

REQUIRED STATE AGENCY FINDINGS

FINDINGS

C = Conforming

CA = Conforming as Conditioned

NC = Nonconforming

NA = Not Applicable

Decision Date: May 3, 2024

Findings Date: May 3, 2024

Project Analyst: Cynthia Bradford

Co-Signer: Gloria C. Hale

Project ID #: G-12494-24

Facility: The Atrium /The Respite Center

FID #: 922007

County: Forsyth

Applicant: Horizons Residential Care Center

Project: Cost overrun for Project ID #G-12341-23 (develop two ICF-IID group homes)

REVIEW CRITERIA

G.S. 131E-183(a): The Department shall review all applications utilizing the criteria outlined in this subsection and shall determine that an application is either consistent with or not in conflict with these criteria before a certificate of need for the proposed project shall be issued.

- (1) The proposed project shall be consistent with applicable policies and need determinations in the State Medical Facilities Plan, the need determination of which constitutes a determinative limitation on the provision of any health service, health service facility, health service facility beds, dialysis stations, operating rooms, or home health offices that may be approved.

C

Horizons Residential Care Center, (hereinafter referred to as “Horizons” or “the applicant”) proposes a cost overrun (COR) for Project ID #G-12341-23 (develop two ICF-IID group homes).

A certificate of need was issued on July 27, 2023, for Project I.D. #G-12341-23 and authorized a capital cost of \$2,000,000. The current application proposes a capital cost increase of \$1,800,000 over the previously approved capital cost for a total combined capital cost of \$3,800,000. The cost overrun application is necessary due to increases in construction and design costs. The applicant proposes no material change in scope from the originally approved project in this application.

Project ID #G-12341-23 was conforming to this criterion and the applicant proposes no changes in the current application which would affect that determination.

Conclusion

The Agency reviewed the:

- Application
- Exhibits to the application
- Information which was publicly available during the review and used by the Agency

Based on that review, the Agency concludes that the application is conforming to this criterion for all the reasons described above.

- (2) Repealed effective July 1, 1987.
- (3) The applicant shall identify the population to be served by the proposed project, and shall demonstrate the need that this population has for the services proposed, and the extent to which all residents of the area, and, in particular, low income persons, racial and ethnic minorities, women, ... persons [with disabilities], the elderly, and other underserved groups are likely to have access to the services proposed.

C

The applicant proposes a cost overrun (COR) for Project ID #G-12341-23 (develop two ICF-IID group homes).

Project ID# G-12341-23 proposed to construct two six-bed ICF-IID group homes on the same site by relocating 10 beds from The Arches in Winston-Salem and two beds from The Atrium/The Respite Center upon project completion. A certificate of need was issued on July 27, 2023 for Project I.D. # G-12341-23 and authorized a capital cost of \$2,000,000. The current application proposes a capital cost increase of \$1,800,000 over the previously approved capital cost for a total combined capital cost of \$3,800,000. The cost overrun application is necessary due to increased construction and design costs. The applicant proposes no material change in scope from the originally approved project in this application.

Patient Origin

In Project ID# G-12341-23, the Agency determined the applicant had adequately identified the projected patient origin for the facility. The applicant proposes no changes in the current application which would affect that determination.

Analysis of Need

In Section Q, Form F.1b, the applicant provides a summary of the capital cost approved in Project ID# G-12341-23, the changes proposed in this application, and the new projected capital cost, as shown in the table below.

	Previously Approved Capital Costs (Project ID# G- 12341-23)	Proposed New Total Capital Costs-Project (Project ID #G- 12341-23 and #G- 12494-24)	Difference (Capital Cost for this Project)
Construction & Design	\$2,000,000	\$3,265,000	\$1,265,000
Architect/ Engineering Fees		\$156,443	\$156,443
Furniture		\$205,000	\$205,000
Consultant Fees		\$59,375	\$59,375
Other (infrastructure)		\$114,182	\$114,182
Total Capital Cost	\$2,000,000	\$3,800,000	1,800,000

In supplemental information, the applicant explains why it believes the proposed increase in capital cost is necessary to develop the proposed project:

- The applicant states that they have received a more detailed estimate of construction and architect expenses since the initial CON was approved.
- Final estimates and fees were more than initially projected in the initial CON.
- Additional expenses for furniture and consulting were added to the project since the initial CON was approved.

