

STAFF SUMMARY FOR DETERMINATION OF NEED
BY THE PUBLIC HEALTH COUNCIL
October 21, 2015

APPLICANT: West Suburban Eye, LLC.

PROGRAM ANALYST: Lynn Conover

LOCATION: 321 Billerica Road
Chelmsford, MA 01824

REGION: HSA 3

DATE OF APPLICATION: July 6, 2015

PROJECT NUMBER: 3-4957

PROJECT DESCRIPTION: Relocation and renovation of 7,015 Gross Square Feet (“GSF”) for a licensed Freestanding Ambulatory Surgery Center (“FASC”) to create one operating room with clinical and administrative support space in an existing building in Chelmsford, Massachusetts.

ESTIMATED MAXIMUM CAPITAL EXPENDITURE:

Requested: \$2,509,483 (July 2015 dollars)
Revised: \$2,744,595 (July 2015 dollars)
Recommended: \$2,744,595 (July 2015 dollars)

ESTIMATED FIRST YEAR INCREMENTAL OPERATING COSTS:

Requested: \$1,795,116 (July 2015 dollars)
Revised: \$1,814,343 (July 2015 dollars)
Recommended: \$1,814,343 (July 2015 dollars)

LEGAL STATUS: A regular application for a Determination of Need (“DoN”) for substantial capital expenditure pursuant, substantial change in service and original licensure to M.G.L. c.111, §25C and the regulations adopted thereunder.

ENVIRONMENTAL STATUS: No environmental notification form or environmental impact report is required to be submitted for this project since it is exempt under 301 Code of Massachusetts Regulations 11.00, promulgated by the Executive Office of Environmental Affairs pursuant to Massachusetts General Laws, Chapter 30, Section 61-62H. This exemption has the effect of a determination that the project will cause no significant damage to the environment.

OTHER PENDING APPLICATIONS: None

COMPARABLE APPLICANTS: None

COMMENTS BY THE DIVISION OF MEDICAL ASSISTANCE: None submitted

COMMENTS BY THE CENTER FOR HEALTH INFORMATION AND ANALYSIS: None submitted

COMMENTS BY THE HEALTH POLICY COMMISSION: None submitted

TEN TAXPAYER GROUPS (TTGs): None formed

RECOMMENDATION: Approval with conditions

I. BACKGROUND AND PROJECT DESCRIPTION

West Suburban Eye Surgery Center, LLC (the “Applicant” or “Surgisite Boston”) filed a Determination of Need (DoN) application on July 6, 2015, to renovate and relocate a FASC from 280 Haverhill Street, Lawrence, MA to 321 Billerica Road, Chelmsford, MA, called Surgisite North. The Applicant requested to operate one operating room (“OR”) to provide ophthalmic surgery at the new location in Chelmsford (“Surgisite North”).

The Applicant is a limited liability company (“LLC”) that currently owns and operates a licensed, four OR FASC in Waltham, MA called Surgisite Boston. The Applicant LLC’s ownership consists of 20 physician members, most with a 4.25% interest, and with the manager physician having 21.27% interest.

The Applicant, through the DoN Change of Ownership process (Project #3-4953, approved on April 22, 2015) acquired a FASC consisting of one OR located at 280 Haverhill Street, Lawrence, MA owned by Boston Laser Surgery Center, LLC (“Boston Laser”). No capital expenditures were associated with the approved acquisition. The former owner had obtained a license in 2012 for the FASC located in Lawrence, but had never established infrastructure or commenced operations at this site. The Department of Public Health (“DPH”), through the Public Health Council, approved the change in ownership with the stipulation that the Applicant file a DoN within six months in order to maintain a valid license (which had been inactive for several years under the previous owner) for the FASC. This application was received within that timeframe.

The Applicant stated that the layout of the facility at 280 Haverhill Street was not feasible for operating a FASC compliant with current Centers for Medicare and Medicaid Services (“Medicare” or “CMS”) certification requirements. It was due to these physical plant compliance issues that the previous owner, Boston Laser, opted to temporarily close the FASC as it evaluated its options to relocate.

Surgisite Boston’s application outlined its intent to establish a satellite facility. However, CMS staff indicated that Medicare likely could not certify satellite FASCs and if so, the site could not obtain Medicare certification. Therefore, the Applicant has agreed to establish the proposed Surgisite North as an independent FASC. The Department’s review was based on the Applicant’s agreement to pursue this type of facility.

The new FASC will be a state-of-the-art, single OR outpatient center. This project requires a revised substantial capital expenditure of \$2,744,595 (July 2015 dollars) associated with renovations of 7,015 GSF to create the one OR with support and administrative areas. The clinical space includes a consultation area, pre-admission testing rooms, a pre-operative area and a post anesthesia care unit (“PACU”). Support spaces include a lobby/waiting area, central sterile processing, clean supply areas and administrative offices.

The Applicant anticipates providing ambulatory surgery services for elective ophthalmic surgical procedures which have been approved for Medicare payment when performed in an ambulatory setting including cataracts, trabeculectomy, ocular shunts, corneal transplants, oculo-plastics, and retina procedures.

II. STAFF ANALYSIS

In reviewing this DoN application, Staff consulted the DoN Regulations and *Guidelines for Freestanding Ambulatory Surgery Centers* (“Guidelines”), approved on November 15, 1994. Given that the guidelines have not been updated and that clinical practice has evolved, Staff has applied the Guidelines to appropriate Factors for the scope of this FASC application. While the Applicant is applying for a DoN under the category of substantial capital expenditure, it is additionally requesting approval to transfer the service

obtained through DoN Project 3-4953 from a site that is not operational to the proposed newly constructed location at 321 Billerica Road in Chelmsford, MA.

A. HEALTH PLANNING PROCESS

Prior to filing this application, West Suburban Eye Surgery Center, LLC consulted with DPH legal and DoN Staff, as well as the Executive Office of Health and Human Services (“EOHHS”) Office of Acute and Ambulatory Care within the Office of Medicaid.

The Applicant indicated that it underwent extensive long range planning which took into consideration such factors as their historical patient data, quality and efficiencies at the current Surgisite Boston; as well as the regional need and demographics in the Merrimack Valley.

Staff finds that the Applicant meets the Health Planning requirements of the guidelines.

B. HEALTH CARE REQUIREMENTS

Data provided by DPH’s Division of Health Care Facility Licensure and Certification (“DHCFLC”) indicate that there are 18 licensed ophthalmic surgery clinics in Massachusetts with only one being located in the Applicant’s projected service area, within the Merrimack Valley.

Since this application concerns a previously approved license for a single specialty ambulatory surgical service, staff limited their analysis of need to the reasonableness of the Applicant’s justification for the project.

Transfer of Site

The Applicant indicated that Surgisite North will provide elective ophthalmic surgical procedures to relatively healthy patients in a more accessible setting for patients in the Merrimack Valley area. The Merrimack Valley Region comprises approximately 32 towns and cities along the Merrimack River and New Hampshire border. The total population of the region is 608,500.

Consistent with the requirements of the Guidelines, the new site will improve access and is easily accessible from both Interstate 495, and Route 3. It is 23 miles or approximately 16 minutes driving time from the current site in Lawrence, and approximately 33 minutes west of the only other FASC in the service area.

Staff notes that opening a FASC anywhere within the service area would provide improved access for patients needing ophthalmic surgery given that the Applicant’s approved site in Lawrence had never treated patients and thus never provided access within the region.

Based on the above analysis, staff finds that the Applicant meets the requirements of the Transfer of Site procedures pursuant to 105 CMR 100.720 of the Regulations.

Utilization Projections

The volume projections that the Applicant developed for the FASC were based off of the following data sources:

- 1) The current volume of patients residing in the Merrimack Valley that are served by the Surgisite Boston in Waltham;
- 2) Estimated additional growth in the market, and
- 3) Estimated number of newly acquired cases within the service area that are currently traveling out of the area.

