SENATE BILL No. 429

July 11, 1991, Introduced by Senators PRIDNIA, GAST, EMMONS, N. SMITH, DE GROW, DUNASKISS, MC MANUS, WARTNER, CARL, ARTHURHULTZ and CISKY and referred to the Committee on Health Policy.

A bill to amend sections 22203, 22205, 22207, 22208, 22209, 22210, 22213, 22215, 22221, 22225, 22229, 22231, 22232, 22247, and 22260 of Act No. 368 of the Public Acts of 1978, entitled as amended

"Public health code,"

section 22203 as added by Act No. 331 of the Public Acts of 1988, sections 22205, 22207, 22213, 22215, 22221, 22225, 22229, 22231, 22232, 22247, and 22260 as added by Act No. 332 of the Public Acts of 1988, and sections 22208, 22209, and 22210 as amended by Act No. 260 of the Public Acts of 1990, being sections 333.22203, 333.22205, 333.22207, 333.22208, 333.22209, 333.22210, 333.22213, 333.22215, 333.22221, 333.22225, 333.22229, 333.22231, 333.22232, 333.22247, and 333.22260 of the Michigan Compiled Laws; to add section 22256; and to repeal certain parts of the act.

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THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

- 1 Section 1. Sections 22203, 22205, 22207, 22208, 22209,
- **2** 22210, 22213, 22215, 22221, 22225, 22229, 22231, 22232, 22247,
- 3 and 22260 of Act No. 368 of the Public Acts of 1978, section
- 4 22203 as added by Act No. 331 of the Public Acts of 1988, sec-
- 5 tions 22205, 22207, 22213, 22215, 22221, 22225, 22229, 22231,
- 6 22232, 22247, and 22260 as added by Act No. 332 of the Public
- 7 Acts of 1988, and sections 22208, 22209, and 22210 as amended by
- 8 Act No. 260 of the Public Acts of 1990, being sections 333.22203,
- 9 333.22205, 333.22207, 333.22208, 333.22209, 333.22210, 333.22213,
- **10** 333.22215, 333.22221, 333.22225, 333.22229, 333.22231, 333.22232,
- 11 333.22247, and 333.22260 of the Michigan Compiled Laws, are
- 12 amended and section 22256 is added to read as follows:
- Sec. 22203. (1) "Addition" means adding patient rooms,
- 14 beds, and ancillary service areas, including, but not limited to,
- 15 procedure rooms or fixed equipment, surgical operating rooms,
- 16 therapy rooms or fixed equipment, or other accommodations to a
- 17 health facility.
- (2) "Capital expenditure" means an expenditure for a single
- 19 project, including cost of construction, engineering, and equip-
- 20 ment which under generally accepted accounting principles is not
- 21 properly chargeable as an expense of operation. Capital expendi-
- 22 ture includes a lease or comparable arrangement by or on behalf
- 23 of a facility by which a person obtains a health facility or
- 24 licensed part of a health facility or equipment for a facility,
- 25 the expenditure for which would have been considered a capital
- 26 expenditure under this part if the person had acquired it by

- 1 purchase. Capital expenditure includes cost of studies, surveys,
- 2 designs, plans, working drawings, specifications, and other
- 3 activities essential to the acquisition, improvement, expansion,
- 4 addition, conversion, modernization, new construction, or
- 5 replacement of physical plant and equipment.
- 6 (3) "Certificate of need" means a certificate issued pursu-
- 7 ant to this part authorizing a new health facility, a change in
- 8 bed capacity, the initiation of a new service, the acquisition of
- 9 covered medical equipment, or a covered capital expenditure that
- 10 is issued in accordance with this part.
- 11 (4) "Certificate of need review standard" means a standard
- 12 approved by the commission -or the statewide health coordinating
- 13 council under section 22215. or 22217 or a document, policy,
- 14 or quideline listed in section 22217(1).
- 15 (5) "Change in bed capacity" means 1 or more of the
- 16 following:
- 17 (a) An increase in licensed hospital beds.
- 18 (b) An increase in licensed nursing home beds or hospital
- 19 beds certified for long-term care.
- 20 (c) An increase in licensed psychiatric beds.
- 21 (d) A change from 1 licensed use to a different licensed
- 22 use.
- (e) The physical relocation of beds from a licensed site to
- 24 another geographic location.
- 25 (6) "Clinical" means directly pertaining to the diagnosis,
- 26 treatment, or rehabilitation of an individual.

- 1 (7) "Clinical service area" means an area of a health
- 2 facility, including related corridors, equipment rooms, ancillary
- 3 service and support areas which house medical equipment, patient
- 4 rooms, patient beds, diagnostic, operating, therapy, or treatment
- 5 rooms or other accommodations related to the diagnosis, treat-
- 6 ment, or rehabilitation of individuals receiving services from
- 7 the health facility.
- 8 (8) "Commission" means the certificate of need commission
- 9 created under section 22211.
- 10 -(9) "Council" means the state health planning council cre-
- 11 ated under the Michigan health planning and health policy devel-
- 12 opment-act, Act No. 323 of the Public Acts of 1978, being sec-
- 13 tions 325.2001 to 325.2031 of the Michigan Compiled Laws.
- 14 (9) -(10) "Covered capital expenditure" means a capital
- 15 expenditure OF \$2,000,000.00 OR MORE by a health facility for a
- 16 single project, excluding the cost of nonfixed medical equipment,
- 17 that -is equal to, or greater than, 1 of the following amounts:
- (a) For a single project that includes or involves the
- 19 -acquisition, improvement, expansion, addition, conversion, mod-
- 20 ernization, new construction, or replacement of a clinical serv-
- 21 ice area. -+
- 22 (1) For certificate of need applications submitted on or
- 23 after October 1, 1988, but before October 1, 1991, \$750,000.00.
- 24 (ii) For certificate of need applications submitted on or
- 25 after October 1, 1991, \$850,000.00.

- 1 (b) For a single project that involves the acquisition,
- 2 improvement, expansion, addition, conversion, modernization, new
- 3 construction, or replacement of nonclinical service areas only:
- 4 (i) For certificate of need applications submitted on or
- 5 after October 1, 1988, but before October 1, 1991,
- 6 \$1,500,000.00.
- 7 (ii) For certificate of need applications submitted on or
- 8 after October 1, 1991, \$1,700,000.00.
- 9 (c) For a single project that is limited solely to the
- 10 acquisition of nonfixed, nonmedical equipment and that does not
- 11 involve acquisition, improvement, expansion, addition, conver-
- 12 sion, modernization, new construction, or replacement of physical
- 13 plant:
- 14 (i) For certificate of need applications submitted on or
- 15 after October 1, 1988, but before October 1, 1991,
- **16** \$1,500,000.00.
- 17 (ii) For certificate of need applications submitted on or
- 18 after October 1, 1991, \$1,700,000.00.
- 19 (10) -(11) "Covered clinical service", except as otherwise
- 20 modified by the commission pursuant to section 22215, means 1 or
- 21 more of the following:
- 22 (a) Initiation or replacement of either of the following
- 23 services:
- 24 (1) Cardiac services.
- 25 (ii) Extrarenal organ transplantation.
- 26 (b) Initiation of a specialized psychiatric program
- 27 utilizing existing-licensed psychiatric beds. Specialized

