

*** REVISED * 9/27/13**

RESOLUTION

RESOLVED, that the Public Health and Health Planning Council, pursuant to the provisions of Section 2801-a of the Public Health Law, on this 3rd day of October, 2013, having considered any advice offered by the Regional Health Systems Agency, the staff of the New York State Department of Health, and the Establishment and Project Review Committee of this Council and after due deliberation, hereby proposes to approve the following application to establish Plattsburgh Associates, LLC as the operator of a renal dialysis extension clinic currently operated by Champlain Valley Physicians Hospital Medical Center, and with the contingencies, if any, as set forth below and providing that each applicant fulfills the contingencies and conditions, if any, specified with reference to the application, and be it further

RESOLVED, that upon fulfillment by the applicant of the conditions and contingencies specified for the application in a manner satisfactory to the Public Health and Health Planning Council and the New York State Department of Health, the Secretary of the Council is hereby authorized to issue the approval of the Council of the application, and be it further

RESOLVED, that any approval of this application is not to be construed as in any manner releasing or relieving any transferor (of any interest in the facility that is the subject of the application) of responsibility and liability for any Medicaid (Medicaid Assistance Program -- Title XIX of the Social Security Act) or other State fund overpayments made to the facility covering the period during which any such transferor was an operator of the facility, regardless of whether the applicant or any other entity or individual is also responsible and liable for such overpayments, and the State of New York shall continue to hold any such transferor responsible and liable for any such overpayments, and be it further

RESOLVED, that upon the failure, neglect or refusal of the applicant to submit documentation or information in order to satisfy a contingency specified with reference to the application, within the stated time frame, the application will be deemed abandoned or withdrawn by the applicant without the need for further action by the Council, and be it further

RESOLVED, that upon submission of documentation or information to satisfy a contingency specified with reference to the application, within the stated time frame, which documentation or information is not deemed sufficient by Department of Health staff, to satisfy the contingency, the application shall be returned to the Council for whatever action the Council deems appropriate.

NUMBER:

FACILITY/APPLICANT:

132065 E

Plattsburgh Associates, LLC

*APPROVAL CONTINGENT UPON:

1. Submission of an executed transfer and affiliation agreement, acceptable to the Department, with a local acute care hospital. [HSP]
2. Submission of loan commitment that is acceptable to the Department of Health. [BFA]
3. Submission of working capital loan commitment that is acceptable to the Department of Health. [BFA]
4. Submission of a resolution of the members of Plattsburgh Associates, LLC, acceptable to the Department. [CSL]
5. Submission of a photocopy of the Certificate of Amendment of the Articles of Organization of Plattsburgh Associates, LLC, acceptable to the Department. [CSL]
6. Submission of a photocopy of the Operating Agreement of Plattsburgh Associates, LLC, acceptable to the Department. [CSL]
7. Submission of a photocopy of a Certificate of Amendment to the Certificate of Incorporation of Plattsburgh Medical Office Management, Inc., acceptable to the Department. [CSL]
8. Submission of a photocopy of the Bylaws of Plattsburgh Medical Office Management, Inc., acceptable to the Department. [CSL]
9. Submission of a photocopy the Application for Authority of American Renal Associates LLC, acceptable to the Department. [CSL]
10. Submission of a photocopy the limited liability company agreement of American Renal Associates LLC, acceptable to the Department. [CSL]
11. Submission of a photocopy the Certificate of Incorporation of American Renal Holdings, Inc., acceptable to the Department. [CSL]
12. Submission of a photocopy the Bylaws of American Renal Holdings, Inc., acceptable to the Department. [CSL]
13. Submission of a photocopy the Articles of Organization of American Renal Holdings Intermediate Company, LLC, acceptable to the Department. [CSL]
14. Submission of a photocopy of the Operating Agreement of American Renal Holdings Intermediate Company, LLC, acceptable to the Department. [CSL]
15. Submission of a photocopy of the Certificate of Incorporation of American Renal Associates Holdings, Inc., acceptable to the Department. [CSL]
16. Submission of a photocopy of the Bylaws of American Renal Associates Holdings, Inc., acceptable to the Department. [CSL]
17. Submission of a photocopy of the Partnership Agreement of Centerbridge Capital Partners L.P., acceptable to the Department. [CSL]
18. Submission of a photocopy of an amended and executed Administrative Services Agreement, acceptable to the Department. [CSL, BFA]
19. Submission of a photocopy of the Application for Authority of American Renal Management, LLC, acceptable to the Department. [CSL]
20. Submission of a photocopy of the executed Asset Purchase Agreement, acceptable to the Department. [CSL, BFA]
21. Submission of a photocopy of the executed Lease Agreement, acceptable to the Department. [CSL, BFA]

*APPROVAL CONDITIONAL UPON:

1. The project must be completed within two years from the Public Health and Health Planning Council recommendation letter. Failure to complete the project within the prescribed time shall constitute an abandonment of the application by the applicant and an expiration of the approval. [PMU]
2. The staff of the facility must be separate and distinct from staff of other entities. [HSP]
3. The signage must clearly denote the facility is separate and distinct from other adjacent entities. [HSP]
4. The entrance to the facility must not disrupt any other entity's clinical program space. [HSP]
5. The clinical space must be used exclusively for the approved purpose. [HSP]
6. To provide Transfusion Services, licensure by the New York State Department of Health-Wadsworth Center is required. [HSP]

Documentation submitted to satisfy the above-referenced contingencies
(4 copies) should be submitted within sixty (60) days to:

Barbara DelCogliano
Director
Bureau of Project Management
NYS Department of Health
Empire State Plaza
Corning Tower, Room 1842
Albany, New York 12237