

MICHIGAN DEPARTMENT OF HEALTH AND HUMAN SERVICES

MEETING NOTICE

GROUP: Open Heart Surgery (OHS) Informal Workgroup

DATE: Tuesday, February 24, 2026

TIME: 9:30 a.m. – 11:30 a.m.

A virtual meeting will be held via Zoom.

In advance of the meeting, members of the public may provide input on or ask questions related to any business that will come before the informal workgroup by sending an email to MDHHS-ConWebTeam@michigan.gov. Any comment or question received sufficiently in advance of the meeting will be presented to the members of the informal workgroup for their review and consideration.

Join from PC, Mac, Linux, iOS or Android:

[Zoom Link](#)

Or Telephone Dial:

USA (408) 961-3927

USA (408) 961-3928

USA (408) 961-3929

USA (855) 758-1310 (US Toll Free)

Meeting ID: 879 5772 1570

Note: Individuals who need auxiliary aids and/or assistance in programs and services of the Michigan Department of Health and Human Services are invited to make their needs known to MDHHS-ConWebTeam@michigan.gov.

Check the Certificate of Need (CON) Web Site for future posting of Agenda www.michigan.gov/con

**TENTATIVE
AGENDA**

OPEN HEART SURGERY INFORMAL WORKGROUP MEETING

Tuesday, February 24, 2026
9:30 a.m. – 11:30 a.m.

[Zoom Meeting Link](#)

Telephone Dial:
(408) 961-3928 or (855) 758-1310
Meeting ID: 879 5772 1570

Agenda topics		
I.	Call to Order	Dr. Pruitt, Chairperson
II.	Introductions	
III.	Review of Agenda	
IV.	Basic CON Overview	Tiffani Stanton, MDHHS
V.	Review and Discussion of Charge	Dr. Pruitt, Chairperson
VI.	Next Steps	Dr. Pruitt, Chairperson
VII.	Public Comment	Katherine Tucker, MDHHS
VIII.	Future Meeting Dates – March 24, 2026; April 14, 2026	Dr. Pruitt, Chairperson
IX.	Adjournment	
NOTE: There may be a 10-minute break at approximately 10:00 a.m.		

***** Be sure to mute your mic during the meeting. *****

NOTES: 1) *Public Comment for all items will be limited to three (3) minutes per item per speaker per organization with a maximum of ten (10) minutes if speaking on four (4) or more items. This time may be adjusted depending on the number of speakers.*



