

GUIDING PRINCIPLES

General Principles

The effective dates of this Plan are *State Fiscal Year 2012 through 2017*.

The goal of OHCA's health planning and health regulation activities is to improve the health of Connecticut's residents; increase the accessibility, continuity and quality of health services; prevent unnecessary duplication of health resources; and provide financial stability and cost containment of health care services.

To achieve this result, this plan is intended to:

- Promote and support the long-term viability of the state's health care delivery system;
- Ensure that any regulated service will maintain overall access to quality health care;
- Promote equitable access to health care services (e.g., reducing financial barriers, increasing availability of physicians) and facilitate access to preventive and medically necessary health care;
- Encourage and support health education, promotion and prevention initiatives;
- Encourage health care providers to collaborate with other entities and develop health care delivery networks;
- Support the need for a sufficient health care workforce that facilitates access to the appropriate level of care in a timely manner (e.g., optimal number of primary and specialty care providers);
- Maintain and improve the quality of health care services offered to the state's residents;
- Promote planning that contains or reduces increases in the cost of delivering health care services to its residents;
- Encourage regional and local participation in decisions about health care delivery, financing and provider supply;
- Promote public policy development through measuring and monitoring unmet need; and

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- Promote planning or other mechanisms that will achieve appropriate allocation of health care resources in the state.

CON-Specific Guidelines and Principles

The CON program is intended promote the provision of quality health care in a manner that ensures access for all state residents to cost-effective services so as to avoid duplication of health services and improve the availability and financial stability of health care services throughout the state. To that end, new health care projects which fall within certain jurisdictional parameters are subject to review and decision by OHCA. Connecticut General Statutes Section 19a-639, as amended by Public Act 10-179, specifies that the Office of Health Care Access, when considering Certificate of Need Applications, shall take into consideration the following guidelines and principles:

- (1) Whether the proposed project is consistent with any applicable policies and standards adopted in regulations by the office;
- (2) The relationship of the proposed project to the state-wide health care facilities and services plan;
- (3) Whether there is a clear public need for the health care facility or services proposed by the applicant;
- (4) Whether the applicant has satisfactorily demonstrated how the proposal will impact the financial strength of the health care system in the state;
- (5) Whether the applicant has satisfactorily demonstrated how the proposal will improve quality, accessibility and cost effectiveness of health care delivery in the region;
- (6) The applicant's past and proposed provision of health care services to relevant patient populations and payer mix;
- (7) Whether the applicant has satisfactorily identified the population to be served by the proposed project and satisfactorily demonstrated that the identified population has a need for the proposed services;
- (8) The utilization of existing health care facilities and health care services in the service area of the applicant; and

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(9) Whether the applicant has satisfactorily demonstrated that the proposed project shall not result in an unnecessary duplication of existing or approved health care services or facilities.

The Office, as it deems necessary, may revise or supplement the above guidelines and principles through regulation.

As planning is a dynamic process, and planning for the rapidly changing health care environment covered by the CON program is especially so, planning practices and the standards used by OHCA should and will reflect and incorporate current best practices, whenever possible. This requires OHCA being attentive to technological advances, research findings, demographic changes, shifting economic incentives, as well as to significant changes in the organization and delivery of health care and planning and quality standards.

Specific Standards

Connecticut's Statewide Health Care Facilities and Services Plan is, by design, an advisory document. In addition to the general guidelines above, the Plan establishes standards for health-care related activities. These standards are included in the plan and will be utilized in the Certificate of Need (CON) review process once adopted into regulation.

The structure, organization, and contents of the plan are designed, in part, to facilitate its use in the review of CON applications. It identifies certain standards that are to be used in the assessment of CON applications.

Each specific set of review standards identifies:

- the geographic area that is to be used in assessing the need for additional capacity;
- the need methodology and formulae to be applied;
- the population estimates and projections to be used; and
- any legislative mandates or other policy considerations that may be applicable.

Maps of the planning regions, inventories of existing service capacity, and projected capacity needs are presented where they are available and applicable. Collectively, these data and information and the accompanying discussion permits potential CON applicants to determine

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quickly whether a contemplated proposal is consistent with the plan and standards/guidelines.

INTERPRETATION OF THE PLAN

In reviewing CON applications, OHCA first applies C.G.S. 19a-639 guidelines and principles, and then considers any additional standards adopted through regulation and provided in the plan.

Unless otherwise noted, the Connecticut Department of Emergency Management and Homeland Security (DEMHAS) regions are the geographic area utilized in determining utilization rates and need.

In reviewing CON applications, the latest version of the *Inventory of Connecticut Health Care Services and Facilities* and published utilization reports shall be used.

All CON decisions shall be made using that version of the Plan in effect on the date of the decision, regardless of when the application was filed or public hearing held.

The *Inventory of Connecticut Health Care Services and Facilities* shall be available from the Department of Public Health Office of Health Care Access, 410 Capitol Avenue, Hartford, CT 06134, (860) 418-7001 and at <http://www.ct.gov/ohca> .

If more than one provider applies for certificate of need approval to establish or expand a healthcare facility or service in the same service area, a comparative hearing on the applications may be held.

All population estimates or projections for use with any standards contained within this Plan shall pertain only to the population within Connecticut and shall be obtained from XXXXX on the effective date of this Plan. This data shall be available Department of Public Health Office of Health Care Access, 410 Capitol Avenue, Hartford, CT 06134, (860) 418-7001 and at <http://www.ct.gov/ohca> .