## As Introduced

## 127th General Assembly Regular Session 2007-2008

H. B. No. 571

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## **Representative Yates**

## A BILL

and the conduct of other health-related

To amend sections 3702.51, 3702.511, and 3702.52 of

the Revised Code to restore the Certificate of

Need Program for the construction of new hospitals

activities.	5
BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF OHIO:	
Section 1. That sections 3702.51, 3702.511, and 3702.52 of the Revised Code be amended to read as follows:	6 7
Sec. 3702.51. As used in sections 3702.51 to 3702.62 of the Revised Code:	8
(A) "Applicant" means any person that submits an application for a certificate of need and who is designated in the application as the applicant.	10 11 12
<ul><li>(B) "Person" means any individual, corporation, business trust, estate, firm, partnership, association, joint stock company, insurance company, government unit, or other entity.</li><li>(C) "Certificate of need" means a written approval granted by</li></ul>	13 14 15
the director of health to an applicant to authorize conducting a reviewable activity.	17 18

(D) "Health service area" means a geographic region

for whom the acceptance of medical care is inconsistent with their	49
religious beliefs, accredited by a national accrediting	50
organization, exempt from federal income taxation under section	51
501 of the Internal Revenue Code of 1986, 100 Stat. 2085, 26	52
U.S.C.A. 1, as amended, and providing twenty-four hour nursing	53
care pursuant to the exemption in division (E) of section 4723.32	54
of the Revised Code from the licensing requirements of Chapter	55
4723. of the Revised Code.	56

- (H) "Medical equipment" means a single unit of medicalequipment or a single system of components with related functionsthat is used to provide health services.
- (I) "Third-party payer" means a health insuring corporation 60 licensed under Chapter 1751. of the Revised Code, a health 61 maintenance organization as defined in division (K) of this 62 section, an insurance company that issues sickness and accident 63 insurance in conformity with Chapter 3923. of the Revised Code, a 64 state-financed health insurance program under Chapter 3701., 65 4123., or 5111. of the Revised Code, or any self-insurance plan.
- (J) "Government unit" means the state and any county,

  municipal corporation, township, or other political subdivision of

  the state, or any department, division, board, or other agency of

  the state or a political subdivision.
- (K) "Health maintenance organization" means a public or
  private organization organized under the law of any state that is
  qualified under section 1310(d) of Title XIII of the "Public 73
  Health Service Act," 87 Stat. 931 (1973), 42 U.S.C. 300e-9.
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- (L) "Existing health care facility" means either of the 75 following:
- (1) A health care facility that is licensed or otherwise
   authorized to operate in this state in accordance with applicable
   law, is staffed and equipped to provide health care services, and
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is actively providing health services;	80
(2) A health care facility that is licensed or has beds	81
registered under section 3701.07 of the Revised Code as skilled	82
nursing beds or long-term care beds and has provided services for	83
at least three hundred sixty-five consecutive days within the	84
twenty-four months immediately preceding the date a certificate of	85
need application is filed with the director of health.	86
(M) "State" means the state of Ohio, including, but not	87
limited to, the general assembly, the supreme court, the offices	88
of all elected state officers, and all departments, boards,	89
offices, commissions, agencies, institutions, and other	90
instrumentalities of the state of Ohio. "State" does not include	91
political subdivisions.	92
(N) "Political subdivision" means a municipal corporation,	93
township, county, school district, and all other bodies corporate	94
and politic responsible for governmental activities only in	95
geographic areas smaller than that of the state to which the	96
sovereign immunity of the state attaches.	97
(O) "Affected person" means:	98
(1) An applicant for a certificate of need, including an	99
applicant whose application was reviewed comparatively with the	100
application in question;	101
(2) The person that requested the reviewability ruling in	102
question;	103
(3) Any person that resides or regularly uses health care	104
facilities within the geographic area served or to be served by	105
the health care services that would be provided under the	106
certificate of need or reviewability ruling in question;	107
(4) Any health care facility that is located in the health	108
service area where the health care services would be provided	109

