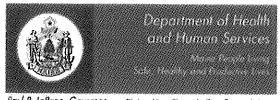
MAINE MEDICAL CENTER LEVEL III SITE PLAN APPLICATION EAST TOWER / VISITOR GARAGE VERTICAL EXPANSIONS WRITTEN SUBMISSION C STATE / FEDERAL APPROVALS

THE MAINE DEPARTMENT OF HEALTH AND HUMAN SERVICES HAS GRANTED A CERTIFICATE OF NEED APPROVAL TO MAINE MEDICAL CENTER, A COPY OF THAT APPROVAL LETTER IS ATTACHED. THE PROJECT WILL ALSO REQUIRE A MAINE STATE FIRE MARSHALL PERMIT, WHICH WILL OCCUR AFTER SITE PLAN REVIEW. FEDERAL APPROVALS ARE LIMITED TO THE FAA PERMIT FOTR THE HELIPORT, WHICH IS INCLUDED WITH WRITTEN SUBMISSION S-5.



Paul R. LePage, Governor Ricks

Ricker Hamilton, Acting Commissioner

Department of Health and Human Services
Commissioner's Office
221 State Street
11 State House Station
Augusta, Maine 04333-0011
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September 26, 2017

Mr. Alexander M. Green Director of Planning Maine Medical Center 22 Bramhall Street Portland, ME 04102

RE: MMC Capital Expenditures - Private Rooms and Universal Procedure Rooms

Dear Mr. Green:

This letter will serve as notification that, on this date, I have decided to grant with conditions a Certificate of Need (CON) that authorizes Maine Medical Center to construct universal single patient rooms and universal procedure rooms as well as other associated capital expenditures outlined in your CON application.

My approval is conditioned on the following:

- If the holder of this certificate determines it will complete the C4 floor at any time before 3 years are completed after the project is operational, the holder will inform the CONU in writing of its decision to complete construction / outfitting the C4 floor as described in the application, at least 30 days before this portion of the project commences.
- The applicant is to report improvements in quality and outcome measures for services affected by the project on an annual basis, within 90 days of its fiscal year-end, beginning with the time period when the Certificate of Need was approved until a full three years have elapsed since the date of project completion.
- The applicant is to report operating room utilization and private room utilization for facilities affected by the project on an annual basis within 90 days of its fiscal year-end beginning with the time period when the Certificate of Need was approved until a full three years have elapsed since the date of project completion.

In order for this CON to remain valid, the project must be "commenced" within two years from the date of the original approval, noted above. You must complete implementation reports on your activities as specified for this type of Project (CON Procedures Manual, Chapter 11, Sec. 3). Limited extensions may be available, if requested in a timely manner and for good cause, as explained in the Manual, Chapter 9, Sec. 3. Failure to commence the project within this 24-month period will result in expiration of the CON, unless extended, as cited above.

Page Two

I am granting this CON because I have determined that the project meets the criteria set forth in the CON Act Sec. 335 (1) and the Departments regulations. The specific details of the project for which I have granted this CON are contained in the record.

Please be aware that in accordance with Section 346 of the Maine Certificate of Need Act this Certificate, as modified herein, is valid only for the stated scope, premises and facility named in the above referenced application and is not transferable or assignable.

Furthermore, it should be clearly understood that our analysis and findings regarding the need for the proposed project, as well as its financial and economic feasibility, are predicated on the application record as described in the Manual, Chapter 8, Subsection 5. Consequently, the proposal must be implemented consistent with the approval stated in this letter, as informed and clarified by the Department's analysis and findings as summarized in the following Department staff reports:

FINAL REVIEW: Briefing memo to Ricker Hamilton, Acting Commissioner, DHHS, dated September 18, 2017.

No significant changes to the project, no variations from the projected operating costs, no modifications of the terms of financing the project, and no increase in the capital expenditures to be made are permitted without the prior written approval of the Department. Any such variances may result in either the disallowance of related expenses, financial penalties or the immediate revocation of the Certificate of Need.

Please work closely with my staff in Health Care Oversight to assure this project is implemented in accordance with the provisions of this Certificate and applicable rules and regulations.

The Certificate of Need statute requires that a holder of a CON make a written report at the end of each six-month period following its issuance. Details regarding this and related requirements will be made the subject of a separate letter from Health Care Oversight.

My staff will work with you as necessary.

Sincerely,

Ricker Hamilton Acting Commissioner

RH/klv

cc: Sarah Taylor, Director, DLC
Larry Carbonneau, Manager Health Care Oversight, DLC
Herb Downs, Director, Audit
Colin Lindley, Rate Setting
File