

Issue Brief



Certificate of Need

Connecticut's CON Program

Connecticut's CON program generally requires certain health care entities to apply for a CON from the Office of Health Strategy (OHS) before (1) establishing new facilities or services, (2) changing ownership, (3) acquiring certain equipment, or (4) terminating or increasing certain services (CGS § 19a-638 et seq.). Covered entities that negligently fail to do so may face a penalty of up to \$1,000 per day of the violation (CGS § 19a-653).

By law, certain entities are exempt from CON requirements, such as long-term care facilities (which have a separate CON program administered by the Department of Social Services), federally-owned and -operated health care facilities, school-based health centers, community health centers, and outpatient rehabilitation facilities (CGS § 19a-638(b)).

What are Certificate of Need (CON) Programs?

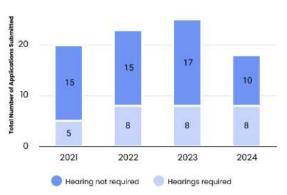


CON programs are state regulatory tools that control health care resources by requiring health care entities to get approval before making certain changes to their services or facilities. According to the National Conference of State Legislatures, as of February 26, 2024, 35 states, including Connecticut, operate these programs.

CON Process

To get a CON, a health care entity must apply to OHS's Health Systems Planning Unit (HSPU) and pay an

Fig. 1: 2021-2024 CON Applications



Source: OHS website, data reported through October

application fee ranging from \$1,000 to \$10,000, depending on the project's cost. The office has 30 days to determine whether the application is complete or if it requires additional information. Once the application is complete, there is a 30-day waiting period to allow for public comments and public hearing requests. OHS may choose to hold a public hearing on any application but must do so for hospital ownership transfers and when certain outside parties request it (CGS § 19a-639a). According to OHS, there were 86 CON applications submitted from 2021 through October 1, 2024, of which 29 required a public hearing (see Figure

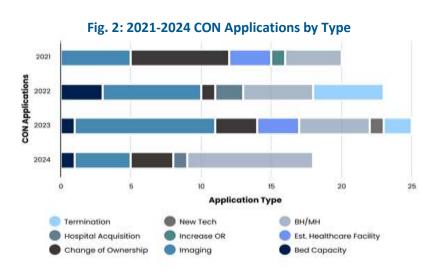
December 4, 2024 2024-R-0196

1). In 2024, half of all applications (nine) were to establish new behavioral or mental health facilities (BH/MH), including for substance abuse (see Figure 2).

OHS then generally issues a decision approving or denying the application within (1) 90 days after the 30-day waiting period has ended; (2) 60 days after the waiting period for voluntary large group practice transfers; and (3) when a public hearing is held, 60 days after the hearing record is closed. Alternatively, OHS and the applicant may enter into an agreed settlement that generally contains additional conditions or modifications to the original proposal (CGS § 4-177(c)). For applications received from 2021 through 2023, 50% resulted in an agreed settlement, 26% were approved, 6% were denied, 9% were withdrawn, and 9% are currently in progress.

CON Task Force

In 2022, the legislature established a <u>CON Task</u> <u>Force</u> to study and make recommendations on the state's CON program. The task force submitted its <u>final report</u> to the legislature in January 2023. Its recommendations included, among other things, (1) strengthening OHS oversight of community needs assessments, (2) expanding the OHS Statewide Health Care Facility Utilization Study and Statewide Healthcare Facilities Services plan to identify health disparities resulting from access to health care resources, and (3) giving OHS more resources to carry out its enforcement and compliance activities.



Source: OHS website, data reported through October 1, 2024

Recent Legislation

During the 2024 legislative session, the General Assembly considered, but did not pass, the following three CON-related bills:

- SSB 9, An Act Promoting Hospital Financial Stability: this bill, introduced by the Governor, proposed adding to the types of transactions requiring CON approval and modifying criteria HSPU must use when reviewing CON applications, among other things.
- SSB 440, An Act Concerning Certificates of Need: this bill, introduced by the Public Health Committee, proposed modifying the types of transactions that require, and are exempt from, CON approval; transferring responsibility, from OHS to the attorney general, for conducting cost and market impact reviews of certain hospital ownership transfers; and shortening deadlines for certain CON processes, among other things.
- HB 5316, An Act Concerning the Office of Health Strategy's Recommendations Regarding the Certificate of Need Program: this bill, introduced by the Public Health Committee proposed changes to CON program requirements for large group practices.



2023 CON Task Force Final Report

OHS CON Program website

OHS CON Guidebook