- 1 psychiatric programs may include services for geriatric,
- 2 pediatric, adolescent, or substance abuse patients.
- 3 (c) Initiation, replacement, or expansion of 1 or more of
- 4 the following:
- 5 (1) Special radiological procedure rooms used for invasive
- 6 procedures such as angiography, arteriography, venography, cathe-
- 7 terizations, and electro-physiology, but excluding procedure
- 8 rooms used only for general radiology and fluoroscopy
- 9 procedures.
- 10 (ii) Specialized radiation therapy services.
- 11 (iii) A partial day hospitalization psychiatric program.
- 12 (A) INITIATION OF LICENSED HOSPITAL BEDS DEDICATED TO NEONA-
- 13 TAL INTENSIVE CARE SERVICES OR SPECIAL NEWBORN NURSING SERVICES.
- 14 (B) INITIATION OR EXPANSION OF 1 OR MORE OF THE FOLLOWING
- 15 SERVICES:
- 16 (i) CARDIAC SERVICES.
- 17 (ii) EXTRARENAL ORGAN TRANSPLANTATION.
- 18 (iii) SURGICAL SERVICES.
- 19 (iv) CARDIAC CATHETERIZATION.
- 20 (C) INITIATION, REPLACEMENT, OR EXPANSION OF 1 OR MORE OF
- 21 THE FOLLOWING SERVICES:
- 22 (i) EXTRACORPOREAL SHOCK WAVE LITHOTRIPSY.
- 23 (ii) SPECIALIZED RADIATION THERAPY.
- 24 (iii) POSITRON EMISSION TOMOGRAPHY.
- 25 (d) Initiation, replacement, or expansion of a service not
- 26 listed in this subsection, but designated as a covered clinical
- 27 service by the commission under section 22215(1)(a).

- 1 (e) Initiation or increase in the number of licensed
- 2 hospital beds dedicated to neonatal intensive care services or
- 3 special newborn-nursing services.
- 4 (12) "Covered medical equipment", except as otherwise modi-
- 5 fied by the commission pursuant to section 22215, means 1 or more
- 6 of the following:
- 7 (a) An extracorporeal shock wave lithotripter.
- 8 (b) A magnetic resonance unit.
- 9 (c) A mobile computerized tomography scanner.
- 10 (d) A fixed computerized tomography scanner.
- 11 (e) Surgical facilities.
- 12 (f) An air ambulance.
- 13 (q) A positron emission tomography scanner.
- 14 (h) Other equipment not listed in this subsection, but des-
- 15 ignated by the commission as covered medical equipment under
- 16 section 22215(1)(a).
- 17 (13) "Fixed equipment" means equipment that is affixed to
- 18 and constitutes a structural component of a health facility,
- 19 including, but not limited to, mechanical or electrical systems,
- 20 elevators, generators, pumps, boilers, and refrigeration
- 21 equipment.
- Sec. 22205. (1) "Health facility", except as otherwise pro-
- 23 vided in subsection (2), means:
- 24 (a) A hospital licensed under part 215.
- 25 (b) A mental hospital, psychiatric hospital, or psychiatric
- 26 unit licensed under the mental health code, Act No. 258 of the

- 1 Public Acts of 1974, being sections 330.1001 to 330.2106 of the
- 2 Michigan Compiled Laws.
- 3 (c) A nursing home licensed under part 217 or a hospital
- 4 long-term care unit as defined in section 20106(6).
- 5 (d) A freestanding surgical outpatient facility licensed
- 6 under part 208.
- 7 (e) A health maintenance organization licensed under part
- 8 210.
- 9 (2) "Health facility" does not include the following:
- 10 (a) An institution conducted by and for the adherents of a
- 11 church or religious denomination for the purpose of providing
- 12 facilities for the care and treatment of the sick who depend
- 13 solely upon spiritual means through prayer for healing.
- 14 (b) A health facility or agency located in a correctional
- 15 institution.
- 16 (c) A veterans facility operated by the state or federal
- 17 government.
- 18 (d) A facility owned and operated by the department of
- 19 mental health.
- 20 (3) "Initiate a new service" means the initiation of a cov-
- 21 ered clinical service by a person if the covered clinical service
- 22 has not been offered in compliance with this part or former part
- 23 221 on a regular basis by that person at the location where the
- 24 covered clinical service is to be offered within the 12-month
- 25 period immediately preceding the date the service will be
- 26 offered. Initiate a new service includes, but is not limited to,
- 27 the expansion or replacement of an existing covered clinical

- 1 service or beds dedicated to a covered clinical service if
- 2 authorized either under this part or by the commission pursuant
- 3 to section 22215.
- 4 (4) "Medical equipment" means a single equipment component
- 5 or a related system of components that is used for clinical
- 6 purposes.
- 7 Sec. 22207. (1) "Medicaid" means the program for medical
- 8 assistance administered by the department of social services
- 9 under the social welfare act, Act No. 280 of the Public Acts of
- 10 1939, being sections 400.1 to 400.121 of the Michigan Compiled
- 11 Laws.
- 12 -(2) "Modernization" means an upgrading, alteration, or
- 13 change in function of a part or all of the physical plant of a
- 14 health facility. Modernization includes, but is not limited to,
- 15 the alteration, repair, remodeling, and renovation of an existing
- 16 building and initial fixed equipment and the replacement of obso-
- 17 lete fixed equipment in an existing building. Modernization of
- 18 the physical plant does not include normal maintenance and oper-
- 19 ational expenses.
- 20 -(3) "New construction" means construction of a health
- 21 facility where a health facility does not exist or construction
- 22 replacing or expanding an existing health facility or a part of
- 23 an existing health facility.
- 24 (4) "Office" means the office of health and medical affairs
- 25 created in the Michigan health planning and health policy devel-
- 26 opment act, Act No. 323 of the Public Acts of 1978, being
- 27 sections 325.2001 to 325.2031 of the Michigan Compiled Laws.

- (2) -(5) "Person" means a person as defined in section 1106
 or a governmental entity.
- 3 (3) -(6) "Planning area" means the area defined in a cer-
- 4 tificate of need review standard for determining the need for,
- 5 and the resource allocation of, a specific health facility, serv-
- 6 ice, or equipment. Planning area includes, but is not limited
- 7 to, the state, a health facility service area, or a health serv-
- 8 ice area or subarea within the state.
- 9 (4) -(7) "Proposed project" means a proposal to -acquire
- 10 or begin operation of a new health facility, make a change in
- 11 bed capacity, initiate a new service, -acquire covered medical
- 12 equipment, or make a covered capital expenditure.
- 13 -(8) "State health plan" means the plan developed by the
- 14 council and approved pursuant to section 10 of Act No. 323 of the
- 15 Public Acts of 1978, being section 325.2010 of the Michigan
- 16 Compiled Laws.
- 17 (9) "Statewide health coordinating council" means the state
- 18 agency created by section 7 of Act No. 323 of the Public Acts of
- 19 1978, being section 325.2007 of the Michigan Compiled Laws,
- 20 before section 7 was amended by the 1988 amendatory act that cre-
- 21 ated the state health planning council.
- 22 (5) -(10) "Stipulation" means a requirement that is germane
- 23 to the proposed project and has been agreed to by an applicant as
- 24 a condition of certificate of need approval.
- 25 Sec. 22208. "Short-term nursing care" means nursing care
- 26 provided -in a hospital to a patient who has been discharged or
- 27 is ready for transfer from a licensed hospital bed other than a