under the certificate of need or reviewability ruling in question;	110
(5) Third-party payers that reimburse health care facilities	111
for services in the health service area where the health care	112
services would be provided under the certificate of need or	113
reviewability ruling in question;	114
(6) Any other person who testified at a public hearing held	115
under division (B) of section 3702.52 of the Revised Code or	116
submitted written comments in the course of review of the	117
certificate of need application in question.	118
(P) "Osteopathic hospital" means a hospital registered under	119
section 3701.07 of the Revised Code that advocates osteopathic	120
principles and the practice and perpetuation of osteopathic	121
medicine by doing any of the following:	122
(1) Maintaining a department or service of osteopathic	123
medicine or a committee on the utilization of osteopathic	124
principles and methods, under the supervision of an osteopathic	125
physician;	126
(2) Maintaining an active medical staff, the majority of	127
which is comprised of osteopathic physicians;	128
(3) Maintaining a medical staff executive committee that has	129
osteopathic physicians as a majority of its members.	130
(Q) "Ambulatory surgical facility" has the same meaning as in	131
section 3702.30 of the Revised Code.	132
(R) Except as otherwise provided in division (T) of this	133
section, and until the termination date specified in division (B)	134
of section 3702.511 of the Revised Code, "reviewable activity"	135
means any of the following:	136
(1) The addition by any person of any of the following health	137
services, regardless of the amount of operating costs or capital	138
expenditures:	139

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(a) A heart, heart-lung, lung, liver, kidney, bowel,	140
pancreas, or bone marrow transplantation service, a stem cell	141
harvesting and reinfusion service, or a service for	142
transplantation of any other organ unless transplantation of the	143
organ is designated by public health council rule not to be a	144
reviewable activity;	145
(b) A cardiac catheterization service;	146
(c) An open-heart surgery service;	147
(d) Any new, experimental medical technology that is	148
designated by rule of the public health council.	149
(2) The acceptance of high-risk patients, as defined in rules	150
adopted under section 3702.57 of the Revised Code, by any cardiac	151
catheterization service that was initiated without a certificate	152
of need pursuant to division (R)(3)(b) of the version of this	153
section in effect immediately prior to April 20, 1995;	154
(3)(a) The establishment, development, or construction of a	155
new health care facility other than a new long-term care facility	156
or a new hospital;	157
(b) The establishment, development, or construction of a new	158
hospital or the relocation of an existing hospital;	159
(c) The relocation of hospital beds, other than long-term	160
care, perinatal, or pediatric intensive care beds, into or out of	161
a rural area.	162
(4)(a) The replacement of an existing hospital;	163
(b) The replacement of an existing hospital obstetric or	164
newborn care unit or freestanding birthing center.	165
(5)(a) The renovation of a hospital that involves a capital	166
expenditure, obligated on or after June 30, 1995, of five million	167
dollars or more, not including expenditures for equipment,	168
staffing, or operational costs. For purposes of division (R)(5)(a)	169

center or the relocation of beds among buildings of a hospital or	200
freestanding birthing center at the same site.	201
(8) The expenditure of more than one hundred ten per cent of	202
the maximum expenditure specified in a certificate of need;	203
(9) Any transfer of a certificate of need issued prior to	204
April 20, 1995, from the person to whom it was issued to another	205
person before the project that constitutes a reviewable activity	206
is completed, any agreement that contemplates the transfer of a	207
certificate of need issued prior to that date upon completion of	208
the project, and any transfer of the controlling interest in an	209
entity that holds a certificate of need issued prior to that date.	210
However, the transfer of a certificate of need issued prior to	211
that date or agreement to transfer such a certificate of need from	212
the person to whom the certificate of need was issued to an	213
affiliated or related person does not constitute a reviewable	214
transfer of a certificate of need for the purposes of this	215
division, unless the transfer results in a change in the person	216
that holds the ultimate controlling interest in the certificate of	217
need.	218
(10)(a) The acquisition by any person of any of the following	219
medical equipment, regardless of the amount of operating costs or	220
capital expenditure:	221
(i) A cobalt radiation therapy unit;	222
(ii) A linear accelerator;	223
(iii) A gamma knife unit.	224
(b) The acquisition by any person of medical equipment with a	225
cost of two million dollars or more. The cost of acquiring medical	226
equipment includes the sum of the following:	227
(i) The greater of its fair market value or the cost of its	228
lease or purchase;	229

