

# **CON Determination Form 2020**

All persons who are requesting a determination from the Office of Health Strategy ("OHS") as to whether a CON is required for their proposed project must complete this Form 2020. The completed form *must be filed electronically* through the OHS' single point of access, its <u>CON</u> <u>Web Portal</u>.

*First time Portal users must register prior to submitting any documents.* To register, click here: Certificate of Need Web Portal

For any questions, please email <u>HSP@ct.gov</u> or call (860) 418-7001.

## SECTION I. PETITIONER INFORMATION

If this proposal has more than two Petitioners, please attach a separate sheet, supplying the same information for each Petitioner in the format presented in the following table.

|  | Petitioner   | Petitioner   |
|--|--|--|
| Full Legal Name  | OptiCare Eye Health<br>Centers, Inc.   | ReFocus Surgery<br>Centers, LLC  |
| Doing Business As  | Waterbury Outpatient<br>Surgical Center  | ReFocus Eye Surgery<br>Center - Waterbury  |
| Name of Parent Corporation   | OptiCare Eye Health<br>Systems, Inc., an<br>entity 100% owned<br>by physician(s) | ReFocus Eye Health<br>of Connecticut, P.C.,<br>(60% ownership<br>interest)<br>ReFocus<br>Management<br>Services, LLC (40%<br>ownership interest) |
| Petitioner's Mailing Address, if Post<br>Office (PO) Box, include a street<br>mailing address for Certified Mail | 87 Grandview<br>Avenue, Waterbury,<br>CT 06708                                   | c/o ReFocus Eye<br>Health of Connecticut,<br>P.C.<br>57 North Street<br>Suite 415<br>Danbury, CT 06810   |

| What is the Petitioner's Status:<br>P for profit and<br>NP for Nonprofit  | Р  | Р  |
|---|--|--|
| <b>Contact Person at Facility</b> , including<br>Title/Position:<br>This Individual at the facility will be<br>the Petitioner's Designee to receive<br>all correspondence in this matter. | Dean Yimoyines,<br>M.D., President             | Richard Casden,<br>M.D., Director  |
| Contact Person's Mailing Address, if<br>PO Box, include a street mailing<br>address for Certified Mail  | 87 Grandview<br>Avenue, Waterbury,<br>CT 06708 | c/o ReFocus Eye<br>Health of Connecticut,<br>P.C.<br>57 North Street<br>Suite 415<br>Danbury, CT 06810 |
| Contact Person's Telephone Number   | (203) 574-2020                                 | (203) 470-4438   |
| Contact Person's Fax Number   | (203) 575-7774                                 | (203) 790-6738   |
| Contact Person's e-mail Address   | djy@opticarepc.net                             | richard.casden@refoc<br>useye.com  |

## SECTION II. GENERAL PROPOSAL INFORMATION

a. Proposal/Project Title:

Transfer of Ownership of Waterbury Outpatient Surgery Center under C.G.S. §19a-493b(c)

b. Estimated Total Project Cost:

Not Applicable

c. Location of proposal, identifying Street Address, Town and Zip Code:

87 Grandview Avenue, Waterbury, CT 06708

d. List each town this project is intended to serve:

No change in services provided or in service area; current service area includes Waterbury and nearby municipalities in New Haven and Litchfield counties. e. Estimated starting date for the project:

As soon as Office of Health Strategy ("OHS") approves this Determination Request and the necessary change of ownership information has been provided to the Department of Public Health ("DPH"), or such later date as the parties may agree.

# SECTION IV. PROPOSAL DESCRIPTION

Please provide a description of the proposed project, highlighting each of its important aspects, on at least one, but not more than two separate 8.5" X 11" sheets of paper. At a minimum each of the following elements need to be addressed, if applicable:

- 1. If applicable, identify the types of services currently provided and provide a copy of each Department of Public Health (DPH) license held by the Petitioner.
- 2. Identify the types of services that are being proposed and what DPH licensure categories will be sought, if applicable.
- 3. Identify the current population served and the target population to be served.