The Applicants' projections by type of surgery are presented below.

Volume Projections for Chelmsford Site

	2016	2017	% Change from 2016-2017	2018	% Change from 2017-2018	2019	% Change from 2018-2019	2020	% Change from 2019-2020
Cataracts	1000	1500	50%	3500	133%	4500	29%	4815	7%
Yag and SLT Laser	100	200	100%	300	50%	400	33%	428	7%
All Other	1000	800	-20%	1300	63%	1600	23%	1712	7%
Total	2100	2500	19%	5100	104%	6500	27%	6955	7%

The data provided by the Applicant indicates that the Waltham site treated 1,839 patients who reside in Surgisite North's projected primary service area ("PSA"). This volume would contribute an average of seven patients per day to the proposed Surgisite North site, assuming surgeries are performed 250 days per year.

Additional volume at the proposed Surgisite North site is projected based upon historical demand at their Waltham site. Data provided indicate an average annual growth rate of 8.6% over five years. With 79 credentialed physicians at the Waltham site who will also have privileges at the new FASC, new referrals will be gained from providers who did not previously refer patients to Waltham. The Applicant reported that some patients who are currently referred to Massachusetts Eye and Ear Infirmary in Boston will now be referred to their Chelmsford site, given patient preference for community-based services and the Applicant's strong reputation.

The main population group obtaining ophthalmic surgical procedures is the sixty-five and over age cohort ("65+") due to age related changes in vision. Population projections for this age cohort will have the greatest impact on the demand for the Applicant's services. At the Applicant's Waltham site, over 90% of their surgeries are performed on this age group.

In the PSA, the 65+ population group grew by over 15% between 2000 and 2010, as shown in the table below. More noteworthy are the growth projections for this age cohort which over twenty years is 37%, to 185,472 by 2030. While this age cohort comprised 12% of the population in 2010, it will constitute 23% of the total by 2030.

Primary Service Area Population Projections 2010-2030

Population	2010 Actual	2020 Projection	Projected % Increase from 2010-2020	2030 Projection	Projected % Increase from 2020-2030
Total-All Ages	745,239	790,735	6.1%	806,158	2.0%
65+	90,388	135,401	49.8%	185,472	37.0%
% 65+	12.1%	17.1%		23.0%	
Source: UMass Donahue Institute Population Estimates Program (MISER)					

The Applicant's projected volume is based on their current caseload of patients who reside in the projected service area, the growth of the aging population, outmigration, and the strength of their physician referral network. Given the lack of community surgical providers now (since the approved site was never

operational), the initial growth rates are high while outmigration is captured and pent-up demand is satisfied. Ultimately, by the fifth year (2020) the growth rate is expected to level off at 7%.

While staff believes that these projections for 2018 may be optimistic, since the Applicant did not have out-migration statistics, it does not negate the need for this service in the region. Staff notes the importance of planning for anticipated need for services that contribute to maintaining independence, such as ophthalmic surgeries that prevent blindness, for this age cohort.

Based on the above analysis, Staff finds that West Suburban Eye Surgery Center, LLC meets the Health Care requirements of the Guidelines.

C. OPERATIONAL OBJECTIVES

The planned days and hours of operation will exceed the minimum requirements of the Guidelines to operate eight hours per day, five days per week for a minimum of 250 days per year. The Applicant will operate the facility eleven hours per day, six days a week, Monday through Saturday, and exceed the minimum of 250 days per year.

The Guidelines require that an Applicant have a written policy regarding the provision of services without charge; acceptance of Medicaid patients and care for indigent and low income patients; as well as assurance to treat racial and ethnic minorities, handicapped and other underserved populations. Since the Applicant did not provide such a policy, in order to ensure access, staff recommends as a condition of approval, that West Suburban Eye Surgery Center, LLC shall not consider ability to pay or insurance status in scheduling patients for surgery for Massachusetts residents.

Also, as part of a condition of approval, in order to assure accessibility to limited English proficient patients, the Applicant has agreed with DPH's Office of Health Equity on a timeframe for submitting plans to provide interpreter services consistent with its recommendations. West Suburban Eye Surgery Center, LLC shall:

- a) Submit a high priority plan that ensures their capacity to provide timely and competent interpreter services to the Office of Health Equity three months prior to their inaugural opening;
- b) Contact the Office of Health Equity to review their interpreter services operations within the first six months of operations; and,
- c) Enter into agreement with the Office of Health Equity to provide language access services consistent with the recommendations of the Office of Health Equity.

In summary, Staff finds that, with adherence to certain conditions, the project meets the Operational Objectives requirements of the Guidelines.

D. COMPLIANCE STANDARDS

The Applicant reports that it will comply with all applicable standards in the Guidelines as well as those in the Massachusetts Clinic Licensure Regulations (105 CMR 140.000) in order to re-activate its license at the new FASC site including:

- Facility Guidelines Institute ("FGI") for Design & Construction of Hospital and Outpatient Facilities
- Medicare Conditions of Participation for Ambulatory Surgical Services, including obtaining Medicare certification within one year of licensure, which staff recommends as a condition of approval.

The Applicant provided transfer agreements within the Tufts-New England Medical System, which includes Lowell General Hospital ("LGH"). Patients requiring urgent care or extended observation after surgery will be transferred to LGH which is within the 15 minute maximum travel time specified in the Guidelines.

Additionally, the Applicant provided both radiological and laboratory service agreements for anatomical and clinical services with the Tufts- New England Medical System radiological and pathology laboratories.

As previously stated, through the DoN application process, West Suburban planned to establish Surgisite North as a satellite of Surgisite Boston. During review of the project as a satellite, and in consultation with the DHCFLC, Staff learned from CMS staff that Medicare likely could not certify satellite FASCs. Due to these CMS limitations, the Applicant has decided to establish the proposed Surgisite North as an independent FASC, and will seek a separate clinic license for Surgisite North. This will require a DoN condition of approval which will require the Applicant to meet the Medicare conditions of participation for ambulatory surgical services and license the FASC as a freestanding clinic and not as a satellite.

Based on the information provided by the Applicant, and with adherence to a certain condition, Staff finds that the project meets the Compliance Standards of the Guidelines.

E. REASONABLENESS OF EXPENDITURE AND COST:

The proposed and recommended Maximum Capital Expenditure (“MCE”) for this project is \$2,744,595 (July 2015 dollars), itemized as follows.

	Renovation
Total Land Costs	\$ 0
Construction Costs:	
Depreciable Land Development	0
Building Acquisition Cost	678,125
Construction Contract	1,294,033
Fixed Equipment NOT in Contract	173,420
Architectural Cost	129,400
Pre-filing Planning & Development	50,000
Post-filing Planning & Development	5,000
Other: Furnishings, Signage	75,000
Net Interest Expense during Construction	11,840
Major Movable Equipment	317,777
Total Construction Costs	\$2,734,595
Financing Costs:	
Cost of Securing Financing	10,000
Total Financing Costs	\$10,000
TOTAL COSTS	\$ 2,744,595

Construction Costs

Staff used the Marshall & Swift Valuation Service *Outpatient (Surgical) Centers (431) Class A-B Good* to aid in determining the reasonableness of construction costs as the chart below demonstrates.

	RENOVATION
Proposed GSF	7,015
Construction Contract	\$ 1,294,033
Site Survey & Soil Investigation	0
Architectural & Engineering Costs	129,400
Fixed Equipment not in Contract	173,420
Total Construction Costs	1,596,853
Marshall & Swift Comparison Costs	\$ 313.45
Applicant's Cost per FT SQ	\$ 227.63
Difference	\$ 85.82
Variance	27.4%

The proposed cost of new construction is below the Marshall & Swift cost estimate by \$85.82 (27%). Based on the above analysis, Staff finds the proposed MCE to be reasonable relative to the applicable standards referenced in the DoN Regulations.

