profit health care system to better meet the needs of residents throughout eastern Massachusetts.

Lahey Health plays a critically important role in the district that I represent. Lahey provides high quality, cost-effective health care services to members of our community and the region. It employs more than 13,000 people across all its facilities – 4,500 at the Burlington campus alone – affording many of my constituents the chance to work close to home. It has also been an important community partner in efforts to increase access to prevention and wellness programs. The proposed new health system will provide significant benefits to the residents of the Fourth Middlesex and the entire region – expanding access to community-based primary care and behavioral health care, increasing the availability of a range of specialists, and providing greater opportunity for economies of scale and innovations in service delivery to help control rising health care costs.

On behalf of the residents of the Fourth Middlesex, I urge you to approve this application. Thank you for your consideration.

Sincerely,

Cindy F. Friedman
Fourth Middlesex



Mystic Valley *Elder Services*

www.mves.org
info@mves.org
781-324-7705

November 22, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

I am writing to express my support of the creation of the new health system proposed by Beth Israel Deaconess Medical Center, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital.

Our non-profit agency provides home- and community-based services for older adults, adults living with disabilities and their caregivers in a service area that overlaps with Winchester Hospital and Lahey Health's current service area. Working together, we have expanded outreach to elders suffering from mental health challenges through our Mobile Mental Health Outreach team. Additionally, we have partnered to improve the transition home from the hospital for elders through our Care Transitions program.

Winchester Hospital and Lahey Health hospitals work with many other community organizations like ours to identify the health and wellness needs of our community and deliver programs that reach those most vulnerable. The creation of this new health care system is essential to ensuring this work continues and that residents and families in need have access to the health care and support services they need.

We respectfully urge the Department's approval of this application, and thank you for your consideration.

Very truly yours,


Daniel J. O'Leary
Executive Director

cc: Nora Mann, Esq., Director, Determination of Need Program



TOWN OF NEEDHAM

TOWN HALL
1471 Highland Avenue
Needham, MA 02492-2669

Office of the
BOARD OF SELECTMEN

TEL: (781) 455-7500
FAX: (781) 449-4569
TDD: (781) 455-7558

November 28, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

We are writing to express our support for the application of the Beth Israel Deaconess Medical Center system, Lahey Health System, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital, to create a new, lower cost, high quality non-profit health care system in Eastern Massachusetts.

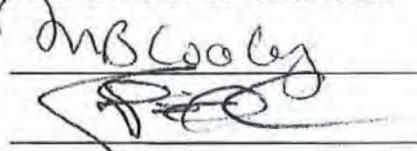
The Board of Selectmen values the partnership Beth Israel Deaconess Hospital-Needham offers to the community, reinforcing the ongoing and critical importance of the hospital to the health status and quality of life in Needham and surrounding communities.

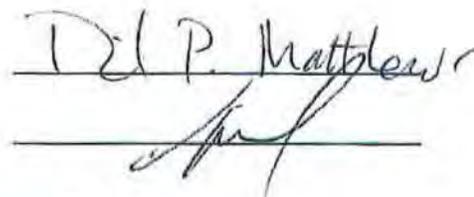
The creation of this high value health care system is essential to improving the health of our community and to ensuring continued access to high quality, affordable health care close to home and seamless access to tertiary and quaternary care when needed.

We respectfully urge the Department's approval of this application, and thank you for your consideration.

Very truly yours,

SELECTMEN OF NEEDHAM





cc: Nora Mann, Esq., Director, Determination of Need Program



CITY OF PEABODY
DEPARTMENT OF HEALTH AND HUMAN SERVICES
24 Lowell Street
Peabody, Massachusetts 01960
(978) 538-5926
Fax: (978) 538-5990

BOARD OF HEALTH
BERNARD H. HOROWITZ, CHAIRMAN
THOMAS J. DURKIN III
LEIGH ANN MANSBERGER, MD, MPH

SHARON CAMERON
DIRECTOR

November 28, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

I am writing to express my support of the creation of the new health system proposed by Beth Israel Deaconess Medical Center, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital.

Over the years, the Peabody Health Department has worked closely with Lahey Hospital & Medical Center on a number of initiatives to improve the well-being of our residents. The community health needs assessment undertaken by Lahey biannually provides us with very useful data to guide our local priorities. Lahey also provides us with clinical expertise through the assignment of one of its clinicians to serve as our City Physician. In addition to clinical and technical support, Lahey has also provided financial support for a variety of local initiatives, including, among others: homes sharps disposal program; capital and operating funds to support the Student Health Center at Peabody Veterans Memorial High School; funding for a maternal home visiting program; funding for school-based anti-bullying programs; and funding for post-overdose outreach teams.

Lahey Hospital & Medical Center has worked closely with the City of Peabody to identify the health and wellness needs of our community and to deliver programs that reach those most vulnerable. It is our hope that this this new health care system will build upon those successes and ensure that residents of our community have expanded access to a wide variety of specialized health care and support services close to home.

Thank you for your consideration.

Sincerely,

Sharon Cameron
Director of Health and Human Services
City of Peabody

cc: Nora Mann, Esq., Director, Determination of Need Program



The Commonwealth of Massachusetts

HOUSE OF REPRESENTATIVES
STATE HOUSE, BOSTON 02133-1054

JERALD A. PARISELLA
STATE REPRESENTATIVE
8TH ESSEX DISTRICT
BEVERLY

Chair
Joint Committee on Public Service

STATE HOUSE, ROOM 156
TEL. (617) 722-2240
Jerald.Parisella@MAhouse.gov

December 5, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE; Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

I write this letter in support of the application filed by Beth Israel Deaconess Medical center, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jacques Hospital, to create a new high quality, low cost, non-profit health care system in eastern Massachusetts.

Lahey Health is a critical partner in the district that I represent, as it operates Beverly Hospital, my community's largest employer. Lahey has continuously provided high quality health care services to the residents of Beverly and the North Shore and is responsible for some 2,000 jobs in the area. This proposal will be beneficial to our region for two reasons: first, by aligning its capabilities under an ACO model, it will provide consumers access to coordinated care for a variety of medical services; second, it will help to lower cost because it will offer consumers with a high value alternative.

The creation of this new system is vital to making our community healthy and ensuring that patients have access to the best healthcare. I want to thank you for your consideration and respectfully ask that you urge the department's approval of this application.

Should you have any questions or concerns please do not hesitate to contact my office at 617-722-2240.

Sincerely,

A handwritten signature in blue ink that reads "Jerald A. Parisella".

Jerald A. Parisella
State Representative

cc: Nora Mann, Esq., Director of Determination of Need Program



December 5, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington St., 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel:

I am writing to express my support for the application of the Beth Israel Deaconess Medical Center System, Lahey Health System, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital, to create a new lower cost, high quality non-profit health care system in Eastern Massachusetts.

The Hyde Square Task Force is a 25-year-old community-based non-profit based in Jamaica Plain. We serve over 1,000 predominantly low-income youth in a variety of arts/culture, college prep/success and civic engagement programs each year. BIDMC has been supporting Hyde Square Task Force for several years in a variety of ways including: giving financial support, providing career education program for teens, and placing volunteers who have served on the Construction Committee of our renovated building and on our Board of Directors.

The collaborative partnership we share with BIDMC continues to illustrate and reinforce the ongoing and critical importance of BIDMC to the quality of life in our neighborhood and surrounding communities.

The creation of this high value health care system is essential to improving the health of our community and to ensuring continued access to high quality, affordable health care close to home and seamless access to tertiary and quaternary care when needed.

We respectfully urge the Department's approval of this application, and thank you for your consideration.

Sincerely,

A handwritten signature in black ink, appearing to read "Celina Miranda".

Celina Miranda, Ph.D.
Executive Director
Hyde Square Task Force, Inc.

17-11-20 11:14 JN

Chair
Campe Goodman

Vice Chair
Jane R. Matlaw

Treasurer
Robert Hughes

Secretary
Richard Yanofsky

Chair Emeritus
Mark Stein

Directors
Ilana Braun
Howard Brick
Catherine Bromberg
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Marjorie Glazer
Darren Goldman
Joseph Goodman

Stacy Goodman
Michael S. Grill*
Richard Heller
Susan Houston

Ben Inker
Rebecca Leventhal
Douglas F. Newman
Judith Obermayer*

Craig Powell
Jay Rosenbaum
Jennifer Rosenbaum

Ellen Segal*
Jon Simon
Gabe Sunshine
Cantor Steve Weiss
Joe Zeff

Post Board Chair

President & CEO
Jerry Rubin



SKILLS . JOBS . CAREERS

December 5, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel:

I am writing to express my support for the application of the Beth Israel Deaconess Medical Center system, Lahey Health System, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital, to create a new, lower cost, high quality non-profit health care system in Eastern Massachusetts.

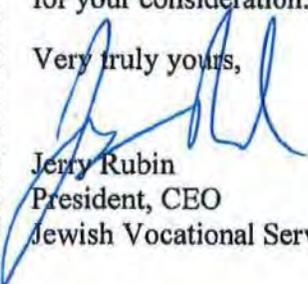
Jewish Vocational Service has partnered with Beth Israel Deaconess Hospital for nearly a decade to provide career, training, and economic opportunities for Boston-area residents and employees of the hospital. BIDMC is one of the national leaders in healthcare workforce development and is dedicated to being a stellar employer as well as a provider of outstanding healthcare services.

The community partnership we share with BIDMC continues to illustrate and reinforce the ongoing and critical importance of BIDMC to the health status and quality of life in our neighborhood and surrounding communities.

The creation of this high value health care system is essential to improving the health of our community, and to ensuring continued access to high quality, affordable health care close to home and seamless access to tertiary and quaternary care when needed.

We respectfully urge the Department's approval of this application, and thank you for your consideration.

Very truly yours,


Jerry Rubin
President, CEO
Jewish Vocational Service

cc: Nora Mann, Esq., Director, Determination of Need Program



The Commonwealth of Massachusetts

HOUSE OF REPRESENTATIVES
STATE HOUSE, BOSTON 02133-1054

MARC T. LOMBARDO
REPRESENTATIVE
22ND MIDDLESEX DISTRICT
BILLERICA

Marc.Lombardo@MAhouse.gov

STATE HOUSE, ROOM 443
TEL (617) 722-2460
FAX (617) 722-2353

November 27, 2017

Nora Mann, Esq.
Director
Determination of Need Program
Massachusetts Department of Public Health
250 Washington Street, 6th Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Director Mann,

I am writing to express my support for the application proposed by Beth Israel Deaconess Medical Center, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital, to create a new high quality, lower cost, non-profit health care system in Eastern Massachusetts.

Lahey Health is essential to the health of our district, providing high quality care health care services to members of our community and hundreds of jobs in our region. The Town of Billerica, 22nd Middlesex is located 6 miles to the northwest of neighboring Burlington.

The creation of this new system is essential to improving the health of the community I represent, and to ensuring patients have access to comprehensive, high quality and affordable health care close to home. I thank you for your consideration, and respectfully urge the Department's approval of this application.

Sincerely,


MARC T LOMBARDO
State Representative

Cc: Monica Bharel, Commissioner, MA Department of Public Health



Riverside Center
275 Grove Street, Suite 3-300
Newton, MA 02466-2275
617-559-8000 tel
617-559-8099 fax

www.atrusheralth.org

December 5, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
Determination of Need Program
250 Washington Street, 6th Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413

Dear Commissioner Bharel:

I am writing on behalf of Atrius Health to express our strong support for the pending application of the Beth Israel Deaconess Medical Center System, Lahey Health System, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital, to create a new, lower cost, high quality non-profit health care system in Eastern Massachusetts.

Atrius Health is an innovative nonprofit healthcare leader, delivering an effective system of connected care for more than 740,000 adult and pediatric patients in eastern and central Massachusetts. Atrius Health's 34 medical practices, with more than 50 specialties and 900 physicians, work together with the home health and hospice services of its VNA Care subsidiary and in close collaboration with hospital partners, community specialists and skilled nursing facilities. Atrius Health provides high-quality, patient-centered, coordinated care to every patient it serves. By establishing a solid foundation of knowledge, understanding and trust with each of its patients, Atrius Health enhances their health and enriches their lives.

First, these are outstanding hospitals that we know well. It is important to the community they continue to thrive. Atrius Health has carefully selected a limited number of high value hospitals to which we refer our patients who need care that we do not provide internally. Our alliances with Beth Israel Deaconess Medical Center System, Lahey Health System, Mount Auburn Hospital and New England Baptist Hospital are amongst the most collaborative relationships serving Atrius Health patients. In 2016 there were approximately 10,200 admissions of Atrius Health patients to these hospitals. These patients were able to benefit from integrated, coordinated care because of our work with these hospitals partners on managing transitions of care, including ensuring that post-acute services were provided by our VNA Care subsidiary or preferred skilled nursing facilities to decrease readmissions. The comprehensive integration of these hospitals will enable the development of coordinated clinical protocols with Atrius Health for avoidable ED visits and avoidable hospitalizations. It will also make for easier and more consistent deployment of new innovations, clinical protocols and collaborative patient care endeavors in areas such as reducing readmissions and moving care to lower acuity settings.

Second, we believe the creation of this new high value integrated health care system will provide opportunities to build even stronger clinical programs in key service areas. Each of these hospitals brings best practices that, if employed system-wide, will allow the new system to better support our patients as well as other patients seeking care.

Third, the creation of this integrated health care system offers opportunities to create efficiencies in back-office operations in areas like lab, purchasing, and human resources. The integrated infrastructure should accelerate the development of population management programs and other initiatives to decrease costs and medical expenses. We hope and expect the consolidation will enable keeping community hospital rates low.

Finally, the creation of another large integrated health care system in Massachusetts will result in increased competition thereby introducing more opportunity for limited network and other products, which will result in market pressure to lower costs. This would be highly beneficial to the community at large.

We respectfully urge the Department's approval of this application, and thank you for your consideration. If you have any questions or require further information, please feel free to contact me at (617) 559-8042 or contact Kathy Keough, Director of Government Relations at (617) 559-8561.

Sincerely,

A handwritten signature in black ink, appearing to read "Steven Strongwater". The signature is fluid and cursive, written over a white background.

Steven Strongwater, MD
President and CEO, Atrius Health

Cc: Nora Mann, Esq., Director, Determination of Need Program



AIDS Action Committee of Massachusetts, Inc.

75 Amory Street
Boston, MA 02119

Our mission: To stop the epidemic and related health inequities by eliminating new infections, maximizing healthier outcomes for those infected and at risk, and tackling the root causes of HIV/AIDS.

December 5, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor

RE: Application Number NEWCO-17082413-TOBoston, MA 02108

Dear Commissioner Bharel:

I am writing to express my support for the application of the Beth Israel Deaconess Medical Center system, Lahey Health System, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital, to create a new, lower cost, high quality non-profit health care system in Eastern Massachusetts.

AIDS Action Committee strives to improve the health of LGBT people and people living with HIV/AIDS. Founded in 1983, AIDS Action Committee (AAC) is New England's largest AIDS service organization. Our mission at AAC is to stop the epidemic and related health inequities by eliminating new infections, maximizing healthier outcomes for those infected and at risk, and tackling the root causes of HIV/AIDS. AAC has advocated for fair and effective AIDS policies, cutting edge HIV prevention programs, and comprehensive health and wellness services for PLWH for three decades, and we serve thousands of clients who come through our door every year.

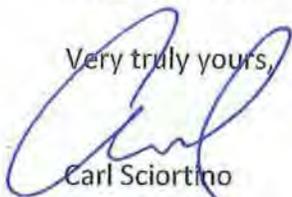
AIDS Action Committee has a unique and important relationship with Beth Israel Deaconess Medical Center. At the center of our work is the goal of care coordination for some of our community's most vulnerable clients. People living with or at risk of HIV often present to AAC with a challenging set of comorbidities. Our clients often simultaneously confront not only HIV care needs, but complexities due to homelessness, poverty, and other social determinants of health that often are obstacles to achieving good health outcomes. We partner with Beth Israel Deaconess Medical Center to coordinate care for some of these very clients. We know that by addressing the social factors of the patients being served there, through the work of our staff here, we are able to improve health outcomes, mitigate public health impacts of this infectious

disease, and reduce costs not only through the reduction of new HIV infections but also through reduced hospitalizations and ER visits.

Especially in an era of rapid evolution of our health systems, we rely on our clinical partners at Beth Israel Deaconess to provide robust health services in as streamlined a manner possible. It is our position that the application to integrate with other institutions will support our efforts in care coordination and cost reduction. The creation of this high value health care system is essential to improving the health of our community, and to ensuring continued access to high quality, affordable health care close to home and seamless access to tertiary and quaternary care when needed.

We respectfully urge the Department's approval of this application, and thank you for your consideration.

Very truly yours,

A handwritten signature in blue ink, appearing to read 'Carl Sciortino', is written over the closing 'Very truly yours,'.

Carl Sciortino
Executive Director
AIDS Action Committee

cc: Nora Mann, Esq., Director, Determination of Need Program



The Commonwealth of Massachusetts

HOUSE OF REPRESENTATIVES
STATE HOUSE, BOSTON 02133-1054

JEFFREY SÁNCHEZ

15TH SUFFOLK/NORFOLK DISTRICT
BOSTON/BROOKLINE
ROOM 243, STATE HOUSE
TEL. (617) 722-2990
FAX. (617) 722-2998

Jeffrey.Sanchez@MAhouse.gov

Chairman
House Committee on Ways and Means

December 1, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

I have had the privilege of representing Mission Hill as a State Representative for the past 14 years.

