# Community Health Care Association of New York State

## New York State Department of Health

October 4, 2010

Thomas Jung, R.A., Director

Division of Health Facility Planning

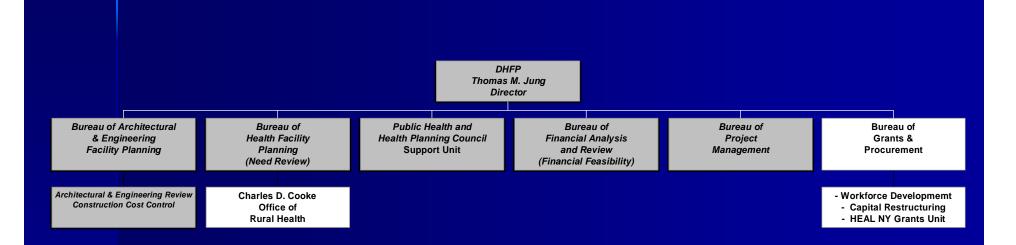
Christopher Delker

Director, Grants & Support Group, DHFP

Karen Madden, Director Bureau of Health Facility

Planning, DHFP

#### **Division of Health Facility Planning**



Also input from: Office of Long Term Care (NH's, Hospice and Home Health)

Bureau of Hospitals and Primary Care Services (Hospitals and D&T's)

Division of Legal Affairs (Legal)

Office of Health Insurance Programs (Medicaid)

# Why CON?

- Control Costs
- · Ensure Access
- Ensure Quality

# <u>Costs</u>

- –Prevent ExcessCapacity and
  - Temper Medical Arms Race
  - Control Premiums
  - Protect TaxpayerInterest



# Access

Redirect capital investment based on need

Address Disparities



St. Peter's Hospital
Albany, NY

# Quality

Character and Competence

Volume and Outcomes



# Certificate of Need (CON) Program

- Authorizes establishment and construction (new and renovation) of :
  - Hospitals
  - Nursing Homes
  - Clinics
  - Home Health Agencies
  - High Technology Specialty Services
  - Hospice & Home Health Care

#### **MAJOR ELEMENTS OF CON REVIEW**

- Review of Proposed Facilities and Services for:
  - -Public Need
  - -Financial Feasibility
  - Character and Competence of Owners and Operators

## **Public Need**

- Determination of public need is based on:
  - Population demographics
  - Use of existing services
    - Bed occupancy
    - Volume of services/procedures
  - Epidemiology of selected diseases and conditions
  - Access
    - Travel time
    - **Insurance status of population**

## **Financial Feasibility**

- Based on:
  - Projected revenues
  - Current financial status
  - Capacity to retire debt

## **Character and Competence**

#### Based on:

- Experience and past performance of proposed owners/operators "substantially consistent high level of care"
- Record of violations, if any

#### Types of Review

(Part 710: CON's and Prior Reviews)

- \* Limited Review (<\$6 M)
- \* Administrative Review
- Commissioner approval only
- In general, \$6 million to \$15 million
- \* Full Review
- Public Health and Health Planning Council approval (formerly SHRPC and PHC)
- New facilities, new beds and high tech services
- >\$15 million

## **Prior Reviews**

- Limited Architectural Review
  - BAEFP review A/E Certification
  - Finance Review as needed
- Prior Review notifications
  - Bed & service de-certifications
  - Bed conversions
  - Minor Service additions
- One-for-One equipment replacements