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(ii) The cost of installation and any other activities	230
essential to the acquisition of the equipment and its placement	231
into service.	232
(11) The addition of another cardiac catheterization	233
laboratory to an existing cardiac catheterization service.	234
(S) Except as provided in division (T) of this section,	235
"reviewable activity" also means any of the following activities $ au$	236
none of which are subject to a termination date:	237
(1) The establishment, development, or construction of a new	238
long-term care facility;	239
(2) The replacement of an existing long-term care facility;	240
(3) The renovation of a long-term care facility that involves	241
a capital expenditure of two million dollars or more, not	242
including expenditures for equipment, staffing, or operational	243
costs;	244
(4) Any of the following changes in long-term care bed	245
capacity:	246
(a) An increase in bed capacity;	247
(b) A relocation of beds from one physical facility or site	248
to another, excluding the relocation of beds within a long-term	249
care facility or among buildings of a long-term care facility at	250
the same site;	251
(c) A recategorization of hospital beds registered under	252
section 3701.07 of the Revised Code from another registration	253
category to skilled nursing beds or long-term care beds.	254
(5) Any change in the health services, bed capacity, or site,	255
or any other failure to conduct the reviewable activity in	256
substantial accordance with the approved application for which a	257
certificate of need concerning long-term care beds was granted, if	258

the change is made within five years after the implementation of

the reviewable activity for which the certificate was granted;	260
(6) The expenditure of more than one hundred ten per cent of	261
the maximum expenditure specified in a certificate of need	262
concerning long-term care beds;	263
(7) Any transfer of a certificate of need that concerns	264
long-term care beds and was issued prior to April 20, 1995, from	265
the person to whom it was issued to another person before the	266
project that constitutes a reviewable activity is completed, any	267
agreement that contemplates the transfer of such a certificate of	268
need upon completion of the project, and any transfer of the	269
controlling interest in an entity that holds such a certificate of	270
need. However, the transfer of a certificate of need that concerns	271
long-term care beds and was issued prior to April 20, 1995, or	272
agreement to transfer such a certificate of need from the person	273
to whom the certificate was issued to an affiliated or related	274
person does not constitute a reviewable transfer of a certificate	275
of need for purposes of this division, unless the transfer results	276
in a change in the person that holds the ultimate controlling	277
interest in the certificate of need.	278
(T) "Reviewable activity" does not include any of the	279
following activities:	280
(1) Acquisition of computer hardware or software;	281
(2) Acquisition of a telephone system;	282
(3) Construction or acquisition of parking facilities;	283
(4) Correction of cited deficiencies that are in violation of	284
federal, state, or local fire, building, or safety laws and rules	285
and that constitute an imminent threat to public health or safety;	286
(5) Acquisition of an existing health care facility that does	287
not involve a change in the number of the beds, by service, or in	288

the number or type of health services;

(6) Correction of cited deficiencies identified by	290
accreditation surveys of the joint commission on accreditation of	291
healthcare organizations or of the American osteopathic	292
association;	293
(7) Acquisition of medical equipment to replace the same or	294
similar equipment for which a certificate of need has been issued	295
if the replaced equipment is removed from service;	296
(8) Mergers, consolidations, or other corporate	297
reorganizations of health care facilities that do not involve a	298
change in the number of beds, by service, or in the number or type	299
of health services;	300
(9) Construction, repair, or renovation of bathroom	301
facilities;	302
(10) Construction of laundry facilities, waste disposal	303
facilities, dietary department projects, heating and air	304
conditioning projects, administrative offices, and portions of	305
medical office buildings used exclusively for physician services;	306
(11) Acquisition of medical equipment to conduct research	307
required by the United States food and drug administration or	308
clinical trials sponsored by the national institute of health. Use	309
of medical equipment that was acquired without a certificate of	310
need under division (T)(11) of this section and for which	311
premarket approval has been granted by the United States food and	312
drug administration to provide services for which patients or	313
reimbursement entities will be charged shall be a reviewable	314
activity.	315
(12) Removal of asbestos from a health care facility.	316
Only that portion of a project that meets the requirements of	317
division (T) of this section is not a reviewable activity.	318