Michigan Certificate of Need

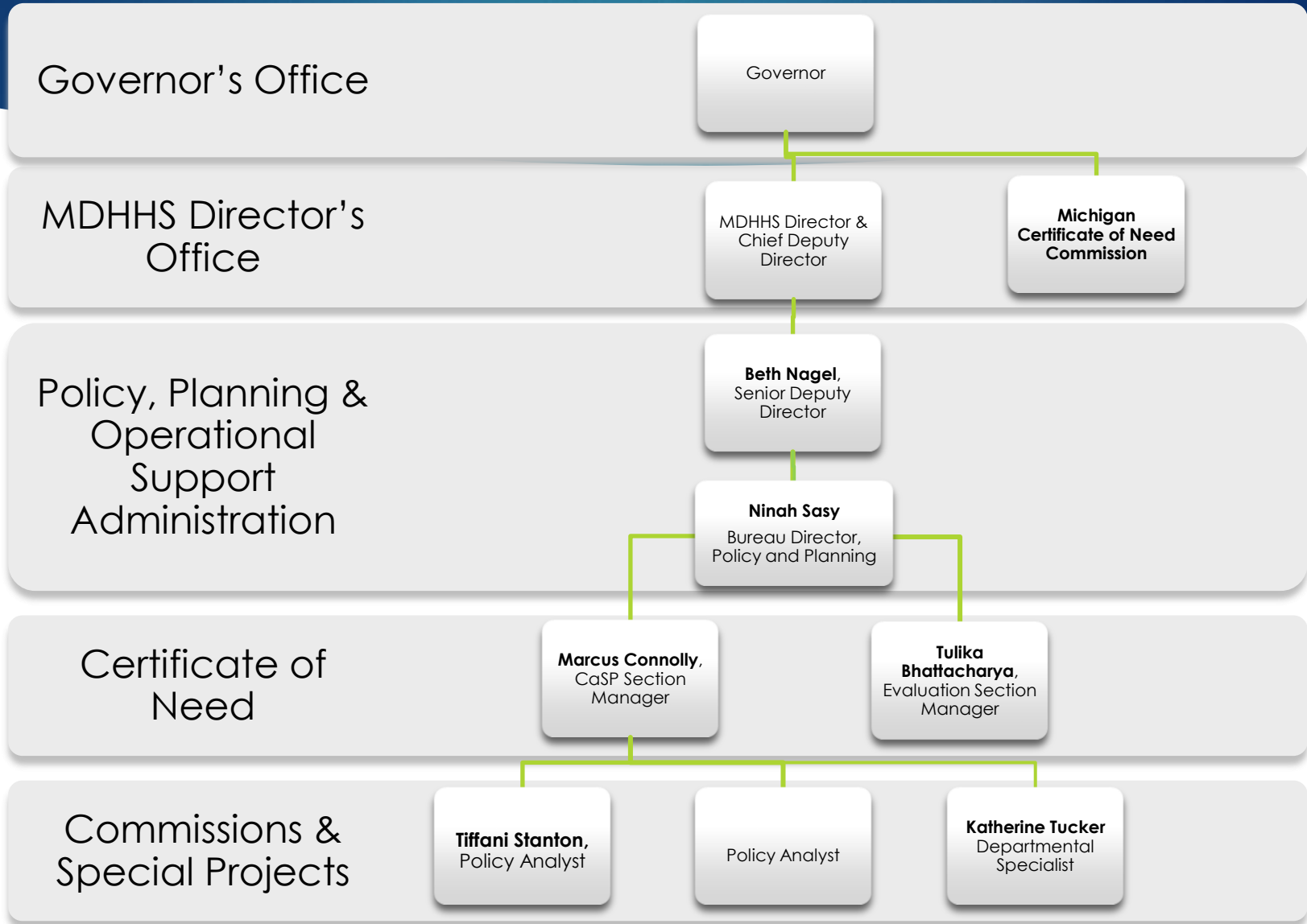
**OPEN HEART SURGERY (OHS)
INFORMAL WORKGROUP**