The information is reasonable and adequately supported based on the following:

- The applicant adequately explains why additional costs are necessary to develop the proposed project.
- The applicant provides documentation of the items listed above in supplemental documentation.

Projected Utilization

In Section C.8, page 47, the applicant confirms that projected utilization is not expected to be different from what was projected in the previously approved project. In Project ID# G-12341-23, the Agency determined that the projected utilization for the facility was reasonable and adequately supported. The applicant proposes no changes in the current application which would affect that determination.

Access to Medically Underserved Groups

The application for Project ID# G-12341-23 adequately demonstrated the extent to which all residents of the area, including underserved groups, were likely to have access to the proposed

services. The applicant proposes no changes in the current application which would affect that determination.

Conclusion

The Agency reviewed the:

- Application
- Exhibits to the application
- Supplemental information requested by the Agency

Based on that review, the Agency concludes that the application is conforming to this criterion for all the reasons described above.

- (3a) In the case of a reduction or elimination of a service, including the relocation of a facility or a service, the applicant shall demonstrate that the needs of the population presently served will be met adequately by the proposed relocation or by alternative arrangements, and the effect of the reduction, elimination or relocation of the service on the ability of low income persons, racial and ethnic minorities, women, ... persons [with disabilities], and other underserved groups and the elderly to obtain needed health care.

C

The applicant proposes a cost overrun (COR) for Project ID #G-12341-23 (develop two ICF-IID group homes).

Project ID #G-12341-23 was conforming to this criterion and the applicant proposes no changes in the current application which would affect that determination.

Conclusion

The Agency reviewed the:

- Application
- Exhibits to the application
- Supplemental information requested by the Agency

Based on that review, the Agency concludes that the application is conforming to this criterion for all the reasons described above.

- (4) Where alternative methods of meeting the needs for the proposed project exist, the applicant shall demonstrate that the least costly or most effective alternative has been proposed.

CA

The applicant proposes a cost overrun (COR) for Project ID #G-12341-23 (develop two ICF-IID group homes).

In Section E, page 53, the applicant states,

“There are no alternative, available resources on our current property, or in close proximity that could be utilized without adding costs to the total cost of the project. If we were to secure additional property to ‘house’ the two 6-bed homes, we would encounter additional property costs. By utilizing currently owned property, we eliminate those costs. Horizons has adequate acreage available on which to construct the two new 6-bed homes...”

The applicant adequately demonstrates that the alternative proposed in this application is the most effective alternative to meet the need for the following reasons:

- The applicant proposes to develop the project as approved in Project I.D. # G-12341-23.
- The application is conforming to all statutory and regulatory review criteria.

Conclusion

The Agency reviewed the:

- Application
- Exhibits to the application

Based on that review, the Agency concludes that the application is conforming to this criterion for the reasons stated above. Therefore, the application is approved subject to the following conditions:

- 1. Horizons Residential Care Center shall materially comply with all representations made in the certificate of need application and any supplemental responses. If representations conflict, the certificate holder shall materially comply with the last made representation.**
- 2. The certificate holder shall construct two six-bed ICF-IID group homes on the same site as The Atrium/ The Respite Center by relocating no more than 10 beds from The Arches in Winston-Salem and two beds from The Atrium/The Respite Center.**
- 3. Upon project completion, The Atrium/ The Respite Center shall be licensed for no more than 40 ICF/IID beds on the entire campus; no more than 28 ICF/IID beds at The Atrium/The Respite Center, no more than six ICF/IID beds at The Arches I group home, and no more than six ICF/IID beds at The Arches II group home.**

4. **Upon completion of the project, The Arches in Winston-Salem will no longer be licensed and will have no ICF/IDD beds.**
 5. **The total combined capital expenditure for this project and Project ID# G-12341-23 is \$3,800,000, an increase of \$1,800,000 over the capital cost of \$2,000,000 previously approved in Project I.D. #G-123441-23.**
 6. **Progress Reports:**
 - a. **Pursuant to G.S. 131E-189(a), the certificate holder shall submit periodic reports on the progress being made to develop the project consistent with the timetable and representations made in the application on the Progress Report form provided by the Healthcare Planning and Certificate of Need Section. The form is available online at: <https://info.ncdhhs.gov/dhsr/coneed/progressreport.html>.**
 - b. **The certificate holder shall complete all sections of the Progress Report form.**
 - c. **The certificate holder shall describe in detail all steps taken to develop the project since the last progress report and should include documentation to substantiate each step taken as available.**
 - d. **The first progress report shall be due on November 15, 2024.**
 7. **For the first three years of operation following completion of the project, the certificate holder shall not increase charges more than 5% of the charges projected in Section Q of the application without first obtaining a determination from the Healthcare Planning and Certificate of Need Section that the proposed increase is in material compliance with the representations in the certificate of need application.**
 8. **The certificate holder shall acknowledge acceptance of and agree to comply with all conditions stated herein to the Agency in writing prior to issuance of the certificate of need.**
- (5) Financial and operational projections for the project shall demonstrate the availability of funds for capital and operating needs as well as the immediate and long-term financial feasibility of the proposal, based upon reasonable projections of the costs of and charges for providing health services by the person proposing the service.