Incremental Operating Costs

	FY 2016
Salaries, Wages & Fringe	\$501,961
Purchased Services	425,158
Supplies and Other Expenses	694,354
Depreciation	150,870
Interest	42,000
Pension	0
Total	\$1,814,343

The incremental operating costs include the addition of 14.4 full time equivalent (“FTE”) staff. These include three administrative and 11.4 clinical staff. Staff estimated an overall cost per procedure of approximately \$850.

The projected breakeven is 2,139 procedures, which breaks down to 1,039 cataract surgeries, 100 posterior capsulotomies and 1,000 procedures classified as “other”. This breakeven should occur early in the second year of operation.

Based on the above analysis, Staff found that the incremental operating costs are reasonable relative to similar approved projects.

F. FINANCIAL FEASIBILITY

West Suburban Eye Care has proposed to finance the recommended MCE of \$2,744,595 with 26% equity. The remaining 74% (\$2,031,001) will be financed through a five year bank loan with an anticipated interest rate of 3.25%. The debt service coverage ratio is strong, at 8.39 in 2014, and will remain strong and above the standards of the regulations at 2.76 to 4.52 over the course of the loan. To note, the applicant originally provided an underestimated MCE, which the Staff requested a revised MCE and as a result the application contains a revised MCE.

The financial statements provided by the Applicant determined that the current ratio was 3.1 in 2014, which favorably exceeds the standard of the Regulations of 1.5.

Based on information provided by the Applicant, staff finds the project to be financially feasible.

G. RELATIVE MERIT

In developing the current project, the Applicant determined that the existing site neither lends itself to expansion or the necessary improvements in efficiencies and cost savings of the proposed FASC. Additionally, the likelihood of not being able to obtain Medicare certification for the current site does not address the issue of patient access within the Merrimack Valley.

The site in Lawrence being neither equipped nor operational was determined to be inadequate from the standpoint of efficiencies and convenient access.

Based on the information provided by the Applicant, Staff finds that the project meets the relative merit factor.

H. ENVIRONMENTAL IMPACT

The Applicant in working with New Ecology Inc. determined that this project will earn 57 points, exceeding the minimal Department's LEED requirement of 55 points.

Based on the above information, Staff finds that West Suburban Eye Surgery Center, LLC meets the environment requirements of the DoN regulations.

III. COMMUNITY HEALTH INITIATIVE

West Suburban Eye Surgery Center, LLC has agreed to provide a total of \$137,229, or \$27,445 per year over five years, to fund the community health service initiatives described in Attachment 2. Staff recommends funding these initiatives as a condition of approval.

Staff finds that with adherence to a condition, the Applicant meets the community health service initiatives requirements of the DoN Regulations.

IV. STAFF FINDINGS AND RECOMMENDATION

Based upon the foregoing analysis, Staff makes the following findings:

1. West Suburban Eye Surgery Center, LLC is proposing transfer of site and renovation of a 7,015 GSF Ambulatory Surgery Center with one operating room to Chelmsford, MA.
2. The health planning process for the project was satisfactory.
3. Applicant meets the requirements of the transfer of site procedures pursuant to 100.720 of the Regulations.
4. The proposed relocation is neither a duplication of service, nor a restriction of access.
5. The project, with adherence to certain conditions, meets the operational objectives of the DoN *Ambulatory Surgery Guidelines*.
6. The project with adherence to certain conditions meets the standards compliance factor of the DoN *Ambulatory Surgery Guidelines*.

7. The Maximum Capital Expenditure of \$2,744,595 (July 2015 dollars) is reasonable compared to Marshall & Swift construction cost estimates.
8. The recommended incremental operating costs of \$1,814,343 (July 2015 dollars) are reasonable as projected.
9. The project is financially feasible and within the financial capability of the Applicant.
10. The project satisfies the requirements for relative merit.
11. The proposed community health service initiatives, with adherence to a certain condition, are consistent with the DoN Regulations.
12. West Suburban Eye Surgery Center, LLC meets the DoN Guidelines for Environmental and Human Health Impact Guidelines.

Based on the above analysis and findings, Staff recommends approval with conditions of Project Number 3-4957 filed by West Suburban Eye Surgery Center, LLC. The approval includes transfer of site from 280 Haverhill Street in Lawrence, MA to 321 Billerica Road in Chelmsford, MA and renovation of the new site to be developed as a one operating room FASC with associated administrative and support functions.

Failure of the Applicant to comply with these conditions may result in Department sanctions including possible fines and/or revocation of the DoN:

1. West Suburban Eye Surgery Center, LLC shall accept the MCE of \$2,744,595 (July 2015 dollars) as the final cost figure except for those increases allowed pursuant to 105 CMR 100.751 and .752.
2. West Suburban Eye Surgery Center, LLC will continue to abide by the conditions agreed upon in the approved Change of Ownership DoN #3-4953.
3. West Suburban Eye Surgery Center, LLC shall meet the Medicare Conditions of Participation for Ambulatory Surgical Services and obtain Medicare certification within one year of licensure.
4. West Suburban Eye Surgery Center, LLC has agreed with the Office of Health Equity to the following time-frame to provide interpreter services consistent with its recommendations. West Suburban Eye Surgery Center, LLC shall:
 - a) Submit a high priority plan that ensures their capacity to provide timely and competent interpreter services to the Office of Health Equity three months prior to their inaugural;
 - b) Contact the Office of Health Equity to review their interpreter services operations within the first six months of operations; and,
 - c) Enter into agreement with the Office of Health Equity to provide language access services consistent with the recommendations of the Office of Health Equity.
5. West Suburban Eye Surgery Center, LLC shall not consider ability to pay or insurance status when scheduling patients for surgery.
6. West Suburban Eye Surgery Center, LLC has agreed to provide a total of \$137,229, which will be distributed at \$27,445 per year over five years, to fund the community health service initiatives described in Attachment 2.
7. West Suburban Eye Surgery Center, LLC shall meet the Medicare conditions of participation for ambulatory surgical services and shall license the ambulatory surgery center as a freestanding clinic and not as a satellite.

ATTACHMENTS

1. Green guidelines
2. Community Health Initiatives



LEED 2009 for Healthcare: New Construction and Major Renovations

Project Checklist

SSB North

6/26/2015

11 0 5 Materials and Resources Possible Points: **16**

Y	7	N	Prereq	Description	Points
Y			Prereq 1	Storage and Collection of Recyclables	
Y			Prereq 2	PBT Source Reduction—Mercury	
3			Credit 1.1	Building Reuse—Maintain Existing Walls, Floors, and Roof	1 to 3
			Credit 1.2	Building Reuse—Maintain Interior Non-Structural Elements	1
2			Credit 2	Construction Waste Management	1 to 2
			Credit 3	Sustainably Sourced Materials and Products	1 to 4
1			Credit 4.1	PBT Source Reduction—Mercury in Lamps	1
2			Credit 4.2	PBT Source Reduction—Lead, Cadmium, and Copper	2
1			Credit 5	Furniture and Medical Furnishings	1 to 2
			Credit 6	Resource Use—Design for Flexibility	1

5 0 13 Indoor Environmental Quality Possible Points: **18**

Y	7	N	Prereq	Description	Points
Y			Prereq 1	Minimum Indoor Air Quality Performance	
Y			Prereq 2	Environmental Tobacco Smoke (ETS) Control	
Y			Prereq 3	Hazardous Material Removal or Encapsulation	
1			Credit 1	Outdoor Air Delivery Monitoring	1 to 2
1			Credit 2	Acoustic Environment	1
1			Credit 3.1	Construction IAQ Management Plan—During Construction	1
1			Credit 3.2	Construction IAQ Management Plan—Before Occupancy	1
2			Credit 4	Low-Emitting Materials	1 to 4
			Credit 5	Indoor Chemical and Pollutant Source Control	1
1			Credit 6.1	Controllability of Systems—Lighting	1
1			Credit 6.2	Controllability of Systems—Thermal Comfort	1
1			Credit 7	Thermal Comfort—Design and Verification	1
2			Credit 8.1	Daylight and Views—Daylight	2
3			Credit 8.2	Daylight and Views—Views	1 to 3