FEBRUARY 2026

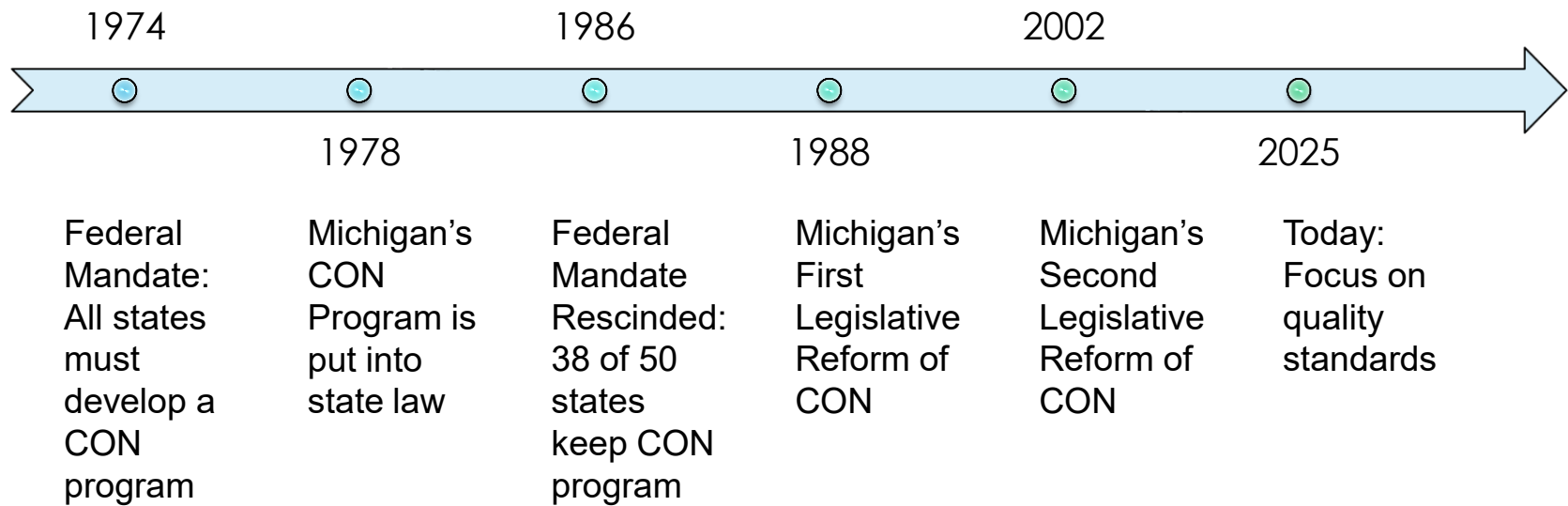
What is Certificate of Need?

- ▶ A health service & equipment regulatory program
- ▶ Created by state law
- ▶ Intended to balance cost, quality and access by ensuring that only needed health services are developed in Michigan
- ▶ Administered by the Michigan Department of Health and Human Services
- ▶ Governor-appointed Commission develops and updates standards

Organization



Michigan Certificate of Need History



What is Certificate of Need?

- ▶ A healthcare provider must apply for a Certificate of Need in order to operate one of the 14 covered clinical services

CON Covered Clinical Services

Bone Marrow Transplants	Cardiac Catheterization Services
Computed Tomography (CT) Scanners	Hospital Beds
Magnetic Resonance Imaging (MRI)	Megavoltage Radiation Therapy (MRT)
Neonatal Intensive Care Units (NICU)	Nursing Home Beds
Open Heart Surgery Services	Positron Emission Tomography (PET) Scanners
Psychiatric Beds (Acute Inpatient)	Surgical Services
Transplant Services: Bone Marrow, Heart, Lung & Liver	Urinary Lithotripter Services (UESWL)