New England Baptist Hospital (NEBH) has been on Mission Hill for over 125 years. The orthopedic care that is delivered at NEBH is second to none. The hospital brings a unique strength as a specialized orthopedic and musculoskeletal institution. I know firsthand that they are committed to improving the health and well-being of those living throughout their community. NEBH provides programs for the community as well as monetary and in kind support to the residents and agencies in the community.

I appreciate the hard work that they have done in the community. For these reasons, I have and will continue to support NEBH.

Sincerely,

A handwritten signature in blue ink, appearing to be "JS", enclosed in a circular scribble.

Jeffrey Sánchez
State Representative
Fifteenth Suffolk District

cc: Nora Mann, Esq., Director, Determination of Need Program

Mission Hill Community Centers Council, Inc.

"Here to Serve the Community"



December 5, 2017
Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

I am writing to express my support for the application of the Beth Israel Deaconess Medical Center system, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital, to create a new, lower cost, high quality non-profit health care system in Eastern Massachusetts.

New England Baptist Hospital (NEBH) brings a unique strength as a specialized orthopedic and musculoskeletal institution and, combining that with the strengths of these great institutions will improve health care for those living within their communities. As a specialty referral hospital, NEBH needs the support of these major institutions in order to care for patients that need/will need orthopedic care. It is critical that NEBH join a network of hospitals that have a significant number of primary care physicians, otherwise its future will be limited with all of the changes taking place in healthcare.

As an invested stakeholder, I know firsthand that they are committed to improving the health and well-being of those living throughout their community. NEBH provides programs for the community as well as significant support to the residents and agencies in the Mission Hill community.

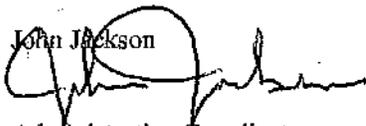
They have been a consistent supporter of the following organizations: Sociedad Latina, Roxbury Tenants of Harvard (RTH), Tobin Community Center, Mission Hill Main Streets, Mission Main Housing Development, Mission Hill Legacy Project, ABCD, Parker Hill/Fenway Service Center, Mission Hill Elementary School, Mission Church, Mission Hill Neighborhood Housing Services, Mission Hill Little League, City of Boston Parks Department (McLaughlin Field), and the Mission Link.

This project is essential to the future of NEBH, and to ensure continued access to affordable health care in the communities they serve.

I thank you for your consideration, and urge the Department's support and approval of this application. I can be reached at 617-635-5216 for any additional information.

Very truly yours,

John Jackson


Administrative Coordinator

cc: Nora Mann, Esq., Director, Determination of Need Program



December 5, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

I am writing to express my support for the application of the Beth Israel Deaconess Medical Center system, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital, to create a new, lower cost, high quality non-profit health care system in Eastern Massachusetts.

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As a long-time member of the community, Sociedad Latina knows firsthand that NEBH is committed to improving the health and well-being of those living throughout their community. NEBH provides programs for the community as well as significant support to the residents and agencies in Mission Hill.

They have been a consistent supporter of the following organizations: Sociedad Latina, Roxbury Tenants of Harvard (RTH), Tobin Community Center, Mission Hill Main Streets, Mission Main Housing Development, Mission Hill Legacy Project, ABCD, Parker Hill/Fenway Service Center, Mission Hill Elementary School, Mission Church, Mission Hill Neighborhood Housing Services, Mission Hill Little League, City of Boston Parks Department (McLaughlin Field), and the Mission Link.

This project is essential to the future of NEBH, and to ensure continued access to affordable health care in the communities they serve.

I thank you for your consideration, and urge the Department's support and approval of this application.

Very truly yours,

cc: Nora Mann, Esq., Director, Determination of Need Program

THE MISSION BAR & GRILL

December 5, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

I am writing to express my support for the application of the Beth Israel Deaconess Medical Center system, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital, to create a new, lower cost, high quality non-profit health care system in Eastern Massachusetts.

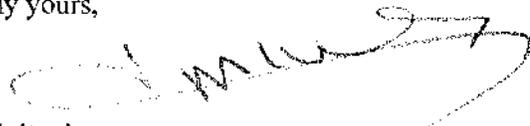
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As the proprietor of The Mission Bar & Grill in Mission Hill and a neighbor to NEBH, I know firsthand that they are committed to improving the health and well-being of those living throughout their community. NEBH provides much needed programs for the community as well as significant support to the residents and agencies in the Mission Hill community. Including; the Mission Hill Legacy Project, Roxbury Tenants of Harvard (RTH), Sociedad Latina, Mission Hill Main Streets, Tobin Community Center, Mission Main Housing Development, ABCD, Parker Hill/Fenway Service Center, Mission Hill Neighborhood Housing Services, and the Mission Link.

This project is essential to the future of NEBH, and to ensure continued access to affordable health care in the communities they serve.

I thank you for your consideration, and urge the Department's support and approval of this application.

Very truly yours,



Michel Soltani
724 Huntington Ave., Boston, MA 02115

cc: Nora Mann, Esq., Director, Determination of Need Program



December 5, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

I am writing to express my support for the application of the Beth Israel Deaconess Medical Center system, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital, to create a new, lower cost, high quality non-profit health care system in Eastern Massachusetts.

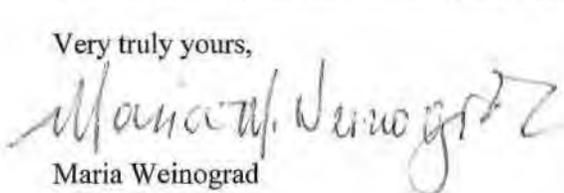
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As the proprietor of Mikes Donuts in Mission Hill and a neighbor to NEBH, I know firsthand that they are committed to improving the health and well-being of those living throughout their community. NEBH provides much needed programs for the community as well as significant support to the residents and agencies in the Mission Hill community. Including; the Mission Hill Legacy Project, Roxbury Tenants of Harvard (RTH), Sociedad Latina, Mission Hill Main Streets, Tobin Community Center, Mission Main Housing Development, ABCD, Parker Hill/Fenway Service Center, Mission Hill Neighborhood Housing Services, and the Mission Link.

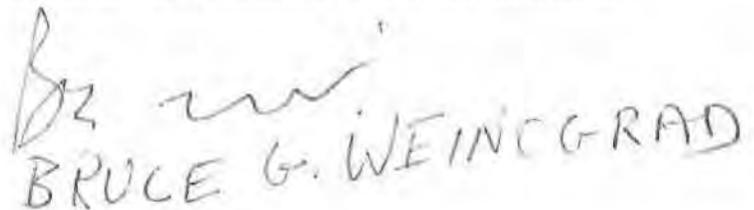
This project is essential to the future of NEBH, and to ensure continued access to affordable health care in the communities they serve.

I thank you for your consideration, and urge the Department's support and approval of this application.

Very truly yours,


Maria Weinograd
Mikes Donuts

1524 Tremont Street, Roxbury, MA 02120


BRUCE G. WEINGRAD

cc: Nora Mann, Esq., Director, Determination of Need Program



December 5, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

I am writing to express my support for the application of the Beth Israel Deaconess Medical Center system, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital, to create a new, lower cost, high quality non-profit health care system in Eastern Massachusetts.

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As the proprietor of Penguin Pizza in Mission Hill and a neighbor to NEBH, I know firsthand that they are committed to improving the health and well-being of those living throughout their community. NEBH provides much needed programs for the community as well as significant support to the residents and agencies in the Mission Hill community. Including; the Mission Hill Legacy Project, Roxbury Tenants of Harvard (RTII), Sociedad Latina, Mission Hill Main Streets, Tobin Community Center, Mission Main Housing Development, ABCD, Parker Hill/Fenway Service Center, Mission Hill Neighborhood Housing Services, and the Mission Link.

This project is essential to the future of NEBH, and to ensure continued access to affordable health care in the communities they serve.

I thank you for your consideration, and urge the Department's support and approval of this application.

Very truly yours,

A handwritten signature in black ink that reads "Dermot Doyne". The signature is fluid and cursive.

Dermot Doyne
735 Huntington Avenue, Boston, MA 02115

cc: Nora Mann, Esq., Director, Determination of Need Program

The Puddingstone Tavern

1592 Tremont Street, Roxbury MA 02120

December 5, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

I am writing to express my support for the application of the Beth Israel Deaconess Medical Center system, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital, to create a new, lower cost, high quality non-profit health care system in Eastern Massachusetts.

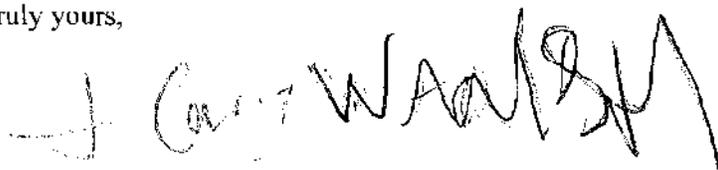
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As the proprietor of The Puddingstone Tavern in Mission Hill and a neighbor to NEBH, I know firsthand that they are committed to improving the health and well-being of those living throughout their community. NEBH provides much needed programs for the community as well as significant support to the residents and agencies in the Mission Hill community. Including; the Mission Hill Legacy Project, Roxbury Tenants of Harvard (RTH), Sociedad Latina, Mission Hill Main Streets, Tobin Community Center, Mission Main Housing Development, ABCD, Parker Hill/Fenway Service Center, Mission Hill Neighborhood Housing Services, and the Mission Link.

This project is essential to the future of NEBH, and to ensure continued access to affordable health care in the communities they serve.

I thank you for your consideration, and urge the Department's support and approval of this application.

Very truly yours,



cc: Nora Mann, Esq., Director, Determination of Need Program



M O U N T A U B U R N H O S P I T A L

December 5, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor

RE: Application Number NEWCO-17082413-TOBoston, MA 02108

Dear Commissioner Bharel,

I am writing to express my support for the application of the Beth Israel Deaconess Medical Center system, Lahey Health System, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital, to create a new, lower cost, high quality non-profit health care system in Eastern Massachusetts.

I have been a practicing Obstetrician for over 20 years. I have served as the Chair of Obstetrics and Gynecology at Mount Auburn Hospital since 2012. Over the years, generations of committed individuals have dedicated their careers to achieving Mount Auburn's vision of being the best community teaching healthcare system in the Boston area. Our mission is to improve the health of the residents of Cambridge and surrounding communities, Mount Auburn Hospital is dedicated to delivering healthcare services in a personable, convenient, and compassionate manner, with respect for the dignity of patients and their families.

Mount Auburn currently has the largest midwifery practice in Eastern MA. Our focus is on providing the most appropriate care, always based on patient risk and choice. Our relationship with an Academic Medical Center is essential to our efforts to "rightsize" care, while appropriately planning for unforeseen risks. Although our current contractual relationships provide access to specialty services, once a patient is transferred for higher level care, there is no incentive to transfer the patient back if clinically appropriate.

I believe this new system will allow us to leverage coordinated management and technology to provide more care in the community setting with a commitment to patient choice. Mount Auburn's commitment to "World Class Care with a Personal Touch", requires the wide variety of services we currently provide, with a strong focus on the medical home, as well as a strong collaborative relationship with a larger system.



A teaching hospital of
Harvard Medical School

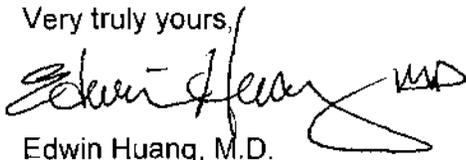
330 Mount Auburn Street
Cambridge, MA 02138
617-492-3500

The creation of this high value health care system is essential to improving the health of our community, and to ensuring continued access to high quality, affordable health care close to home and seamless access to tertiary and quaternary care when needed.

The transaction is consistent with the Commonwealth's goals of improving the health status and quality of life for individuals and families throughout our Commonwealth; of ensuring continued access to affordable, high quality care close to home, and seamless access to tertiary and quaternary care when needed; and assisting the Commonwealth in meeting its short and long-term cost containment goals.

We respectfully urge the Department's approval of this application, and thank you for your consideration.

Very truly yours,

A handwritten signature in black ink, appearing to read "Edwin Huang" with a stylized flourish at the end.

Edwin Huang, M.D.

Chair

cc: Nora Mann, Esq., Director, Determination of Need Program



M O U N T A U B U R N H O S P I T A L

December 5, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor

RE: Application Number NEWCO-17082413-TOBoston, MA 02108

Dear Commissioner Bharel,

I am writing to express my support for the application of the Beth Israel Deaconess Medical Center system, Lahey Health System, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital, to create a new, lower cost, high quality non-profit health care system in Eastern Massachusetts.

As you know, Mount Auburn Hospital has been a member of CareGroup since it was founded in 2006. Our relationship with Beth Israel Deaconess Medical Center and New England Baptist Hospital has resulted in a number of benefits to our hospital and the larger community. Mount Auburn provides 24/7 trauma care, and a range of important health care services for the benefit of our patients – regardless of their insurance status or ability to pay. In addition, we are proud to employ over 3100 clinicians and other staff. However, the confederation structure of our current system is not conducive to joint planning and programming.

I have been a member of the active medical staff at Mount Auburn Hospital for over 41 years and have served as the Chair of the Department of Radiology since 1998. Mount Auburn's commitment to both clinical care excellence and to teaching students of medicine and the health professions has remained steadfast since its founding in 1886.

We regularly review our performance and share our data so we can see what we are doing well and understand where there is room for improvement. I am very excited about the potential, within this new high value geographically diverse health care system, to leverage this work and enhance collaboration to improve the health of our community. I believe the new system will provide access for our patients and our employees to high quality, affordable health care close to home, as well as seamless access to tertiary and quaternary care when needed. We are committed to a new model of care in the new world of ACO's, with a focus on keeping patients and communities healthy.

I believe this new system will strengthen our ability to provide care at the local level, bringing care to the patient where they live. Collaboration will allow us to share best practices, efficiently use resources and expand our lower cost high quality option.



A teaching hospital of
Harvard Medical School

330 Mount Auburn Street
Cambridge, MA 02138
617-492-3500

I respectfully urge the Department's approval of this application, and thank you for your consideration.

Very truly yours,

Handwritten signature of Michael Shortsleeve, M.D. The signature is written in cursive and includes the initials "M.D." at the end.

Michael Shortsleeve, M.D.

cc: Nora Mann, Esq., Director, Determination of Need Program



M O U N T A U B U R N H O S P I T A L

December 5, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

I am writing to express my support for the application of the Beth Israel Deaconess Medical Center system, Lahey Health System, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital, to create a new, lower cost, high quality non-profit health care system in Eastern Massachusetts.

I have been employed by Mount Auburn Hospital since 2007, as Vice President of Contracting and Business Development. Over the course of my career of over 30 years in health care administration, working almost exclusively with major health care providers in the Boston metropolitan area, I have developed an extensive background in managed care, and in particular in negotiating and managing global payment contracts. I have sought to work with organizations which have a vision of providing quality care to individual patients and an appreciation of their acute role in serving their communities, including as stewards of health care resources.

Mount Auburn Hospital and its affiliated physician organizations have been leaders in managed care and in working under alternative payment arrangements. We were the first Hospital to sign the Blue Cross Alternative Quality Contract in 2009, but that followed many years of working consistently under managed care contracts. Working to provide the very best episodic care while also focusing on caring for a population of patients with an eye towards reducing the total cost of care has taken focus and determination. It has required vision, and it has required adroitness. But today it requires more than what we as a community health care provider can do on our own. The new system will allow us to pool our expertise and our resources to develop all infrastructure necessary to manage population health into the future. The infrastructure has gotten too costly for one local provider organization to build and maintain on its own. Actually, I believe it is wasteful for each local contracting entity to replicate all the efforts required to manage effectively under shrinking budgets and to have in place the supports necessary to ensure that patients are getting the right care at the right place and time. The new system will allow Mount Auburn Hospital to rationalize the use of resources and to coordinate within a larger



A teaching hospital of
Harvard Medical School

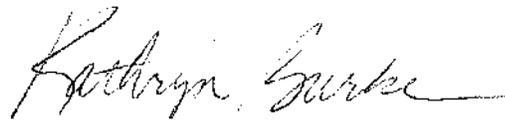
330 Mount Auburn Street
Cambridge, MA 02138
617-492-3500

geographic territory specialty care which we can't justify building locally. It will allow for a broader coordination of post-acute and behavioral health care services. It will allow for investment in innovative services necessary as alternatives to costlier acute care. First class managed care infrastructure, including data management and care management, access to coordinated specialty and post-acute services, and innovative technology, are all necessary to manage care across the board in a cost effective manner. We at Mount Auburn understand that we can't do this alone any more. We need to partner with other like-minded providers who have a commitment to population health as well as quality care and who we believe have the vision and expertise to build that next generation health care system.

I want to point out that as the person responsible for negotiating all the payer contracts for the Mount Auburn Hospital, its employed physician group and home care and hospice agency, I believe that care coordination and the efficient rationalization of resources across a broad geographically diverse system is the way to control healthcare spending in the Commonwealth.

I respectfully urge the Department's approval of this application, and thank you for your consideration.

Very truly yours,

A handwritten signature in cursive script that reads "Kathryn Burke". The signature is written in dark ink and is positioned above the typed name and title.