6 0 0 Innovation in Design Possible Points: **6**

Y	7	N	Prereq	Description	Points
Y			Prereq 1	Integrated Project Planning and Design	
1			Credit 1.1	Green Cleaning	1
1			Credit 1.2	Green Building Education	1
1			Credit 1.3	Building Performance Partnership	1
1			Credit 1.4	Demolition Diversion	1
1			Credit 2	LEED Accredited Professional	1
1			Credit 3	Integrated Project Planning and Design	1

2 0 2 Regional Priority Credits Possible Points: **4**

Y	7	N	Prereq	Description	Points
1			Credit 1.1	WE 2 Water Use Reduction - Measurement and Verification	1
1			Credit 1.2	MR 1.1 Building Reuse	1
1			Credit 1.3	N/A	1
1			Credit 1.4	N/A	1

57 0 53 Total Possible Points: **110**

9 0 9 Sustainable Sites Possible Points: **18**

Y	7	N	Prereq	Description	Points
Y			Prereq 1	Construction Activity Pollution Prevention	
Y			Prereq 2	Environmental Site Assessment	
1			Credit 1	Site Selection	1
1			Credit 2	Development Density and Community Connectivity	1
1			Credit 3	Brownfield Redevelopment	1
3			Credit 4.1	Alternative Transportation—Public Transportation Access	3
			Credit 4.2	Alternative Transportation—Bicycle Storage and Changing Rooms	1
1			Credit 4.3	Alternative Transportation—Low-Emitting and Fuel-Efficient Vehicles	1
1			Credit 4.4	Alternative Transportation—Parking Capacity	1
1			Credit 5.1	Site Development—Protect or Restore Habitat	1
1			Credit 5.2	Site Development—Maximize Open Space	1
1			Credit 6.1	Stormwater Design—Quantity Control	1
1			Credit 6.2	Stormwater Design—Quality Control	1
1			Credit 7.1	Heat Island Effect—Non-roof	1
1			Credit 7.2	Heat Island Effect—Roof	1
1			Credit 8	Light Pollution Reduction	1
1			Credit 9.1	Connection to the Natural World—Places of Respite	1
1			Credit 9.2	Connection to the Natural World—Direct Exterior Access for Patients	1

6 0 3 Water Efficiency Possible Points: **9**

Y	7	N	Prereq	Description	Points
Y			Prereq 1	Water Use Reduction—20% Reduction	
Y			Prereq 2	Minimize Potable Water Use for Medical Equipment Cooling	
1			Credit 1	Water Efficient Landscaping—No Potable Water Use or No Irrigation	1
2			Credit 2	Water Use Reduction: Measurement & Verification	1 to 2
1			Credit 3	Water Use Reduction	1 to 3
1			Credit 4.1	Water Use Reduction—Building Equipment	1
1			Credit 4.2	Water Use Reduction—Cooling Towers	1
1			Credit 4.3	Water Use Reduction—Food Waste Systems	1

18 0 21 Energy and Atmosphere Possible Points: **39**

Y	7	N	Prereq	Description	Points
Y			Prereq 1	Fundamental Commissioning of Building Energy Systems	
Y			Prereq 2	Minimum Energy Performance	
Y			Prereq 3	Fundamental Refrigerant Management	
11			Credit 1	Optimize Energy Performance	1 to 24
8			Credit 2	On-Site Renewable Energy	1 to 8
2			Credit 3	Enhanced Commissioning	1 to 2
1			Credit 4	Enhanced Refrigerant Management	1
2			Credit 5	Measurement and Verification	2
1			Credit 6	Green Power	1
1			Credit 7	Community Contaminant Prevention—Airborne Releases	1

110 0 53 Total Possible Points: **110**

Prerequisites: 39 points; Silver: 39 points; Gold: 60 to 79 points; Platinum: 80 to 110

	Improve by 16% for New Buildings or 12% for Existing Building Renovations	3
	Improve by 18% for New Buildings or 14% for Existing Building Renovations	5
	Improve by 20% for New Buildings or 16% for Existing Building Renovations	7
	Improve by 22% for New Buildings or 18% for Existing Building Renovations	9
	Improve by 24% for New Buildings or 20% for Existing Building Renovations	11
	Improve by 26% for New Buildings or 22% for Existing Building Renovations	13
	Improve by 28% for New Buildings or 24% for Existing Building Renovations	14
	Improve by 30% for New Buildings or 26% for Existing Building Renovations	15
	Improve by 32% for New Buildings or 28% for Existing Building Renovations	16
	Improve by 34% for New Buildings or 30% for Existing Building Renovations	17
	Improve by 36% for New Buildings or 32% for Existing Building Renovations	18
	Improve by 38% for New Buildings or 34% for Existing Building Renovations	19
	Improve by 40% for New Buildings or 36% for Existing Building Renovations	20
	Improve by 42% for New Buildings or 38% for Existing Building Renovations	21
	Improve by 44% for New Buildings or 40% for Existing Building Renovations	22
	Improve by 46% for New Buildings or 42% for Existing Building Renovations	23
	Improve by 48%+ for New Buildings or 44%+ for Existing Building Renovations	24
Credit 2	On-Site Renewable Energy	1 to 8
	1% Renewable Energy	1
	3% Renewable Energy	2
	10% Renewable Energy	5
	20% Renewable Energy	6
	30% Renewable Energy	7
	40% Renewable Energy	8
Credit 3	Enhanced Commissioning	1 to 2
Credit 4	Enhanced Refrigerant Management	1
Credit 5	Measurement and Verification	2
Credit 6	Green Power	1
Credit 7	Community Contaminant Prevention—Airborne Releases	1

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0	0	0
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Y	?	N
Y		
Y		

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Materials and Resources

Possible Points: 16

Prereq 1	Storage and Collection of Recyclables	
Prereq 2	PBT Source Reduction—Mercury	
Credit 1.1	Building Reuse—Maintain Existing Walls, Floors, and Roof	1 to 3
	Reuse 55%	1
	Reuse 75%	2
	Reuse 95%	3
Credit 1.2	Building Reuse—Maintain Interior Non-Structural Elements	1
Credit 2	Construction Waste Management	1 to 2
	50% Recycled or Salvaged	1
	75% Recycled or Salvaged	2
Credit 3	Sustainably Sourced Materials and Products	1 to 4
	10% of Total Material	1
	20% of Total Material	2
	30% of Total Material	3
	40% of Total Material	4
Credit 4.1	PBT Source Reduction—Mercury in Lamps	1
Credit 4.2	PBT Source Reduction—Lead, Cadmium and Copper	2

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Credit 5	Furniture & Medical Furnishings	1 to 2
	<input type="checkbox"/> 30% of Total Material	1
	<input type="checkbox"/> 40% of Total Material	2

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Credit 6	Resource Use—Design for Flexibility	1
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0	0	0
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Indoor Environmental Quality

