

National Directory * State Certificate of Need Programs * Health Planning Agencies * 2009
Maine

Key Contact

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Certificate of Need

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Health Plans & Data

Statewide Health Plan.	Yes	Local Health Plan.	No	Date of Last Plan. . .	2008
Health/Medical Plan.	No	Specific Service Plan.	No		
<u>Other Health Plans:</u> Yes, State Health Plan for Maine					
Local health planning entities (e.g.; HSAs; labor or other coalitions) . . . No					
<u>Availability of Public Data:</u>					
Ambulatory Care Data. . .	No	Hospital Discharge Data. . .	Yes	Mental Health Data. . .	Yes
Cost/Charge Data.	Yes	Long Term Care Data.	Yes	Quality Data.	No
Other Health Data.	Yes, Manpower and Population Data				
<u>Other Planning, Data, Information, Programs & Initiatives:</u> Not Reported (NR)					

Legislative Information

Legislative changes in health planning, data or regulation in the last year:
 Capital Investment Fund Established in 2006 (to limit expenditures)

Health Reform Legislation:
 Dirigo Health and Capital Investment Fund. Contact Trish Riley, Director, Governor's Office for Health Policy and Finance: 207-624-7442; e-mail trish.riley@maine.gov.

CON Duration & Moratoria

Certificate of Need in Place (Dates) . . . 1978-Present	<u>New Bed Moratoria:</u>
<u>Comments on Moratoria:</u> Contact CON staff	Hospital Bed Moratorium. . . Yes
	LTC Moratorium. Yes
	Other Moratoria. No

Selected Service Inventories

<u>Number of Facilities:</u>	<u>Number of Beds:</u>	<u>High Tech Equipment:</u>
Hospitals. . . 37	Hospital Beds. . . 3,654	CTs. . . 50 MRIs. . . 40 PETs. . . 3
Nursing Homes. . . 112	Nursing Home Beds. . . 7,245	Gamma Knives. . . 0
Assisted Living/Res Care Facilities. . . 65	Assisted Living/Res Care Beds. . . 8,923	Lithotripters. . . 4
Psych Facilities. . . 4	Psych Beds. . . 403	Linear Accelerators. . . 9

Note: See Section IV for current state population information, for selected historical states health facility and health service inventories and use data, and for selected health service capacity and use trends.

Maine

Certificate of Need Basics

<p>Name of Program: Certificate of Need</p> <p>CON Website: http://www.maine.gov/dhhs/dlrs/c_o_n/</p> <p>FY 2008 Budget: \$526,000 FY 2008 CON Staff: 4</p> <p>Review Period (standard # of days to process application): 150</p> <p>Final Decision Making Authority: Commissioner, Department of Health & Human Services</p>	<p>Guidance:</p> <p>Statute..... Yes</p> <p>Rules & Regulations... Yes</p> <p>Criteria & Standards... Yes</p> <p>Other Guidance..... Yes</p> <p>CON Fees: \$1,000 per \$1,000,000 (any portion); Minimum \$5,000; Maximum \$250,000</p>	<p>CON Activity Reports:</p> <p>Monthly..... Yes</p> <p>Quarterly..... No</p> <p>Yearly..... Yes</p>
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Certificate of Need Review Volume

FY 2008:	Hospitals	Long Term Care	Freestanding	Mobile Services	TOTAL
No. Applications	5	4	0	0	9
Total Dollars	\$326,729,334	\$850,000	\$0	\$0	\$327,579,334
Approved Dollars	\$326,729,334	\$850,000	\$0	\$0	\$327,579,334

Certificate of Need Review Process

Published assessments/evaluations of the results on the effectiveness of CON regulation: No

Process (Summary):

Letter of Intent (LOI) must be filed at least 90 days before the review cycle begins. There are two CON project review cycles: The large project review cycle begins January 1 of each year; the small project review cycle begins April 1 annually. Applications must be received and determined complete before the start of the applicable review cycle. Public informational meeting is held on each complete application. A public hearing must be requested within 30 days following the public informational meeting. Staff analysis and decision by Commissioner are due within 150 days of the start of the review cycle. Administrative and judicial reviews of the Commissioner's decision are permissible. Reconsideration of the Commissioner's decision must be requested within 30 days of the Commissioner's decision letter.

Certificate of Need Review Thresholds and Coverage

Dollar Thresholds:		Major Medical Equipment Review:	
Capital Threshold:	\$3,070,988	Hospital.....	Yes
Equipment Capital Threshold:	\$1,525,444	Freestanding....	Yes
New Service Threshold:	\$140,098	Mobile.....	Yes
State reviews changes of owners or operators for nursing homes or hospitals or other health services:		None.....	No

Health Services Covered:

Air Ambulance.....	Yes	Hospice.....	No	Nursing Homes/Beds...	Yes	Rehabilitation.....	Yes
Amb Surgery Centers..	Yes	Hospitals/Beds.....	Yes	NICU.....	Yes	Renal Dialysis.....	Yes
Burn Care.....	Yes	ICF/MR.....	No	Obstetrical.....	Yes	Residential Care/	
Cardiac Cath.....	Yes	Lithotripsy.....	Yes	Open Heart.....	Yes	Assisted Living.....	No
Business Computers...	No	LTAC.....	Yes	Organ Transplant.....	Yes	Subacute Care.....	No
CT Scanners.....	Yes	Med Office Bldgs.....	No	PET Scanners.....	Yes	Substance Abuse.....	Yes
Gamma Knives.....	Yes	MRI Scanners.....	Yes	Psychiatric Beds.....	Yes	Swing Beds.....	Yes
Home Health.....	No	Mobile High Tech....	Yes	Rad Therapy/Linacs....	Yes	Ultra Sound.....	Yes

Other Services Covered : No

Notes:
Review criteria are in statute; review guidelines are used rather than standards.