Kathryn Burke
Vice President, Contracting and Business Development
Mount Auburn Hospital

cc: Nora Mann, Esq., Director, Determination of Need Program



M O U N T A U B U R N H O S P I T A L

December 5, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

I am writing to express my support for the application of the Beth Israel Deaconess Medical Center system, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital, to create a new, lower cost, high quality non-profit health care system in Eastern Massachusetts.

Mount Auburn Hospital, a 220-bed Harvard Medical School regional teaching hospital, serving the greater metropolitan Boston- Cambridge area, is dedicated to excellence with compassion. The physicians and employees are dedicated to the patient experience and the Hospital is recognized regionally and nationally for a focus on quality improvement and patient safety.

I have been practicing Uro-Gynecology as an employed physician at Mount Auburn Hospital for 14 years. I serve as the Director of the fellowship in Female Pelvic Medicine and Reconstructive Surgery and am currently the President of the Mount Auburn Medical Staff. Our goal is to provide safe, outstanding care to every patient every time. To meet that goal, we develop and implement systems and procedures that incorporate the most up-to-date medical evidence, the best technology, and the most compassionate care. I strongly believe that in order to continue to provide this level of excellence in this changing healthcare environment, we need to become part of a larger more geographically diverse system.

Our employees and our patients will benefit greatly from a high quality, lower-cost system that allows them to access all levels of care with more choice. As a subspecialist it will allow me to reach a broader group of patients who could access care at Mount Auburn if they choose. It also will allow subspecialists to work together to provide access to subspecialty care in other community settings. We currently provide such services in a few communities outside of our key service area, but such arrangements are expensive and require significant management resources. The ability to provide those same types of subspecialty services at community locations within our new system will allow us to better manage those costs and resources.



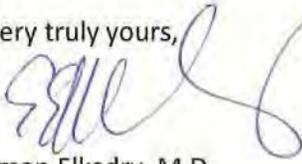
A teaching hospital of
Harvard Medical School

330 Mount Auburn Street
Cambridge, MA 02138
617-492-3500

This project is essential to the future of Mount Auburn Hospital and its affiliated physicians, and to ensure continued access to affordable health care in the communities we serve. A system with the breadth and geographic coverage that this new system would provide will make a significant difference in our ability to care for our patients across the continuum.

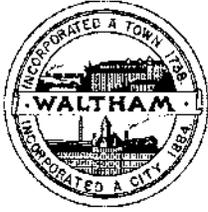
I thank you for your consideration, and urge the Department's support and approval of this application.

Very truly yours,

A handwritten signature in blue ink, appearing to read 'E. Elkadry', with a large, sweeping flourish extending to the right.

Eman Elkadry, M.D.

cc: Nora Mann, Esq., Director, Determination of Need Program



CITY OF WALTHAM
Massachusetts

Council on Aging
Marybeth Duffy, LICSW - Director

November 30, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street
2nd Floor
Boston, MA 02108

Dear Commissioner Bharel:

I am writing to express my support for the application of the Beth Israel Medical Center System, Lahey Health System, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital to create a new, lower cost, high quality non-profit health care system in Eastern Massachusetts.

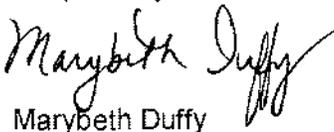
As a professional who works with the elderly, I fully appreciate the importance a health care system plays in their lives. Quality, convenience and dependability matter to them. We have over ten thousand seniors here in Waltham. Since the closing of Waltham Hospital fourteen years ago, our seniors have come to depend on Mount Auburn Hospital for their care.

Our senior center has a strong relationship with Mount Auburn. They provide us with a nurse for our blood pressure clinic as well as speakers for health care presentations.

The creation of this high value health care system is essential to improving the health of our community. It ensures continued access to high quality affordable health care close to home and seamless access to tertiary care when needed.

I respectfully urge the Department's approval of this application. Thank you for your consideration.

Respectfully,


Marybeth Duffy



December 5, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TOBoston, MA 02108

Dear Commissioner Bharel,

I am writing to express the support of The Greater Boston Food Bank for the application of the Beth Israel Deaconess Medical Center (BIDMC) system, Lahey Health System, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital, to create a new, lower cost, high-quality, nonprofit health care system in Eastern Massachusetts.

The Greater Boston Food Bank (GBFB) distributes 50 million healthy meals annually to those struggling with hunger across Eastern Massachusetts. We work with a network of 530 food pantries, meal programs and shelters located in the 190 cities and towns in our service area. In addition, we operate four direct service programs, including School-based Pantries, free Mobile Markets and two food distributions for seniors.

Research has shown that the food-insecure suffer from poorer health than the general population, and food-insecure adults are at higher risk for specific diseases and conditions such as diabetes, hypertension and depression. Children living in food-insecure households are at higher risk for impaired brain development, hospitalizations, iron-deficiency anemia and mental health and behavioral disorders.

To help address the harmful effects of food insecurity, GBFB has launched partnerships with nine healthcare centers in its area. GBFB offers its partners assistance with the implementation of food-insecurity screening, a patient toolkit of food resources, and free, on-site produce Mobile Markets. GBFB partner Charles River Community Health has had a clinical affiliation with BIDMC for over 15 years, and BIDMC has provided funding to Charles River in support of the GBFB-operated, on-site Mobile Market, which serves on average 450 people monthly. In addition, Allen Hamdan, M.D., Clinical Director of Vascular and Endovascular Surgery at BIDMC, serves on the GBFB Board of Directors.

70 South Bay Avenue • Boston, MA 02118 • Tel: 617.427.5200 • Fax: 617.427.0146 • GBFB.org

Those we serve need and deserve access to lower-cost, high-quality healthcare in the communities they live, work and play. The creation of Beth Israel Deaconess Medical Center (BIDMC) system, including Lahey Health System, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital, will help provide that.

We respectfully urge the Department's approval of this application, and thank you for your consideration.

Very truly yours,



Catherine D'Amato, President and CEO

✓cc: Nora Mann, Esq., Director, Determination of Need Program



Beth Israel Deaconess Hospital
Plymouth

December 5, 2017

275 Sandwich Street
Plymouth, MA 02360
508-746-2000 **Phone**
508-830-1131 **Fax**
bidplymouth.org

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

I am writing to express my support for the application of the Beth Israel Deaconess Medical Center system, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital, to create a new, lower cost, high quality non-profit health care system in Eastern Massachusetts.

As you know, Beth Israel Deaconess Hospital-Plymouth joined the BIDMC family of hospitals in January 2014, and our partnership has resulted in a number of benefits to our hospital and the larger community. We provide 24/7 emergency care, acute care, and a range of important health care services for the benefit of our patients – regardless of their insurance status or ability to pay. The relationship has allowed us to expand our Cancer, Cardiology, Critical Care, Neonatology, and TeleStroke programs, to name a few, for the benefit of those in our service area. In addition, we are proud to employ more than 1,800 employees and clinicians and other staff.

This project is essential to the future of BID-Plymouth and to ensure continued access to affordable health care in the communities we serve.

It is consistent with the Commonwealth's goals of improving the health status and quality of life for individuals and families throughout our Commonwealth; of ensuring continued access to affordable, high quality care close to home, and seamless access to tertiary and quaternary care when needed; and assisting the Commonwealth in meeting its short and long-term cost containment goals.

I thank you for your consideration, and urge the Department's support and approval of this application.

Very truly yours,


Clark Hinkley
Chair

BID-Plymouth Board of Directors

cc: Nora Mann, Esq., Director, Determination of Need Program



The Commonwealth of Massachusetts
MASSACHUSETTS SENATE

SENATOR MICHAEL F. RUSH
Norfolk and Suffolk District

MIKE.RUSH@MASENATE.GOV
WWW.MASENATE.GOV

Chairman
JOINT COMMITTEE ON VETERANS
AND FEDERAL AFFAIRS
SENATE COMMITTEE ON
PERSONNEL AND ADMINISTRATION

STATE HOUSE, ROOM 511C
BOSTON, MA 02133-1053

TEL. (617) 722-1348
FAX. (617) 722-1071

November 20, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108
RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

I am writing to express my support for the application of the Beth Israel Deaconess Medical Center system, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital. To establish a new, lower cost, high quality non-profit health care system in Eastern Massachusetts.

Beth Israel Deaconess Hospital-Needham is a critical provider in my community, providing 24/7 trauma care, acute hospital care, and a range of important health care services for the benefit of all patients in this community – regardless of their insurance status or ability to pay. In addition, Beth Israel Deaconess Hospital-Needham is an important employer, providing more than 650 jobs in our region.

The approval of this application is essential to the future of Beth Israel Deaconess Hospital-Needham, and to ensure continued access to affordable health care in the communities I represent.

The project is consistent with the Commonwealth's goals of improving the health status and quality of life for individuals and families throughout our Commonwealth; of ensuring continued access to affordable, high quality care close to home, and seamless access to tertiary and quaternary care when needed; and assisting the Commonwealth in meeting its short and long-term cost containment goals.

I thank you for your consideration, and respectfully urge the Department's approval of this application.

Respectfully,

Mike Rush

State Senator
Norfolk & Suffolk District
cc: Nora Mann, Esq., Director, Determination of Need Program

December 5, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor

RE: Application Number NEWCO-17082413-TOBoston, MA 02108

Dear Commissioner Bharel,

I am writing to express my support for the Beth Israel Deaconess Medical Center.

As the Executive Director of the Needham Community Council, I work closely with Beth Israel Deaconess Hospital-Needham. The community partnership they currently offer Needham residents and our agency, in particular, reinforces the ongoing and critical importance of the hospital to the health status and quality of life in our community and the surrounding communities.

I enthusiastically support the plans of the administration of the Hospital to continue to provide a high quality non-profit health care system in Eastern Massachusetts; which is essential to improving the health of our community and to ensuring continued access to high quality, affordable health care close to home.

Very truly yours,

Sandra Robinson

Sandra Robinson
Executive Director, Needham Community Council
srobinson@needhamcommunitycouncil.org
570 Hillside Ave.
Needham, MA 02494

cc: Nora Mann, Esq., Director, Determination of Need Program

November 16, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108
RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

As a Board Member at Beth Israel Deaconess Hospital–Needham, I am writing to express my support for the application of the Beth Israel Deaconess Medical Center system, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital, to create a new, lower cost, high quality non-profit health care system in Eastern Massachusetts.

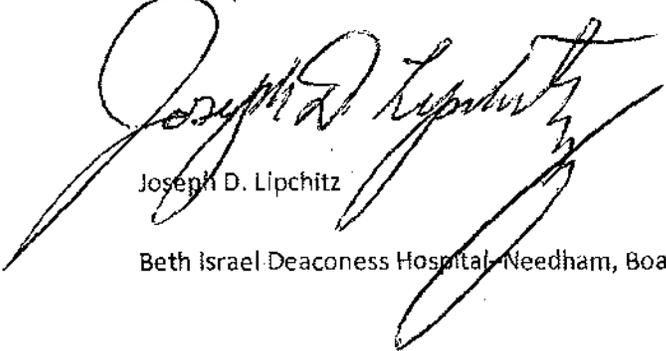
Beth Israel Deaconess Hospital–Needham (BID–Needham) has been a longstanding clinical affiliate of the Beth Israel Deaconess Hospital System, and our affiliation has resulted in a number of benefits to our hospital and Needham and the surrounding communities. We provide 24/7 trauma care, and a range of important health care services for the benefit of our patients – regardless of their insurance status or ability to pay.

We are proud to employ 669 employees at BID–Needham, are actively engaged in addressing the unmet health needs in our community, and support the community in a financial capacity in terms of rental payments, donations to other non-profits, and by doing business with local merchants. This project is essential to the future of Beth Israel Deaconess Hospital–Needham, and to ensure continued access to affordable health care in the communities we serve.

It is consistent with the Commonwealth's goals of improving the health status and quality of life for individuals and families throughout our Commonwealth; of ensuring continued access to affordable, high quality care close to home, and seamless access to tertiary and quaternary care when needed; and assisting the Commonwealth in meeting its short and long-term cost containment goals.

I thank you for your consideration, and urge the Department's support and approval of this application.

Sincerely,



Joseph D. Lipchitz

Beth Israel Deaconess Hospital–Needham, Board of Trustees

cc: Nora Mann, Esq., Director, Determination of Need Program

November 16, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108
RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

As a Board Member at Beth Israel Deaconess Hospital–Needham, I am writing to express my support for the application of the Beth Israel Deaconess Medical Center system, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital, to create a new, lower cost, high quality non-profit health care system in Eastern Massachusetts.

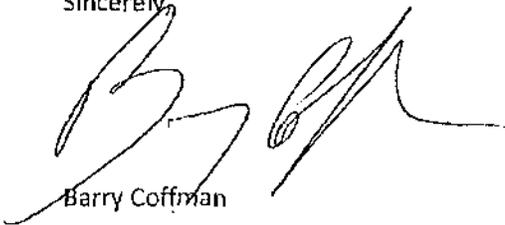
Beth Israel Deaconess Hospital–Needham (BID–Needham) has been a longstanding clinical affiliate of the Beth Israel Deaconess Hospital System, and our affiliation has resulted in a number of benefits to our hospital and Needham and the surrounding communities. We provide 24/7 trauma care, and a range of important health care services for the benefit of our patients – regardless of their insurance status or ability to pay.

We are proud to employ 669 employees at BID–Needham, are actively engaged in addressing the unmet health needs in our community, and support the community in a financial capacity in terms of rental payments, donations to other non-profits, and by doing business with local merchants. This project is essential to the future of Beth Israel Deaconess Hospital–Needham, and to ensure continued access to affordable health care in the communities we serve.

It is consistent with the Commonwealth's goals of improving the health status and quality of life for individuals and families throughout our Commonwealth; of ensuring continued access to affordable, high quality care close to home, and seamless access to tertiary and quaternary care when needed; and assisting the Commonwealth in meeting its short and long-term cost containment goals.

I thank you for your consideration, and urge the Department's support and approval of this application.

Sincerely,



Barry Coffman

Beth Israel Deaconess Hospital–Needham, Board of Trustees

cc: Nora Mann, Esq., Director, Determination of Need Program

November 16, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108
RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

As Chair of the Board of Trustees at Beth Israel Deaconess Hospital–Needham, I am writing to express my support for the application of the Beth Israel Deaconess Medical Center system, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital, to create a new, lower cost, high quality non-profit health care system in Eastern Massachusetts.

Beth Israel Deaconess Hospital–Needham (BID–Needham) has been a longstanding clinical affiliate of the Beth Israel Deaconess Hospital System, and our affiliation has resulted in a number of benefits to our hospital and Needham and the surrounding communities. We provide 24/7 trauma care, and a range of important health care services for the benefit of our patients – regardless of their insurance status or ability to pay.

We are proud to employ 669 employees at BID–Needham, are actively engaged in addressing the unmet health needs in our community, and support the community in a financial capacity in terms of rental payments, donations to other non-profits, and by doing business with local merchants. This project is essential to the future of Beth Israel Deaconess Hospital–Needham, and to ensure continued access to affordable health care in the communities we serve.

It is consistent with the Commonwealth's goals of improving the health status and quality of life for individuals and families throughout our Commonwealth; of ensuring continued access to affordable, high quality care close to home, and seamless access to tertiary and quaternary care when needed; and assisting the Commonwealth in meeting its short and long-term cost containment goals.

I thank you for your consideration, and urge the Department's support and approval of this application.

Sincerely,



Stephen E. Vanourny

Beth Israel Deaconess Hospital–Needham, Chair, Board of Trustees

cc: Nora Mann, Esq., Director, Determination of Need Program



Beth Israel Deaconess
Medical Center



HARVARD MEDICAL SCHOOL
TEACHING HOSPITAL

December 5, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108
RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

As members of Beth Israel Deaconess Medical Center's (BIDMC) Community Benefits Committee, we are writing to express support for the application of the BIDMC System, Lahey Health System, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital, to create a new, lower cost, high quality non-profit health care system in Eastern Massachusetts.

We are proud to serve BIDMC in our capacity as the Community Benefits Committee. BIDMC is committed to the health and wellness of its diverse patients and communities; in particular Boston's underserved populations. BIDMC provides inclusive, patient-centered, equitable care and services to some of Boston's most vulnerable residents, regardless of race, ethnicity, immigration status, language preference, religion, sexual orientation, gender identity, economic or insurance status.

We have seen first-hand BIDMC's commitment to community, including fostering a welcoming environment, and partnering with community-based organizations on various initiatives. In order for BIDMC to continue serving Boston's neighborhoods and surrounding communities, including providing access to care for all patients regardless of patients' ability to pay, we need the hospital to remain financially strong.

The creation of this high value health care system is critical to ensuring the financial well-being of this important institution and its ability to continue to serve the underserved. This system will ensure continued access to high quality, linguistically appropriate, affordable health care close to home, and ensure seamless access to tertiary and quaternary care when needed.

We respectfully urge the Department's approval of this application, and thank you for your consideration.