Possible Points: 18

Y ? N

Y		
Y		
Y		

Prereq 1	Minimum Indoor Air Quality Performance	
Prereq 2	Environmental Tobacco Smoke (ETS) Control	
Prereq 3	Hazardous Material Removal or Encapsulation	
Credit 1	Outdoor Air Delivery Monitoring	1
Credit 2	Acoustic Environment	1 to 2
	<input type="checkbox"/> Sound Isolation	1
	<input type="checkbox"/> Acoustical Finishes	1
Credit 3.1	Construction IAQ Management Plan—During Construction	1
Credit 3.2	Construction IAQ Management Plan—Before Occupancy	1
Credit 4	Low-Emitting Materials	1 to 4
	<input type="checkbox"/> Interior Adhesives & Sealants	1
	<input type="checkbox"/> Wall & Ceiling Finishes	1
	<input type="checkbox"/> Flooring	1
	<input type="checkbox"/> Composite Wood, Agrifiber Products and Batt Insulation Products	1
	<input type="checkbox"/> Exterior Applied Products	1
Credit 5	Indoor Chemical and Pollutant Source Control	1
Credit 6.1	Controllability of Systems—Lighting	1
Credit 6.2	Controllability of Systems—Thermal Comfort	1
Credit 7	Thermal Comfort—Design and Verification	1
Credit 8.1	Daylight and Views—Daylight	2
Credit 8.2	Daylight and Views—Views	1 to 3
	<input type="checkbox"/> 90% of Inpatient Units	1
	<input type="checkbox"/> Threshold A for Non-Inpatient Areas	1
	<input type="checkbox"/> Threshold B for Non-Inpatient Areas	2

0	0	0
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Innovation in Design

Possible Points: 6

Y ? N

Y		

Prereq 1	Integrative Project Planning & Design	
Credit 1.1	Innovation in Design: Specific Title	1
Credit 1.2	Innovation in Design: Specific Title	1
Credit 1.3	Innovation in Design: Specific Title	1
Credit 1.4	Innovation in Design: Specific Title	1
Credit 2	LEED Accredited Professional	1
Credit 3	Integrative Project Planning & Design	1

0	0	0
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Regional Priority Credits

Possible Points: 4

Y ? N

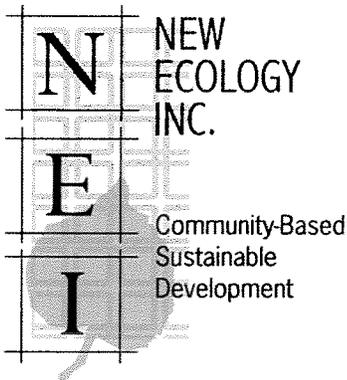
Credit 1.1	Regional Priority: Specific Credit	1
Credit 1.2	Regional Priority: Specific Credit	1
Credit 1.3	Regional Priority: Specific Credit	1
Credit 1.4	Regional Priority: Specific Credit	1

0 0 0

Total

Possible Points: 110

Certified 40 to 49 points Silver 50 to 59 points Gold 60 to 79 points Platinum 80 to 100 points



**SSB North
Hardaway Associates
LEED for Healthcare
June 26, 2015**

New Ecology, Inc. (NEI) has reviewed the proposed SSB North project (the project) for compliance with the Leadership in Energy and Environmental Design for Healthcare (LEED HC) rating system and identified each credit as “yes” or “no” credit, for a total of 57 “Yes” points, exceeding the Department of Public Health (DPH) requirement for 55 points; checklist is attached for reference.

SUSTAINABLE SITES

**SUSTAINABLE SITES PREREQUISITE 1
CONSTRUCTION ACTIVITY POLLUTION PREVENTION
PREREQUISITE**

All project construction activities will occur within an existing building. Therefore, no erosion or sedimentation will occur and the project is exempt from this prerequisite.

**SUSTAINABLE SITES PREREQUISITE 2
ENVIRONMENTAL SITE ASSESSMENT
PREREQUISITE**

The project is located within an existing building and therefore, does not require a Phase 1 Environmental Assessment and is exempt from this prerequisite.

**SUSTAINABLE SITES CREDIT 1
SITE SELECTION
1 “Yes” Point**

The project is located within an existing building therefore, is not being developed on a site meeting any of the following criteria:

- Prime Farmland as defined by the U.S. Department of Agriculture in the United States Code of Federal Regulations, Title 7, Column 6, and Parts 400 to 699, Section 657.5,
- Previously undeveloped land whose elevation is lower than 5-feet above the 100-year flood plain as defined by FEMA,
- Land specifically identified as habitat for threatened or endangered species by federal or state committees,
- Land within 100-feet of wetlands as defined by the U.S. Code of Federal Regulations 40 CFR, Parts 230-233 and Part 22,

- Previously undeveloped land that is within 50-feet of a water body, and/or
- Land that was public parkland.

**SUSTAINABLE SITES CREDIT 2
DEVELOPMENT DENSITY AND COMMUNITY CONNECTIVITY**

1 "Yes" Point

The project is located within ½-mile of at least 10 basic services providing community connectivity for project employees and patients.

**SUSTAINABLE SITES CREDIT 3
BROWNFIELD REDEVELOPMENT**

1 "No" Point

The project site is not located on a site classified as a "Brownfield" via Federal, State, or Local classification.

**SUSTAINABLE SITES CREDIT 4.1
PUBLIC TRANSPORTATION ACCESS**

3 "No" Points

The project site is not located within a ½-mile walking distance of a planned or existing commuter rail, light rail, or subway station; nor it is located within 1/8-mile walking distance of public, campus, or private bus lines.

**SUSTAINABLE SITES CREDIT 4.2
ALTERNATIVE TRANSPORTATION – BICYCLE STORAGE & CHANGING ROOMS**

1 "Yes" Point

The project will provide secure, covered bicycle racks for at least 5% of the Full Time Equivalent (FTE) staff as well as a shower and changing facilities for at least 0.5% of FTE staff; both installations will be located within 200-yards of the main project entrance.

**SUSTAINABLE SITES CREDIT 4.3
ALTERNATIVE TRANSPORT – LOW-EMITTING & FUEL-EFFICIENT VEHICLES**

1 "No" Point

The project parking will consist of five (5) existing spots within the building parking lot; provision of preferred parking for low-emitting and fuel-efficient vehicles is not feasible.

**SUSTAINABLE SITES CREDIT 4.4
PARKING CAPACITY**

1 "Yes" Point

The project will pursue Case 1 Non-Residential Healthcare projects, Option 3 and provide no new parking. Additionally, the project will provide a transport van for patients without personal vehicles- this van will be granted preferred parking at the project site.

**SUSTAINABLE SITES CREDIT 5.1
PROTECT OR RESTORE HABITAT**

1 "Yes" Point

The project will not remove any site landscaping or open space; effectively protecting 100% of the habitat at the existing building site.

**SUSTAINABLE SITES CREDIT 5.2
MAXIMIZE OPEN SPACE**

1 "Yes" Point

The project is located on an existing site that qualifies for Case 3 and includes pedestrian-accessible, open space equivalent to at least 20% of the interior project area.

**SUSTAINABLE SITES CREDIT 6.1
STORMWATER DESIGN – QUANTITY CONTROL**

1 "Yes" Point

Project construction activities will occur on the interior of an existing building and will not include addition of impervious material on the existing site; therefore, the project will not affect the quantity of stormwater runoff.

**SUSTAINABLE SITES CREDIT 6.2
STORMWATER DESIGN – QUALITY CONTROL**

1 "Yes" Point

Project construction activities will occur on the interior of an existing building and will not include addition of impervious material on the existing site; therefore, the project will not affect the quality of stormwater runoff.

**SUSTAINABLE SITES CREDIT 7.1
HEAT ISLAND EFFECT – NON-ROOF**

1 "No" Point

The project does not include installation of exterior hardscape to meet the requirements of this credit.

**SUSTAINABLE SITES CREDIT 7.2
HEAT ISLAND EFFECT - ROOF**

1 "No" Point

The project will not include replacement of existing roofing materials beyond patching required for installation of mechanical equipment and related penetrations.

**SUSTAINABLE SITES CREDIT 8
LIGHT POLLUTION REDUCTION**

1 "No" Point

The project scope does not include exterior lighting installation.