- 1 hospital long term care unit bed and cannot be placed in a
- 2 nursing home bed, county medical care facility bed, or hospital
- 3 long term care unit bed located within a 50 mile radius of the
- 4 patient's residence PURSUANT TO SECTION 1883 OF TITLE XVIII OF
- 5 THE SOCIAL SECURITY ACT, 42 U.S.C. 1395tt.
- 6 Sec. 22209. (1) Except as otherwise provided -under IN
- 7 this part, a person shall not do any of the following without
- 8 first obtaining a certificate of need:
- 9 (a) Acquire or begin BEGIN operation of a new health
- 10 facility.
- 11 (b) Make a change in the bed capacity of a health facility.
- 12 (c) Initiate a new service.
- 13 -(d) Acquire covered medical equipment.
- 14 (D) (e) Make a covered capital expenditure.
- 15 (2) For purposes of evaluating the effect of this part, the
- 16 department shall require persons to report capital expenditures
- 17 and single projects that were subject to former part 221. The
- 18 reports shall be made in conjunction with the annual survey of
- 19 hospitals conducted by the department and according to procedures
- 20 approved by the commission. The department, with the concurrence
- 21 of the commission, may require that reports for specific types of
- 22 capital expenditures or projects be reported on other than an
- 23 annual basis, as necessary to evaluate the effect of this part.
- 24 (2) -(3) A certificate of need -shall IS not -be required
- 25 for a reduction in licensed bed capacity or services at a
- 26 licensed site.

- 1 (3) -(4) The -office of CENTER FOR rural health created in
- 2 section 2612 shall designate a certificate of need ombudsman to
- 3 provide technical assistance and consultation to rural hospitals
- 4 and rural communities regarding certificate of need proposals and
- 5 applications under THIS part. -222. The ombudsman shall also
- 6 act as an advocate for rural health concerns in the development
- 7 of certificate of need review standards under THIS part. $\frac{-222}{100}$
- 8 Sec. 22210. (1) A hospital that applies to the department
- 9 for a certificate of need and meets all of the following criteria
- 10 shall be granted a certificate of need for a short-term nursing
- 11 care program with up to 10 licensed hospital beds:
- 12 (a) Is eligible to apply for certification as a provider of
- 13 swing-bed services under section 1883 of title XVIII of the
- 14 social security act, 42 U.S.C. 1395tt.
- 15 (b) Subject to subsection (2), has fewer than 100 licensed
- 16 beds not counting beds excluded under section 1883 of title XVIII
- 17 of the social security act.
- 18 (c) Does not have uncorrected licensing, certification, or
- 19 safety deficiencies for which the department or the state fire
- 20 marshal, or both, has not accepted a plan of correction.
- 21 (d) Provides evidence satisfactory to the department that
- 22 the hospital has had difficulty in placing patients in skilled
- 23 nursing home beds during the 12 months immediately preceding the
- 24 date of the application.
- 25 (2) After October 1, 1990, the criteria set forth in
- 26 subsection (1)(b) may be modified by the commission, using the
- 27 procedure set forth in section 22215(3). The department shall

- 1 not charge a fee for processing a certificate of need application
- 2 to initiate a short-term nursing care program.
- 3 (3) A hospital that is granted a certificate of need for a
- 4 short-term nursing care program under subsection (1) shall comply
- 5 with all of the following:
- 6 (a) Not charge for or otherwise attempt to recover the cost
- 7 of a length of stay for a patient in the short-term nursing care
- 8 program that exceeds the length of time allowed for post-hospital
- 9 extended care under title XVIII of the social security act,
- 10 chapter 531, 49 Stat. 620, 42 U.S.C. 1395 to 1395b, 1395b-2,
- 11 1395c to 1395i, 1395i-2 to 1395i-4, 1395j to $\frac{-1395w-2}{2}$, $\frac{1395w-4}{2}$ to
- 12 1395dd, 1395ff to 1395yy 1395t, 1395u TO 1395w-2, 1395w-4 TO
- 13 1395zz, and 1395bbb to 1395ccc.
- 14 (b) Admit patients to the short-term nursing care program
- 15 only pursuant to an admissions contract approved by the
- 16 department.
- (c) Not discharge or transfer a patient from a licensed hos-
- 18 pital bed other than a hospital long-term care unit bed and admit
- 19 that patient to the short-term nursing care program unless the
- 20 discharge or transfer and admission is determined medically
- 21 appropriate by the attending physician.
- (d) Permit access to a representative of an organization
- 23 approved under section 21764 to patients admitted to the
- 24 short-term nursing care program, for all of the purposes
- 25 described in section 21763.
- 26 (e) Subject to subsection (8), not allow the number of
- 27 patient days for the short-term nursing care program to exceed

- 1 the equivalent of 1,825 patient days for a single state fiscal 2 year.
- 3 (f) Transfer a patient in the short-term nursing care pro-
- 4 gram to an appropriately certified nursing home bed, county medi-
- 5 cal care facility bed, or hospital long-term care unit bed
- 6 located within a 50-mile radius of the patient's residence within
- 7 5 business days after the hospital has been notified, either
- 8 orally or in writing, that a bed has become available.
- 9 (g) Not charge or collect from a patient admitted to the
- 10 short-term nursing care program, for services rendered as part of
- 11 the short-term nursing care program, an amount in excess of the
- 12 reasonable charge for the services as determined by the United
- 13 States secretary of health and human services under title XVIII
- 14 of the social security act.
- 15 (h) Assist a patient who has been denied coverage for serv-
- 16 ices received in a short-term nursing care program under title
- 17 XVIII of the social security act to file an appeal with the medi-
- 18 care recovery project operated by the office of services to the
- 19 aging.
- 20 (i) Operate the short-term nursing care program in accord-
- 21 ance with this section and the requirements of the swing bed pro-
- 22 visions of section 1883 of title XVIII of the social security
- 23 act, 42 U.S.C. 1395tt.
- 24 (j) Provide data to the department considered necessary by
- 25 the department to evaluate the short-term nursing care program.
- 26 The data shall include, but is not limited to, all of the
- 27 following:

- (i) The total number of patients admitted to the hospital's
 short-term nursing care program during the period specified by
 the department.
- 4 (ii) The total number of short-term nursing care patient 5 days for the period specified by the department.
- 6 (iii) Information identifying the type of care to which7 patients in the short-term care nursing program are released.
- 8 (k) As part of the hospital's policy describing the rights
 9 and responsibilities of patients admitted to the hospital, as
 10 required under section 20201, incorporate all of the following
 11 additional rights and responsibilities for patients in the
 12 short-term nursing care program:
- (i) A copy of the hospital's policy shall be provided to
 14 each short-term nursing care patient upon admission, and the
 15 staff of the hospital shall be trained and involved in the imple16 mentation of the policy.
- (ii) Each short-term nursing care patient may associate and communicate privately with persons of his or her choice.

