

## Kellogg, Natalie (DCH)

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**From:** DoNotReply@michigan.gov  
**Sent:** Wednesday, November 07, 2012 10:07 AM  
**To:** MDCH-ConWebTeam  
**Subject:** October 10, 2012 Public Comment Period Written Testimony (ContentID - 147062)  
**Attachments:** PBH\_Psych\_Beds\_Comments\_11-1-12.pdf

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5. Standards: CT 6. Testimony:

Content-Length: 111876



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November 1, 2012

Mr. James B. Falahee, JD  
Chairman  
Certificate of Need Commission  
Michigan Department of Community Health  
201 Townsend, 7<sup>th</sup> Floor  
Lansing, Michigan 48913

Re: CON Standards for Psychiatric Beds and Services

Dear Chairman Falahee,

Thank you for the opportunity to provide comments regarding the proposed changes to the Certificate of Need Standards for Psychiatric Beds and Services. As an active participant in the workgroup meetings held this past summer, I would like to encourage you, and the other members of the Certificate of Need Commission, to adopt the changes recommended by the workgroup and approved at your September meeting.

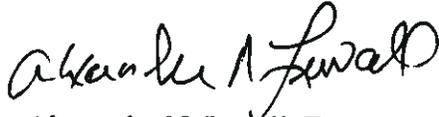
The recommendations make 3 very important changes to the standards, which we believe will have a very positive impact on 'access' by individuals to improved inpatient psychiatric care.

1. **Creation of Flex Unit.** The revised standards would allow facilities that provide care to both child/adolescent and adult patients to designate some of their adult beds as "flex beds", allowing child/adolescent patients to use those beds when the child/adolescent unit is full. As the need for inpatient psychiatric services in children has grown, it is becoming increasingly difficult to find appropriate placements for these patients. This innovative approach will allow increased flexibility in the use of existing beds, hopefully creating a solution, without adding beds to the system.
2. **Relocation of Beds.** The proposed changes would bring the psychiatric bed standards in line with hospital and nursing home bed standards by creating a mechanism to allow existing licensed facilities to move beds between licensed entities. Replacement language already allowed whole facilities to move the location where they are needed. This language allows facilities to decrease and increase beds more freely to ensure the right numbers of beds are located where they are needed.

- 3. High Occupancy.** Currently the standards require a psychiatric hospital to demonstrate high occupancy for 24 consecutive months. When taking into consideration the 6 months to obtain CON approval and the 18 months to construct space to accommodate the additional beds, this means that a facility has to operate at or above 80% for 4 years before being able to bring on extra beds. Unlike acute care hospitals where many patients can be scheduled for services or have alternative options very close by, inpatient psychiatric services are more geographically dispersed and are serving patients in crisis. Turning any patient away because of capacity issues means either leaving them in the ER for an extended period of time or leaving them on the streets to fend for themselves, hoping that they do not harm themselves or others. The proposed changes will reduce the demonstration period for high occupancy down to 12 months, which should help to bring additional beds on more quickly and alleviate capacity concerns.

We appreciate both you and your colleagues support in September and we would appreciate the continued support of the body as these changes come up for final approval at your December meeting. Please feel free to contact me directly have you any questions at (313) 283-1000. Thank you for your consideration.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Alexander N. Luvall". The signature is written in a cursive, flowing style.

Alexander N. Luvall, Esq.  
Vice President-Development

## Kellogg, Natalie (DCH)

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**From:** DoNotReply@michigan.gov  
**Sent:** Wednesday, November 14, 2012 8:39 AM  
**To:** MDCH-ConWebTeam  
**Subject:** October 10, 2012 Public Comment Period Written Testimony (ContentID - 147062)  
**Attachments:** Pine\_Rest\_Psych\_Standards\_11-14-12.pdf

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5. Standards: CT
6. Testimony:

Content-Length: 337319

Mr. James B. Falahee, Jr., Chair  
Certificate of Need Commission  
C/o Michigan Department of Community Health  
Certificate of Need Policy Section  
Capitol View Building, 201 Townsend Street  
Lansing, Michigan 48913

Dear Mr. Falahee,

This letter is written as formal testimony concerning the CON Review Standards for Psychiatric Beds and Services that were approved for public comment at the CON Commission meeting on September 27, 2012. Pine Rest Christian Mental Health Services appreciates the opportunity to comment on these proposed Standards.

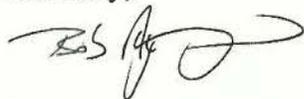
Pine Rest is generally supportive of the proposed changes to the Psychiatric Beds Standards. The innovative concept of “flex beds” will enhance the ability of inpatient psychiatric service providers to adapt their operations to changing needs of the local areas. Specifically, this mechanism will allow existing adult psychiatric beds to be “flexed” to accommodate the mental health needs of children and adolescents who frequently arrive at emergency rooms of local community hospitals with nowhere else to go for service. The ability to convert designated adult beds for service to children and adolescents will greatly enhance our ability to meet the needs of our community.

Likewise, the proposed revisions to the standards facilitating relocation of existing psychiatric beds within the planning area will benefit West Michigan communities. As Pine Rest continues to collaborate with other community providers in our area, the ability to move licensed psychiatric beds with relative ease will greatly enhance flexibility in the provision of inpatient psychiatric services in the community. We support both these provisions.

Pine Rest maintains its position that reduction in the length of the “high occupancy” period from 24 to 12 months is unnecessary, especially given the other proposed changes, noted above. A period of 12 consecutive months is insufficient to establish a discernible trend demonstrating the need for additional capacity. We support maintenance of the existing language regarding high occupancy.

Pine Rest Christian Mental Health Services appreciates the opportunity to comment on the proposed revisions to the CON Review Standards for Psychiatric Beds and Services. We urge the CON Commission to take final action to approve the provisions related to flex beds and relocation.

Sincerely,



Bob Nykamp  
Vice President, COO

## Kellogg, Natalie (DCH)

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**From:** DoNotReply@michigan.gov  
**Sent:** Wednesday, November 14, 2012 4:30 PM  
**To:** MDCH-ConWebTeam  
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**Attachments:** Psych.\_beds\_public\_comment\_-\_Nov.\_14,\_2012.doc.pdf

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5. Standards: CT
6. Testimony:

Content-Length: 39444

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November 7, 2012

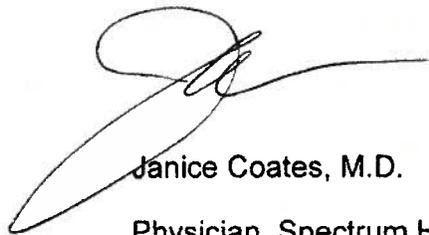
James B. Falahee, Chair  
Certificate of Need Commission  
C/o Michigan Department of Community Health  
Certificate of Need Policy Section  
Capitol View Building, 201 Townsend Street  
Lansing, Michigan 48913

Dear Commissioner Falahee,

This letter is written as formal testimony and support for the proposed revisions and modifications to the CON Review Standards for Psychiatric Beds and Services. We at Spectrum Health attended the work group meetings and support the proposed changes to the CON standards discussed in those meetings. It is the position of Spectrum Health that the proposed changes will enhance the psychiatric services available to the citizens in the state of Michigan

Spectrum Health appreciates the opportunity to participate in the work group process and to offer comment on these Standards.

Sincerely,



Janice Coates, M.D.  
Physician, Spectrum Health - Helen DeVos Children's Hospital