Very truly yours,

Carol F. Anderson
Phyllis Barajas
Jonathan Bornstein
Helen Chin Schlichte
Kelley Chunn
Stephen Denny

Thomas DeSimone
Matthew E. Epstein
Lee Ann Fatalo
Joan Feinberg Berns, PhD
Paula Ivey Henry, PhD
Edward Ladd

Harvey Makadon, MD
Femi Obi
Pamela Scott
April Tang
Fred Wang
Tracey West

Community Benefits Committee - Beth Israel Deaconess Medical Center
cc: Nora Mann, Esq., Director, Determination of Need Program

GBIO BI Lahey Merger Testimony

Thanks much for listening! I'm Ken Farbstein of GBIO, the Greater Boston Interfaith Organization. I'm on GBIO's healthcare leadership team. We hope you will perform a careful, impartial Cost and Market Impact Review with consumer input. There are 2 key reasons why:

First, with all due respect, no hospital executive or community organization tonight has said WHY or HOW the merger would decrease costs. Sherlock Holmes famously said that the key piece of evidence was that the dog did not bark. The silence was very revealing. In the last 2 hours, many hospital leaders had the chance to explain why costs would decline, but they just told us about the high quality and volume of the medical services they provide. Their facts are true but that's not the point.

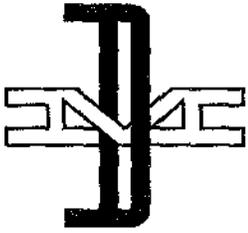
And I'm glad to hear the stories of patients tonight who got excellent care at these hospitals, but please keep in mind that their care was excellent BEFORE any merger.

Second, prices are way too high. The cost of my own physical at one of these hospitals was \$900. For a physical! GBIO is doing dozens of house meetings and we're hearing lots of stories about wildly high costs. Here in eastern Mass, we have the highest prices in the world.

GBIO doesn't yet have a formal position on the merger, but we note that mergers often INcrease costs. That was true with the Partners merger, and it's also true in a lot of other industries.

When you do the CMIR, with consumer input please, we hope you'll consider these 2 key questions:

- 1) Do these hospitals really want to merge because they want to improve quality? Or to get a larger slice of the pie?
- 2) And if it's to get more pie, will costs to the public go UP, or down?



Michael P. Dreslinski

#W95468

**P.O. Box 466
Gardner MA 01440**

November 29, 2017

Massachusetts Department of Public Health

Determination of Need Program

250 Washington Street, 6th Floor

Boston MA 02108

RE: 09-08-2017 Application for Determination of Need by Lahey Health System and Seacoast
Regional Health System – Public Comments

Greetings:

After a thorough review of the proposal submitted by the applicant/petitioner, I cannot, in good faith, consent to this merger moving forward. Until such time that critical deficiencies in the applicant/petitioner proposal are corrected, I remain in objection to the proposed merger.

Respectfully,

Michael P. Dreslinski

A prior commitment prevents me from attending this most important meeting regarding the merger and I hope my voice will be heard.

Addison Gilbert Hospital is one of our most important assets. We are the "end of the line". There are two bridges off our island and a 20-30 minute ride to the next closest hospital, Lahey Beverly. Our census counts nearly 30,000 full time residents. In summer, this number swells with seasonal residents and visitors. It is important to be able to access easily emergency care, x-rays, scans, routine testing and hospital beds. Gorton's built a state of the art cancer center at AGH, making treatment for these residents so much easier. Our emergency room saves lives. If necessary, we can airlift critical patients from the O'Maley School field.

Over the years, we have seen an erosion of local services available at AGH transferred to Beverly. It would greatly enhance our city to see some of these services return. I personally know babies who were delivered in the breakdown lane on Route 128, so the return of full Maternity services would be a boon to our residents. Ambulance costs rise remarkably when cases that could be treated locally are driven "up the line", affecting the cost of personal medical insurance, Medicare, Medicaid and the like.

There are aspects of the merger that seem wonderful: having New England Baptist as part of our group would be a godsend. NEB is one of the top orthopedic facilities in the country and where I chose to have both of my Total Hip Replacements performed. Adding Anna Jaques does make sense and there should be a commitment to improving services at that facility as well.

The beauty of the Boston area and one of the reasons I am grateful to live here is access to some of the best medical care, medical schools and medical innovation available in the country. Access to quality healthcare enriches us individually and as a whole. My hope is that this merger strengthens our very local access to quality care instead of diminishing it.

Sincerely,
Roberta Ginda-Vrachos
861 Washington Street
Gloucester, MA 01930

CITY OF PEABODY

24 Lowell Street
Peabody, Massachusetts 01960



P. 978-538-5700
F. 978-538-5980

OFFICE OF THE MAYOR EDWARD A. BETTENCOURT, JR.

November 22, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel:

I am writing to express my support for the application proposed by Beth Israel Deaconess Medical Center, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jacques Hospital, to create a new high quality, lower cost, non-profit health care system in Eastern Massachusetts.

Lahey Medical Center is essential to the health of the City of Peabody, providing high quality health care services to our residents, and hundreds of jobs in our region.

The creation of this new system is essential to improving the health of the City of Peabody, and to ensuring that patients have access to comprehensive, high quality and affordable health care close to home. I thank you for your consideration, and respectfully urge the Department's approval of this application.

Warmest regards,

Edward A. Bettencourt, Jr.
Mayor, City of Peabody

EAB:dm

cc: Scott Hartman, Vice President
Government Relations



The Commonwealth of Massachusetts

HOUSE OF REPRESENTATIVES
STATE HOUSE, BOSTON, MA 02133-1054

JAMES J. DWYER
REPRESENTATIVE
30TH MIDDLESEX DISTRICT

Committee:
Financial Services
Public Safety
Steering, Policy & Scheduling

ROOM 254, STATE HOUSE
TEL: (617) 722-2220
FAX: (617) 626-0831

December 6, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCo-17082413-TO

Dear Commissioner Bharel,

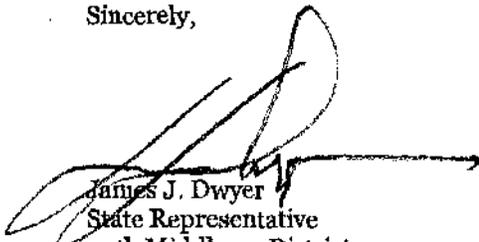
I am writing to express my support for the application proposed by Beth Israel Deaconess Medical Center, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital, to create a new high quality, lower cost, non-profit health care system in Eastern Massachusetts.

Winchester Hospital, a member of the Lahey Health System is essential to the health of my district that includes the City of Woburn and Town of Reading. Winchester Hospital provides high quality care health care services to members of our community and 2,600 jobs in our region. My constituents also access care at Lahey Hospital in nearby Burlington. The continued accessibility and affordability of both locations as well as Lahey Hospital's continued expansion and growing reputation as a medical facility growing in comparison to our world respected hospitals in Boston are crucial to our region.

The creation of this new system is essential to improving the health of the communities I represent, and to ensuring patients have access to comprehensive, high quality and affordable health care close to home.

I thank you for your consideration, and respectfully urge the Department's approval of this application.

Sincerely,



James J. Dwyer
State Representative
30th Middlesex District
Woburn - Reading

cc: Nora Mann, Esq., Director, Determination of Need Program



The Commonwealth of Massachusetts
House of Representatives
State House, Boston 02133-1054

BRADLEY H. JONES, JR.
STATE REPRESENTATIVE
MINORITY LEADER

20th MIDDLESEX DISTRICT
READING • NORTH READING
LYNNFIELD • MIDDLETON
ROOM 124
Tel. (617) 722-2100
Bradley.Jones@MA.house.gov

December 4, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

Dear Commissioner Bharel,

I write to express my support for the application proposed by Beth Israel Deaconess Medical Center, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital and Anna Jacques Hospital to create a new integrated health care system.

As health care costs for Massachusetts residents continue to increase, it is imperative to support initiatives that lower medical expense for consumers while simultaneously maintaining high quality care. The proposed health care system also integrates significant behavioral health services and strengthens our community hospitals.

The creation of the new health care system will benefit residents in my district, who will receive and have access to comprehensive, high quality and affordable care, as well as those individuals who are gainfully employed by the participating hospitals. I thank you for your consideration, and respectfully urge the Department's approval of this application.

Sincerely,

A handwritten signature in black ink, appearing to read "Bradley H. Jones, Jr.", written over a white background.

Bradley H. Jones, Jr.
Minority Leader

cc: Nora Mann, Esq., Director, Determination of Need Program

December 6, 2017

President: Christian Senna
C&S Capital Properties

Vice President: Marylou Hardy
Winchester Hospital/Lahey

Treasurer: Christine Murphy
Salem Five

Clerk: Robert Brogna
Hallmark Health System

Past President: Carolyn Lassiter
Excelsior Realty Group

Directors:

Tracey Arsenia Reed
Redstone Chiropractic Healing

Cynthia Bentz
Eastern Bank

Diane Bonanni
Diane Bonanni, DMD

Maureen Canova
Stoneham Council on Aging

Denise Clampa
Stoneham Ford

Julianna Curtis
The Energy Barre

Melissa deFriesse
Stoneham Theatre

Anthony Guardia
Boys & Girls Club

Andy Hackett
TeamLogic IT

Bob Lee
Body Mind Systems

Meaghan McDonald
McDonald-Finnegan
Funeral Home

Stephen Rotondi
Rotondi Travel Services

Mark Samson
Giglio & Samson, Attorneys

Rhonda Sabblo
StonehamBank

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

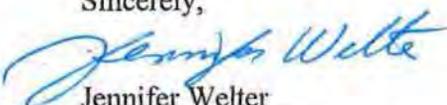
On behalf of the Stoneham Chamber of Commerce board of directors, I am writing to express my support of the creation of the new health system proposed by Beth Israel Deaconess Medical Center, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital.

The Stoneham Chamber of Commerce includes approximately 265 business members in Stoneham and neighboring communities. For a community of its size, both in terms of population and business make--up, the Stoneham Chamber of Commerce is a strong chamber, primarily because of its mission and the commitment of its board members to the Stoneham community.

The Stoneham Chamber recognizes that its businesses thrive when they are supported by the greater community. Therefore, its mission's broader focus is fostering community involvement and civic pride. Winchester Hospital, now affiliated with Lahey Health, has been an active member of our board of directors since 2003. Guiding the work of our Chamber, corporate sponsoring our many community events and working on collaborative efforts of the Chamber with other important non-profits and community organizations, are all hallmarks of Lahey's community involvement with our Chamber.

Winchester Hospital and Lahey Health hospitals work with many other community organizations like ours to identify the health and wellness needs of our community. We respectfully urge the Department's approval of this application, and thank you for your consideration.

Sincerely,


Jennifer Welter
Executive Director
Stoneham Chamber of Commerce

cc: Nora Mann, Esq., Director, Determination of Need Program



335 Main Street Suite 202 Stoneham, MA 02180 (781) 438-0001



December 6, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

I am writing to express my support of the creation of the new health system proposed by Beth Israel Deaconess Medical Center, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital.

The Burlington Area Chamber of Commerce is a non-profit organization aligning the needs of the business community with the residents of our area. We foster cooperative efforts in the areas of workforce and economic development, advocacy and connection to community.

Lahey Hospital & Medical Center's work with many other community organizations like ours to identify the health and wellness needs of our community and deliver programs that reach those most vulnerable. The creation of this new health care system is essential to ensuring this work continues and that residents and families in need have access to the health care and support services they need.

Community hospitals like Lahey, are critical to the care of our residents as well as a major draw for business looking to locate their employees in close proximity to a world-class healthcare facility.

We respectfully urge the Department's approval of this application, and thank you for your consideration.

Very truly yours,

A handwritten signature in black ink, appearing to read "Rick Parker", written over a white background.

Rick Parker
President, Burlington Area Chamber of Commerce

cc: Nora Mann, Esq., Director, Determination of Need Program



December 6, 2017

**Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108**

**Greater Beverly Chamber of Commerce
100 Cummings Center, Suite 107-K
Beverly MA 01915**

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

I am writing to express my support of the creation of the new health system proposed by Beth Israel Deaconess Medical Center, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital.

Greater Beverly Chamber of Commerce represents the business community for the City of Beverly, Massachusetts, and surrounding communities. Our member businesses participate in a number of activities, programs and events sponsored by the Chamber that help support the business climate and quality of life within our community. The Chamber utilizes the funds it receives to its best possible advantage by doing business for business through local and state legislative advocacy groups, public relations, and by sponsoring focused business, networking and educational programs. Greater Beverly Chamber is the Voice of Business in Beverly and surrounding communities and is the #1 referral service in the City and surrounding communities.

Beverly and Addison Gilbert Hospitals work with many other community organizations like ours to identify the health and wellness needs of our community and deliver programs that reach those most vulnerable. The creation of this new health care system is essential to ensuring this work continues and that residents and families in need have access to the health care and support services they need.

We respectfully urge the Department's approval of this application, and thank you for your consideration.

Very truly yours,
**John Somes
Chief Executive Officer
Greater Beverly Chamber of Commerce**

cc: Nora Mann, Esq., Director, Determination of Need Program



BILLERICA COUNCIL ON AGING

25 CONCORD ROAD
BILLERICA, MASSACHUSETTS 01821



TELEPHONE: 978-671-0916
FAX: 978-671-1347

Jean Patel Bushnell
DIRECTOR

December 5, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

I am writing to express my support for the creation of the new health system proposed by Beth Israel Deaconess Medical Center, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital and Anna Jaques Hospital.

Through a series of Community Wellness Programs offered by Lahey, the Billerica Council on Aging (BCOA) has been able to seriously augment its programmatic offerings to better the life quality of our patrons. These well-designed programs led by skilled Lahey staff and associates have included vital topics to foster healthy aging such as Matter of Balance, Chronic Disease Management, Chronic Pain, Diabetes and Arthritis Self-Management and Eating Healthy with My Plate. Also designed and delivered by Lahey staff has been '*Yesterday and Today*', an intergenerational summer program which Lahey has been hosting for over 10 years to present positive role models to our youth and decrease social isolation for Billerica's seniors.

Lahey Hospital & Medical Center works with many other community organizations like ours to identify the health and wellness needs of our community and deliver programs that reach those most vulnerable. The creation of this new health care system positively positions Lahey Health to increase its commitment to the community with enriched offerings so that local residents and families in need have access to comprehensive health and social support services to live the best lives they can.

We sincerely hope that Department will see the sweeping merits of this integrated system to bring more care of a high quality cost-effectively to our community, and approves this application.

Sincerely yours,

Jean Patel Bushnell, Director
Billerica Council on Aging

cc: Nora Mann, Esq., Director, Determination of Need Program



City of Medford

Council on Aging

Medford Senior Citizens
Multi-Service Drop-In Center
101 Riverside Avenue
Medford, MA 02155

Pamela L. Kelly
Director of Elder Affairs

Telephones: (781)396-6010
Fax : (781) 395-8912

November 17, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

I am writing to express my support of the creation of the new health system proposed by Beth Israel Deaconess Medical Center, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital.

The Medford Council on Aging mandate is to evaluate, promote and encourage new and existing services and programs to Medford residents age sixty and over that are intended to enhance the quality of t lives. Services are but not limited to, social services, recreational programs, home maintenance program, health and nutrition programs, classes, support groups, transportation and special programs. Support from the community is critical towards the proliferation of our programs, events and services now more than ever! Winchester Hospital and Lahey Health has been a strong community partner over the past ten years. They are of immense value in helping to improve the quality of life of the senior demographic we serve through the many collaborations we partner in throughout each year.

Winchester Hospital and Lahey Health hospitals work with many other community organizations like ours to identify the health and wellness needs of our community and deliver programs that reach those most vulnerable. The creation of this new health care system is essential to ensuring this work continues and that residents and families in need have access to the health care and support services they need.

We respectfully urge the Department's approval of this application, and thank you for your consideration.

Very truly yours,

Arlene Carroll
Program Development
Volunteer & Community Outreach Manager



November 17, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

I am writing to express my support of the creation of the new health system as proposed by Beth Israel Deaconess Medical Center, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital.

Minuteman Senior Services (Minuteman) is the hub of a network of support services whose mission is to help seniors and people with disabilities live in the setting of their choice by engaging community resources and supporting caregivers. Minuteman is one of 26 state designated Aging Services Access Points and one of 670 federally designated Area Agencies on Aging. We serve 16 communities in the metro Boston area, including Burlington, Bedford, Wilmington, Woburn, Arlington, Lexington, Winchester and Bedford. In FY17 over 30,000 people accessed our over 20 programs and services; many are patients of Lahey Hospital and Medical Center (LHMC).

Minuteman has long-enjoyed a strong partnership with LHMC, with collaboration aimed to address service needs at the individual level, but also to impact the broader health and wellness needs of our shared communities, especially the most vulnerable. Thanks to the generous support of the LHMC Community Benefits Initiative, Minuteman is able to provide free, Medicare health insurance counseling to residents of Winchester, Burlington, and Arlington both at the hospital, as well as at community-based sites. The creation of this new health care system is essential to ensuring this work continues, and that residents and families have access to the health care and support services they need.

We respectfully urge the Department's approval of this application, and thank you for your consideration.

Best,

A handwritten signature in black ink that reads "Kelly Magee Wright". The signature is fluid and cursive.