(U) "Small rural hospital" means a hospital that is located

within a rural area, has fewer than one hundred beds, and to which	320
fewer than four thousand persons were admitted during the most	321
recent calendar year.	322
(V) "Children's hospital" means any of the following:	323
(1) A hospital registered under section 3701.07 of the	324
Revised Code that provides general pediatric medical and surgical	325
care, and in which at least seventy-five per cent of annual	326
inpatient discharges for the preceding two calendar years were	327
individuals less than eighteen years of age;	328
(2) A distinct portion of a hospital registered under section	329
3701.07 of the Revised Code that provides general pediatric	330
medical and surgical care, has a total of at least one hundred	331
fifty registered pediatric special care and pediatric acute care	332
beds, and in which at least seventy-five per cent of annual	333
inpatient discharges for the preceding two calendar years were	334
individuals less than eighteen years of age;	335
(3) A distinct portion of a hospital, if the hospital is	336
registered under section 3701.07 of the Revised Code as a	337
children's hospital and the children's hospital meets all the	338
requirements of division (V)(1) of this section.	339
(W) "Long-term care facility" means any of the following:	340
(1) A nursing home licensed under section 3721.02 of the	341
Revised Code or by a political subdivision certified under section	342
3721.09 of the Revised Code;	343
(2) The portion of any facility, including a county home or	344
county nursing home, that is certified as a skilled nursing	345
facility or a nursing facility under Title XVIII or XIX of the	346
"Social Security Act";	347
(3) The portion of any hospital that contains beds registered	348

under section 3701.07 of the Revised Code as skilled nursing beds

reviewable activities in accordance with this section.	380
(A) The activities specified in divisions (R)(1)(a) to (c),	381
(2), (4)(b), (5)(b), (7), (10)(a), and (11) of section 3702.51 of	382
the Revised Code cease to be reviewable activities as follows:	383
(1) Except as provided in division (A)(2) of this section, if	384
initial rules adopted under section 3702.11 of the Revised Code	385
take effect prior to May 1, 1997, for any service specified in	386
that section, all activities related to that service cease to be	387
reviewable activities one year after the effective date of the	388
<del>rules;</del>	389
(2) If the director of health fails to file proposed initial	390
rules in accordance with section 119.03 of the Revised Code prior	391
to May 1, 1996, for any service specified in section 3702.11 of	392
the Revised Code, all activities related to that service cease to	393
<del>be reviewable activities May 1, 1997;</del>	394
(3) If initial rules for any service specified in section	395
3702.11 of the Revised Code do not take effect prior to May 1,	396
1997, all activities related to that service cease to be	397
reviewable activities May 1, 1997.	398
(B) The activities specified in divisions (R)(1)(d), (3)(b),	399
(3)(c), $(4)(a)$ , $(5)(a)$ , and $(10)(b)$ of section 3702.51 of the	400
Revised Code cease to be reviewable activities May 1, 1997.	401
(C) The activity specified in division (R)(3)(a) of section	402
3702.51 of the Revised Code ceases to be a reviewable activity	403
March 31, 1996, if conducted within a metropolitan statistical	404
area, and May 1, 1997, if conducted within a rural area.	405
(D) The activities specified in divisions (R)(6), (8), and	406
(9) of section 3702.51 of the Revised Code pertain to	407
implementation of reviewable activities for which a certificate of	408
need has been granted. When an activity described in division	409
(R)(1), (2), (3), (4), (5), (7), (10), or (11) of that section	410