## **Administrative Level CON's**

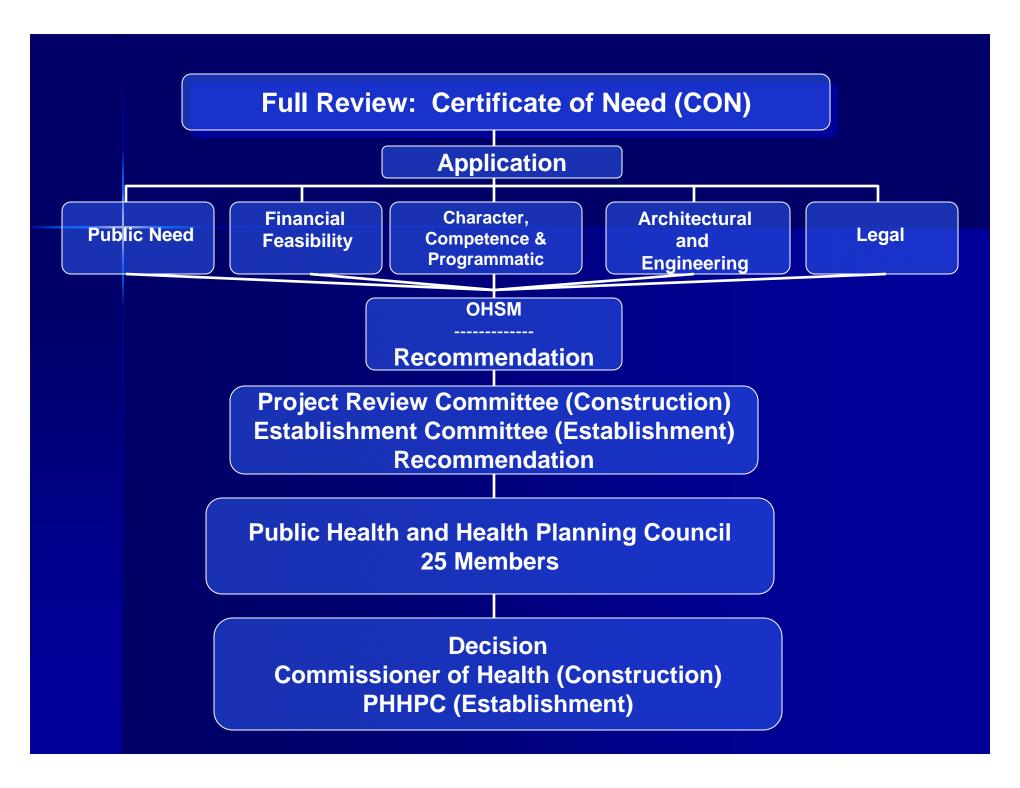
- All DHFP units review
  - Associate program units review as needed
- Approval issued by the Department

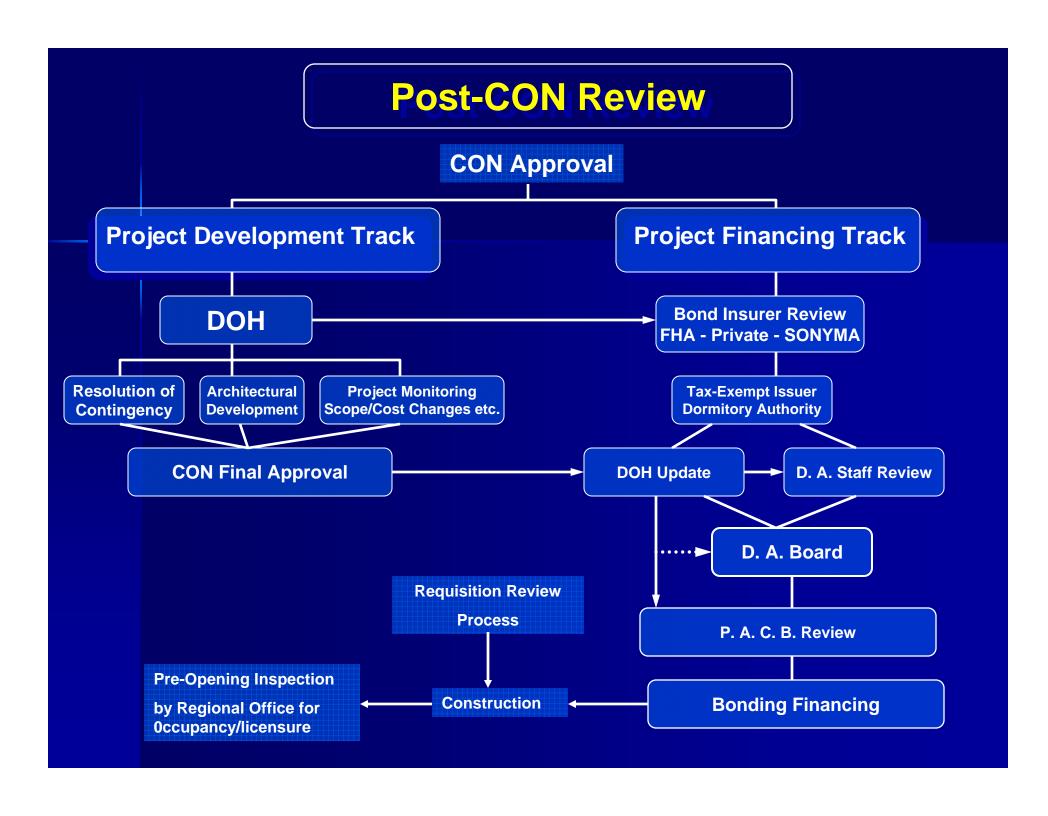
## **Full Review CON**

- Department staff reviews CON application and makes recommendation for approval or disapproval to Public and Health Planning Council (PHHPC)
- PHHPC reviews recommendation and takes public comment
- PHHPC makes Recommendation to the Commissioner (for construction)
- PHHPC approves establishment