**SUSTAINABLE SITES CREDIT 9.1
CONNECTION TO THE NATURAL WORLD – PLACES OF RESPITE**

1 "Yes" Point

The project will provide outdoor "places of respite" equal to 5% of the net usable program area of the project, for patients and visitors, as well as an additional 2% for staff use. These areas will meet the following criteria:

- Located within 200-feet of a project entrance,
- Located where no medical intervention or direct medical care is given,
- Open to fresh air, the sky and natural elements,
- Provide options for shade and one seating space per 200 square feet of garden area, with one wheelchair space per five seating spaces, and
- Be dedicated as non-smoking areas.

**SUSTAINABLE SITES CREDIT 9.2
CONNECTION TO THE NATURAL WORLD – DIRECT EXTERIOR ACCESS FOR PATIENTS**

1 "No" Point

The project will not provide direct patient access to the exterior.

WATER EFFICIENCY

**WATER EFFICIENCY PREREQUISITE 1
WATER USE REDUCTION – 20% REDUCTION
PREREQUISITE**

The project will demonstrate water efficiency savings of at least 20% for project water use and process water use. Calculations will be based on estimated occupant usage of installed water fixtures as compared to the LEED baseline water usage.

**WATER EFFICIENCY PREREQUISITE 2
MINIMIZE POTABLE WATER USE FOR MEDICAL EQUIPMENT COOLING
PREREQUISITE**

The project will minimize the use of potable water for all medical equipment, including the following scenarios:

- Use of potable water only in emergency backup systems,
- No potable water for once-through cooling equipment,
- Limiting discharge temperature of fluids into the drainage systems, and/or
- No potable water usage in the primary cooling system.

**WATER EFFICIENCY CREDIT 1
WATER EFFICIENT LANDSCAPING – NO IRRIGATION**

1 “Yes” Point

The project will not install irrigation system, inherently meeting the requirements of this credit.

**WATER EFFICIENCY CREDIT 2
WATER USE REDUCTION – MEASUREMENTS & VERIFICATION**

1 “Yes” Point

The project will install meters for the following systems and track usage for a minimum of 1-year, as applicable to installed equipment:

- Cooling tower make-up and blowdown,
- Incoming water to the project,
- Filter backwash water,
- Steam boiler systems make-up water,
- Water use in surgical systems make-up water, *and/or*
- Cold-water make-up for domestic hot water systems.

**WATER EFFICIENCY CREDIT 3
WATER USE REDUCTION – ADDITIONAL % REDUCTION**

1 “Yes” Point; 2 “No” Points

This credit is based on WEprereq1-Water Use Reduction (20%), listed above. To gain the additional point, the project will further reduce its water usage to at least 30% below the applicable baseline.

**WATER EFFICIENCY CREDIT 4.1
WATER USE REDUCTION – BUILDING EQUIPMENT**

1 “No” Point

Due to equipment needs, the project will not pursue this credit.

**WATER EFFICIENCY CREDIT 4.2
WATER USE REDUCTION – COOLING TOWERS**

1 “Yes” Point

The project is not installing a Cooling Tower and therefore, is not in violation of the credit requirements.

**WATER EFFICIENCY CREDIT 4.3
WATER USE REDUCTION – FOOD WASTE SYSTEMS**

1 “Yes” Point

The project does not include any food waste systems and therefore, is not in violation of this credit.

ENERGY AND ATMOSPHERE

ENERGY AND ATMOSPHERE PREREQUISITE 1 FUNDAMENTAL COMMISSIONING OF BUILDING ENERGY SYSTEMS

PREREQUISITE

The project team will include a Commissioning Agent for the following designed and installed systems:

- HVAC systems and controls,
- Refrigeration systems and controls,
- Lighting and daylighting controls, and
- Domestic hot water systems.

ENERGY AND ATMOSPHERE PREREQUISITE 2 MINIMUM ENERGY PERFORMANCE

PREREQUISITE

The project will create a comprehensive energy model, which demonstrates at least a 10% improvement over than the ASHRAE Standard 90.1-2007, Appendix G baseline.

ENERGY AND ATMOSPHERE PREREQUISITE 3 FUNDAMENTAL REFRIGERANT MANAGEMENT

PREREQUISITE

The project will not use chlorofluorocarbon (CFC)-based refrigerants in the installed HVAC&R systems.

ENERGY AND ATMOSPHERE CREDIT 1 OPTIMIZE ENERGY PERFORMANCE

11 "Yes" Points; 13 "No" Points

Based on previous experience with similar projects, as well as code-required Massachusetts Stretch Energy Code (Stretch Code) compliance, the project will strive to attain 11 points and approximately 20% energy savings below the ASHRAE 90.1-2007 baseline.

ENERGY AND ATMOSPHERE CREDIT 2 ON-SITE RENEWABLE ENERGY

8 "No" Points

The project scope does not include installation of on-site renewable energy systems.

ENERGY AND ATMOSPHERE CREDIT 3 ENHANCED COMMISSIONING

2 "Yes" Points

In addition to the tasks noted in EA Prerequisite 1 Fundamental Commissioning, the project team will include a Commissioning Agent that will review the following items:

- Design review of the owner's project requirements, basis of design, and design documents prior to the mid-construction documents phase,
- Back-check the review comments in the subsequent design submission;
- Review of contractor submittals;
- Development of Operations & Maintenance manual;
- Verification that the requirements for training operating personnel and occupants have been completed; and
- Retro-commissioning of the existing thermal envelope.

**ENERGY AND ATMOSPHERE CREDIT 4
ENHANCED REFRIGERANT MANAGEMENT**

1 "Yes" Point

The project will select HVAC&R equipment with refrigerants that minimize, or eliminate, emission of compounds that contribute to ozone depletion and climate change.

**ENERGY AND ATMOSPHERE CREDIT 5
MEASUREMENT AND VERIFICATION**

2 "Yes" Points

The project will develop and implement a Measurement and Verification plan consistent with Option D: Calibrated Simulation of the International Performance Measurement and Verification Protocol Volume III: Concepts of Options for Determining Energy Savings in New Construction, April 2003(IPMVP V.3). The M&V period will consist of least 1-year of the post-construction occupancy, will include a process of corrective action, and will provide evidence of a long-term plan.

**ENERGY AND ATMOSPHERE CREDIT 6
GREEN POWER**

1 "Yes" Point

The project owner will enter into at least a two-year renewable energy contract to provide the newly constructed space with at least 35% of its electricity from renewable sources (based on calculated usage quantity).

**ENERGY AND ATMOSPHERE CREDIT 7
COMMUNITY CONTAMINANT PREVENTION – AIRBORNE RELEASES**

1 "Yes" Point

The project will install combustion equipment with emissions that do not exceed the California South Coast Air Quality Management District for products of combustion.

MATERIALS AND RESOURCES

**MATERIALS AND RESOURCES PREREQUISITE 1
STORAGE AND COLLECTION OF RECYCLABLES
PREREQUISITE**

The project will install a recycling collection and storage area to collect the following materials: paper, corrugated cardboard, glass, plastics, metals, batteries, and mercury-containing products and devices (including fluorescent lamps).

MATERIALS AND RESOURCES PREREQUISITE 2

PBT SOURCE REDUCTION – MERCURY

PREREQUISITE

The project will complete the following tasks to meet all credit requirements:

- Identification of mercury-containing products and devices that will be collected as well as disposal methods for captured mercury.
- Comply with the mercury elimination requirement outlined in the 2010 FGI Guidelines for Design and Construction of Health Care Facilities:
- Will not specify, or install, preheat T-9, T-10, or T-12 fluorescents, or mercury vapor type, high-intensity discharge (HID) lamps in the project.
- Will not specify probe-start, metal halide, HID lamps in interior spaces.
- Will use only LED or LEC lamps with less than 5 watts of electricity output, in all Exit and Emergency Signage.

MATERIALS AND RESOURCES CREDIT 1.1

BUILDING REUSE – MAINTAIN EXISTING WALLS, FLOOR AND ROOF

3 “Yes” Points

This project will reuse 100% of the structural walls, floors, and roof in the existing building.

