

## Massachusetts Department of Public Health

150 YEARS OF ADVANCING PUBLIC HEALTH

# Consolidation under Determination of Need WEBINAR

Margo Michaels | *Director, Determination of Need* Rebecca Rodman | *Deputy General Counsel* October 25, 2019

- Outline how Consolidation will change the way DPH will accept DoN Applications
- Provide examples of how Consolidation will work
- Answer questions you have about Consolidation

#### Massachusetts Department of Public Health mass.gov/dph

# Purpose of the DoN

- Encourage competition & development of innovative health delivery methods & population health strategies within the health care delivery system
- ....ensure that resources will be made reasonably and equitably available to every person ...at the lowest reasonable aggregate cost
- ...advance goals for cost containment, improved public health outcomes, and delivery system transformation



# What is Consolidation?

Simply put, Consolidation requires Health Care Facilities submit DON applications differently.

- It requires consolidating capital expenditures and/or changes in service planned over a single FFY into one DoN application
- There are specifics around how applicants are to categorize expenditures/changes in service when filing a consolidated application
- Consolidated applications are required beginning October 1, 2019

# **New DoN** regulations 2017

# 100.715: Substantial Capital Expenditure and Substantial Change in Service

https://www.mass.gov/files/documents/2018/12/31/ jud-lib-105cmr100.pdf

#### (A) Substantial Capital Expenditure.

#### Effective October 1, 2019 an Application for Substantial Capital Expenditure must be submitted when the total of any Capital Expenditures, excluding those Capital Expenditures consisting of construction defined as a Conservation Project, by a Health Care Facility, as that term is defined in 105 CMR 100.100, for any construction ... reasonably forseeable during the course of a single Federal Fiscal Year, exceed, or may be reasonably regarded as likely to exceed, the Expenditure Minimum with Respect to Substantial Capital Expenditures when consolidated over the course of a single Federal Fiscal Year. Such Applications must also include all proposed Substantial Changes in

Service consolidated over the same Federal Fiscal Year. An Applicant may separately submit an Application for those Capital Expenditures consisting solely of construction defined as a Conservation Project that, when consolidated over the course of a single Federal Fiscal Year. exceed the Expenditure Minimum with Respect to Substantial Capital Expenditures. A Hospital or comprehensive cancer center ... may separately submit an Application for Substantial Capital Expenditure for those Capital Expenditures concerned solely with outpatient services other than Ambulatory Surgery and not otherwise defined by the Department as DoN -required Equipment or DoN -required Services; provided that such an Application includes all such reasonably foreseeable Capital Expenditures across all locations on the Health Care Facility License that exceed the Expenditure Minimum with Respect to Substantial Capital Expenditures when consolidated over the course of a single Federal Fiscal Year. Such Applications must also include all planned Substantial Changes in Service consolidated over the same Federal Fiscal Year.

#### (B) Substantial Change in Service. Effective October 1, 2019, a

Health Care Facility...that is not required to submit an application ...but proposes any reasonably foreseeable Substantial Change in Service over the course of a single Federal Fiscal Year, must submit an Application for any Substantial Change in Service that consolidates all such Substantial Changes in Service at the Health Care Facility over that Federal Fiscal Year. A Hospital or comprehensive cancer center ...may separately submit an Application for Substantial Change in Service for outpatient services; provided that such an Application consolidates all such reasonably foreseeable Substantial Changes in Service across all locations on the Health Care Facility License over the course of a single Federal Fiscal Year.

# Guidance Posting and Public Comment

### Added clarifications

## Final posted October 4, 2019

https://www.mass.gov/files/documents/2019/10/10/ don-consolidation-guideline-final.pdf