Kelly Magee Wright
Executive Director

cc: Nora Mann, Esq., Director, Determination of Need Program



WOBURN COUNCIL ON AGING

Veteran's Memorial Senior Center

144 School Street
Woburn, MA 01801

(781) 897-5960
FAX (781) 937-8259

December 6, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel:

The Woburn Senior Center has benefitted from some excellent programs offered by the Winchester Hospital and Lahey Health hospitals for more than fifteen years. Examples of programming offered includes:

- Lunch and Learn
- Healthy Living Programs such as "Matter of Balance" Fall Prevention; Healthy Eating; Diabetes Self-Management; Chronic Pain Self-Management
- Intergenerational Programming in conjunction with the local YMCA
- Osteoporosis Screening
- Participation in the Fall Festival Resource Annual Open House
- Participation in the recent Elder Abuse Prevention focus
- Safe Home Initiative focus for 2018

Sincerely,
Community Partner
Judy Tanner

Woburn Senior Center
Programs/Volunteers

cc: Nora Mann, Esq., Director, Determination of Need Program

WINCHESTER FIRE DEPARTMENT

32 Mount Vernon Street Winchester, Massachusetts 01890 (781) 729-1801

John F. Nash, Chief of Department

December 6, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

I am writing to express my support of the creation of the new health system proposed by Beth Israel Deaconess Medical Center, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital.

The Winchester Fire Department operates an Advanced Life Support (ALS) level ambulance service. In addition to receiving emergency patients from our community, this department receives critical support and training from these hospitals, particularly Winchester Hospital and Lahey Health. Our department and its personnel have benefited greatly from a medical control agreement, advanced medical training, pharmacy restocking program, and health and wellness programs.

Without these invaluable services, the delivery of emergency medical care to our patients would not achieve the highest standards currently provided. The creation of an integrated health system will enhance the delivery of care to our patients.

Winchester Hospital and Lahey Health hospitals work with many other community organizations like ours to identify the health and wellness needs of our community and deliver programs that reach those most vulnerable. The creation of this new health care system is essential to ensuring this work continues and that residents and families in need have access to the health care and support services they need.

We respectfully urge the Department's approval of this application, and thank you for your consideration.

Sincerely yours,



John F. Nash
Chief of Department

cc: Nora Mann, Esq., Director, Determination of Need Program



Chief Matthew Grafton

**TOWN OF
STONEHAM
MASSACHUSETTS**

**FIRE/RESCUE
25 CENTRAL STREET
STONEHAM, MASSACHUSETTS
02180-1302**

**(781) 438-0127
FAX (781) 438-7066**

November 29, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd floor
Boston, MA 02108

RE: Application number NEWCO-17082413-TO

Dear Commissioner Bharel,

I am writing to express my support of the creation of the new health system proposed by Beth Israel Deaconess Medical Center, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital and Anna Jacques Jaques Hospital.

The mission of the Stoneham Fire Department is to protect life, property and the environment while always striving to maintain the public trust and to prevent harm in our community. In addition to receiving emergency patients from our community, Winchester Hospital works diligently with the Stoneham Fire Department, Substance Abuse Coalition, Senior Center, and many other community partners to identify and address the health and wellness needs of our community. Without this support, the delivery of emergency medical care to our patients would not achieve the highest standards currently provided.

The creation of this new health care system is essential to ensuring this work continues and that residents and families in need have access to the health care and support services they need.

We respectfully urge the Department's approval of this application, and thank you for your consideration.

Very Truly Yours,

Matthew Grafton, Chief

Cc: Nora Mann, Esq., Director, Determination of Need Program



November 21, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

I am writing to express my support of the creation of the new health system proposed by Beth Israel Deaconess Medical Center, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital.

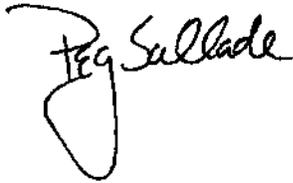
DanversCARES is a partnership for a healthy community. Our mission is to assist youth and families in making healthy decisions; to reduce youth substance use and to ensure the future of a safe and healthy community. Lahey Health has been a healthcare partner with DanversCARES over the past 10 years. As such, we have worked together to share community health assessment data, identify local needs and collaborate on innovative prevention programming, including outreach to underserved populations such as youth, parents, seniors, and those struggling with addictions. Over the years, Lahey has provided sponsorship, grant funding, employee volunteers, training, health data, and much more to our coalition partners. As an organization, Lahey provides critical outpatient health care services in Danvers and will continue to meet the health care needs of the community through its plans to open an urgent care center.

As a current member of the Community Benefits Board at Lahey Addison Gilbert/Beverly Hospital, I have seen the support of community-based health continue as a primary system focus over many years.

Beverly and Addison Gilbert Hospitals work with many other community organizations like ours to identify the health and wellness needs of our community and deliver programs that reach those most vulnerable. The creation of this new health care system is essential to ensuring this work continues and that residents and families in need have access to the health care and support services they need.

We respectfully urge the Department's approval of this application, and thank you for your consideration.

Sincerely,

A handwritten signature in black ink that reads "Peg Sallade". The signature is written in a cursive style with a large, looped initial "P" and a long, sweeping underline.

Peg Sallade
Project Director
DanversCARES
www.danverscares.org

cc: Nora Mann, Esq., Director, Determination of Need Program



December 6, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

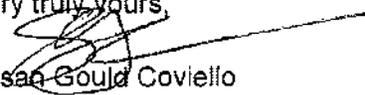
I am writing to express my support of the creation of the new health system proposed by Beth Israel Deaconess Medical Center, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital.

The North Shore Health Project serves people with HIV/AIDS and substance use disorder in Gloucester and the surrounding communities. Strong local medical supports are required for many of our clients, and this new health system will ensure our positive and measurable outcomes.

Beverly and Addison Gilbert Hospitals work with many other community organizations like ours to identify the health and wellness needs of our community and deliver programs that reach those most vulnerable. The creation of this new health care system is essential to ensuring this work continues and that residents and families in need have access to the health care and support services they need.

We respectfully urge the Department's approval of this application, and thank you for your consideration.

Very truly yours,


Susan Gould Coviello
Executive Director, NSHP

cc: Nora Mann, Esq., Director, Determination of Need Program



Support and Friendship For South Asian Women and Families

P O Box 1345, Burlington, MA 01803
www.saheliboston.org
1.866.472.4354
info@saheliboston.org

December 1, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

I am writing to express Saheli's support of the creation of the new health system proposed by Beth Israel Deaconess Medical Center, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital.

Saheli is a community-based organization in Massachusetts founded in 1996 with the mission to empower South Asian women and their families to live safe and healthy lives. Headquartered in Burlington, Saheli is led by dedicated volunteers and eight staff members. Saheli is uniquely focused on the needs of South Asians, and our staff and volunteers speak several South Asian languages.

Saheli offers survivors of domestic violence a variety of free services. Our popular community programs serve immigrants and families from all over the world and include financial aid to manage domestic violence crises, and free counseling from two licensed counselors and social workers. Lahey Health has been an ongoing supporter of our counseling programs.

Lahey Hospital & Medical Center's work with many other community organizations like ours to identify the health and wellness needs of our community and deliver programs that reach those most vulnerable. The creation of this new health care system is essential to ensuring this work continues and that residents and families in need have access to the health care and support services they need.

Board Members 2017-2019

Shweta Agrawal
Pooja Bakhal
Gouri Barterjee, Ph. D.
Divya Chandra
Tanvi Devimane
Amrith Fernandes-Prabhu
Supriya Saurabh
Maheen Shermohammed
Kiran Uppuluri
Usha Vakil

Staff

Nadia Madden, *Co-Executive Director*
Savitha Rajiv, *Co-Executive Director*
Rita Shah, MSW, LCSW, *Family Services Coordinator*
Salita Mehta, *Senior Domestic Violence Advocate*
Lata Rao, *Senior Domestic Violence Advocate*
Renu Tewarie, *Domestic Violence Advocate*
Usha Verma, *Domestic Violence Advocate*
Prachi Gandhi, *Bookkeeper*

Advisory Committee

Ramesh Advani
Anu Chitrapu
David S. Ludwig MD, Ph. D
Sweta Mepani
Trupti Patel ESQ
Ranjani Saigal
Manju Sheth, MD
Rajendra Trivedi, MD
Jaya Voruganti
Neelam Wali

We respectfully urge the Department's approval of this application, and thank you for your consideration.

Very truly yours,

Nadia Madden and Savitha Rajiv
Saheli Executive Directors

cc: Nora Mann, Esq., Director, Determination of Need Program



Center for Human Services
61 Center Street, Burlington, MA 01803

Phone: (781)270-1695 · Fax: (781)270-1657
Email: recreation@burlington.org

November 16, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

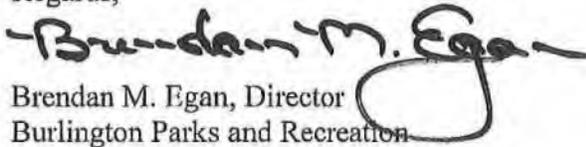
I am writing to express my support of the creation of the new health system proposed by Beth Israel Deaconess Medical Center, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital.

The Burlington Parks and Recreation Department has worked on a number of projects with Lahey Health which positively benefited the Burlington community. Lahey is an annual supporter of Celebrate Burlington, which is a day-long celebration of everything Burlington has to offer, with non-profits, local businesses and activities for families. More recently we partnered with Lahey Health on a sunscreen initiative, a program that offers sunscreen as an effective preventive measure to help avoid sun over-exposure year round. With Lahey's support we were able to place over 20 sunscreen dispensers in our parks.

Lahey Hospital & Medical Center's work with many other community organizations like ours to identify the health and wellness needs of our community and deliver programs that reach those most vulnerable. The creation of this new health care system is essential to ensuring this work continues and that residents and families in need have access to the health care and support services they need.

I respectfully urge the Department's approval of this application, and thank you for your consideration.

Regards,


Brendan M. Egan, Director
Burlington Parks and Recreation

cc: Nora Mann, Esq., Director, Determination of Need Program



T: 978.282.1000
F: 978.283.0523
www.actioninc.org

December 6, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

I am writing to express my strong support for the creation of the new health system proposed by Beth Israel Deaconess Medical Center, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital.

For 52 years, Action Inc. has served as a critical safety net for its communities by offering a broad range of services, including: assistance with public benefits enrollment, case management, housing assistance, eviction prevention, homelessness prevention, emergency shelter for homeless adults, affordable housing, weatherization, energy conservation, assistance with fuel and utility bills, heating system repair and replacement, adult basic education, resume and job readiness assistance, academic and career counseling, healthcare career training programs, programming for out-of-school youth, and in-home personal care for elders and disabled adults. With a mission to create opportunities that promote a thriving Cape Ann for all, we work closely with our partners at the local, state, and national levels. Lahey Health is one of our most important partners, particularly in serving the community's most vulnerable residents.

We work closely with a number of Lahey Health locations and programs on both individual and community-based efforts. Action Inc. regularly coordinates with our local hospital, Addison Gilbert Hospital, and with Lahey Behavioral Services on individual cases in order to provide the best possible services to people in need. Whether it's the Emergency Department or the DISCOVER Program, we know that we can count on the support and collaboration of AGH. Having such high quality services here on Cape Ann is vital to the health and wellness of our community.

Additionally, we partner with Lahey Health to offer a health care career training program for local residents. Action Inc. works directly with Seacoast Nursing and Rehabilitation Center to provide Massachusetts Department of Public Health approved Nurse Aide trainings. Action Inc. operates the



Client & Housing Services • Energy Services • HomeCare • Riley Education & Training Center

program and provides the classwork for the students. Seacoast is our clinical partner and serves as the clinical site for our program. We work together to ensure that our students receive high quality training and hands-on experience. Again, we are very fortunate to have Seacoast as a clinical site right here in Gloucester.

On a broader community level, we work together with Lahey Health as key members of the Gloucester High Risk Task Force (HRTF). The task force includes agencies and City departments providing care to very high risk individuals. Our group is part of the Healthy Gloucester Collaborative and meets monthly at AGH to discuss emerging issues and challenging cases, as well as provide coordinated care to Gloucester residents. Partners include: Addison Gilbert Hospital, Lahey Health Behavioral Services, Action Inc., Gloucester Public Health Department, Gloucester Police Department, Gloucester Fire and Rescue Department, Gloucester District Court (Probation Department), Gloucester Family Health Center, Eliot Community Human Services, Beverly Hospital (Partial Hospitalization Program), OBOT (suboxone) Clinic, The Grace Center, North Shore Health Project, Massachusetts Department of Mental Health, Massachusetts Rehabilitation Commission, SeniorCare, Gloucester Veterans Services, Adult Protective Services, and others. This group has collaborated to help vulnerable people get into drug treatment, to reduce emergency department visits, and to connect residents with life-saving mental health services.

For several years, Lahey Health has been a critical supporter of Action Inc.'s Healing to Housing initiative. Action Inc. has been very fortunate to receive grant support through Beverly Hospital and Addison Gilbert Hospital (BH-AGH) Community Collaborative Grant program for the Healing to Housing initiative, enabling us to provide critical supportive services to at-risk members of our community. The Healing to Housing program addresses BH-AGH's Mental and Behavioral Health priority. Our program provides homeless men and women with supportive services and counseling so they can address mental health and substance use disorder issues, which are often a barrier to obtaining and maintaining safe, affordable housing. The Healing to Housing program also supports formerly homeless individuals who reside in permanent housing and continue to struggle with mental health and substance use disorders.

These are just a few examples of the many ways in which Lahey Health works with us to identify the local health and wellness needs of our community and to deliver programs that reach our most vulnerable residents. The creation of this new health care system will help ensure that this work continues – and that individuals and families in need have access to the health care and support services they need.

We respectfully urge the Department's approval of this application, and thank you for your consideration.

Very truly yours,



Peggy Hegarty-Steck
Executive Director

cc: Nora Mann, Esq., Director, Determination of Need Program

December 6, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

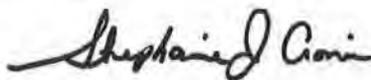
I am writing to support the new health system proposed by Beth Israel Deaconess Medical Center, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital.

The Middlesex 3 Coalition (www.middlesex3.com) is a regional public-private partnership of business, municipal, educational, health care and nonprofit leaders working together to improve regional economic development along the Route 3 corridor in Middlesex County. The Middlesex 3 Coalition works to address the concerns that impact our region's business community, including transportation, infrastructure, utilities, health care, real estate, and workforce development.

Lahey Hospital & Medical Center is a partner and works closely with many community organizations like ours to identify the health and wellness needs of our community and deliver programs that reach those most vulnerable. The creation of this new health care system is essential to ensuring this work continues and that residents and families in need have access to the health care and support services they need.

We respectfully urge the Department's approval of this application, and thank you for your consideration.

Sincerely,



Stephanie Cronin,
Middlesex 3 Coalition, Executive Director

cc: Nora Mann, Esq., Director, Determination of Need Program



BOYS & GIRLS CLUBS
OF STONEHAM & WAKEFIELD

December 6, 2017

Officers

- President*
George Getty
- Treasurer*
Kathy Boyle
- Secretary*
William Chetwynd
- Directors*
Cameron Bain
Ralph Barile, Jr.
Robert Bardell
Gloria DeVine
Paula DiBartolomeo
Jeffrey Ekberg
Carey Gatto
Joseph Gresci
Sharon Iovanni
Mirela Jonuz
Christine Murphy
Lynda Torregrossa

Staff

- Executive Director*
Adam Rodgers
- Clubs Directors*
Donna DiVirgilio
Bethany Riley

Development

Anthony Guardia

15 Dale Court
Stoneham, Ma. 02180
Tel 781-438-8770
Fax 781-438-0597
www.bgstoneham.org
www.bgwakefield.org
Tax ID# 23-7025777

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

I am writing to express my support of the creation of the new health system proposed by Beth Israel Deaconess Medical Center, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital.

Winchester Hospital and Lahey Health have been critical to our mission. Our mission at the Boys & Girls Clubs of Stoneham & Wakefield is simple: "To enable all young people, especially those who need us most, to reach their full potential as productive, caring, responsible citizens." Since 1973 we have confronted our communities' youth's most difficult challenges. We have been able to do so, because we have always had community partners we could rely on to confront these challenges.

Most recently, our challenges have become ever more daunting: the opiate crisis, obesity, substance abuse, mental disorders, grandparents raising again, amongst others. Fortunately for us, we are not alone in confronting these challenges. Winchester Hospital and Lahey Health have become one of our most, if not our most, important partner in serving children throughout the North Shore.

Together we have partnered on a variety of initiatives to combat substance abuse, obesity, self-harm, grandparents raising again, among other difficult issues.

They have supported us through education, training, and funding. For example, they have educated hundreds of local children about healthy eating, staying active, and water safety over the past two years. They sent our Teen Directors to the New England Institute for Addiction Studies so they could be trained on issues ranging from mental disorders to substance abuse. Finally, through Lahey Health, we have funded projects such as our Screening, Brief Intervention, and Referral to Treatment (SBIRT) initiative, our new Teen Centers, and Open Parks' programs.

In 2016 we served over 1,000 children, and have doubled the number of children we serve from 2013. Our most recent data shows a 30% increase in 2017 and growing. Our average daily attendance is over 300 children a day. The only reason we can serve these children and fulfill our mission is because we are not serving them alone. We are serving them with Winchester Hospital and Lahey Health.

We also know we are not alone. Winchester Hospital and Lahey Health hospitals work with many other community organizations like ours to identify the health and wellness needs of our community and deliver programs that reach those most vulnerable. The creation of this new health care system is essential to ensuring this work continues and that residents and families in need have access to the health care and support services they need.

We respectfully urge the Department's approval of this application, and thank you for your consideration.