 19 Reasonable, regular visiting hours, which shall take into consideration the special circumstances of each visitor, shall be established for short-term nursing care patients to receive visitors. A short-term nursing care patient may be visited by the patient's attorney or by representatives of the departments named in section 20156 during other than established visiting
- 26 short-term nursing care patient who shares a room with another

25 hours. Reasonable privacy shall be afforded for visitation of a

- 1 short-term nursing care patient. Each short-term nursing care
- 2 patient shall have reasonable access to a telephone.
- 3 (iii) A short-term nursing care patient is entitled to
- 4 retain and use personal clothing and possessions as space per-
- 5 mits, unless medically contraindicated, as documented by the
- 6 attending physician in the medical record.
- 7 (iv) A short-term nursing care patient is entitled to the
- 8 opportunity to participate in the planning of his or her medical
- 9 treatment. A short-term nursing care patient shall be fully
- 10 informed by the attending physician of the short-term nursing
- 11 care patient's medical condition, unless medically contraindi-
- 12 cated, as documented by a physician in the medical record. Each
- 13 short-term nursing care patient shall be afforded the opportunity
- 14 to discharge himself or herself from the short-term nursing care
- 15 program.
- 16 (v) A short-term nursing care patient is entitled to be
- 17 fully informed either before or at the time of admission, and
- 18 during -their- HIS OR HER stay, of services available in the hos-
- 19 pital and of the related charges for those services. The state-
- 20 ment of services provided by the hospital shall be in writing and
- 21 shall include those services required to be offered on an as
- 22 needed basis.
- 23 (vi) A patient in a short-term nursing care program or a
- 24 person authorized in writing by the patient may, upon submission
- 25 to the hospital of a written request, inspect and copy the
- 26 patient's personal or medical records. The hospital shall make
- 27 the records available for inspection and copying within a

- 1 reasonable time, not exceeding 7 days, after the receipt of the 2 written request.
- 3 (vii) A short-term nursing care patient has the right to
- 4 have his or her parents, if the short-term nursing care patient
- 5 is a minor, or his or her spouse, next of kin, or patient's rep-
- 6 resentative, if the short-term nursing care patient is an adult,
- 7 stay at the facility 24 hours a day if the short-term nursing
- 8 care patient is considered terminally ill by the physician
- 9 responsible for the short-term nursing care patient's care.
- 10 (viii) Each short-term nursing care patient shall be pro-
- 11 vided with meals that meet the recommended dietary allowances for
- 12 that patient's age and sex and that may be modified according to
- 13 special dietary needs or ability to chew.
- 14 (ix) Each short-term nursing care patient has the right to
- 15 receive a representative of an organization approved under
- 16 section 21764, for all of the purposes described in section
- **17** 21763.
- 18 (1) Achieve and maintain medicare certification under title
- 19 XVIII of the social security act.
- 20 (4) A hospital or the owner, administrator, an employee, or
- 21 a representative of the hospital shall not discharge, harass, or
- 22 retaliate or discriminate against a short-term nursing care
- 23 patient because the short-term nursing care patient has exercised
- 24 a right described in subsection (3)(k).
- 25 (5) In the case of a short-term nursing care patient, the
- 26 rights described in subsection (3)(k)(iv) may be exercised by the
- 27 patient's representative, as defined in section 21703(2).

- 1 (6) A short-term nursing care patient shall be fully
- 2 informed, as evidenced by the short-term nursing care patient's
- 3 written acknowledgment, before or at the time of admission and
- 4 during stay, of the rights described in subsection (3)(k). The
- 5 written acknowledgment shall provide that if a short-term nursing
- 6 care patient is adjudicated incompetent and not restored to legal
- 7 capacity, the rights and responsibilities set forth in subsection
- 8 (3)(k) shall be exercised by a person designated by the
- 9 short-term nursing care patient. The hospital shall provide
- 10 proper forms for the short-term nursing care patient to provide
- 11 for the designation of this person at the time of admission.
- 12 (7) Subsection (3)(k) does not prohibit a hospital from
- 13 establishing and recognizing additional rights for short-term
- 14 nursing care patients.
- (8) Upon application, the department may grant a variation
- 16 from the maximum number of patient days established under subsec-
- 17 tion (3)(e), to an applicant hospital that demonstrates to the
- 18 satisfaction of the department that there is an immediate need
- 19 for skilled nursing beds within a 100-mile radius of the
- 20 hospital. A variation granted under this subsection shall be
- 21 valid for not more than 1 year after the date variation is
- 22 granted. The department shall promulgate rules to implement this
- 23 subsection including, at a minimum, a definition of immediate
- 24 need and the procedure for applying for a variation.
- 25 (9) A hospital that violates subsection (3) is subject to
- 26 the penalty provisions of section 20165.

- 1 (10) A person shall not initiate a short-term nursing care
- 2 program without first obtaining a certificate of need under this
- 3 section.
- 4 (11) By October 1, 1990, the department shall collect data
- 5 from hospitals operating short-term nursing care programs and
- 6 report to the legislature on the status of short-term nursing
- 7 care programs in this state. The report shall include a recom-
- 8 mendation as to whether or not short-term nursing care programs
- 9 should continue.
- 10 (12) This section is repealed effective October 1, 1993.
- 11 Sec. 22213. (1) The commission shall, within 2 months after
- 12 appointment and confirmation of all members, adopt bylaws for the
- 13 operation of the commission. The bylaws shall include, at a min-
- 14 imum, voting procedures that protect against conflict of interest
- 15 and minimum requirements for attendance at meetings.
- 16 (2) The commission shall make it a priority to review and
- 17 to amend or rescind, or both, the documents, policies, and guide-
- 18 lines set forth in section 22217.
- 19 (2) -(3)— The governor may remove a commission member from
- 20 office for failure to attend 3 consecutive meetings in a 1-year
- 21 period.
- 22 (3) -(4) The commission annually shall elect a chairperson
- 23 and vice-chairperson. The commission annually shall appoint a
- 24 member to serve as liaison to the state health planning council.
- 25 (4) -(5) The commission shall hold regular quarterly meet-
- 26 ings at places and on dates fixed by the commission. Special

- 1 meetings may be called by the chairperson, by not less than 2
- 2 commission members, or jointly by the department and the office.
- 3 (5) -(6) A majority of the commission members appointed and
- 4 serving -shall constitute CONSTITUTES a quorum. Final action by
- 5 the commission shall be only by affirmative vote of a majority of
- 6 the commission members appointed and serving. A commission
- 7 member shall not vote by proxy.
- 8 (6) $\frac{(7)}{(7)}$ The legislature annually shall fix the per diem
- 9 compensation of members of the commission. Expenses of members
- 10 incurred in the performance of official duties shall be reim-
- 11 bursed as provided in section 1216.
- 12 (7) -(8) The department shall furnish administrative serv-
- 13 ices to the commission, shall have charge of the commission's
- 14 offices, records, and accounts, and shall provide secretarial and
- 15 other staff necessary to allow the proper exercise of the powers
- 16 and duties of the commission. The department shall make avail-
- 17 able the times and places of commission meetings and keep minutes
- 18 of the meetings and a record of the actions of the commission.
- 19 (8) -(9) The department -and office each shall assign pro-
- 20 fessional employees to jointly staff the commission to assist the
- 21 commission in the performance of its substantive responsibilities
- 22 under this part.
- 23 Sec. 22215. (1) Pursuant to the requirements of this part,
- 24 the commission shall do all of the following:
- 25 (a) Upon submission by the department and the office,
- 26 approve, disapprove, or revise the designation of covered
- 27 clinical services and covered medical equipment in addition to

