WHAT IS THE CON PROGRAM?
Certificate of Need (CON) is a state regulatory program intended to balance cost, quality and access issues, and ensure that only needed services are developed in Michigan.

Michigan’s CON program was enacted in 1972 and is administered by the Department of Community Health. The CON program is governed by Part 222 of PA 368 of the Public Acts of 1978, as amended.

Go to www.mi.gov/con for additional information.

WHAT IS COVERED BY THE CON PROGRAM?
An entity (health facility, physician, group practice, etc.) proposing any of the following types of projects must obtain a CON, regardless of the capital expenditure proposed:

► Increase in the number of licensed beds or the relocation of licensed beds from one site to another.
► Acquisition of an existing health facility.
► Operation of a new health facility.
► Initiation, replacement, or expansion of covered clinical services. (See list of Review Standards)
► Short-term nursing care program (Swing Beds).

In addition, capital expenditure projects (construction, renovation, etc.) that involve a health facility require a CON. The capital expenditure threshold is indexed annually by the Department based on the Consumer Price Index. The threshold effective January 1, 2014, is $3,160,000 for clinical service areas.

For purposes of CON, a health facility is defined as a:

► Hospital
► Psychiatric Hospital or Unit
► Nursing Home
► Freestanding Surgical Outpatient Facility
► HMO (only for limited projects)

Determinations of whether a project requires CON approval, whether a project complies with applicable requirements, or whether other requirements apply, must be obtained in writing from the Department.

REVIEW STANDARDS
The CON Commission, an 11-member independent body appointed by the Governor, has approved CON Review Standards for determining the need and ongoing quality assurance standards for the following:

► Air Ambulance Services (Helicopters)
► Cardiac Catheterization Services
► Computed Tomography (CT) Scanner Services
► Hospital Beds
► Magnetic Resonance Imaging (MRI) Services
► Megavoltage Radiation Therapy (MRT) Services
► Neonatal Intensive Care Units (NICU)
► Nursing Home/Hospital Long-Term Care Beds
► Open Heart Surgery Services
► Positron Emission Tomography (PET) Scanner Services
► Psychiatric Beds and Services
► Surgical Services
► Transplantation Services: Bone Marrow, Including Peripheral Stem Cell; Heart/Lung & Liver
► Urinary Lithotripter Services

The CON Commission is responsible for developing and approving Review Standards used by the Department to regulate covered health facilities and services. The Commission is not involved in making decisions in the review of CON applications.

REVIEW TYPES

Nonsubstantive:
Projects not requiring a full review, requiring less information, and processed more quickly. Examples of projects that may be reviewed on a nonsubstantive basis are equipment replacements and addition of mobile host sites.

Substantive:
Projects requiring a full review, but on an individual basis, such as initiation of an MRI service.

Comparative:
Applications competing for project types for which the need is limited: beds, and transplantation services (excluding pancreas). Applications subject to Comparative Review must be filed on the first working day of February, June, or October of each year.

HOW DOES THE CON PROCESS WORK?

► An applicant files a Letter of Intent (LOI) with the Department and regional review agency, if any. Based on LOI information, the Department notifies the applicant of required application forms for the project.

► The applicant files completed application with the Department and regional review agency, if any.

► Within 15 days of receipt of an application, the Department reviews it for completeness and requests any necessary additional information.

► The applicant has 15 days to submit the requested information to the Department.

► The Department deems the application complete and determines the review type.

► A proposed decision is issued within the deadlines for each review type:
  - Nonsubstantive - 45 days
  - Substantive - 120 days
  - Comparative - 150 days

► If the proposed decision is an approval, a final decision is issued by the Department Director within five (5) days.

► If the proposed decision is a disapproval, the applicant has 15 days to request a hearing.

► If a hearing is not requested, a final decision is issued by the Department Director.

► If requested, the hearing must begin within 90 days, unless waived by the applicant.

► The final decision is issued by the Department Director following the hearing.

► Letters of Intent, nonsubstantive and substantive applications can be filed online as well as amendments, emergency CONs and swing bed applications. In addition, the application fee can be paid online. Potential comparative applications must be filed by submitting a paper copy only. For more information, visit www.mi.gov/con.
Certificate of Need Activity

During FY 2013, the Department has continued to make process improvements in both the Policy and Evaluation Sections. The Evaluation Section worked with the Department’s legislative liaison and Michigan Legislature to successfully enroll House Bill No. 4787 with new CON fees, and developed implementation plans for various types of CON fees. The Evaluation Section also made substantial progress in revising the CON administrative rules and enhancing the CON Annual Survey tool.

The Policy Section made improvements by converting Commission meetings to paperless, giving Commissioners and Departmental Staff the ability to access the most up-to-date information quickly and easily.

These initiatives have greatly increased the availability of information to improve and streamline the review process, better inform policy makers, and enhance community knowledge about Michigan’s healthcare system.

GENERAL INFORMATION

An entity considering a health care project should contact the CON Evaluation Section before proceeding to determine if the project requires a CON.

The review of CON applications is governed by the CON law, administrative rules, and applicable review standards.

Applicants must contact the relevant licensing, evaluation, or certification agencies to determine requirements applicable to the operation of the project.

CON WEB SITE
www.mi.gov/con

Michigan’s Certificate of Need Program

DEPARTMENT OF COMMUNITY HEALTH
Certificate of Need

CONTACT INFORMATION

CON Evaluation Section
517-241-3344-Phone
517-241-2962-Fax

CON Policy Section (Commission)
517-335-6708-Phone
517-241-1200-Fax

OTHER CON RELATED REGULATORY AGENCIES

Division of Licensing & Certification (Hospital & Surgical Facilities)-MDLARA
517-241-4160

Division of Nursing Home Monitoring-MDLARA
517-334-8408

Health Facilities Engineering Section-MDLARA
517-241-3408

Radiation Safety Section-MIOSHA-MDLARA
517-636-6800

Bureau of Fire Services-MDLARA
517-241-8847

MDLARA=Michigan Department of Licensing & Regulatory Affairs

CON FEES STRUCTURE

<table>
<thead>
<tr>
<th>Project Costs:</th>
<th>Fee:</th>
</tr>
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<tbody>
<tr>
<td>$0 to $500,000</td>
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</tr>
<tr>
<td>$500,000 or more but less than $4,000,000</td>
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</tr>
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<tr>
<td>$10,000,000 or more</td>
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</tbody>
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Additional Fee:

| Comparative or Complex Review            | $ 3,000 |
| Expedited Review                        | $ 1,000 |
| Amendment Request or LOI Waiver         | $ 500   |
| Annual Survey                           | $ 100   |

(per Facility per Covered Service)

Michigan Department of Community Health

Balancing Cost, Quality, & Access

2014

MDCH is an Equal Opportunity Employer, Services and Program Provider

(Revised 01/2014)