C

The applicant proposes a cost overrun (COR) for Project ID #G-12341-23 (develop two ICF-IID group homes).

Capital and Working Capital Costs

In Project I.D. # G-12341-23 the applicant projected, and the project was approved for, a capital cost of \$2,000,000. The current application proposes a capital cost increase of

\$1,800,000 which exceeds the 115 percent statutory limit for capital expenditures in an approved project.

The following table compares the capital cost approved in Project ID# G-12341-23, the changes proposed in this application, and the new projected capital costs, as reported in Form F.1b in Section C, between pages 47 and 48, and in supplemental information.

	Previously Approved Capital Costs (Project ID# G-12341-23)	Proposed New Total Capital Costs-Project (Project ID #G-12341-23 and #G-12494-24)	Difference (Capital Cost for this Project)
Construction & Design	\$2,000,000	\$3,265,000	\$1,265,000
Architect/ Engineering Fees		\$156,443	\$156,443
Furniture		\$205,000	\$205,000
Consultant Fees		\$59,375	\$59,375
Other (infrastructure)		\$114,182	\$114,182
Total Capital Cost	\$2,000,000	\$3,800,000	\$1,800,000

In supplemental information provided by the applicant, the applicant states the increase in capital costs is necessary due to increases in construction and additional architect, consulting, furniture, and infrastructure expenses that were discovered when the finalized cost estimates were provided to them after the original CON (Project ID# G-12341-23) was issued.

Availability of Funds

A certificate of need was issued on July 31, 2023, for Project I.D. # G-12341-23 and authorized a capital cost of \$2,000,000. In Project ID # G-12341-23, the Agency determined that the applicant adequately demonstrated that it had sufficient funds available for capital needs of the project. The current application proposed a capital cost increase of \$1,800,000 over the previously approved capital cost for a total combined capital cost of \$3,800,000.

In Section F.5, page 60, the applicant states that the capital cost for the COR will be funded as shown in the table below,

Sources of Capital Cost Financing	
Type	Horizons Residential Care Center
Loans	\$ 0
Accumulated reserves or OE *	\$1,935,000
Bonds	\$0
Other (Specify)	\$0
Total Financing	\$1,935,000

* OE = Owner's Equity

The applicant adequately demonstrates the availability of sufficient funds for the capital needs of the project based on the following:

- The applicant provides a copy of a financial statement of Horizons Residential Care Center for the period of December 31, 2023, to January 31, 2024, in Exhibit F.1 that shows an ending balance of \$5,193,517.28. The applicant states that this is an investment account that the applicant has access to cover the increased expenses incurred due to rising costs in construction.
- In supplemental information, the applicant provides a letter dated April 9, 2024, from the Complex Manager of Alex Brown, a Division of Raymond James, that verifies that the applicant has in excess of \$5,000,000 in marketable securities and cash equivalents. In an email, dated April 9, 2024, from an associate of Alex Brown, states that these funds are available to be utilized to cover the costs of equipment and building out facilities as deemed appropriate by the applicant.

Financial Feasibility

In Project ID# G-12341-23, the applicant projected revenues would exceed operating expense during the first three years of the project following project completion. The Agency determined Project ID# G-12341-23 had demonstrated the financial feasibility of the proposal was based on reasonable projections of costs and charges. The applicant is not proposing any changes that would affect that determination.

Conclusion

The Agency reviewed the:

- Application
- Exhibits of the application
- Supplemental information requested by the Agency

Based on that review, the Agency concludes that the application is conforming to this criterion for the following reasons:

- The applicant adequately demonstrates that the capital costs are based on reasonable and adequately supported assumptions for all the reasons described above.
 - The applicant adequately demonstrates availability of sufficient funds for the capital needs of the proposal for all the reasons described above.
 - The applicant adequately demonstrates sufficient funds for the operating needs of the proposal and that the financial feasibility of the proposal is based upon reasonable projections of revenues and operating expenses for all the reasons described above.
- (6) The applicant shall demonstrate that the proposed project will not result in unnecessary duplication of existing or approved health service capabilities or facilities.