- 1 the covered clinical services and covered medical equipment
- 2 listed in section 22203. Also, upon submission by the department
- 3 and the office, the commission shall approve, disapprove, or IF
- 4 DETERMINED NECESSARY BY THE COMMISSION, revise -the- BY ADDITION
- 5 OR deletion -or revision of THE covered clinical services -and
- 6 covered medical equipment- listed in section 22203. -Before
- 7 final action is taken by the commission under this subdivision,
- 8 the commission shall seek the advice and counsel of the depart-
- 9 ment and the office.
- 10 (b) -Upon submission by the department and the office,
- 11 approve, APPROVE, disapprove, or revise certificate of need
- 12 review standards that establish for purposes of section 22225
- 13 the need, if any, for the initiation of new services,
- 14 -acquisition of covered medical equipment, acquisition or initi-
- 15 ation of new health facilities, OR making changes in bed
- 16 capacity. -, or making covered capital expenditures, including
- 17 conditions, standards, assurances, or information that must be
- 18 met, demonstrated, or provided by a person who applies for a cer-
- 19 tificate of need. A certificate of need review standard may also
- 20 establish ongoing quality assurance requirements including any or
- 21 all of the requirements specified in section 22225(2)(c). The
- 22 statewide health coordinating council may perform the duties of
- 23 the commission under this subdivision, only until all members of
- 24 the commission are appointed and confirmed, or 5 months after the
- 25 effective date of this part, whichever is sooner. Before final
- 26 action is taken by the commission or the statewide health
- 27 coordinating council under this subdivision, the commission or

- 1 the statewide health coordinating council shall seek the advice
- 2 and counsel of the department and the office. THE COMMISSION
- 3 SHALL ASSURE THAT THE CERTIFICATE OF NEED REVIEW STANDARDS THAT
- 4 ESTABLISH THE NEED FOR THE ACQUISITION OF COVERED CLINICAL SERV-
- 5 ICE PERMIT THE ACTIVE AVAILABILITY OF AT LEAST 1 OF EACH TYPE OF
- 6 COVERED CLINICAL SERVICE FOR EACH PLANNING AREA.
- 7 (c) Direct the department -and the office to prepare and
- 8 submit recommendations regarding commission duties and functions
- 9 that are of interest to the commission including, but not limited
- 10 to, specific modifications of proposed actions considered under
- 11 this section.
- 12 (d) Upon submission by the department and the office,
- 13 approve, disapprove, or revise proposed data reporting require-
- 14 ments under section 22209(2) and criteria for determining health
- 15 facility viability under section 22225. Before final action is
- 16 taken by the commission under this subdivision, the commission
- 17 shall seek the advice and counsel of the department and the
- 18 office.
- 19 (D) -(e) Annually assess the operations and effectiveness
- 20 of the certificate of need program based on periodic reports from
- 21 the department and other information available to the
- 22 commission.
- 23 (E) -(f) Four years following the effective date of this
- 24 part BY OCTOBER 1, 1992, and every 5 years after that fourth
- 25 year- OCTOBER 1, 1992, make recommendations to the standing com-
- 26 mittees in the senate and the house that have jurisdiction over
- 27 matters pertaining to public health regarding statutory changes

- 1 to improve OR ELIMINATE the certificate of need program. -
- 2 including, but not limited to, threshold levels for capital
- 3 expenditures, the role of the commission, certificate of need
- 4 review standards, and the need for the certificate of need
- 5 program.
- 6 (g) Upon submission by the department and the office,
- 7 approve, disapprove, or revise standards to be used by the
- 8 department-in designating a regional-certificate of need review
- 9 agency, pursuant to section 22226. Before final action is taken
- 10 by the commission under this subdivision, the commission shall
- 11 seek the advice and counsel of the department and the office.
- (h) Upon submission by the department and the office,
- 13 approve, disapprove, or revise certificate of need review stan-
- 14 dards governing the acquisition of new technology. Before final
- 15 action is taken by the commission under this subdivision, the
- 16 commission shall seek the advice and counsel of the department
- 17 and the office.
- 18 (F) -(i) In accordance with section 22255, approve, disap-
- 19 prove, or revise proposed procedural rules for the certificate of
- 20 need program. Before final action is taken by the commission
- 21 under this subdivision, the commission shall seek the advice and
- 22 counsel of the department. and the office.-
- 23 (j) If determined by the commission to be consistent with
- 24 the purposes of this part, modify the 100 licensed bed limitation
- 25 set forth in section 22210. Before final action is taken by the
- 26 commission under this subdivision, the commission shall seek the
- 27 advice and counsel of the department and the office.

- 1 (G) $\frac{-(k)}{-(k)}$ Consider the recommendations of the department and
- 2 the department of attorney general as to the administrative fea-
- 3 sibility and legality of proposed actions under subdivisions (a),
- 4 (b), and (c).
- 5 (H) -(1) Consider the impact of a proposed restriction on
- 6 the acquisition of -equipmenr or availability of COVERED
- 7 CLINICAL services on the quality, availability, and cost of
- 8 health services in this state.
- 9 (2) The commission shall exercise its duties under this part
- 10 to promote -both of the following: EQUAL ACCESS TO HEALTH CARE
- 11 FOR ALL CITIZENS OF THIS STATE.
- 12 (a) The availability of quality health services at reason-
- 13 able cost.
- 14 (b) The general health objectives in the state health plan.
- 15 (3) -Before- NOT LESS THAN 30 DAYS BEFORE final action is
- 16 taken by the commission under subsection (1)(a) OR (b), (d),
- 17 (g), (h), or (j), the commission shall conduct a public hearing
- 18 on the matter. In addition, not less than 30 days before final
- 19 action is taken by the commission under subsection (1)(a), (b),
- 20 (d), (g), (h), or (j), the THE commission shall submit the pro-
- 21 posed final action for comment to the standing committees in the
- 22 senate and house of representatives with jurisdiction over public
- 23 health matters -. Before a final commission approval under sub-
- 24 section (1)(a), (b), (d), (g), (h), or (j) is effective, the com-
- 25 mission shall submit the proposed action AND to the governor.
- 26 -and the standing committee of each house of the legislature
- 27 having jurisdiction over public health matters. The governor

- 1 -or- AND the -legislature SENATE OR THE GOVERNOR AND THE HOUSE
- 2 OF REPRESENTATIVES OR THE SENATE AND THE HOUSE OF REPRESENTATIVES
- 3 may disapprove the proposed action within 45 days after the date
- 4 of submission. If the legislature is not in session at the time
- 5 of submission of the proposed action, or is in recess, the 45
- 6 days shall commence on the first day the legislature reconvenes.
- 7 The 45 days shall include not less than 9 legislative session
- 8 days. Legislative disapproval DISAPPROVAL BY THE SENATE OR THE
- 9 HOUSE OF REPRESENTATIVES shall be expressed by -concurrent-
- 10 resolution. -which shall be adopted by each house of the
- 11 legislature. The -concurrent- resolution shall state specific
- 12 objections to the proposed action. A proposed -commission- FINAL
- 13 action BY THE COMMISSION under subsection (1)(a) $\overline{}$ OR (b) $\overline{}$
- 14 (d), (g), (h), or (j) shall— IS not become effective if it has
- 15 been disapproved under this subsection. If the proposed action
- 16 is not disapproved under this subsection, it -shall be IS effec-
- 17 tive and binding on all persons affected by this part upon the
- 18 expiration of the 45-day period or on a later date specified in
- 19 the proposed FINAL action. As used in this subsection,
- 20 "legislative session day" means each day in which a quorum of
- 21 either the house of representatives or the senate, following a
- 22 call to order, officially convenes in Lansing to conduct legisla-
- 23 tive business.
- 24 (4) Every 5 years following the effective date of this
- 25 part, the standing committees of the senate and the house of rep-
- 26 resentatives having jurisdiction over public health matters shall
- 27 make findings and recommendations regarding any changes in, or