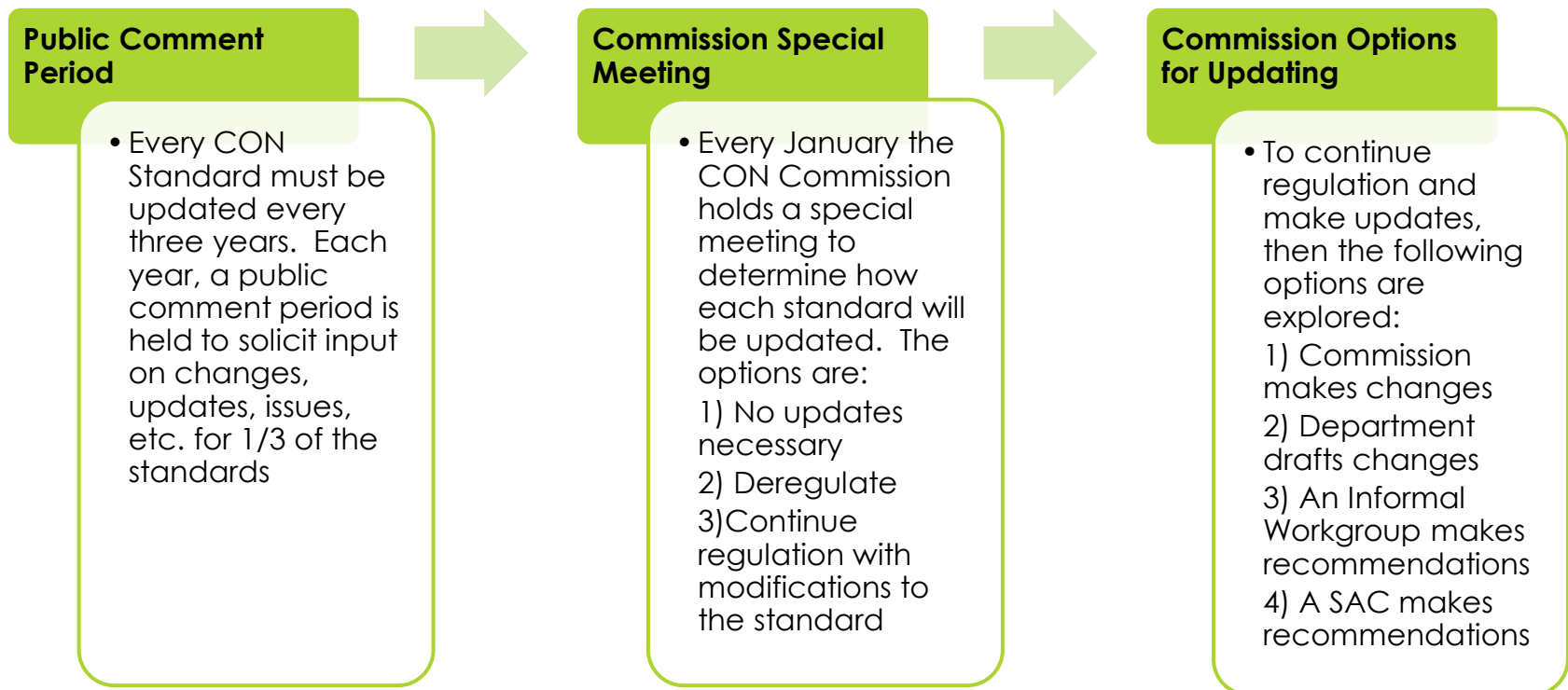
Obtaining a Certificate of Need

- ▶ In order to be approved for a Certificate of Need in Michigan, a provider must:
 - ▶ Meet Michigan CON criteria outlined in the corresponding CON standard
 - ▶ Demonstrate “need” per the corresponding CON Standard
 - ▶ Agree to specific project delivery requirements
 - ▶ Agree to meet specific service volumes
 - ▶ Provide data to MDHHS regularly for the life of the service
 - ▶ Apply for another CON before specific changes are made to the service (relocation, replacement, acquisition, for example)
 - ▶ Understand that a CON can be revoked

The Certificate of Need Review Standards

- ▶ Created and updated by CON Commission
- ▶ Must be reviewed at least every three years
- ▶ Are prospective (not retroactive)
- ▶ Contain specific requirements to initiate, replace, acquire, relocate (as necessary)
- ▶ Contain Project Delivery Requirements

CON Standard Update Process



Informal Workgroups

- ▶ Deliver recommendations to the CON Commission based on a specific “Charge”
- ▶ Composition
 - ▶ A chair is appointed by the CON Chairperson to run the workgroup.
 - ▶ The Chair may ask for a volunteer to take meeting notes. There are no formal minutes.
 - ▶ All meetings open to the public. Anyone that attends may participate
- ▶ No set timeframe to complete the work unless set by the Commission.
- ▶ Operates using group consensus. If voting is necessary, modified Robert’s Rules are followed.

OPEN HEART SURGERY (OHS) SERVICES

INFORMAL WORKGROUP CHARGE

Approved by the Certificate of Need (CON) Commission Chairperson as Delegated by the CON Commission on January 22, 2026

The OHS Informal Workgroup is charged with reviewing and recommend any necessary changes to the OHS Services CON Review Standards regarding the following:

1. Review and if necessary, add the designated rural hospital definition.
2. Consider any other technical changes from the Department, e.g., updates or modifications consistent with other CON review standards and the Michigan Public Health Code.