MATERIALS AND RESOURCES CREDIT 1.2

BUILDING REUSE – MAINTAIN INTERIOR NON-STRUCTURAL ELEMENTS

1 “No” Point

The project will not reuse in the interior, non-structural elements of the existing building.

MATERIALS AND RESOURCES CREDIT 2

CONSTRUCTION WASTE MANAGEMENT

2 “Yes” Points

The project will develop and implement a construction waste management plan to recycle nonhazardous construction debris. At a minimum, the project will divert at least 75% of the construction waste from landfill disposal.

MATERIALS AND RESOURCES CREDIT 3

SUSTAINABLY SOURCED MATERIALS AND PRODUCTS

2 “Yes” Points and 2 “No” Points

The project will pursue use of sustainably sourced materials and products for a minimum of 20% of the total materials cost. Qualified materials and products include the following:

- Salvaged, refurbished, or reused,
- Recycled content (counted in full for post-consumer and half for pre-consumer),
- Regionally sourced and manufactured within 500-miles of project site,

- Rapidly renewable materials, and/or
- FSC-certified wood products.

Additionally, products that fall under the listed categories will meet applicable requirements under IEQc4 Low-Emitting Materials, discussed further below.

MATERIALS AND RESOURCES CREDIT 4.1 PBT SOURCE REDUCTION – MERCURY IN LAMPS

1 “Yes” Point

The project will specify and install long-lasting mercury-fluorescent lamps based on the following criteria:

- T-8 eight-foot (standard output) – 24,000 rated hours on instant start OR program start (3 hour starts)
- T-8 eight-foot (high output) – 18,000 rated hours on instant start OR program start (3 hour starts)
- T-8 four-foot (standard and high output) – 30,000 rated hours on instant start OR 36,000 rated hours on program start (3 hour starts)
- T-8 two-foot and three-foot – 24,000 rated hours on instant start OR program start (3 hour starts)
- T-8 U-bent – 18,000 rated hours on instant start OR 24,000 rated hours on program start (3 hour starts)
- T-5 (stand and high output) – 25,000 rated hours on program start
- CFL non-integral ballast – 12,000 rated hours
- CFL integral ballast, bare bulb – 10,000 rated hours
- CFL integral ballast, covered models – 8,000 rated hours
- All high pressure sodium lamps – use non cycling type or replace with LED lamps or induction lamps

MATERIALS AND RESOURCES CREDIT 4.2 PBT SOURCE REDUCTION – LEAD, CADMIUM, AND COPPER

2 “Yes” Points

The project will specify substitutes for materials manufactured with lead and cadmium by:

- Using 100% lead-free solder and flux in connecting plumbing pipe on-site for water conveyance intended for human consumption,
- Using pipes, pipe fittings, plumbing fixtures, and faucets for water intended for human consumption that have a weighted average lead content of the wetted surface area of not more than 0.25% lead,
- Using lead-free roofing and flashing,
- Using electrical wire and cable with lead content <300ppm, and
- Specifying that no interior or exterior paints can contain cadmium or lead.

Additionally, for copper pipe applications, the project will reduce and/or eliminate joint-related sources of copper corrosion through the following design methods:

- Use mechanically-crimped copper joint system, OR

- Specify that all solder joints are compliant with ASTM B828 and specify and use ASTM B813 flux.

MATERIALS AND RESOURCES CREDIT 5 FURNITURE AND MEDICAL FURNITURE

1 "Yes" Point, 1 "No" Point

The project will pursue inclusion of qualifying freestanding furniture and medical furnishings for at least 30% of the total furniture and furnishing needs, based on cost. Qualifying components will meet one of the following Options:

- **Option 1-** All components of a furniture or medical furnishing assembly contain less than 100 parts per million (ppm) of at least four of the five chemical groups:
 - Urea formaldehyde,
 - Heavy metals including mercury, cadmium, lead, antimony,
 - Hexavalent chromium in plated finishes,
 - Stain and non-stick treatments derived from Perfluorinated Compounds (PFCs), and/or
 - Added antimicrobial treatments.
- **Option 2-** All components of a furniture or medical furnishing assembly contain less than 100 ppm of at least two of the five chemicals listed above AND the product must comply with Scientific Certification Systems (SCS) Indoor Advantage Gold Environmental Certification Program OR Greenguard Product Emission Standard for Children & Schools.
- **Option 3-** All components of furniture or medical furnishing assembly meet the sustainably sourced materials criteria of the MRc3-Sustainably Sourced Materials and Products, discussed above.

MATERIALS AND RESOURCES CREDIT 6 RESOURCE USE – DESIGN FOR FLEXIBILITY

1 "No" Point

Due to the project needs and floor plan, the project will not pursue a design that allows for flexibility.

INDOOR ENVIRONMENTAL QUALITY

INDOOR ENVIRONMENTAL QUALITY PREREQUISITE 1 MINIMUM INDOOR AIR QUALITY PERFORMANCE PREREQUISITE

The project will install a ventilation system that meets the minimum requirements of Section 6 of ASHRAE Standard 170-2008 AND will design the system using the ventilation rates in Section 7 of the same standard as well as the requirements of the 2010 FGI Guidelines for Design & Construction of Health Care Facilities.

**INDOOR ENVIRONMENTAL QUALITY PREREQUISITE 2
ENVIRONMENTAL TOBACCO SMOKE (ETS) CONTROL
PREREQUISITE**

The project will prohibit smoking in the space and will not allow smoking outside within 50-feet of all entries, outdoor air intakes, qualifying places of respite, operable windows, and other locations where occupants could come in contact with ETS when occupying, entering or leaving the space.

**INDOOR ENVIRONMENTAL QUALITY CREDIT 1
OUTDOOR AIR DELIVERY MONITORING**

1 "No" Point

Due the nature of the designed outdoor air system and the needs of employees and patients, the project will not pursue an outdoor air delivery monitoring system.

**INDOOR ENVIRONMENTAL QUALITY CREDIT 2
ACOUSTIC ENVIRONMENT**

1 "Yes" Point; 1 "No" Point

The project will strive to meet, or exceed, the requirements of Option 1 Sound Isolation & Room Noise, including the sound and vibration criteria outlined in the 2010 FGI Guidelines for Design and Construction of Health Care Facilities. In doing so, the following measures will be achieved:

- *Sound Isolation-*
 - Achieve speech privacy, acoustical comfort, and minimal annoyance from noise-producing sources,
 - Meet criteria outlined in 2010 FGI Guidelines Table 1.2-3 and Table 1.2-4, and
 - Calculate/measure sound isolation and speech privacy as identified in Sections 1.2-6.1.5 and 1.2-6.1.6 of the 2010 FGI Guidelines.
- *Room Noise-*
 - Design the project to meet the 2010 FGI Guidelines Table 1.2-2 in representative interior rooms and spaces, and
 - Calculate/measure sound levels in representative rooms and spaces of each type as necessary to confirm compliance with the above criteria.

**INDOOR ENVIRONMENTAL QUALITY CREDIT 3.1
CONSTRUCTION IAQ MANAGEMENT PLAN – DURING CONSTRUCTION**

1 "Yes" Point

The project will develop and implement an Environmental Quality Management Plan (EQMP) for the construction and preoccupancy phases of the project. This EQMP will cover the following elements:

- A moisture control plan for all materials stored on-site.
- Permanently installed air handlers will include minimum MERV (Minimum Efficiency Reporting Value) 8 filters at each return air grille,
- Active outdoor air intakes will be protected and all filters will be replaced prior to occupancy.

- Construction procedures will be scheduled to minimize exposure of absorbent materials to VOC emissions.
- The on-site team will prohibit the use of tobacco products inside the project and within 50-feet of project's exterior façade.
- Reduce noise emissions and vibrations from construction equipment by complying with British Standard 5228.