The applicant proposes a cost overrun (COR) for Project ID #G-12341-23 (develop two ICF-IID group homes).

Project ID #G-12341-23 was conforming to this criterion and the applicant proposes no changes in the current application which would affect that determination.

Conclusion

The Agency reviewed the:

- Application
- Exhibits to the application
- Information which was publicly available during the review and used by the Agency

Based on that review, the Agency concludes that the application is conforming to this criterion for all the reasons described above.

- (7) The applicant shall show evidence of the availability of resources, including health manpower and management personnel, for the provision of the services proposed to be provided.

C

The applicant proposes a cost overrun (COR) for Project ID #G-12341-23 (develop two ICF-IID group homes).

Project ID #G-12341-23 was conforming to this criterion and the applicant proposes no changes in the current application which would affect that determination.

Conclusion

The Agency reviewed the:

- Application
- Exhibits to the application
- Information which was publicly available during the review and used by the Agency

Based on that review, the Agency concludes that the application is conforming to this criterion for all the reasons described above.

- (8) The applicant shall demonstrate that the provider of the proposed services will make available, or otherwise make arrangements for, the provision of the necessary ancillary and support services. The applicant shall also demonstrate that the proposed service will be coordinated with the existing health care system.

C

The applicant proposes a cost overrun (COR) for Project ID #G-12341-23 (develop two ICF-IID group homes).

Project ID #G-12341-23 was conforming to this criterion and the applicant proposes no changes in the current application which would affect that determination.

Conclusion

The Agency reviewed the:

- Application
- Exhibits to the application
- Information which was publicly available during the review and used by the Agency

Based on that review, the Agency concludes that the application is conforming to this criterion for all the reasons described above.

- (9) An applicant proposing to provide a substantial portion of the project's services to individuals not residing in the health service area in which the project is located, or in adjacent health service areas, shall document the special needs and circumstances that warrant service to these individuals.

NA

The applicant does not project to provide the proposed services to a substantial number of persons residing in Health Service Areas (HSAs) that are not adjacent to the HSA in which the services will be offered. Furthermore, the applicant does not project to provide the proposed services to a substantial number of persons residing in other states that are not adjacent to the North Carolina county in which the services will be offered. Therefore, Criterion (9) is not applicable to this review.

- (10) When applicable, the applicant shall show that the special needs of health maintenance organizations will be fulfilled by the project. Specifically, the applicant shall show that the project accommodates: (a) The needs of enrolled members and reasonably anticipated new members of the HMO for the health service to be provided by the organization; and (b) The availability of new health services from non-HMO providers or other HMOs in a reasonable and cost-effective manner which is consistent with the basic method of operation of the HMO. In assessing the availability of these health services from these providers, the applicant shall consider only whether the services from these providers:
- (i) would be available under a contract of at least 5 years duration;
 - (ii) would be available and conveniently accessible through physicians and other health professionals associated with the HMO;
 - (iii) would cost no more than if the services were provided by the HMO; and
 - (iv) would be available in a manner which is administratively feasible to the HMO.

NA

The applicant is not an HMO. Therefore, Criterion (10) is not applicable to this review.

- (11) Repealed effective July 1, 1987.
- (12) Applications involving construction shall demonstrate that the cost, design, and means of construction proposed represent the most reasonable alternative, and that the construction project will not unduly increase the costs of providing health services by the person proposing the construction project or the costs and charges to the public of providing health services by other persons, and that applicable energy saving features have been incorporated into the construction plans.

C

The applicant proposes a cost overrun (COR) for Project ID #G-12341-23 (develop two ICF-IID group homes).

The discussion regarding the need for the increased capital expenditure found in Criterion (3) is incorporated herein by reference. The discussion regarding costs and charges found in Criterion (5) is incorporated herein by reference. The changes proposed in this application, and the new projected capital cost are provided, as shown in the table below.