In its deliberations of the above-mentioned charges, the Informal Workgroup shall consider and report on how each recommendation addresses healthcare cost, quality, and/or access in Michigan.

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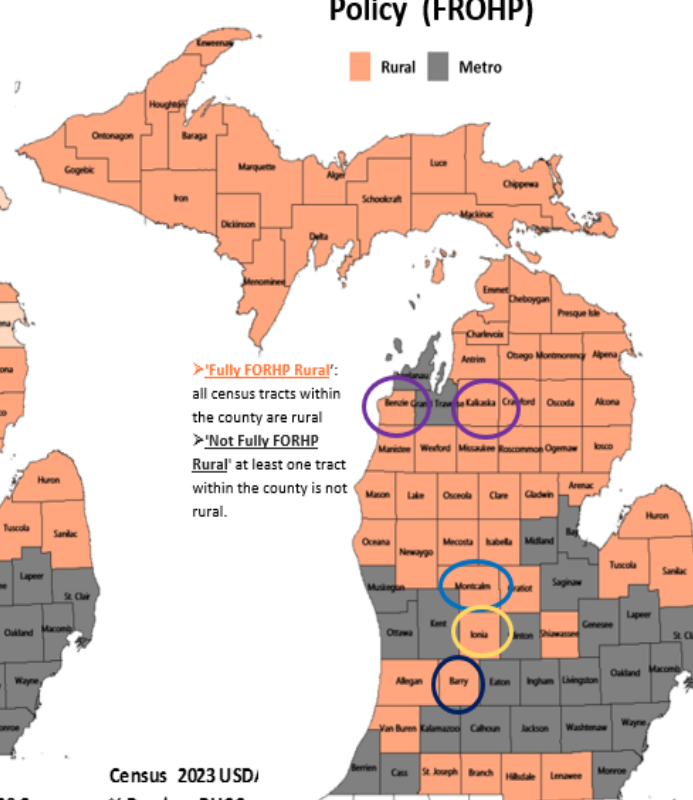
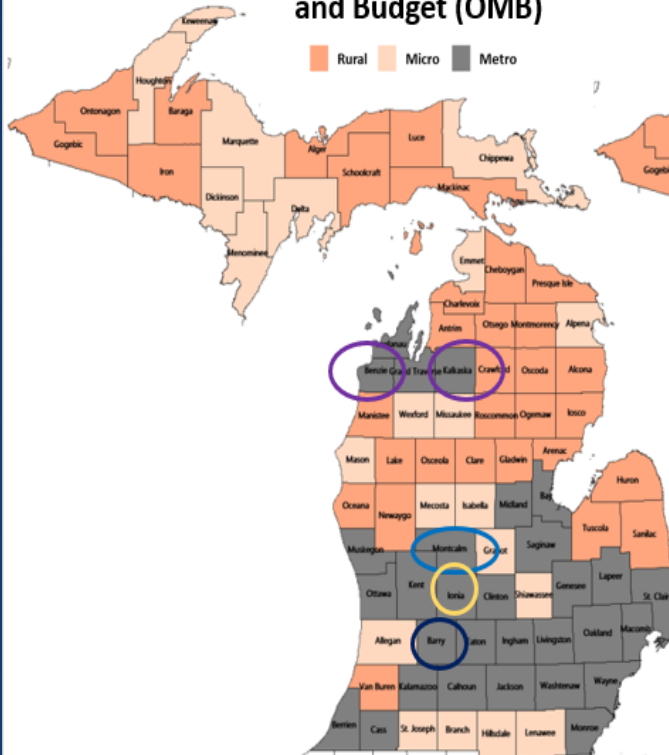
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2020 Office of Management and Budget (OMB)

Federal Office of Rural Health Policy (FROHP)



> 'Fully FROHP Rural': all census tracts within the county are rural
 > 'Not Fully FROHP Rural' at least one tract within the county is not rural.