		Health and Huma nt of Public Healt on of Need Progr	an Services h am	
CHARLES D. BAKEF Governor KARYN E. POLITO	2		MARYLOU SUDDERS Secretary MONICA BHAREL, MD, MPH	
Lieutenant Governor	PUBLIC COMMENTS ARE BEING	ys, ending on Septem		
TO: FROM:	M E M Determination of Need Applicar Margo Michaels MPH, Director	iph.don@state.ma.us	Executive Office of Hea Department o Determination	L th of Massachusetts alth and Human Services of Public Health of Need Program eet Boston, MA 02108
DATE:	August 23, 2019	CHARLES D. BAKER Governor		MARYLOU SUDDERS Secretary
RE:	Consolidated Applications	KARYN E. POLITO Lieutenant Governor		MONICA BHAREL, MD, MPH Commissioner
Effective October 1, 2019 and pursuant to 10 (DoN) will be required to submit Proposed Pro reasonably foreseeable capital expenditures Federal Fiscal Year (FFY). This includes the license. Applicants seeking to file Proposed Pr requirements of 105 CMR 100.705 must provid			M E M O F	ANDUM
		TO:	Determination of Need Applicants	
		FROM:	Margo Michaels MPH, Director	
		DATE:	October 4, 2019	
		RE:	Consolidated Applications	
		will be requ foreseeabl	ired to submit Proposed Project <sup>1</sup> application e Capital Expenditures or Substantial Cha	00.715, Applicants for a Determination of Need (DoN) s that consolidate all planned or reasonably unges in Service for a licensed Health Care Facility des the Facility's main location and any satellite sites on
			05 must provide adequate information as to l plicant's plan to demonstrate Sufficient Inter to obtain any necessary municipal authorizat	location(s) that do not yet meet the requirements of 105 now the proposed expenditures meet the DoN factors est in the Site or Facility and evidence it has commenced ion within a date certain as necessary to meet the han 12 months after the date of the Notice of
				a Care Facility Require a DoN Application

Do we need to complete a DoN Application for Capital Expenditure?

- Take a look at your planned expenditures over the Federal Fiscal year
  - ➤ add them up...
  - see if total costs for any category exceed \$ minimum

Planned or reasonably foreseeable Capital Expenditures across 6 different categories

- Category 1: Non -Conservation Inpatient
- Category 2: Non -Conservation Outpatient
- Category 3: Conservation Inpatient
- Category 4: Conservation Outpatient
- Category 5: Non -Conservation at a Long -Term Care Facility
- Category 6: Conservation at a Long -term Care Facility

Do we need to complete a DoN Application for Substantial Changes in Service?

- Will either become incorporated into Application for Capital Expenditure
- Or, if for a particular category, you don't need a Capital Expense, all Substantial Changes in Service need to complete a DoN

Planned or reasonably foreseeable Substantial Changes in Service across 3 different categories

- Category 7: Inpatient Substantial Change in Services
- Category 8: Outpatient Substantial Change in Services
- Category 9: Substantial Change in Services at a Long-term Care Facility

# **Capital Expenditures Minimum \$ Thresholds**

## Updated yearly on the DON website

#### Currently:

- ~\$18M for Capital Expenditures at hospitals and comprehensive cancer centers
- ~30M for Outpatient Service Expenditures and Acquisitions
- ~\$2M for Capital Expenditures at other health care facilities

# Situation 1

**Hospital A** is building a Tower for inpatient services including ICU, a new inpatient cardiac floor, and MRI to support these services. In addition, the Hospital is doing routine maintenance on other sections of the hospital on the same campus, affecting only outpatient services.

- Cost for tower: \$20 million
- Cost for routine maintenance: \$18 million



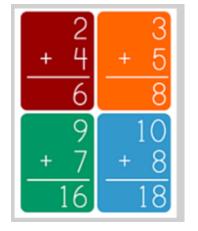
#### How should they handle their DoN Application?

Only apply for the Tower, because the routine maintenance is outpatient conservation below the \$30 million threshold

# Situation 2

**Hospital B** is expanding services to include a new Ambulatory Surgical Wing and a Emergency New Room, and extensive expansion of their MED/SURG services. In addition at a satellite location the hospital is adding a outpatient cardiac service.

- Cost for Ambulatory: \$30 million
- Cost for ED: \$27 million
- Expansion of Med/Surg: \$19 million
- Outpatient Cardiac Clinic: \$6.5 million



Add up to see if it is > than Minimum Thresholds

How should they handle their DoN Application? They could do 1 or 2 applications

1-includes everything

#### OR

- 1- outpatient and ambulatory surgery, and cardiac
- 2- the other with expansion of Med/Surg and ED

# Situation 3

**Hospital A** is revising its plans to build a Tower for inpatient services including ICU, a new inpatient cardiac floor, and MRI to support these services. This will be in 3 phases, over a 3 year period.

• Total cost for tower: 20 million  $\rightarrow$  exceeds minimum thresholds

In year 3, the hospital decides they also need to reduce the number of double rooms to single rooms, at a cost of \$23 million

#### How should they handle their DoN Application?

• Apply once for the Tower. Once it is approved, no additional Application is required. On year 3, the hospital must apply for DoN approval for the inpatient construction.

## Today's call ...

- Outline how Consolidation will change the way DPH will accept DoN Applications
- Provide some examples of how Consolidation will work
- Answer questions you have about Consolidation

# **Questions?**





MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH

# Determination of Need Consolidation

## Questions? DPH.DON@MassMail.State.MA.US

(617) 624-5690