**INDOOR ENVIRONMENTAL QUALITY CREDIT 3.2
CONSTRUCTION IAQ MANAGEMENT PLAN – BEFORE OCCUPANCY**

1 "No" Point

Due to the project size, construction methodology will not pursue a flush out, or air testing, prior to occupancy.

**INDOOR ENVIRONMENTAL QUALITY CREDIT 4
LOW-EMITTING MATERIALS**

2 "Yes" Points, 2 "No" Points

The project will achieve a minimum of 2 points for minimizing exposure to Volatile Organic Compounds (VOC) chemicals from materials within the following categories:

1. Interior Adhesives and Sealants,
2. Composite Wood, Agrifiber Products, and Batt Insulation Products,
3. Flooring, and/or
4. Exterior Applied Products.

**INDOOR ENVIRONMENTAL QUALITY CREDIT 5
INDOOR CHEMICAL AND POLLUTANT SOURCE CONTROL**

1 "No" Point

Due to the assumed project layout and needs of the staff and patients, the project will not pursue this credit.

**INDOOR ENVIRONMENTAL QUALITY CREDIT 6.1
CONTROLLABILITY OF SYSTEMS - LIGHTING**

1 "Yes" Point

The project will install controls for the following floor plan conditions:

- Lighting controls for all multi-occupant spaces,
- Lighting controls for at least 90% of staff areas for individual task needs, and
- Lighting controls for at least 90% of patients for individual task needs.

**INDOOR ENVIRONMENTAL QUALITY CREDIT 6.2
CONTROLLABILITY OF SYSTEMS – THERMAL COMFORT**

1 "Yes" Point

The project will provide the following thermal controls:

- Individual thermal comfort controls for all single occupant patient rooms.

- A minimum of 50% of remaining staff and patients will have access to controls to meet individual needs and preferences, and
- All shared multi-occupant spaces will include controls to meet group needs and preferences.

**INDOOR ENVIRONMENTAL QUALITY CREDIT 7
THERMAL COMFORT – DESIGN AND VERIFICATION**

1 “No” Point

Due to related costs and equipment, the project will not pursue installation of a permanent monitoring system to evaluation ongoing thermal comfort concerns.

**INDOOR ENVIRONMENTAL QUALITY CREDIT 8.1
DAYLIGHT AND VIEWS - DAYLIGHT**

2 “No” Points

Due to the proposed floor plan, the project will not pursue compliance with this credit.

**INDOOR ENVIRONMENTAL QUALITY CREDIT 8.2
DAYLIGHT AND VIEWS - VIEWS**

3 “No” Points

Due to the proposed floor plan, the project will not pursue compliance with this credit.

INNOVATION IN DESIGN

**INNOVATION IN DESIGN PREREQUISITE 1
INTEGRATED PROJECT PLANNING AND DESIGN
PREREQUISITE**

The project will incorporate the following into the project tasks throughout the design and construction phases:

- Owner’s Project Requirements including a Health Mission Statement,
- Preliminary Rating Goals,
- Integrated Project Team, and
- Design Charrette.

**INNOVATION IN DESIGN CREDIT 1
INNOVATION IN DESIGN**

4 “Yes” Points

The project will pursue applicable and feasible innovation credits, including the following:

1. Green Cleaning,
2. Green Education,
3. Performance Partnership, and
4. Demolition Diversion.

**INNOVATION IN DESIGN CREDIT 2
LEED ACCREDITED PROFESSIONAL**

1 "Yes" Point

Ashley Wisse, of New Ecology, Inc., will serve as the LEED Accredited Professional on the project team.

**INNOVATION IN DESIGN CREDIT 3
INTEGRATED PROJECT PLANNING AND DESIGN**

1 "Yes" Point

The project design and construction will involve all team members in at least three of the following phases of the project:

- Conceptual/schematic design,
- LEED planning,
- Preliminary design,
- Energy/envelope systems analysis or design,
- Design development,
- Final design and construction documents, and/or
- Construction administration.

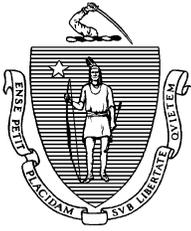
REGIONAL PRIORITY

REGIONAL PRIORITY CREDIT

2 "Yes" Points; 2 "No" Points

The project will utilize 2 Regional Priority Credits through compliance with the following previously discussed items:

1. Water Efficiency Credit 2 Water Use Reduction – Measurement and Verification,
2. Materials and Resources Credit 1.1 Building Reuse – Existing Walls, Floors, and Roof.



The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Public Health
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Governor

KARYN E. POLITO
Lieutenant Governor

MARYLOU SUDDERS
Secretary

MONICA BHAREL, MD, MPH
Commissioner

Tel: 617-624-6000
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To: Commissioner Bharel and Members of the Public Health Council

Attachment 2

From: Ben Wood, Bureau of Community Health and Prevention

Date: 10/05/2015

Re: Community Health Initiative (CHI) for Factor 9; West Suburban Eye Surgery Center, LLC;
Project #3-4957; Relocation and Renovation of Facility to Establish Satellite Ambulatory
Surgery Center; MCE: \$ 2,744,595; CHI: \$137,229

The Applicant, West Suburban Eye Surgery Center, LLC, is committed to contributing an amount reasonably related to this Project for programs that provide primary care and preventative health services to underserved populations in its service area. As such, the Applicant will contribute five percent (5%) of the MCE upon project implementation for the Factor 9 requirements. This project is expected to be implemented in 2016.

Consistent with the policies and procedures set forth in the Department of Public Health Bulletin ("Bulletin") of February 11, 2009 and amended August 2014, The Applicant will work with representatives of the Department of Public Health's Bureau of Community Health and Prevention (BCHAP), Office of Community Health Planning and Engagement to identify community planning partners for the development of a specific funding plan for the Initiative(s) which will include the Greater Lowell Health Alliance and other planning partners as identified by BCHAP to ensure that the funds are directed to community health initiatives that will improve health for vulnerable populations, reduce health disparities, and create policy, system and environmental change that positively impact the social determinants of health. Specifically, \$137,229 will be distributed over five (5) years at \$27,445 per year. Funding will begin within forty five (45) days of the project implementation.

The planning process will be based on the following

1. The Greater Lowell Health Alliance, their planning partners and others identified by BCHAP will work together to develop community health strategies using a joint community health assessment/community health improvement planning process as a foundation.
2. Funds will be directed to implementing community health improvement plan priorities

through high impact, collaborative initiatives that can be replicated, expanded, and/or leveraged. High consideration will be given to the social determinants of health and be aimed at creating policy, system and/or environmental change.

3. There will be an assessment of who else needs to be part of the planning process moving forward with a focus on identifying organizations that understand policy, systems and environmental level change, Boards of Health and other's identified by DPH, and the Greater Lowell Health Alliance.

4. Planning partners are open to using funds to provide the infrastructure for these activities (e.g. staffing) in a to-be-determined manner.

5. Any future funded entity will develop a set of accountability goals and metrics in partnership with the funder and which will be approved by and reported on annually to the funders and to DPH. Accordingly, evaluation and measurement of future efforts will be funded at a level necessary to adequately provide information on the impact of the funds.

The Applicant and other designated planning partners will meet on an annual basis to review the outcomes of funded initiatives and confirm subsequent year investments of the community health initiative budget. Any modifications to the Factor 9 budget must be approved in advance by BCHAP.

Consistent with 105 CMR 100.551(J), the applicant is required to file written reports to the department, annually through the duration of each approved project, including a) reporting period; b) funds expended; c) recipient(s) of funds; d) purpose(s) of expenditures; e) project outcomes to date; f) proposed changes, if any, to the approved CHI; g) balance of funds to be expended over the duration of the project; and h) name of applicant's representative, including complete contact information. Reports may but are not required to include copies of printed materials, media coverage, DVDs, etc. Reports should be submitted electronically to Ben Wood, Bureau of Community Health and Prevention @ ben.wood@state.ma.us