County	2023	2020		MSU	2020 Census	Census 2023 USD/	% Rural	RUCC
	Population	OMB	FROHP					
Benzie	18,441	Metro	Fully Rural	Rural	Mostly Rural	86%	Metro	
Kalkaska	18,490	Metro	Fully Rural	Rural	Completely Rural	100%	Metro	
Barry	63,808	Metro	Fully Rural	Rural	Mostly Rural	87%	Metro	
Ionia	66,262	Metro	Fully Rural	Urban	Mostly Rural	61%	Metro	
Montcalm	68,154	Metro	Fully Rural	Urban	Mostly Rural	85%	Metro	

Rural/Micro Counties Population

	2020 OMB	FORHP
Mean	31,520	32,857
Median	25,982	26,015
Standard Dev	23,646	24,026
Sum	1,670,563	1,905,718
Count	53	58

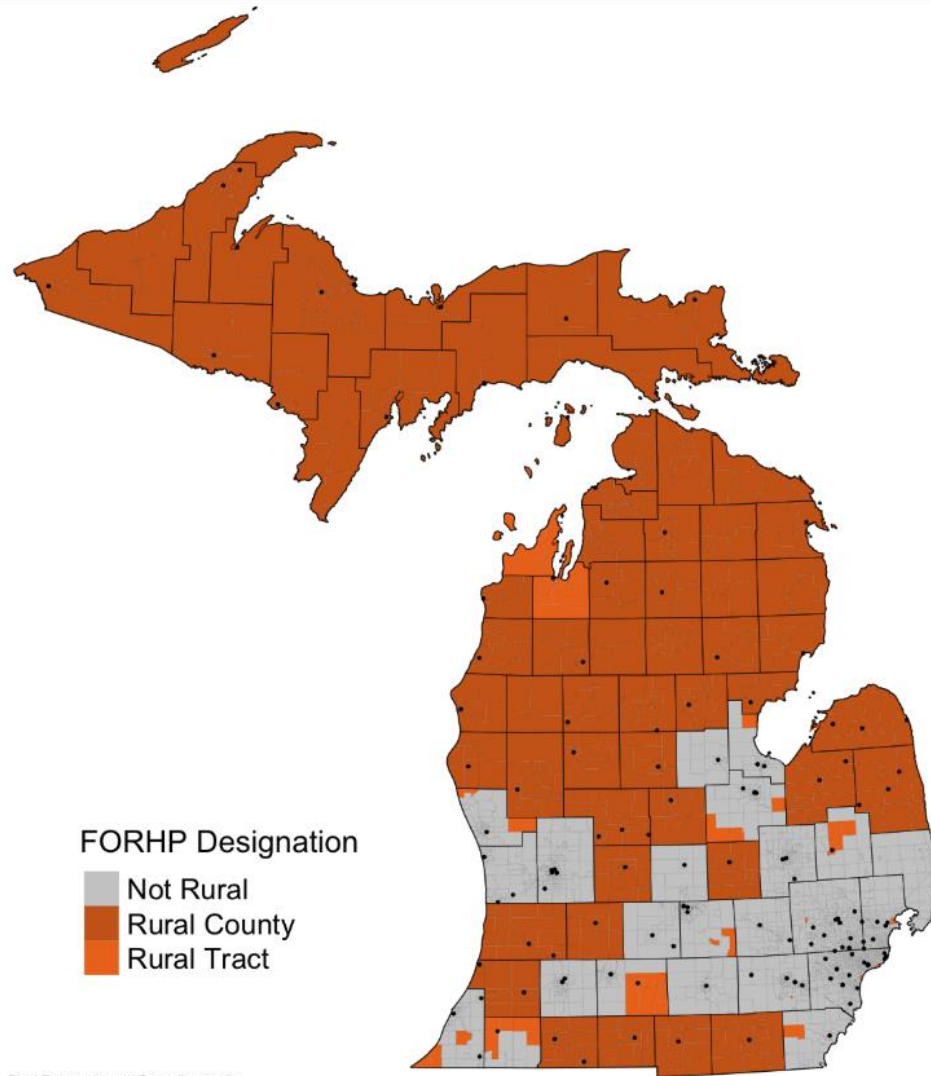
Rural & Micro Fully Rural

When comparing OMB and FROHP definitions, five counties show differing designations—likely influenced by commuting patterns to adjacent, more populous counties.

