

What are need projections and how are they used in Certificate of Need determinations?

Certificate of Need (CON) rules and regulations for specific services contain demand-based forecasting methodologies which are used to determine the demand for regulated healthcare services. These demand-based forecasting methodologies project need associated with regulated services. Each methodology uses current utilization and supply data along with formulations defined for each service to project demand and extrapolate supply in the future.

When and why are the Health Planning's need projections updated and/or revised?

Since 2008 most need projections are updated on a schedule that conforms to the batching review cycle schedule. The schedule for batched services is as follows:

Need Projection Schedule for Batched Services		
	Batched Service/Need Projection	Need Projection Updated/ Batching Notices Issued
SPRING	Home Health, Nursing Home, Perinatal Services, Inpatient Physical Rehab, Ambulatory Surgery Centers	March (By the 25th)
SUMMER	PET Scanner, MegaVoltage Radiation Therapy	June (By the 22nd)
FALL	Home Health, Nursing Home, Perinatal Services, Inpatient Physical Rehab, Ambulatory Surgery Centers	September (By the 25th)
WINTER	PET Scanner, MegaVoltage Radiation Therapy	December (By the 22nd)

Cardiac Catheterization and Long Term Care Hospital Bed need projections are issued for each new horizon year (on or after April 1st) and/or when new utilization data becomes available. Shortstay Hospital bed need projections are facility-specific so are issued on an ad hoc basis.

What is a Horizon Year?

This is the projection year designated by rule for each regulated service. It is normally 3 or 5 years from the current year.

Can the Division of Health Planning's need projections be calculated at the county level?

Normally need projections are calculated at the aggregate (i.e. planning area) level and are never assessed at the county level. In some cases, certain components or steps of the projection will be done at the county or provider level and then aggregated to planning areas or statewide. DCH does not provide official projections at the county level, however.

What about short-stay general hospital bed need projections?

These projections are facility or location specific. Existing hospitals' need projections are calculated using facility-specific data. Calculations for new hospitals use data specific to the location of the proposed facility and the target service area.

How were the need projection methodologies and standards developed?

Technical Advisory Committees (TACs) were responsible for developing need projection methodologies as part of the rule making process. These TACs have been convened by DCH and consists of subject matter experts and providers of regulated services. Their recommendations go before the Board of Community Health and are subject to Public Comment before adoption.

Additional Questions? Please submit to DCH Health Planning.