Very truly yours,

Adam Rodgers

Executive Director of the Boys & Girls Clubs of Stoneham & Wakefield

cc: Nora Mann, Esq., Director, Determination of Need Program



Aberjona | Winchester | Woburn

December 6, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

I am writing to express my support of the creation of the new health system proposed by Beth Israel Deaconess Medical Center, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital.

Salter Healthcare consists of three skilled nursing centers located in Winchester and Woburn. We have been providing post-acute rehabilitation and nursing services for over 60 years in the Winchester and Woburn communities as well as the many surrounding cities and towns north of Boston.

Over the course of 60 years Salter Healthcare has worked very closely with both Winchester and Lahey Hospital to help enhance the quality of rehabilitation and nursing care to the residents in the communities we serve. We believe that the creation of the new health system will further enable quality healthcare to be delivered in an efficient and effective manner to many residents throughout our communities.

Winchester Hospital and Lahey Health hospitals work with many other community organizations like ours to identify the health and wellness needs of our community and deliver programs that reach those most vulnerable. The creation of this new health care system is essential to ensuring this work continues and that residents and families in need have access to the health care and support services they need.

We respectfully urge the Department's approval of this application, and thank you for your consideration.

Very truly yours,

Robert Driscoll

CEO

Salter Healthcare, Inc.

cc: Nora Mann, Esq., Director, Determination of Need Program

P.O. Box 490 | Winchester, MA 01890 | Tel: (781) 729-2200 | Fax: (781) 729-3817

www.salterhealthcare.com



A charitable, community-based agency, responding to the basic needs of people of all ages, providing early education and care, helping individuals develop their potential, creating positive family and community relationships, and fostering respect for diversity.

WEB SITE
www.socialconcern.org

Executive Director
Dean A. Solomon
dean@socialconcern.org

**CHILDREN'S CENTER
FAMILY CHILD CARE SYSTEM
FAMILY KILL BUILDING
-PARENTING EDUCATION
-SUPERVISED VISITATION
FOOD PANTRY
2 Merrimack Street
Woburn, MA 01801-1606
(781) 933-6495
(781) 933-1923 Fax**

All of our programs serve
individuals and families
from these communities
**Woburn
Winchester**

Some of our programs
also serve residents of
one or more other
communities within
Middlesex County

THIS AGENCY SUPPORTED BY



United Way
of Massachusetts Bay
and Merrimack Valley

November 16, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

I am writing to express my support of the creation of the new health system proposed by Beth Israel Deaconess Medical Center, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital.

I am the Executive Director of the Council of Social Concern which serves low income families and at risk children through its Food Pantry, early education programs, parenting education classes and information & referral services. We consider Winchester Hospital / Lahey Health as a community partner that has provided our agency with in-kind food and cash support, as well as information for our clients on making nutritious meals with food provided by the Food Pantry.

Winchester Hospital and Lahey Health hospitals work with many other community organizations like ours to identify the health and wellness needs of our community and deliver programs that reach those most vulnerable. The creation of this new health care system is essential to ensuring this work continues and that residents and families in need have access to the health care and support services they need.

We respectfully urge the Department's approval of this application, and thank you for your consideration.

Very truly yours,

Dean Solomon
Executive Director

Burlington Public Schools

Eric M. Conti, Ph.D.
Superintendent of Schools

123 CAMBRIDGE STREET
BURLINGTON, MA 01803
(781) 270-1801
FAX (781) 270-1773

December 6, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel:

We are writing to express our support of the creation of the new health system proposed by Beth Israel Deaconess Medical Center, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital.

The Middlesex League consisting of the communities of Arlington, Belmont, Burlington, Lexington, Melrose, Reading, Stoneham, Wakefield, Watertown, Wilmington, Winchester, and Woburn, have partnered with the Lahey Group in support of our collaboration of the Youth Risk Behavior Survey. Our collaboration efforts would not have been possible without the financial and technical support of the Lahey Group.

Lahey Hospital and Medical Center works with many other community organizations like ours to identify the health and wellness needs of our community and deliver programs that reach those most vulnerable. The creation of this new health care system is essential to ensuring this work continues and that residents and families in need have access to the health care and support services they need.

We respectfully urge the Department's approval of this application, and thank you for your consideration.

Sincerely,



Eric M. Conti, Ph.D.
For the Middlesex League Superintendents'

HC/tao

cc: Nora Mann, Esq., Director, Determination of Need Program

December 4, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

I am writing to express my support of the creation of the new health system proposed by Beth Israel Deaconess Medical Center, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital.

As a member of the Rotary club of Winchester, I have had the privilege of working alongside employees of Winchester Hospital from the beginning. The great people at Winchester Hospital have always been there to help with sponsorships, pitch in with community service projects and inform our club on the latest trends in the healthcare world.

Winchester Hospital and Lahey Health hospitals work with many other community organizations like ours to identify the health and wellness needs of our community and deliver programs that reach those most vulnerable. The creation of this new health care system is essential to ensuring this work continues and that residents and families in need have access to the health care and support services they need.

We respectfully urge the Department's approval of this application, and thank you for your consideration.

Very truly yours,



Stephen Mix
President
Rotary Club of Winchester

cc: Nora Mann, Esq., Director, Determination of Need Program



**The Stoneham Coalition
35 Central St.
Stoneham, MA 02180**

December 1, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

We write in support of the creation of the new health system proposed by Beth Israel Deaconess Medical Center, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital.

Winchester Hospital / Lahey Health have been critical community partners to the Stoneham Coalition in our efforts to provide education, resources and support to the community during the opioid crisis. From participating in events, having a presence at monthly meetings and offering resources to the community the Winchester Hospital/ Lahey Health team has been instrumental in the success of our coalition.

Winchester Hospital and Lahey Health hospitals work with many other community organizations like ours to identify the health and wellness needs of our community and deliver programs that reach those most vulnerable. The creation of this new health care system is essential to ensuring this work continues and that residents and families in need have access to the health care and support services they need.

We respectfully urge the Department's approval of this application, and thank you for your consideration.

Sincerely,

Shelly MacNeill

Chair, The Stoneham Substance Abuse Coalition

cc: Nora Mann, Esq., Director, Determination of Need Program



December 4, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

Beverly Bootstraps has been serving the community for over 25 years. We are unique in our approach to the issues of hunger. While recognizing that people need food in hand to stem immediate hunger, our clients also need the opportunity to be embraced by the community, educated about the resources available and empowered to improve their own lives.

Beverly Bootstraps provides critical resources to families and individuals so that they may achieve self-sufficiency. We accomplish this while maintaining our commitment to fiscal responsibility and serving as trusted stewards of the organization.

Over the years, the relationship with our community hospital in Beverly, owned by Lahey Health, has been beneficial to our clients, our organization and our community over the years.

The interest the hospital has taken in the health of the most vulnerable members of our community has resulted in important programming such as:

- Screening for food security in the ER: If the patient is food insecure, the ER staff can provide food bags and referrals to Beverly Bootstraps.
- Mobile Markets: The hospital has been a lead funder and champion of this program that provides fresh produce to low income neighborhoods since 2012.
- Community Meals funding: This year, the hospital has provided funding for support to the Beverly Community Meals program to ensure food to those in great need.
- Summer Lunch: The hospital has provided lunches for children who are out of school and hungry.

These are just a few of the ways the hospital has supported the health of the community. We look forward to additional collaborative efforts in the future.

Regards,

Sue Gabriel
Executive Director

cc: Nora Mann, Esq., Director, Determination of Need Program



105 CHAUNCY STREET
9TH FLOOR
BOSTON, MA 02111
VOICE: 617.350.5480
FAX: 617.350.5499
WWW.MIRACOALITION.ORG

December 5, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: **Application Number NEWCO-17082413-TO**

Dear Commissioner Bharel;

On behalf of the Massachusetts Immigrant and Refugee Advocacy Coalition, our 130 member organizations, and the over 1 million immigrant residents of the Commonwealth, I write today to express my support for the application of the Beth Israel Deaconess Medical Center system, Lahey Health System, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital, to create a new, lower cost, high quality non-profit health care system in Eastern Massachusetts. MIRA is the largest coalition in New England promoting the rights and integration of immigrants and refugees. We are a dynamic and multi-ethnic coalition whose membership includes grassroots community organizations; refugee resettlement agencies; providers of social, legal and health services; faith-based organizations and civil and human rights advocates. We organize and empower our members and allies, and together we mobilize immigrant communities to advocate for themselves, and amplify and support their voices. MIRA is a respected leader on immigrant issues at the state and national levels, and an authoritative source of information and policy analysis for policymakers, advocates, immigrant communities and the media.

Beth Israel Deaconess Medical Center is a valued MIRA member, and our partnership continues to illustrate and reinforce the ongoing and critical importance of the hospital to the health status and quality of life in our communities. The creation of this high value health care system is essential to improving the health of immigrant communities, and to ensuring continued access to high quality, affordable health care close to home and seamless access to tertiary and quaternary care when needed.

MIRA respectfully urges the Department of Public Health to approve this application. Thank you for your consideration of this important matter.

Respectfully,

Eva A Millona
Executive Director
Massachusetts Immigrant and Refugee Advocacy Coalition

Mass Department of Public Health
Public Hearing
December 6, 2017

Patti Page
3 Tidal Cove Way
Gloucester, MA

Under the proposed merger there will be a new corporation formed to deliver health care. Currently, it is referred to as NewCo - as in new company to be named later. Provisions of this merger should include a written commitment of services for AGH.

Once the merger is approved, AGH will be the weakest in the group of hospitals with the least services. This will create a need for equity in services. To achieve parity with other facilities in the group, I am advocating for restoration of services, particularly acute care, and investments be made in staffing levels and equipment upgrades at AGH. Non-profit hospitals post their yearly financials and although they cannot claim "profit", they list millions in "surplus" funds.

At previous meetings Administration officials have given assurances there has been an increase in services at AGH. That may be true in number, but not all services are weighted equally in importance with regard to patient safety. To lose services such as acute care surgical services and a maternity floor is far from equivalent to adding screening services or scheduled procedures, even if some these procedures are classified as surgical. Although these routine services are needed in the community, they alone do not make our community safer on a daily basis or during a disaster.

Presently, there is a lot of word-smithing representations with regard to availability of surgical services for AGH Emergency Room patients.

In order to retain ER services, a hospital is required to have the ability to conduct emergency surgery. Currently, there has not been an emergency surgery performed at AGH in years. The claims of "available" emergency surgical services, in that there is an available Operating Room, and if deemed necessary, a surgical team

can be called in to perform surgery, does not equate to actual onsite emergency services being performed. The staffing infrastructure is not in place. There is no medical consultant in residence to evaluate a patient and call in a surgical team. I believe there is no resident anesthesiologist. Additionally, surgical teams, being highly specialized, do not perform on the fly like a mash unit. They need to be familiar with the facility and have experience working with each other. They need to be in residence 24/7/365 to be an effective team.

There is also an issue with providing "emergency" surgery and emergency services regionally. By whose measure is "emergency" now defined? Patients that arrive at AGH are kept relatively comfortable until an **AVAILABLE** surgical room or other emergency service is identified at the nearest facility. Regional emergency service units are full and emergency patients are waiting in que for transport to care facilities. This can take several hours. Patients are being transported long distances in critical condition. This is dangerous for the patient and is taxing on the surgical teams and servicing emergency personnel. Not to mention the toll it takes on the patients' personal support system.

Although statistical outcomes are positive, the risk is transferred to patients and hospital staff.

Mentioned in the GDT, there is a plan to open an Urgent Care center off site of the AGH campus. There is concern if Urgent Care is located somewhere other than at AGH, this will contribute to a further erosion of services at AGH.

I ask the Mass Department of Public Health to objectively evaluate the community needs and reality of available regional resources.

With statistical outcomes in good standing and surplus funds there is solid basis to provide these requests. It would be prudent to include contractual commitments for equity of services, which include restoration of services, particularly acute care, and investments in staffing and equipment. These actions would strength services at AGH, provide relief within the regional system of facilities and create trust and peace of mind within the community.

12/5/2017

To Whom it may concern,

I had to bring my husband to the hospital 3 times in a 12 month period. He had never been to the hospital before. During the same period, I was also admitted 3 times staying an average of 17 days. Because it was Addison C, but my children could not drop in & check on us or bring up what we needed. We were so thankful to start our hospital stay at Addison C, but and the sent to Leahy (3 times) when a bed became available.

I managed elderly housing in Rockledge and my residents often when to ACH only to be treated and come back to their home the same day. It is very, very important we keep Addison open and functioning.



The Peace Institute

Transforming Society's Response to Homicide

December 5, 2017

Commissioner Monica Bharel
RE: Application Number NEWCO-17082413-TO
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

Dear Commissioner Bharel,

I am writing to express my support for the application of the Beth Israel Deaconess Medical Center system (BIDMC), Lahey Health System, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital, to create a new, lower cost, high quality non-profit health care system in Eastern Massachusetts.

The Louis D. Brown Peace Institute is a center of healing, teaching, and learning for families and communities impacted by murder, grief, trauma, and loss founded in 1994. We have a long-standing partnership with BIDMC rooted in a shared commitment to serving survivors of violence and their families with dignity and compassion.

BIDMC is part of the vanguard in acknowledging and addressing the unique and complex needs of people impacted by violence and survivors of homicide victims. These needs include but aren't limited to the highest quality medical care. BIDMC has collaborated with the Peace Institute to offer staff training on the best practices for meeting the physical, emotional, and practical needs of families in the immediate aftermath of their loved one's murder.

BIDMC has implemented the *Survivors Burial and Resource Guide* that offers families a road map from death notification through the funeral and burial process. Thanks to this dynamic partnership, BIDMC providers have tools and training to help families of murder victims to manage the crisis and chaos after a homicide happens. BIDMC staff also participate in the Serving Survivors of Homicide Victims Providers Network as part of their commitment to coordinated, consistent, and compassionate homicide response.

A BIDMC clinical social worker has an office at the Peace Institute to provide counseling to survivors of homicide victims in a setting where they feel most comfortable. Our staff and BIDMC social worker regularly collaborate in order to offer holistic healing events and opportunities for survivors in the months and years after their loved one's murder.



The Peace Institute

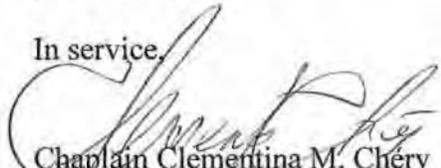
Transforming Society's Response to Homicide

BIDMC is an active partner in the Peace Institute's Mother's Day Walk for Peace. The Mother's Day Walk for Peace is a celebration of our potential to create more peaceful communities. Every year families from across the state and region walk together toward peace. The Mother's Day Walk for Peace started in 1996 so mothers of murdered children could receive support and love from their neighbors. Twenty-two years later, the Mother's Day Walk has become a time-honored tradition and way to lift up our loved ones who have been murdered and embrace our shared responsibility to create more peaceful communities. Dr. Kevin Tabb in particular has been a galvanizing force in growing support for the Mother's Day Walk for Peace and inspired health systems across the state to participate in this meaningful community initiative.

We believe that the creation of this high value health care system will allow for more opportunities to improve care for the survivor community. We trust that BIDMC will do everything in its power to implement effective and equitable homicide response across the health system on a broad scale that's rooted in the needs of local communities. In this way, BIDMC will be a leader in Massachusetts and model the treatment and care families impacted by murder need and deserve.

We respectfully urge the Department's approval of this application, and thank you for your consideration.

In service,



Chaplain Clementina M. Chery
President and CEO



Rachel Rodrigues,
Interim Executive Director

12/08/17

To the Mass DPH Determination of Need Program
Regarding Application NEWCO-17082413-TO

I have worked as an RN for the last 35 years in the Gloucester community, initially at AGH and then as a community health nurse for the VNA for the last 30 years.

I have participated in the many dialogues about the provision of hospital care on Cape Ann. I've witnessed the local results of decisions that were made and allowed through two mergers and a rapidly changing health care environment.

It is amazing to me what a great institution Addison Gilbert has remained. The merger with Beverly Hospital was allowed to lay waste to the provision of services at AGH. The Lahey merger brought some hope of improvement, but AGH remains a shadow of its former self as a full-service hospital.

And yet, I still hear patients every week, on my job and in the community, who continue to applaud the services at AGH, say they never choose to go elsewhere for their care and convey their stories of how AGH is responsible for saving their lives.

I have long wished for an infusion of resources into Addison Gilbert that was commiserate with our population, its actual needs and the numbers who would happily use our local facility if the services were available there.

Gloucester is a community of 30,000 residents approximately and Rockport somewhere around 17,000. In the summer, this population

doubles. The combined communities therefore can have upwards of 100,000 people located here.

Singular ring roads characterize access to most of the Cape Ann population. The narrow street configuration of historic Gloucester and Rockport are primarily scenic byways, rather than efficient roads allowing for rapid medical transport. As a visiting nurse, I am particularly aware of the many residents located on remote side streets and spread across a broad land mass. Multiple issues such as beach traffic backups in East and West Gloucester and on Route 128, lack of alternate roadways, aging infrastructure and access issues with our bridges create special problems. We have no airstrip landing capacity allowing for more than singular helicopters should we become isolated from the mainland in a health or weather emergency.

