

CARDIAC CATHETERIZATION

STANDARD ADVISORY COMMITTEE (SAC) CHARGE

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

The Cardiac Catheterization SAC is charged with reviewing and recommending any necessary changes to the Cardiac Catheterization Services CON Review Standards regarding the following:

1. Review and if necessary, add the designated rural hospital definition.
2. Review the term “Cardiology” within section 10(1)(j)(iv) and if necessary, recommend language.
3. Determine if there is an access issue for PCI services in rural areas. If so, recommend language to improve access.
4. Consider if revisions are needed for the open-heart surgical backup requirement for CardioMEMS implantations.
5. Review Section 12(3)(d) and 12(4)(c) and determine if provisions are needed for the 20-mile distance between existing and proposed services.
6. Review the type of facility listed under section 10(2)(g) and 10(2)(k).
7. Update section 2(1)(s) definition for consistency on the type of facility that can offer additional services at an EPCI facility.
8. Update Section 10(4)(a) to include annual requirements to perform 10 right-sided ablations for a facility to do left-sided ablations.
9. Review Section 4(2) and if necessary, recommend language to allow the initiation of left-sided ablations to be performed in an Ambulatory Surgical Center (ASC).
10. Review and determine whether Chronic Total Occlusion (CTO) procedures should be included as part of Elective Percutaneous Coronary Intervention (PCI) services without on-site open-heart surgery. 0
11. 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 SAC shall consider and report on how each recommendation addresses healthcare cost, quality and/or access in Michigan.