	Previously Approved Capital Costs (Project ID# G- 12341-23)	Proposed New Total Capital Costs-Project (Project ID #G- 12341-23 and #G- 12494-24)	Difference (Capital Cost for this Project)
Construction & Design	\$2,000,000	\$3,265,000	\$1,265,000
Architect/ Engineering Fees		\$156,443	\$156,443
Furniture		\$205,000	\$205,000
Consultant Fees		\$59,375	\$59,375
Other (infrastructure)		\$114,182	\$114,182
Total Capital Cost	\$2,000,000	\$3,800,000	\$1,800,000

In the original application, Project ID# G-12341-23, the applicant states that the project involves constructing two ICF/IID group homes that will encompass 3,218 square feet each. In supplemental information provided by the applicant, the applicant states that the project involves constructing two six bed ICF/IID group homes with a supporting structure to house shared functions that will encompass a total of 11,600 square feet. The line drawing for the updated facility is also provided in supplemental information.

In supplemental information, the applicant provides a letter, dated April 25, 2024, from the project architect describing how the cost, design, and means of construction represents the most reasonable alternative for this project.

In supplemental information, the applicant adequately explains why the proposal will not unduly increase the costs to the applicant of providing the proposed services or the costs and charges to the public for the proposed services based on the following:

- The applicant states that their program participates in the NC Medicaid Plan via ICF-IID Clinical Coverage Policy No. 8E, and thus has no mechanism in which they can “charge” an increased service fee. The applicant states they contract with all four MCO’s and have established contractual agreements regarding fee schedules.
- The applicant states that the proposed project cost overrun is specifically the result of inflationary and design-cost increases. The cost overrun will not affect the cost of operating services once the homes are occupied.

In supplemental information, the applicant provides a letter, dated April 25, 2024, from the project architect describing applicable energy saving features that will be incorporated into the construction plan.

Conclusion

The Agency reviewed the:

- Application
- Exhibits to the application
- Information publicly available during the review and used by the Agency
- Supplemental information requested by the Agency

Based on that review, the Agency concludes that the application is conforming to this criterion for all the reasons described above.

- (13) The applicant shall demonstrate the contribution of the proposed service in meeting the health-related needs of the elderly and of members of medically underserved groups, such as medically indigent or low income persons, Medicaid and Medicare recipients, racial and ethnic minorities, women, and ... persons [with disabilities], which have traditionally experienced difficulties in obtaining equal access to the proposed services, particularly those needs identified in the State Health Plan as deserving of priority. For the purpose of determining the extent to which the proposed service will be accessible, the applicant shall show:
- (a) The extent to which medically underserved populations currently use the applicant's existing services in comparison to the percentage of the population in the applicant's service area which is medically underserved;

C

The applicant proposes a cost overrun (COR) for Project ID #G-12341-23 (develop two ICF-IID group homes).

Project ID #G-12341-23 was conforming to this criterion and the applicant proposes no changes in the current application which would affect that determination.

Conclusion

The Agency reviewed the:

- Application
- Exhibits to the application
- Information which was publicly available during the review and used by the Agency

Based on that review, the Agency concludes that the application is conforming to this criterion for all the reasons described above.

- (b) Its past performance in meeting its obligation, if any, under any applicable regulations requiring provision of uncompensated care, community service, or access by minorities and persons with disabilities to programs receiving federal assistance, including the existence of any civil rights access complaints against the applicant;

C

The applicant proposes a cost overrun (COR) for Project ID #G-12341-23 (develop two ICF-IID group homes).

Project ID #G-12341-23 was conforming to this criterion and the applicant proposes no changes in the current application which would affect that determination.

Conclusion

The Agency reviewed the:

- Application
- Exhibits to the application
- Information which was publicly available during the review and used by the Agency

Based on that review, the Agency concludes that the application is conforming to this criterion for all the reasons described above.

- (c) That the elderly and the medically underserved groups identified in this subdivision will be served by the applicant's proposed services and the extent to which each of these groups is expected to utilize the proposed services; and

C

The applicant proposes a cost overrun (COR) for Project ID #G-12341-23 (develop two ICF-IID group homes).

Project ID # G-12341-23 was conforming to this criterion and the applicant proposes no changes in the current application which would affect that determination.

Conclusion

The Agency reviewed the:

- Application
- Exhibits to the application
- Information which was publicly available during the review and used by the Agency

Based on that review, the Agency concludes that the application is conforming to this criterion for all the reasons described above.

- (d) That the applicant offers a range of means by which a person will have access to its services. Examples of a range of means are outpatient services, admission by house staff, and admission by personal physicians.