The last census clearly showed that the population of Gloucester and Rockport are on a unique trajectory with a population that is aging far more rapidly than other locations. The last census predicted that it is not until 2040 that the US population will age to the point that over 20% of the population will be 65 years or older. This has already occurred in both Gloucester and Rockport. And the trend is accelerating in these two communities, rather than equalizing with other places.

We have long maintained an over 65 year old population that exceeded state and national averages, however, our percent of seniors is now outpacing other averages by a much greater percent. What unique services are engendered by populations, in the near future, with seniors amounting to 30-40 percent of the overall population. Certainly, you know the answer to this even better than I. This is our need here and a part of our unique community demographic.

Additionally, we have a disproportionate population that do not own cars, many who require interpreter services, those who might require

services related to the marine environment both commercial and recreational. In Gloucester, although median home prices are extremely high, the city has a large population that is economically challenged and this translates into obvious and predictable health care needs. We have many already in their 90's, primarily females, living on very limited fixed incomes, in a demographic area with rapidly increasing costs for all aspects of life. And this community has certainly seen more than its share of drug related deaths as well as successful resuscitations in our ER and a long-standing need for drug treatment services. The importance of locally based services, to these populations especially, cannot be over emphasized as it greatly impacts the resultant outcomes.

Strong local community health services are what is needed, in addition to a broad-based network of care. Our ER is essential to the provision of adequate care on Cape Ann. The 8 essential services that allow for the provision of emergency care must be promoted and maintained at AGH. Obviously, the need for surgery exists here, the provision of surgery at other small community hospitals within this merger discussion certainly exists, the logistical and institutional capacity for surgery exists at AGH and the residents would loyally support the use of surgical services should they be expanded to any reasonable level.

Loyalty, however, is a two-way street and a public trust requires the voice of the local community in decision making regarding its own special needs. In the wake of the low level of support showed the long standing venerable Addison Gilbert by its partners I have chosen to go to AGH for any services that still exist there and to take my business elsewhere for the services no longer provided there, with only one small concession. So, I go to MGH for pulmonary care, dermatology and to the Voice Center for my vocal cord cancer follow-up.

I do not feel we, as a contributing community, have been a partner in decisions affecting us and the playing field has not been level since the Beverly/AGH merger. After many attempts at engagement with AGH's merged "partners" I exercised the only power I have, to vote with my feet, as a consumer. When my local hospital has been shown some loyalty then I will return to the Lahey System. Why should AGH have the lowest array of acute care services in this hospital system constellation, especially given our needs, current and contributed assets and population numbers.

In a nutshell for me, I will support the parent company when reasonable surgical services return to AGH, signaling a real and concrete commitment to maintaining this institution.

I am convinced that the community would support surgical services and without them this dialogue is just a one-way street over the A. Piatt Andrew Bridge heading out of town. Not my idea of a partnership with Cape Ann residents.

I ask you to insist that the 8 essential services are strengthened at AGH and that AGH is again treated as a partner rather than a resource to be plundered. You are a part of the line of defense that keeps us all from becoming just numbers instead of the complicated community based individuals that we are.

Sincerely,

Marcia F Hart RN

Marcia F Hart RN
2 Fremont St
Gloucester, MA
01930

Determination of Need Program

Commonwealth of Massachusetts

Department of Public Health

250 Washington Street

Boston, MA 02108

Dear Massachusetts Department of Public Health,

On December 6, 2017 I attended the forum in Gloucester concerning the merging of Beth Israel Deaconess Medical Center and Lahey Health along with all affiliated hospitals. I had been on the list to speak but had to leave the forum after the State representatives, Mayor, President and CMO's presented. I would like to voice my approval of the merger and add some information about the needs of the population of Cape Ann.

I currently work as a Clinical Associate on Steele 1 at Addison Gilbert Hospital. I have been employed by Lahey Health since May 2016. It is such a privilege to provide care to the residents of Cape Ann, I can say that all departments at Addison Gilbert strive for the best quality patient care they can provide with the equipment we are provided. I am a solo parent of a 4-year-old and nursing student at University of Massachusetts Boston. I have been fortunate enough to have clinicals at Beth Israel and Winchester Hospital. The plan for increased care and access to services in Boston at BI would only improve the outcomes for patients of all the hospitals in the Lahey Health system.

I would also like to address the determination of need for Addison Gilbert Hospital. Addison Gilbert at one time was a full-service hospital. Currently the hospital provides services for emergencies, acute medical surgical care, ICU, senior adults, clinics, women's health, and oncology along with a small radiology department and individual practices. There is a need due to patient load at the hospital and the needs of the community to restore some services to Addison Gilbert.

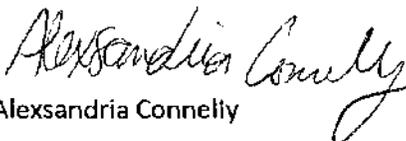
I hope that with this merger Addison Gilbert will continue with renovations to the hospital and opening of closed areas to increase services to Cape Ann. Additional medical surgical/telemetry beds are needed. The radiology department should have certain MRI services restored to reduce costs to patients due to ambulance rides. The hospital needs at least 12 beds to house overnight pediatric patients. The pediatrician's office at Addison Gilbert is wonderful and provide the best care to my son, if he was sick enough for an overnight I would like his pediatrician responding. Operating services should be restored

similar perhaps to what is performed at Winchester Hospital. The ICU and cardiology services should be continued and enhanced. Additional cardiologist should be available at Addison Gilbert for services. I cannot speak higher of the care of Dr. Arsenian and coverage should be available for him or an increased team. The residents of Gloucester need this service at the hospital.

The need for Addison Gilbert Hospital is great, closing a community hospital would harm the residents of Gloucester and Rockport. Restoring and re-opening parts of the hospital to increased services is what the community needs. Not everyone in Gloucester owns a car, Addison Gilbert is convenient for hospital stays and emergencies in addition to housing primary care and pediatric offices. Seconds count in an emergency, some areas of Rockport and Gloucester are a half hour from 128 south. The consequences of time in emergencies is irreversible. Addison Gilbert needs to have some services restored and enhanced. Provider's need to be available at the hospital on a more regular basis to assist with the health needs specifically cardiac in this area. Pediatrics needs to be an option for an overnight stay.

Another factor in the determination of need is the industry of Gloucester. The plight of the fishing industry is well known, what remains is the need for an industrial venture to provide needed local jobs to the area. To have a safe workforce there needs to be local accessible hospital services in case of emergencies. Addison Gilbert serve's Gloucester industries such as Gorton's, Gloucester Engineering, Varian, and hotels. For Gloucester to be able to draw in a business, like Amazon for instance, there needs to be the assurance of emergency medical services close by for the workforce. Beyond being a major employer, Addison Gilbert can be a major factor in industry coming to Cape Ann. Increasing services and beds at the hospital will only improve the lives of the residents of Cape Ann.

I provide the best care I can to the residents of Cape Ann and visitors. Thank you for reviewing my reason's that there is a great need for Addison Gilbert on Cape Ann and the suggestions for restoring services.


Alexsandria Connelly

203 Washington St

Gloucester, MA 01930

alexsandriajan@gmail.com



CITY of BEVERLY
OFFICE of the MAYOR

191 Cabot Street
Beverly, Massachusetts 01915
Phone (978) 921-6000
Fax (978) 922-0285

Mayor

Michael P. Cahill

Chief of Staff

Kevin Harutunian

Executive Secretary

Martha A. Lewis

December 5, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel:

I am writing to express my support for the application proposed by Beth Israel Deaconess Medical Center, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital and Anna Jaques Hospital, to create a new high quality, low cost, non-profit health care system in Eastern Massachusetts.

Beverly Hospital is essential to the health of our district, providing high quality health care services to members of our community and hundreds of jobs in Beverly and the North Shore communities. Further, they are a committed partner on all local prevention issues and supporter of municipal and educational efforts throughout the community.

The creation of this new system is essential to improving the health of our community and to ensuring patients have access to comprehensive, high quality and affordable health care close to home. I thank you for your consideration, and respectfully urge the Department's approval of this application.

Sincerely yours,

A handwritten signature in cursive script, appearing to read "Michael P. Cahill".

Michael P. Cahill
Mayor

Cc: Nora Mann, Esq., Director, Determination of Need Program

DEC 11 PM 3:56



The Commonwealth of Massachusetts
HOUSE OF REPRESENTATIVES

WILLIAM J. DRISCOLL, JR.
STATE REPRESENTATIVE
Seventh Norfolk District

STATE HOUSE, ROOM 134
BOSTON, MA 02133-1053
TEL. (617) 722-2400

WILLIAM.DRISCOLL@MAHOUSE.GOV

JOINT COMMITTEE ON TRANSPORTATION
JOINT COMMITTEE ON EXPORT DEVELOPMENT
JOINT COMMITTEE ON STATE ADMINISTRATION
AND REGULATORY OVERSIGHT
HOUSE COMMITTEE ON BONDING, CAPITAL
EXPENDITURES AND STATE ASSETS

December 5, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO – 17082413 – TO

Dear Commissioner Bharel,

I am writing to express my support for the application of the Beth Israel Deaconess Medical Center system, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital and Anna Jaques Hospital, to create a new, lower cost, high-quality non-profit health care system in Eastern Massachusetts.

As you know, Beth Israel Deaconess Hospital-Milton is a critical provider in my community, providing 24/7 emergency care, acute inpatient hospital care and a range of important healthcare services for the benefit of all patients in this community – regardless of their insurance status or ability to pay. In addition, Beth Israel Deaconess Hospital-Milton is an important employer, providing close to 1,000 jobs in my community.

The approval of this application is essential to the future of Beth Israel Deaconess Hospital-Milton and to ensure continued access to affordable health care in the communities I represent.

The project is consistent with the Commonwealth's goals of improving the health status and quality of life for individuals and families throughout our Commonwealth; of ensuring continued access to affordable, high-quality care close to home, and seamless access to tertiary and quaternary care when needed; and assisting the Commonwealth in meeting its short- and long-term cost containment goals.

I thank you for your consideration, and respectfully urge the Department's approval of this application.

Sincerely,

State Representative William J. Driscoll, Jr.
7th Norfolk District

Cc: Nora Mann, Esq., Director, Determination of Need Program





TOWN OF PLYMOUTH

26 Court Street
Plymouth, Massachusetts 02360
(508) 747-1620

DEC 11 PM 8:56

December 7, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor

RE: Application Number NEWCO-17082413-TOBoston, MA 02108

Dear Commissioner Bharel,

I am writing to express my support for the application of the Beth Israel Deaconess Medical Center system, Lahey Health System, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital, to create a new, lower cost, high quality non-profit health care system in Eastern Massachusetts.

As you know, Beth Israel Deaconess Hospital-Plymouth is a critical provider in my community, providing a full-range of acute hospital care, 24/7 emergency department care, and a range of important outpatient and community health care services for the benefit of all patients in the Greater Plymouth area – regardless of their insurance status or ability to pay. In addition, BID-Plymouth is an important employer, providing more than 1,800 jobs in our region.

The community partnership we share with Beth Israel Deaconess Hospital-Plymouth continues to illustrate and reinforce the ongoing and critical importance of BID-Plymouth to the health status of our residents and the quality of life in Plymouth. The new, expanded healthcare system will further strengthen our shared commitment to providing services and programs that best meet the needs of our residents.

The creation of this high value health care system is essential to improving the health of our community, and to ensuring continued access to high quality, affordable health care close to home and seamless access to tertiary and quaternary care when needed.

We respectfully urge the Department's approval of this application, and thank you for your consideration.

Very truly yours,

Melissa Arrighi
Town Manager, Plymouth

cc: Nora Mann, Esq., Director, Determination of Need Program



The Commonwealth of Massachusetts
MASSACHUSETTS SENATE

SENATOR JASON M. LEWIS

Fifth Middlesex District

STATE HOUSE, ROOM 511B
BOSTON, MA 02133-1053
TEL. (617) 722-1206
FAX. (617) 722-1063

December 5, 2017

Nora Mann, Director
Determination of Need Program
Bureau of Health Care Quality and Safety
Department of Public Health
99 Chauncy Street
2nd Floor, Boston, MA 02111

Dear Director Mann,

We write to express our strong support for the Determination of Need application recently submitted by Beth Israel Deaconess Medical Center, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jacques Hospital, to support the sustainable operation of quality hospital care in the communities we represent. Winchester Hospital has long been a steady public partner and leader in our district, providing quality care and good jobs. Based on the information we have on hand at this time, and in light of the concurrent review conducted by the Health Policy Commission, it appears to us that the proposed merger will further the best interests of patients, employees and the community by keeping care in the community; integrating key behavioral health supports; leveraging economies of scale; and positioning the system to serve underserved populations while meeting new market interests of the ACOs.

We look forward to the review of the Health Policy Commission, and in the meantime, thank you for your consideration of this letter of support.

Sincerely,

Jason Lewis
State Senator
5th Middlesex District

Patricia Jehlen
State Senator
2nd Middlesex District

Michael Day
State Representative
31st Middlesex District

CC: Monica Bharel



The Commonwealth of Massachusetts
House of Representatives
State House, Boston 02133-1054

REPRESENTATIVE
DENISE C. GARLICK
13TH NORFOLK DISTRICT
NEEDHAM, DOVER, MEDFIELD

CHAIR
JOINT COMMITTEE ON MENTAL HEALTH,
SUBSTANCE USE AND RECOVERY
STATE HOUSE, ROOM 33
TEL (617) 722-2080
Email: Denise.Garlick@MAhouse.gov

December 7, 2017

Commissioner Monica Bharel
Massachusetts Department of Public Health
250 Washington Street, 2nd Floor
Boston, MA 02108

RE: Application Number NEWCO-17082413-TO

Dear Commissioner Bharel,

We are writing to express our support for the application of the Beth Israel Deaconess Medical Center system, Lahey Health, Mount Auburn Hospital, New England Baptist Hospital, and Anna Jaques Hospital, to create a new, lower cost, high quality non-profit health care system in Eastern Massachusetts.

As you know, Beth Israel Deaconess Hospital-Needham is a critical provider in our communities, providing 24/7 trauma care, acute hospital care, and a range of important health care services for the benefit of all patients in our communities – regardless of their insurance status or ability to pay. In addition, Beth Israel Deaconess Hospital-Needham is an important employer, providing more than 650 jobs in our region.

The approval of this application is essential to the future of Beth Israel Deaconess Hospital-Needham, and to ensure continued access to affordable health care in the communities we represent.

The project is consistent with the Commonwealth's goals of improving the health status and quality of life for individuals and families throughout our Commonwealth; of ensuring continued access to affordable, high quality care close to home, and seamless access to tertiary and quaternary care when needed; and assisting the Commonwealth in meeting its short and long-term cost containment goals.

We thank you for your consideration, and respectfully urge the Department's approval of this application.

Very truly yours,

Denise Garlick
State Representative
13th Norfolk

Richard J. Ross
State Senator
Norfolk, Bristol, and Middlesex

Michael F. Rush
State Senator
Norfolk and Suffolk

cc: Nora Mann, Esq., Director, Determination of Need Program

John Fogarty, President & CEO, Beth Israel Deaconess Hospital-Needham

12/8/17

I was not allowed to complete my testimony at the DON meeting held in Gloucester on December 6th re: The proposed merger of Lahey health System that included Addison Gilbert Hospital. I enclose testimony here.

Sincerely,

Lee Swekla

9 Bertoni Rd.

Gloucester, Ma. 01930

Thank you for being here today. I am Lee Swekla, President of the Addison Gilbert Citizens Fund. The AGH Citizens Fund is a nonprofit, Citizen controlled, grass roots organization established in 2010. Our mission is to support Comprehensive in patient and out- patient care on site at AGH for the benefit of the Cape Ann community.

We have, over the course of the fund, contributed thousands of dollars for support of and equipment for general and orthopedic surgical services, the new cardiology suite and the endoscopy suite.

Our goal is and always has been to support the hospital and bring back surgical services to Gloucester.

Since the merger or take over by North East Health Systems we have suffered greatly. This community recognizes the importance of having a full-service hospital right here on Cape Ann.

Over the course of several months I have spoken to surgeons about returning to AGH O.R. One outright said that they would love that, one said he would consider it an honor to operate in the same community that he serves in his office, but said he was told he could only operate at Beverly or Lahey and one said simple

"absolutely, but its not allowed. And yet another said it will never happen unless those at the helm of AGH start acting on behalf of your community. He also stated that he would need the equipment and allowable block time to sustain the number of surgical cases he currently has at Beverly hospital where many of his patients are Cape Ann residents.

Not only are we in need of surgery, but surgical consultations as well. Recently, an 86-year-old woman who lives about some doors down from AGH, called me and asked if I would give her a ride to the hospital. When I asked why she said that she was having rectal bleeding. She had been bleeding for hours. I offered to call an ambulance for her and meet her at AGH as I knew she had no family in the area.

She quickly became alarmed and begged me not to do that as she feared she would be taken to Beverly Hospital. A quick assessment in my head told me I could safely get her there and I did. No one was available at the E.R. desk to assist us, but there was a phone and I dialed 0 which got me to an operator at Beverly Hospital. I explained our situation, and someone came to assist us and got her in a room. I stayed with her, helped

her undress and waited through her initial exam with the E.R. doc. I am not a doctor or a nurse, but I knew by what I was seeing on the monitor that she would not be going home that night.

When I felt she was in good hands, I left. A short time later she called and said she was being admitted and thanked me for my assist.