- 1 the continuation of, the certificate of need program established
- 2 under this part considered appropriate by those committees after
- 3 consideration of the recommendations submitted by the commission
- 4 pursuant to subsection (1)(f).
- 5 (5) If the reports received under section 22221(1)(e) indi-
- 6 cate that the certificate of need application fees collected
- 7 under section 20161(2) have not been within 10% of 1/2 the cost
- 8 to the department of implementing this part, the commission shall
- 9 make recommendations under subsection (1)(f) regarding the revi-
- 10 sion of those fees so that the certificate of need application
- 11 fees collected equal approximately 1/2 of the cost to the depart-
- 12 ment of implementing this part.
- 13 Sec. 22221. (1) The department shall do all of the
- 14 following:
- 15 (a) -Develop- PROMULGATE rules -authorized by- TO IMPLEMENT
- 16 this part in conjunction with the -office- COMMISSION.
- (b) Report to the commission not less than 3 times each year
- 18 on the performance of the department's duties under this part.
- 19 (c) Develop -, in conjunction with the office, proposed
- 20 certificate of need review standards for submission to the
- 21 commission.
- 22 (d) Administer and apply certificate of need review
- 23 standards.
- 24 (e) Following the first state fiscal year after -the enact-
- 25 ment of this part OCTOBER 1, 1988, and annually thereafter,
- 26 report to the commission regarding the costs to the department of
- 27 implementing this part and the certificate of need application

- 1 fees collected under section 20161(2) in the immediately
- 2 preceding state fiscal year.
- 3 (2) In the development of a proposed certificate of need
- 4 review standard under subsection (1)(c), the department THE
- 5 COMMISSION shall appoint an ad hoc advisory committee which
- 6 shall- TO assist in the development of -the- A proposed
- 7 CERTIFICATE OF NEED REVIEW standard UNDER SUBSECTION (1)(C) and
- 8 -shall have the opportunity to review and comment on the propos-
- 9 als submitted to the commission. The composition of the ad hoc
- 10 advisory committee shall include all of the following:
- 11 (a) Experts WITH PROFESSIONAL COMPETENCE in the subject
- 12 matter of the proposed standard, who shall constitute a majority
- 13 of the ad hoc advisory committee.
- 14 (b) Representatives of health care provider organizations
- 15 concerned with licensed health facilities or licensed health
- 16 professions.
- (c) Representatives of organizations concerned with health
- 18 care consumers and the purchasers and payers of health care
- 19 services.
- 20 Sec. 22225. (1) In order to be approved under this part, an
- 21 applicant for a certificate of need shall demonstrate to the sat-
- 22 isfaction of the department that the proposed project will -meet
- 23 an unmet BE CONSISTENT WITH THE need in the area proposed to be
- 24 served. -The- AN APPLICANT SHALL DEMONSTRATE THE need for a pro-
- 25 posed project -shall be demonstrated by credible documentation
- 26 of compliance with the applicable certificate of need review
- 27 standards or, if -none- THERE ARE NO APPLICABLE CERTIFICATE OF

- 1 NEED REVIEW STANDARDS, by credible documentation that the
- 2 proposed project will be geographically accessible and effi-
- 3 ciently and appropriately utilized in light of the type of pro-
- 4 posed project and the existing health care system, including
- 5 approved projects that are not yet operational, proposed projects
- 6 under appeal from a final decision of the department, or proposed
- 7 projects that are pending final department decision.
- 8 (2) If, and only if, the requirements of subsection (1) are
- 9 met, in IN order for an application to be approved under this
- 10 part, an applicant shall also demonstrate to the reasonable sat-
- 11 isfaction of the department all of the following:
- 12 (a) With respect to the method proposed to meet the -unmet-
- 13 need identified under subsection (1), that each of the following
- 14 is met:
- 15 (i) The project -utilizes the most DESIGN IS efficient and
- 16 -effective feasible. -methods that are available to the health
- 17 care industry.
- 18 (ii) In the case of a project proposing physical plant
- 19 expansion, that the project is -the most AN efficient and effec-
- 20 tive -expansion- alternative after consideration of at least new
- 21 construction, modernization, lease, or purchase.
- 22 (iii) In the case of proposed new construction, the project
- 23 is the most appropriate construction option.
- 24 (b) With respect to the financial aspects of the proposed
- 25 project, that each of the following is met:
- 26 (i) The proposed project, in terms of capital costs, is the
- 27 least costly project, in light of available alternatives.

- 1 (i) -(ii) The CAPITAL COSTS OF THE proposed project
- 2 represents the least costly alternative of providing the health
- 3 facility, service, or equipment ARE REASONABLE.
- 4 (ii) -(iii) Funds are available to meet the capital and
- 5 operating needs of the proposed project.
- 6 (iii) -(iv) The proposed project utilizes the least costly
- 7 method of financing, in light of available alternatives.
- 8 (iv) -(v)— In the case of a construction project, the appli-
- 9 cant stipulates that the applicant will competitively bid
- 10 -covered capital expenditures among qualified contractors or
- 11 alternatively, the applicant -presents evidence satisfactory to
- 12 the department that the applicant is proposing an alternative to
- 13 competitive bidding. -that will result in the least costly
- 14 method for implementing the project.
- 15 (c) The proposed project will be delivered in compliance
- 16 with applicable operating standards and quality assurance stan-
- 17 dards approved under section 22215(1)(b), including 1 or more of
- 18 the following:
- 19 (i) Mechanisms for assuring appropriate utilization of the
- 20 project.
- 21 (ii) Methods for evaluating the effectiveness of the
- 22 project.
- 23 (iii) Means of assuring delivery of the project by qualified
- 24 personnel and in compliance with applicable safety and operating
- 25 standards.
- 26 (iv) Evidence of the current and historical compliance with
- 27 federal and state licensing and certification requirements in

- 1 this state by the applicant or the applicant's owner, or both, to
- 2 the degree determined appropriate by the commission in light of
- 3 the subject of the review standard.
- 4 (v) Other criteria approved by the commission as appropriate
- 5 to evaluate the quality of the project.
- 6 (d) The health services proposed in the project will be
- 7 delivered in a health facility that meets the criteria, if any,
- 8 established by the commission for determining health facility
- 9 viability, pursuant to this subdivision. The criteria shall be
- 10 proposed by the department and the office, and approved or disap-
- 11 proved by the commission. At a minimum, the criteria shall spec-
- 12 ify, to the extent applicable to the applicant, that an applicant
- 13 shall be considered viable by demonstrating at least 1 of the
- 14 following:
- 15 (1) A minimum percentage occupancy of licensed beds.
- 16 (ii) A minimum percentage of combined uncompensated dis-
- 17 charges and discharges under title XIX of the social security act
- 18 in the health facility's planning area.
- 19 (iii) A minimum percentage of the total discharges in the
- 20 health facility's planning area.
- 21 (iv) Evidence that the health facility is the only provider
- 22 in the health facility's planning area of a service that is con-
- 23 sidered essential by the commission.
- 24 (v) An operating margin in an amount determined by the
- 25 commission.