C

The applicant proposes a cost overrun (COR) for Project ID #G-12341-23 (develop two ICF-IID group homes).

Project ID #G-12341-23 was conforming to this criterion and the applicant proposes no changes in the current application which would affect that determination.

Conclusion

The Agency reviewed the:

- Application
- Exhibits to the application
- Information which was publicly available during the review and used by the Agency

Based on that review, the Agency concludes that the application is conforming to this criterion for all the reasons described above.

- (14) The applicant shall demonstrate that the proposed health services accommodate the clinical needs of health professional training programs in the area, as applicable.

C

The applicant proposes a cost overrun (COR) for Project ID #G-12341-23 (develop two ICF-IID group homes).

Project ID #G-12341-23 was conforming to this criterion and the applicant proposes no changes in the current application which would affect that determination.

Conclusion

The Agency reviewed the:

- Application
- Exhibits to the application
- Information which was publicly available during the review and used by the Agency

Based on that review, the Agency concludes that the application is conforming to this criterion for all the reasons described above.

- (15) Repealed effective July 1, 1987.
- (16) Repealed effective July 1, 1987.
- (17) Repealed effective July 1, 1987.
- (18) Repealed effective July 1, 1987.
- (18a) The applicant shall demonstrate the expected effects of the proposed services on competition in the proposed service area, including how any enhanced competition will have a positive impact upon the cost effectiveness, quality, and access to the services proposed; and in the case of applications for services where competition between providers will not have a favorable impact on cost-effectiveness, quality, and access to the services proposed, the applicant shall demonstrate that its application is for a service on which competition will not have a favorable impact.

C

The applicant proposes a cost overrun (COR) for Project ID #G-12341-23 (develop two ICF-IID group homes).

The application for Project ID# G-12341-23 adequately demonstrated the expected effects of the proposed services on competition and how any enhanced competition would have a positive impact on cost-effectiveness, quality, and access to the services proposed. The applicant proposes no changes in this application which would affect that determination.

Conclusion

The Agency reviewed the:

- Application
- Exhibits to the application
- Information publicly available during the review and used by the Agency

Based on that review, the Agency concludes that the application is conforming to this criterion based on the reasons described above.

- (19) Repealed effective July 1, 1987.
- (20) An applicant already involved in the provision of health services shall provide evidence that quality care has been provided in the past.

C

The applicant proposes a cost overrun (COR) for Project ID #G-12341-23 (develop two ICF-IID group homes).

Project ID #G-12341-23 was conforming to this criterion and the applicant proposes no changes in the current application which would affect that determination.

In Section O, page 84, the applicant states that, during the 18 months immediately preceding submission of the application, they have no knowledge of incidents related to quality of care at any of its facilities. According to the files in the Mental Health Licensure and Certification Section, DHSR, during the 18 months immediately preceding submission of the application through the date of this decision, no incidents related to quality of care occurred in either of these facilities. After reviewing and considering information provided by the applicant and by the Mental Health Licensure and Certification Section and considering the quality of care provided at both facilities, the applicant provided sufficient evidence that quality care has been provided in the past. Therefore, the application is conforming to this criterion.

Conclusion

The Agency reviewed the:

- Application
- Exhibits to the application
- Information which was publicly available during the review and used by the Agency

Based on that review, the Agency concludes that the application is conforming to this criterion for all the reasons described above.

- (21) Repealed effective July 1, 1987.

G.S. 131E-183 (b): The Department is authorized to adopt rules for the review of particular types of applications that will be used in addition to those criteria outlined in subsection (a) of this section and may vary according to the purpose for which a particular review is being conducted or the type of health service reviewed. No such rule adopted by the Department shall require an academic medical center teaching hospital, as defined by the State Medical Facilities Plan, to demonstrate that any facility or service at another hospital is being appropriately utilized in order for that academic medical center teaching hospital to be approved for the issuance of a certificate of need to develop any similar facility or service.

C

The applicant proposes a cost overrun (COR) for Project ID #G-12341-23 (develop two ICF-IID group homes).

Project ID #G-12341-23 was conforming with all applicable Criteria and Standards for IID/ICF licensed facilities. The applicant proposes no changes in the current application which would affect that determination.

Conclusion

The Agency reviewed the:

- Application
- Exhibits to the application
- Information which was publicly available during the review and used by the Agency

Based on that review, the Agency concludes that the application is conforming to this criterion for all the reasons described above.