A short time after that she called again extremely agitated because although they had a bed for her, they had no GI specialist at AGH to examine her.

Weeks before, during a conversation with Ms. Donaldson she had assured me that a doctor would indeed come if a GI bleed needed attention. The doctor on call at Beverly refused to come and said send her by ambulance to Beverly hospital where he was. Both the patient and myself were frustrated, but when you need attention you go.

A short while later she called again in tears saying that they were sending her to lahey. The situation was this: WE HAD A BED AT AGH, BUT NO DOC. BEVERLY HAD A DOC, BUT NO BEDS.

Did I mention that she was 86 yrs. Old? Her biggest concern in that moment was how would she get back to

Gloucester from Lahey. No family, no transportation, no support.

This was not good patient care. This is not how our health care delivery system should work. Schlepping around the elderly like they are a sack of potatoes in a grocery cart is unacceptable.

Granted, in the aftermath at Lahey she was taken care of very well, as they are well trained in damage control.

In another incident, while visiting a patient in respiratory distress she was very unhappy with the shortage of nursing staff and the fact that they wouldn't change her bed sheets while she was sweaty and uncomfortable.

The nurse on duty said that the staff was told it was not necessary to change a patient's sheets daily. This practice was confirmed to me by a retired nurse who said she visited her aunt daily and the first thing she did for her was change her sheets. If you have ever spent time in a sweat or in pain in a hospital bed you can imagine what I am saying.

I asked the patient if she wished to address her situation with administration and she did. A member of the administration staff as well as the charge nurse came and

heard her complaint. Once all was rectified she was extremely happy with her care moving forward.

In my own case, my husband, while at the end of life, fell out of bed while at AGH. I asked for a specialist to look at his hip. I was told they could send him to Beverly for a consult and if no surgery was needed they could send him back to AGH. Would you put your dying spouse through that? Would you?

Over the years Cape Ann Resident have contributed thousands of dollars, if not millions to AGH. Monthly we receive letters seeking even more donations, saying matching gifts are available.

Its time for matching gifts, weather doubled or tripled to go to the direct care of Cape Ann Citizens in need of not only surgery, but surgical consult on site as well.

You cannot have a hospital without surgery and you can't provide basic medical care without surgery. I could say more, as I have much to say, but for now I'll thank you for being here and hearing our concerns.

Lee Swekla

From: cgconnelly@aol.com

Date: December 14, 2017 at 12:21:43 AM EST

To: dph.don@massmail.state.ma.us

Subject: Determination of Need Program for Addison Gilbert Hospital in Gloucester

Determination of Need Program
Commonwealth of Massachusetts
Department of Public Health
250 Washington Street
Boston, MA 02108

This letter is written to convey my personal thoughts concerning that once again after having just being brought under the wing of Lahey Health, Addison Gilbert Hospital again has to re-prove itself as to the need of our community hospital here on Cape Ann. People who do not live here think that we are "just a few minutes from Beverly" and that that lone fact makes the need for medical facilities are not needed or that the adequacy of care is no big deal. Route 128 is just a little trip up the highway...try it in a rain storm or winter ice and snow conditions and also realize that geographically, it takes anywhere from a few minutes to upwards of 15-20 minutes just to get to one of the entrances to 128 from Rockport, West Gloucester, Wingaersheek areas or East Gloucester areas and there are just two bridges to get off of the island. A fast trip just from Grant circle to Beverly takes a heavy 20 minutes and that is by normal transportation means. Which brings up my next point. There are more than a few family households that do not have vehicles and getting to Beverly can be problematic as direct transportation can only be done by taxi which is expensive. Train service is not a convenient option either. Cape Ann has a very convenient CATA Bus service that serves the community well and it makes it possible for family and friends to visit patients at Addison Gilbert.

As far as care is concerned, Addison Gilbert does a fine job even with the limitations forced on them by Beverly Hospital and I personally prefer Addison Gilbert rather than Beverly and if I need acute service I go to Boston.

I also feel that there are some services that need to be brought back to Gloucester that would serve the community better. There should be at least a small unit for pediatric care here locally. We have good pediatricians, Family Health office and Child Services all located right next to the hospital and having young patients able to stay in the community would enhance the overall services to our younger resident population. Having the doctors able to serve their young patients without having to travel to Beverly would

enhance services that they could offer their young patients and their families and help to sustain and attract future doctors to serve here on Cape Ann.

There is also a need for some type of a med/operating facilities to be returned to the hospital...again taken away to Beverly. At times, I deeply resent the fact that one hospital does all in their power to take away good care and essential services just to make themselves bigger and more important.

I have been a resident Gloucester for the past 42 years when I married into a Gloucester family and my husband and I raised our children and use Addison Gilbert Hospital when ever possible for all of our general medical needs and only when required do we use other hospitals. I am 71 and my husband is 74 and we have always received excellent and professional medical attention from the all facets of the medical and rehabilitation services affiliated with Addison Gilbert Hospital and hope to able to do so for not just ourselves but for the continuation of good health for the residents and summer tourists who come to Cape Ann.

Sincerely,

Candace Connelly
203 Washington Street
Gloucester, MA 01930

From: Bill & Gerrie Butman <butmanbg@comcast.net>

Date: December 14, 2017 at 9:40:41 AM EST

To: dph.don@massmail.state.ma.us

Subject: Lahey, Beth Israel, Anna Jacques, etc DON

Reply-To: Bill & Gerrie Butman <butmanbg@comcast.net>

Determination of Need Program

Commonwealth of Massachusetts

Department of Public Health

Dear Members,

We support the proposed combination of Lahey, New England Deaconess, etc, but with some reservation. We are afraid that it will be at the expense of the smaller institutions such as Addison Gilbert Hospital. We feel the current trend toward technological advances should allow the health care systems to retain smaller outlying institutions rather than attempting to combine all services in mega facilities. Current and future technology allows both paperwork and face to face communication to be available across geographical distances and potentially eliminating the need for patients to travel to large central facilities. It would also seem to allow many of the business services to combine to promote monetary savings while still allowing patient care to be available locally.

We hope whatever your decision may be will incorporate the insistence of continued local care through the current community hospitals such as Addison Gilbert.

Sincerely

William & Geraldine Butman

Concord Street

Gloucester, MA

MAKE HEALTHCARE AFFORDABLE
COALITION

December 14, 2017

Nora Mann, Director
Massachusetts Department of Public Health
Determination of Need Program
250 Washington Street, 6th Floor
Boston, MA 02108

**RE: Letter from 46 members of the Make Healthcare Affordable Coalition
opposing the 13 Hospital Mega Merger led by Beth Israel and Lahey Health**

Dear Director Mann,

The Make Healthcare Affordable Coalition is a non-profit organization formed earlier this year by diverse community members across Eastern Massachusetts. We are deeply concerned about the rise in health premiums and negative impacts on communities of color that would arise from the proposed 13 hospital Mega Merger led by Beth Israel Deaconess Medical Center and Lahey Health.

Our organization believes this merger will lead to higher costs for all, and will especially hurt communities of color and small-businesses.

We urge the Department of Public Health to deny approval of this merger, which would control one-of-three hospitals and reduce access to community hospitals that serve Latinos, African Americans, Cape Verdeans, Chinese, Haitian and Vietnamese residents.

Mega Merger Background:

Upon receiving the merger request earlier this year, Massachusetts Health Policy Commission (HPC) Chair Stuart Altman called the proposed consolidation, "The most significant change in the structure of the Massachusetts health care market in more than 20 years, and it will further consolidate our health care market into a small number of major systems and a declining number of independent community hospitals."¹

We could not agree more. All available facts lead us to determine that the merger will harm our most vulnerable communities.

Negative Impacts on Communities of Color:

- If the 13 Hospital Mega Merger is approved, Beth Israel-Lahey Health will become the largest health provider in Eastern Massachusetts
- This Mega Merger will control 1 of 3 hospitals in Eastern Massachusetts and use this power to increase prices
- Community hospitals outside the Mega Merger won't be able to compete and will be forced to

¹ HPC Statement on BID-Lahey Merger Announcement, 7/13/2017. <http://www.mass.gov/ani/budocct-taxes-and-procurement/oversight-agencies/health-policy-commission/hpc-statement-on-on-bid-lahey-merger-announcement.html>

- reduce services, or close
- People of color will lose their doctors, and access to services and will pay more in health care premiums if the merger is approved
- The Mega Merger will shift wealthy patients to Boston-priced facilities to make a larger profit
- The merged entity will leave MassHealth and Connector patients behind as they aren't as profitable
- Owners of small-businesses like bodegas and convenience stores will see their insurance premiums skyrocket

Supporting Facts:

This proposed merger involves the consolidation of the following entities: CareGroup, Inc. (the parent of Beth Israel Deaconess Medical Center, Inc. (BIDMC), which includes Beth Israel Deaconess Hospital - Milton, Inc., Beth Israel Deaconess Hospital - Needham, Inc., and Beth Israel Deaconess Hospital - Plymouth, Inc., New England Baptist Hospital, and Mount Auburn Hospital); Lahey Health System (LHS), Inc. (the parent of Lahey Clinic Hospital, Inc., Northeast Hospital Corporation, and Winchester Hospital); Seacoast Regional Health Systems (SRHS), Inc. (the parent of Anna Jaques Hospital); and contracting entities such as BIDCO and other physician networks.

Although the official proposed transaction includes 10 hospitals, it is important to evaluate the entirety of BIDCO (including the three non-owned Contracting Affiliates - Cambridge Health Alliance, Lawrence General, and MetroWest Medical Center) and to include the clinical affiliation between Beth Israel and Signature Brockton.

This merger would represent a massive consolidation of providers in Eastern Massachusetts, and this increased market power will give them significant leverage to increase prices and health insurance premiums. If this merger is approved, Beth Israel Deaconess (BI)-Lahey would become the largest provider in Eastern Massachusetts by many key measures. It would control one in every three hospitals - including one in three emergency room discharges - and nearly the same share of primary care visits as Partners - in Eastern Massachusetts.² BI-Lahey would represent a new Goliath in the market. As CHIA's and the Attorney General's landmark cost trend reports have repeatedly demonstrated, the market power of providers is the single greatest driver of cost growth in Massachusetts. This entity also would have even greater ability to drive patients from community-based hospital settings to the more expensive Boston-based, or Boston-priced, providers.

We don't have to guess if these entities would use enhanced market leverage to increase prices, we already have proof. Both Lahey and Beth Israel have gained market share over the last few years, and both have increased medical costs. Beth Israel saw its market share nearly double from 2012 to 2015, and that corresponded with an 8.5 percent growth in Total Medical Expenses in 2015 alone³. As Lahey acquired Beverly Hospital and Winchester Hospital, nearly doubling its market share, its Total Medical Expenses rose by 3.5% in 2015⁴.

Based on these trends and the increased market leverage that would result from this consolidation, we believe the BI-Lahey merger could cause Total Medical Expenses to grow by nearly 6%⁵ - well beyond the state's cost containment benchmark. **Massachusetts residents could see premium increases in**

² 2015 CHIA IP Case Mix data

³ 2016 CHIA Total Medical Expense Report. Represents weighted average of 3 largest commercial payers (BCBS, Tufts, HPHC).

⁴ 2016 CHIA Total Medical Expense Report. Represents weighted average of 3 largest commercial payers (BCBS, Tufts, HPHC).

⁵ Based on analysis of 2016 CHIA Total Medical Expense Report

the tens of millions of dollars.⁶

While the cost increases resulting from this merger will impact everyone in Massachusetts, we believe it will disproportionately harm small businesses and individuals in poorer communities and communities of color. Addressing growing inequities in health care has been a priority of the DPH and Governor Baker's Administration, and we believe this is yet another reason to further review this proposed merger.

Beth Israel and Lahey predominantly serve wealthy communities. Approximately 63% of BI-Lahey's patients reside in high income areas in Eastern Massachusetts, and 72% of BI-Lahey's service area zip codes have median incomes greater than the state median.⁷ They also both serve a relatively small percentage of the state's Medicaid population. The merger will only continue this focus on wealthier patients, while our poorer neighborhoods and communities will be forced to subsidize that care through higher premiums and higher costs.

In addition, BI-Lahey – through their negotiating power and physician networks - will be able to further drive utilization out of community settings and into the higher priced academic medical centers. This will put local community hospitals and providers at an even greater disadvantage, widening the gap between the "haves and have nots."

This will harm communities of color. Local, independent community hospitals will not be able to compete. That means people in our low-income communities and communities of color are going to steadily see their community hospitals close and lose access to their doctor. It is the exact opposite direction that we should be going in health care right now.

We know that the entities have claimed that they will use this consolidation to increase efficiency and reduce costs. These claims run counter to everything we have learned about the impact of market consolidation, including studies by the Attorney General's Office, CHIA, and the HPC. In fact, the leadership of Lahey and Beth Israel argued against the "cost efficiency" premise when the Partners merger was proposed just a few short years ago. **There is no evidence – either through independent research or Lahey and Beth Israel's own actions – to demonstrate that this increased market power will do anything but raise costs and premiums for all.**

We understand that the DPH cannot rely on our analysis alone, nor can it rely on the analysis offered by BI and Lahey - it must verify these facts through its own independent review. During this review process, we urge the DPH to collaborate with the Attorney General's Office and the HPC, and also engage more stakeholders and residents to understand the community impact of this unprecedented merger.

Comments on Public Hearings:

Numerous members of our coalition attending the DPH's public hearings in Roxbury and Gloucester in early December. Many delivered testimony in line with the message of this letter.

However, dozens of our members are urban working people who could not attend due to the locations and times of these hearings. Further we found that a lack of translation services on site made it impossible for non-English speaking residents to participate. We urge you to give weight to the voices of communities of color and solicit feedback from more diverse communities as you review this merger proposal.

This consolidation will have enormous implications on health care costs for diverse families and businesses, on access to care in our poorest communities, and on the health care market as a whole. It **would** represent the most significant change to the health care market in the last 20 years.

⁶ Based on analysis of Health Policy Commission Cost Trends Report
⁷ 2015 CHIA IP Case Mix data

We write on behalf of our communities to request that the DPH and its Public Health Council deny approval of this merger.

Thank you for your consideration.



Hanoi Reyes of Jamaica Plain

On behalf of the Make Healthcare Affordable Coalition

Current list of members follows:

617-419-6989

info@makehealthcareaffordablecoalition.org

MAKE HEALTHCARE AFFORDABLE
COALITION

First Name	Last Name	Title	Residence
Mireya	Abreu	Community Member	Jamaica Plain
Yomaira	Avalo - Pimentel	Community Member	Jamaica Plain
Maiky	Cardoza	Community Member	Lawrence
Sacheat	Chan	Community Member	Lowell
Visal	Chin	Program Coordinator, Cambodian Mutual Assistance Association	Lowell
Luz	Corporan	Community Member	Dorchester
Belkis	Diaz	Community Activist, CLIMA	South Boston
Porfirio	Duarte	Community Member	Jamaica Plain
Somony	Eng	Nail Technician	Lowell
Raunel	Fernandez	Community Member	Jamaica Plain
Keke	Flourissant	Small Business Owner	Mattapan
Yvette	Gonzalez	President, Banilejos Unidos en el Exterior	Jamaica Plain
Dinorah	Gonzalez	Community Member	Lawrence
Tararith	Kho	Community Member	Lowell
Juan	Lopez	Community Liaison	Jamaica Plain
Eunice	Lopez	Community Member	Dorchester
Rodolfo	Martinez	Community Member	Dorchester
Altagracia	Mayi	Community organizer	Lawrence

Katie	Moleus	Radio / TV personality - Community Activist	Mattapan
Tony	Molina	VP, Puerto Rican Veterans Monument Square Association	Hyde Park
Digna	Nova	Community Member	Dorchester
Gladys	Oliveros	Executive Director & Founder, Casa Cultura	East Boston
Soady	Ouch	Community Member	Lowell
Jacqueline	Peguero	Advisor & Former President, Banilejos Unidos of Boston	Jamaica Plain
Muth	Pheak	Community Member	Lowell
Carmen	Pola	Mission Hill Community Leader	Mission Hill
Juan	Reyes	Community Member	Lawrence
Franklin	Rodriguez	Community organizer	Boston
Irene	Rodriguez	Community Member	Boston
Jeimy	Rodriguez	Community Member	Hyde Park
Alex	Rosa	Community Office Manager	Boston
Luis	Rosaado	Community Member	Dorchester
Alba	Rosado	Community Activist and Leader	Dorchester
Santa	Rosado	President, LULAC Mass Council #12125	Jamaica Plain
Carmen	Santana	Community Member	Dorchester
Haydee	Santana	Community Member	Dorchester
Corila	Santiago	Community Member	Hyde Park
Rathy	Seng	Community Member	Lowell
Saureth	Sok	Community Member	Lowell
Digna	Sosa	Community Member	Jamaica Plain
Chhorvivoinn	Sumsethi	Community Organizer and Human Services Coordinator	Lowell
Sergio	Taveras	Community Member	Jamaica Plain
Maria	Trigueros	Community Member	Lawrence
Maryn	Uy	Community Member	Lowell
Tooch	Van	Community Organizer	Lowell

cc:

Governor Charlie Baker
HHS Secretary Marylou Sudders
DPH Commissioner Monica Bharel
Attorney General Maura Healey
HPC Executive Director David Seltz
Sen. Jason Lewis
Rep. Kate Hogan
Rep. Evandro Carvalho

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