- 1 (vi) Other criteria approved by the commission as
- 2 appropriate for statewide application to determine health
- 3 facility viability.
- 4 (e) In the case of a nonprofit health facility, the health
- 5 facility is in fact governed by a body composed of a majority
- 6 consumer membership broadly representative of the population
- 7 served. In the case of a health facility sponsored by a reli-
- 8 gious organization, or if the nature of the nonprofit health
- 9 facility is such that the legal rights of its owners or sponsors
- 10 might be impaired by a requirement as to the composition of its
- 11 governing body, an advisory board with majority consumer member-
- 12 ship broadly representative of the population served may be con-
- 13 strued by the department to be equivalent to the governing board
- 14 described in this subdivision, if the advisory board meets all of
- 15 the following requirements:
- 16 (i) The role assigned to the advisory board is meaningful,
- 17 as determined by the department.
- 18 (ii) The functions of the advisory board are clearly
- 19 prescribed.
- 20 (iii) The advisory board is given an opportunity to influ-
- 21 ence policy formulation by the legally recognized governing body,
- 22 as determined by the department.
- Sec. 22229. (1) The following proposed projects -shall be-
- 24 ARE subject to comparative review:
- 25 (a) Proposed projects specified as subject to comparative
- 26 review in a certificate of need review standard.

- 1 (b) Proposed projects that, when combined, exceed the need
- 2 of the planning area, as determined by the department.
- 3 (B) $\frac{(c)}{(c)}$ New beds in a health facility that is a hospital
- 4 LONG-TERM CARE UNIT or nursing home ___ if there are multiple
- 5 applications to meet the same need for projects that, when com-
- 6 bined, exceed the need of the planning area as determined by the
- 7 applicable CERTIFICATE OF NEED review standards. Replacement
- 8 beds in a hospital or nursing home that are proposed for con-
- 9 struction on the original site, on a contiguous site, within a
- 10 5-mile radius of the original site if the hospital or nursing
- 11 home is located in a county with a population of less than
- 12 200,000, or within a 2-mile radius of the original site if the
- 13 hospital or nursing home is located in a county with a population
- 14 of 200,000 or more, -shall not be ARE NOT subject to comparative
- 15 review.
- 16 -(2) Until otherwise established in a certificate of need
- 17 review standard approved by the commission, the establishment or
- 18 expansion of 1 or more of the following services shall be subject
- 19 to comparative review if applications exist that exceed the need
- 20 for the service as stated in the applicable review standard:
- 21 (a) Open heart surgery services.
- 22 (b) Specialized radiation therapy services.
- 23 (c) Neonatal intensive care unit or special newborn nursery
- 24 unit services.
- 25 (d) Extracorporeal shock wave lithotripsy services.
- 26 (e) Extrarenal organ transplantation services.

- 1 (f) Air ambulance services.
- 2 (2) -(3) Certificate THE COMMISSION MAY APPROVE CERTIFICATE
- 3 of need review standards approved by the commission may THAT
- 4 establish comparative review or an alternative procedure -based
- 5 on the specific considerations of a particular applicant, verifi-
- 6 able applicant performance data, or other information considered
- 7 relevant by the department. In the case of an applicant
- 8 involving FOR DETERMINING WHETHER 1 OF SEVERAL QUALIFIED APPLI-
- 9 CANTS MAY BE APPROVED IF THE LEVEL OF NEED IS NOT SUFFICIENT TO
- 10 JUSTIFY APPROVAL OF ALL QUALIFIED APPLICANTS. IF AN APPLICATION
- 11 INVOLVES more than 1 health facility, the APPLICANT SHALL INDI-
- 12 CATE ON THE application -shall indicate- the proposed site or
- 13 sites for the project and arrangements for the utilization and
- 14 financing of the -covered medical equipment or covered clinical
- 15 services.
- 16 (4) If an application under comparative review or appeal is
- 17 not subject to comparative review under this part or a standard
- 18 implementing this part, the application may be withdrawn and
- 19 resubmitted as a new application under this part. The applica-
- 20 tion shall be considered filed on the date it is resubmitted. If
- 21 the application is for substantially the same project and is
- 22 resubmitted within 60 days after the date the application is
- 23 withdrawn, the department shall waive the certificate of need
- 24 application fee for the resubmitted application.
- 25 Sec. 22231. (1) The decision to grant or deny an applica-
- 26 tion for a certificate of need shall be made by the director. A
- 27 decision shall be proposed to the director by a bureau within the

- 1 department designated by the director as responsible for the
- 2 certificate of need program. A decision shall be in writing and
- 3 shall indicate 1 of the following:
- 4 (a) Approval of the application.
- 5 (b) Disapproval of the application.
- 6 (c) Subject to subsection (2), approval of the application 7 with conditions.
- 8 (d) If agreed to by the department and the applicant,
- 9 approval of the application with stipulations.
- 10 (2) If an application is approved with conditions pursuant
- 11 to subsection (1)(c), the conditions shall be explicit, shall be
- 12 related to the proposed project or to the applicable provisions
- 13 of this part, and shall specify a time, not to exceed 1 year
- 14 after the date the decision is rendered, within which the condi-
- 15 tions shall be met.
- 16 (3) If the department is conducting a comparative review,
- 17 the director shall issue only 1 decision for all of the applica-
- 18 tions included in the comparative review.
- 19 (4) Before a final decision on an application is made, the
- 20 bureau of the department designated by the director as responsi-
- 21 ble for the certificate of need program shall issue a proposed
- 22 decision -that-individually addresses WITH SPECIFIC FINDINGS OF
- 23 FACT IN SUPPORT OF THE PROPOSED DECISION WITH REGARD TO each of
- 24 the criteria listed in section 22225. -and states with specific-
- 25 ity the reasons and authority of the department for the proposed
- 26 decision. If a proposed decision is issued within the
- 27 application review period specified in the rules promulgated

- 1 under former part 221, the department shall be in compliance with
- 2 the review period requirement of those rules. The department
- 3 shall transmit a copy of the proposed decision to the applicant.
- 4 (5) The proposed decision shall be submitted to the director
- 5 on the day the proposed decision is issued. -, if the proposed
- 6 decision is an approval without conditions or stipulations.
- 7 (6) If the proposed decision is other than an approval with-
- 8 out conditions or stipulations, -the proposed decision shall be
- 9 submitted to the director -not more than 16 SHALL ISSUE A FINAL
- 10 DECISION 60 days after receipt by the applicant of the proposed
- 11 decision, UNLESS THE APPLICANT HAS FILED AN APPEAL OF THE PRO-
- 12 POSED DECISION.
- 13 (7) The director shall review the proposed decision before a
- 14 final decision is rendered.
- 15 (8) If a proposed decision is an approval, and if, upon
- 16 review, the director reverses the proposed decision, the direc-
- 17 tor immediately shall notify the applicant of the reversal.
- 18 Within 15 days after receipt of the notice of reversal, the
- 19 applicant may request a hearing under section 22232. After the
- 20 hearing, the applicant may request the director to reconsider the
- 21 reversal of the proposed decision, based on the results of the
- 22 hearing SHALL ISSUE A FINAL DECISION OF APPROVAL WITHIN 3 DAYS
- 23 AFTER RECEIPT OF THE PROPOSED DECISION.
- 24 -(9) The director shall issue a final decision not later
- 25 than 60 days after the date a proposed decision is submitted to
- 26 the director under subsection (6) or, if the proposed decision is