# Public Health and Health Planning Council

- Governor appoints, Legislature confirms
- Reviews all full CON review projects
- Final decision-maker on establishment





## **CON Approval**

#### Contingencies

- Require specific action to resolve
- Typically subject to 60 Day time period
- Must be satisfied to complete (perfect) CON approval

#### Conditions

 On-going requirements that must be complied with during life of project, as applicable

#### **Recent CON Reforms**

- Non-clinical projects <\$15 million as limited review</p>
- Initial MRI purchase/certification Administrative CON instead of Full Review CON
- Relocation of Extension Clinic (< \$6 million) limited review instead of Administrative CON
- Raised thresholds of Administrative CON's from \$3 million to \$6 million; and Full Review CON's from \$10 million to \$15 million
- Eliminate Construction Start Approval letter? (Under Review)

#### Tips on Completing CON Applications: General

- Use latest version of application at <u>http://www.nyhealth.gov/nysdoh/cons/cons</u> <u>application</u>
- avoid 30-day letters (adds step in process)
  - Complete all necessary schedules
  - Ensure information in schedules is consistent

# Tips on Completing CON Applications: Need

- Be specific and comprehensive when addressing need issues
  - Be familiar with applicable need methodologies and policy
  - Address all pertinent local factors
  - Clearly identify proposed primary service area
    - specific zip codes
    - specific population
    - demographics & health status indicators (PQI)

#### Tips on Need (continued)

- Capacity of Existing Providers
- Identify existing barriers to service provision
- Assumptions and data that support utilization
- Serving Medicaid beneficiaries & underserved

# **Primary Care**

- No Need Methodology
- Guidelines:
  - Target Population and Service Area
  - Health Status (PQI's, etc.)
  - Special Needs or Conditions
  - Expansion of Access to Care

# **Primary Care**

- Guidelines (cont'd.)
  - Capacity of Existing Providers
    - Ratio of physicians to population
    - Medicaid Physicians
    - ■D&TCs in service area
    - Primary care visits/population

# Tips on Completing CON Applications: Architecture & Engineering

- Architectural Narrative (6): specific as possible
  - Site (address and building location)
  - New versus Renovation
  - Number and types of spaces proposed
- Functional Program
  - Number of staff and patients/visits
  - Major functions & support space(s)
  - Types of services

#### Tips on Architecture (continued)

#### Schematic Floor Plans

- Scaled
- All pertinent floors
- Clearly show exits and exit paths
- Site Plan if appropriate
- Focus of review
  - Function/State Hospital Code
  - Life Safety
  - Separate and Distinct (identifiable)

#### Tips on Architecture (continued)

#### Letters of Certification

- A/E Certification of Design Compliance
- Physicists Certification for Radiation

#### Proposed Space and Cost (10)

- Co\$t/SF will be compared to database
- Estimated costs must be accurate

# Tips on Completing CON Applications: Financial Feasibility

#### - Will determine:

- Ability to fund proposed project
- Reasonableness of budget
- Capacity to retire the new debt

#### - Include in CON application:

- Letter of credit from intended source of financing
- Revenue & expense projections
- Amount (10% minimum) and source(s) of equity

# Tips on Financial Feasibility (continued)

- Working Capital: funds needed to initiate & maintain operations until revenue can support operations
  - 2 mos. of 3<sup>rd</sup> year expenses for new
  - 2 mos. of 1<sup>st</sup> year expenses for existing
  - 50% cash equity
  - Need letter of interest for balance

# Tips on Financial Feasibility (continued)

- Feasibility
  - Existing: 3 years of certified financial statements (explain any losses)
- Changes of operator
  - Affidavit to be liable and responsible for any Medicaid overpayments and fees due from existing operator (unless agreement to contrary is documented

# Thank You....questions?