OptiCare Eye Health Centers, Inc. d/b/a Waterbury Outpatient Surgery Center owns and operates a licensed outpatient surgical center (License ASC.0000071, copy attached) at 87 Grandview Avenue, Waterbury, Connecticut (the "Surgery Center"). At the Surgery Center, an array of traditional ocular surgical procedures, including but not limited to procedures to treat, cataracts, glaucoma, retinal tears, are available, as well as refractive procedures (e.g. LASIK). The current population served includes individuals from Waterbury and other towns in Litchfield and New Haven counties. The Surgery Center has a payor mix of government and commercially insured patients as well as private pay patients. Consummation of the proposed transaction will not result in any change to the payor mix or population served by the Surgery Center.

The Surgery Center, which has been in operation since 1986, is 100% owned by Dean Yimoyines, M.D.<sup>1</sup>

Dr. Yimoyines has determined that affiliation with a larger ophthalmology group practice and professional management company will result in enhanced access to cost-effective, quality patient care. As a result, Dr. Yimoyines proposes to transfer the assets of the Surgery Center to ReFocus Surgery Centers, LLC ("ReFocus ASC"). ReFocus ASC will be 60% owned by ReFocus Eye Health of Connecticut, P.C. ("ReFocus PC"), which is a 100% physician owned professional corporation, and 40% owned by ReFocus Management Services, LLC ("RMS"),

<sup>&</sup>lt;sup>1</sup> Dr. Yimoyines holds ownership in the Surgery Centers as a result in his 100% ownership of DY, LLC, which owns 100% of OptiCare Health Systems, Inc., which in turn owns 100% of OptiCare Eye Health Centers, Inc., the entity that currently owns and operates the Surgery Center.

an experienced provider of management services to physician groups and related providers. Representatives of each of ReFocus PC and RMS will serve on the Board of Managers of ReFocus ASC.

The change of ownership of the Surgery Center is part of a broader transaction pursuant to which OptiCare, P.C., a separate group practice owned by Dr. Yimoyines and employing several ophthalmologists, will consolidate with ReFocus PC. The physicians affiliated with OptiCare, P.C. will continue to provide services at the Surgery Center following consummation of the transaction and, together with other ophthalmologists affiliated with ReFocus PC, will enhance access to ocular surgery and related services in the Waterbury area. Dr. Yimoyines will continue his involvement with the Surgery Center under the terms of a consulting agreement with RMS, further enhancing continuity of care following consummation of the transaction.

Based on the foregoing, the Surgery Center seeks a determination by OHS that, in accordance with Section 19a-493b(c) of the Connecticut General Statutes, a Certificate of Need is not required for the proposed transactions because prior to the transfer or change of ownership or control, the Surgery Center is owned and controlled exclusively by a Connecticut licensed physician (Dr. Yimoyines), and after the contemplated transactions, Connecticut-licensed physicians shall own and control 60% of the Surgery Center through ReFocus PC's 60% ownership interest in ReFocus ASC.

#### SECTION V. AFFIDAVIT

#### (Each Petitioner must submit a completed Affidavit.)

Petitioner: OptiCare Eye Health Centers, Inc.

Project Title: Transfer of Ownership of Waterbury Outpatient Surgery Center under C.G.S. §19a-493b(c)

I, Dean Yimoyines, M.D., President of OptiCare Eye Health Systems, Inc., the sole member of OptiCare Eye Health Centers, Inc., being duly sworn, depose and state that the information provided in this CON Determination form is true and accurate to the best of my knowledge.

allegee

Signature

6/12/20

Date

Subscribed and sworn to before me on 6 - 12 - 2

Notary Public/Commissioner of Superior Court

My commission expires: 2024

OHS Revision 3/29/19 Page **5** of **6** 

## SECTION V. AFFIDAVIT

## (Each Petitioner must submit a completed Affidavit.)

Petitioner: ReFocus Surgery Centers, LLC

Project Title: Transfer of Ownership of Waterbury Outpatient Surgery Center under C.G.S. §19a-493b(c)

I, Richard Casden, MD, director of ReFocus Surgery Centers, LLC, being duly sworn, depose and state that the information provided in this CON Determination form is true and accurate to the best of my knowledge.

12 2020 na

Subscribed and sworn to before me on 12 TH DAY OF JUNE

\$4550 ANTHON

Notary Public/Commissioner of Superior Court

My commission expires: 11/30 /2020

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ANTHONY J. SASSO NOTARY FUELIC OF CONNECTICUT My Commission Expires 11/30/2020



OHS Revision 3/29/19 Page 6 of 6