- 1 an approval, not later than 20 days after the proposed decision
- 2 is submitted to the director.
- 3 (9) $\frac{-(10)}{}$ The final decision of the director may be
- 4 appealed only by the applicant and only on the record directly to
- 5 the circuit court for the county where the applicant has its
- 6 principal place of business in this state or the circuit court
- 7 for Ingham county. Judicial review -shall be IS governed by
- 8 sections 103 to 106 of the administrative procedures act of 1969,
- 9 Act No. 306 of the Public Acts of 1969, being sections 24.303 to
- 10 24.306 of the Michigan Compiled Laws.
- 11 -(11) The review and appeal of a certificate of need appli-
- 12 cation submitted with the required filing fee before the effec-
- 13 tive date of this part shall be conducted under former part 221
- 14 and the rules promulgated under that part. The certificate of
- 15 need board created by former section 22121(2) shall continue for
- 16 the purpose of performing the functions vested in it by former
- 17 part 221, until all appeals lawfully brought under former
- 18 part 221 are concluded.
- 19 (10) -(12)— If the department exceeds the time frames set
- 20 forth in this section for other than good cause, as determined by
- 21 the commission, upon the written request of an applicant, the
- 22 department shall return to the applicant all of the certificate
- 23 of need application fee paid by the applicant under section
- 24 20161(2) AND THE APPLICANT MAY IMPLEMENT THE PROPOSED PROJECT
- 25 WITHOUT A CERTIFICATE OF NEED.
- 26. ♦ Sec. 22232. (1) The applicant may, within 15 days after
- 27 receipt by the applicant of the bureau's proposed decision -or

- 1 receipt of notice of reversal by the director of a proposed
- 2 decision that is an approval, TO DENY THE APPLICATION submit a
- 3 written request for a hearing to demonstrate -to the department
- 4 that the application filed by the applicant meets the require-
- 5 ments for approval under this part.
- 6 (2) The department shall appoint a hearing officer for a
- 7 hearing held under this section. The hearing officer shall
- 8 establish a schedule for the hearing, control the presentation of
- 9 proofs, and take such other action determined by the hearing
- 10 officer to be necessary to ensure that the hearing is conducted
- 11 in an expeditious manner and completed within a reasonable period
- 12 of time. The hearing officer shall convene the hearing within 90
- 13 days after receipt of a request for a hearing under this
- 14 section. Upon written request by a party, a hearing officer may
- 15 issue subpoenas requiring the attendance and testimony of wit-
- 16 nesses and the production of evidence. The department shall
- 17 establish appropriate qualifications for hearing officers
- 18 appointed under this section. UNLESS AGREED BY THE APPLICANT,
- 19 THE HOLDING BY THE DEPARTMENT OF A PREHEARING CONFERENCE OR OTHER
- 20 SIMILAR PROCEDURE DOES NOT CONSTITUTE CONVENING A HEARING FOR
- 21 PURPOSES OF THIS SUBSECTION.
- 22 (3) If a hearing is requested under this section, chapter 4
- 23 of the administrative procedures act of 1969, Act No. 306 of the
- 24 Public Acts of 1969, being sections 24.271 to 24.287 of the
- 25 Michigan Compiled Laws, -shall govern GOVERNS.
- 26 Sec. 22247. (1) The -department-shall-monitor compliance
- 27 with certificates of need-issued under this part, including, but

- 1 not limited to, project costs and conditions and stipulations
- 2 contained in a decision to approve an application. In addition,
- 3 the-department may investigate allegations of noncompliance with
- 4 a certificate of need or this part.
- 5 (2) If the department determines that the recipient of a
- 6 certificate of need under this part is not in compliance with the
- 7 terms of the certificate of need or that a person is in violation
- 8 of this part or the rules promulgated under this part, the
- 9 department may do 1 or more of the following:
- 10 (a) Revoke or suspend the certificate of need.
- 11 (b) Impose a civil fine of not more than the amount of the
- 12 billings for the services provided in violation of this part.
- 13 (c) Take any action authorized under this article for a vio-
- 14 lation of this article or a rule promulgated under this article,
- 15 including, but not limited to, issuance of a compliance order
- 16 under section 20162(5), whether or not the person is licensed
- 17 under this article.
- (d) Request enforcement action under section 22253.
- (e) Take any other enforcement action authorized by thiscode.
- 21 (f) Publicize or report the violation or enforcement action,
- 22 or both, to any person.
- 23 (3) A person shall not charge to, or collect from, another
- 24 person or otherwise recover costs for services provided or for
- 25 equipment or facilities that are acquired in violation of this
- 26 part. If a person has violated this subsection, in addition to
- 27 the sanctions provided under subsection (2), the person shall,

- 1 upon request of the person from whom the charges were collected,
- 2 refund those charges, either directly or through a credit on a
- 3 subsequent bill.
- 4 SEC. 22256. (1) THE DEPARTMENT SHALL SCHEDULE A HEARING FOR
- 5 AN APPEAL OF AN APPLICATION SUBMITTED UNDER FORMER PART 221
- 6 WITHIN 120 DAYS AFTER THE EFFECTIVE DATE OF THIS SECTION. IF AN
- 7 APPLICANT UNDER FORMER PART 221 DOES NOT PROCEED WITH AN APPEAL
- 8 AT A HEARING SCHEDULED UNDER THIS SECTION, THE APPLICATION WILL
- 9 BE CONSIDERED WITHDRAWN.
- 10 (2) IF THE DEPARTMENT DOES NOT SCHEDULE A HEARING WITHIN THE
- 11 TIME PERIOD REQUIRED UNDER SUBSECTION (1), THE APPLICANT MAY COM-
- 12 PLETE THE PROJECT WITHOUT A CERTIFICATE OF NEED.
- 13 Sec. 22260. (1) The department shall prepare and publish at
- 14 least annually reports of reviews conducted under this part. The
- 15 reports shall include a statement on the status of each pending
- 16 review and a statement as to each review completed, including
- 17 statements of the findings and decisions made in the course of
- 18 the reviews since the last report. -, and the recommendations of
- 19 regional certificate of need review agencies.
- 20 (2) The department -and, if applicable, the appropriate
- 21 regional certificate of need review agency shall make available
- 22 to the public for examination during -reasonable- ALL BUSINESS
- 23 hours -on business days the applications received by -them THE
- 24 DEPARTMENT and pertinent written materials on file.
- 25 Section 2. Sections 22217, 22227, 22230, 22237, 22239,
- 26 22241, 22243, 22249, and 22251 of Act No. 368 of the Public Acts
- 27 of 1978, being sections 333.22217, 333.22227, 333.22230,

- 1 333.22237, 333.22239, 333.22241, 333.22243, 333.22249, and
- 2 333.22251 of the Michigan Compiled Laws, are repealed.