Hospitals in 5 Selected Counties

Institution	Type	County
Corewell Pennock	CAH	Barry
Munson Paul Oliver	CAH	Benzie
U of M-Sparrow Ionia	CAH	Ionia
Kalkaska Memorial	CAH	Kalkaska
Corewell Greenville	AC	Montcalm
Sheridan Community	CAH	Montcalm
U of M-Sparrow Carson	AC	Montcalm

FORHP Census Tract



- The Workgroup unanimously approved using the Federal Office of Rural Health Policy (FORHP) over OMB to define rural areas; aligning with definition used for rural health funding

- Impacted Standards:

- Nursing Home
- Hospital Beds
- Psych Beds
- NICU
- UESWL
- Cardiac Cath
- Surgical Services
- CT, MRT, PET, and MRI
- Open-Heart

Body of Standards: RURAL AREA

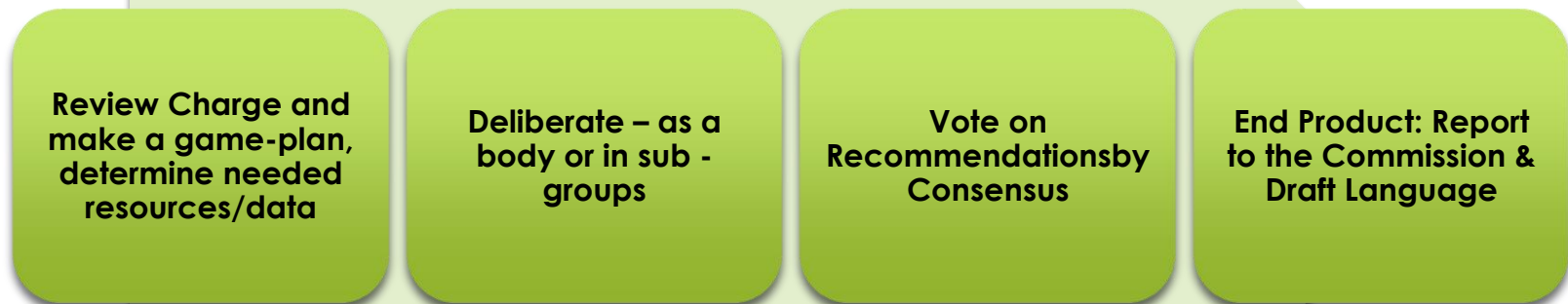
Definitions:

- **"RURAL AREA"** MEANS THE COUNTIES DESIGNATED BY THE FEDERAL OFFICE OF RURAL HEALTH POLICY (FORHP) AS BEING FULLY ELIGIBLE FOR RURAL HEALTH GRANT PROGRAMS OR THE CENSUS TRACTS WITHIN METROPOLITAN COUNTIES THAT HAVE BEEN DETERMINED BY THE FORHP TO MEET THE CRITERIA TO BE ELIGIBLE FOR RURAL HEALTH GRANT PROGRAMS. THE DEPARTMENT SHALL UTILIZE THE MOST RECENT LIST OF AREAS ELIGIBLE FOR RURAL HEALTH GRANT PROGRAMS PUBLISHED BY FORHP IN MAKING THIS DETERMINATION.¹
 1. HEALTH RESOURCES & SERVICES ADMINISTRATION (HRSA)- [RURAL SERVICE AREAS AND TARGET POPULATIONS](#) - LIST OF RURAL COUNTIES AND DESIGNATED ELIGIBLE CENSUS TRACTS IN METROPOLITAN COUNTIES.
- **"METROPOLITAN COUNTIES"** MEANS COUNTIES DESIGNATED BY FEDERAL OFFICE OF RURAL HEALTH POLICY (FORHP) AS NON-FULLY ELIGIBLE COUNTIES.

**OHS Updates included adding the definitions in Section 4(1)(d)

- Unanimously approved the definition of *Designated rural hospital*.
 - “**Designated rural hospital**” means a licensed hospital designated by CMS as a Critical Access Hospital [Pursuant to 42 CFR 485.606], Sole Community Hospital [Pursuant to 42 CFR 412.92], Medicare Dependent Hospital [Pursuant to 2 CFR 412.108], or Rural Emergency Hospital [Pursuant to 42 USC 1395X].
- OHS was 1 of 6 review standards asked to have a workgroup review the definition.

Informal Workgroup Recommendations Process



After the Informal Workgroup...

- ▶ Recommendations presented to the Commission
- ▶ Commission may:
 - ▶ Accept the Recommendations
 - ▶ Make modifications
 - ▶ Reject the Recommendations
- ▶ If changes to the Standard are to be made, then:



Certificate of Need

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Home > Doing Business with MDHHS > Health Care Providers > Certificate of Need

How Do I? ▼

Online Tools ▼

Find It Now ▼

What's New?

Starting Immediately

Certificate of Need (CON) (Checks) must be mailed directly to the Cashier's Office at MDHHS Cashier Office, Suite 801, Certificate of Need, P.O. Box 30437, Lansing, MI 48909.

Mail all Paper Application Materials, LOIs, Amendments, Annual Survey, and other communications directly to the CON office at MDHHS Certificate of Need Evaluation Section, South Grand Building, 4th Floor, P.O. Box 30195 Lansing, MI 48909.

Capital Expenditure Threshold for 2026

The capital expenditure threshold is indexed annually by the Department based on the Consumer Price Index. The threshold effective January 1, 2026, is \$4,272,500 for clinical service areas.

Certificate of Need Commission

[2026 Michigan CON Meetings](#)

[2026 Commission Minutes, Public Testimony, and Transcripts](#)



[2026 Informal Workgroups](#)

[Standard Advisory Committees \(SAC\)](#)

[Informal Workgroups Archive](#)

[Commission Overview and Members](#)

[Meetings, Minutes, Public Testimony, and Audio by Calendar Year](#)

[Resource Documents](#)

[New Medical Technology Advisory Committee \(NEWTAC\)](#)

2026 Informal Workgroups

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About CON Informal Workgroups: Pursuant to MCL 333.22215, the CON Commission may form a Standard Advisory Committee or determine other ways to get input in the form of professional and technical assistance or advice. Often in these circumstances, the CON Commission will decide to form a workgroup to address specific issues in any one of the [CON Review Standards](#). The workgroups are informal, meaning that the workgroup proceedings are open to the public and anyone can participate in the discussion. A workgroup chair is selected, and a detailed workgroup charge is created by the CON Commission, often these tasks are delegated to the Chair of the CON Commission. The workgroup chair will provide the CON Commission with updates on the workgroup's progress and will present the final recommendations back to the CON Commission.

For past workgroups, please visit our [Informal Workgroups Archive](#).

Surgical Services

Charge

Tentative Meeting Dates:

Pending

Hospital Beds

Charge

Tentative Meeting Dates:

2.26.26 -

3.26.26 -

4.23.26 -

Open Heart Surgery (OHS) Services

[Charge](#)

Meeting Dates:

2.24.26 -

3.24.26 -

4.14-26 -

Questions?

Tiffani Stanton, Policy Analyst,
Commissions and Special Projects

StantonT4@Michigan.gov

CON Web Team

MDHHS-ConWebTeam@michigan.gov

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