ceases to be a reviewable activity, divisions (R)(6), (8), and (9)	411
cease to pertain to that activity as it existed immediately prior	412
to the effective date of this amendment are reviewable activities	413
on and after the effective date of this amendment.	414
(B) An activity specified in division (R) of section 3702.51	415
of the Revised Code that ceased to be a reviewable activity in	416
accordance with this section as it existed immediately prior to	417
the effective date of this amendment remains not reviewable if	418
either of the following applies:	419
(1) The activity was completed prior to the effective date of	420
this amendment and retains the character it had at the time it was	421
completed.	422
(2) The activity was commenced but not completed prior to the	423
effective date of this amendment, as long as the entity conducting	424
the activity meets the same requirements that would apply under	425
section 3702.525 of the Revised Code if a certificate of need had	426
been granted for the activity on the effective date of this	427
amendment.	428
Sec. 3702.52. The director of health shall administer a state	429
certificate of need program in accordance with sections 3702.51 to	430
3702.62 of the Revised Code and rules adopted under those	431
sections.	432
(A) The director shall issue rulings on whether a particular	433
proposed project is a reviewable activity. The director shall	434
issue a ruling not later than forty-five days after receiving a	435
request for a ruling accompanied by the information needed to make	436
the ruling. If the director does not issue a ruling in that time,	437
the project shall be considered to have been ruled not a	438
reviewable activity.	439
(B) The director shall review applications for certificates	440

of need. Each application shall be submitted to the director on	441
forms prescribed by the director, shall include all information	442
required by rules adopted under division (B) of section 3702.57 of	443
the Revised Code, and shall be accompanied by the application fee	444
established in rules adopted under division (G) of that section.	445
Application fees received by the director under this division	446
shall be deposited into the state treasury to the credit of the	447
certificate of need fund, which is hereby created. The director	448
shall use the fund only to pay the costs of administering sections	449
3702.51 to 3702.62 of the Revised Code and rules adopted under	450
those sections.	451

The director shall mail to the applicant a written notice 452 that the application meets the criteria for a complete application 453 specified in rules adopted under section 3702.57 of the Revised 454 Code, or a written request for additional information, not later 455 than fifteen days after receiving an application or a response to 456 an earlier request for information. The director shall not make 457 more than two requests for additional information. 458

The director may conduct a public informational hearing in 459 the course of reviewing any application for a certificate of need, 460 and shall conduct one if requested to do so by any affected person 461 not later than fifteen days after the director mails the notice 462 that the application is complete. The hearing shall be conducted 463 in the community in which the activities authorized by the 464 certificate of need would be carried out. Any affected person may 465 testify at the hearing. The director may, with the health service 466 agency's consent, designate a health service agency to conduct the 467 hearing. 468

Except during a public hearing or as necessary to comply with 469 a subpoena issued under division (F) of this section, after a 470 notice of completeness has been received, no person shall 471 knowingly discuss in person or by telephone the merits of the 472

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application with the director. If one or more persons request a	473
meeting in person or by telephone, the director shall make a	474
reasonable effort to invite interested parties to the meeting or 4	475
conference call.	476
(C) Divisions (C)(1) to (7) of this section apply to 4	477
certificate of need applications for which the director had not	478
issued a written decision prior to April 20, 1995, unless the	479
director was required, under the version of this section in effect 4	480
immediately prior to June 30, 1995, to grant a certificate of need 4	481
prior to June 30, 1995, because of a lack of written objections 4	482
from any affected person. Divisions (C)(1) to (7) of this section 4	483
do not invalidate any certificate of need that the director was	484
required to grant prior to June 30, 1995, under that circumstance. 4	485
(1) The director shall grant a certificate of need for the	486
entire project that is the subject of the application immediately 4	487
after both of the following conditions are met:	488
(a) The board of trustees of the health service agency of the 4	489
health service area in which the reviewable activity is proposed 4	490
to be conducted recommends, prior to the deadline specified in	491
division (C)(4) of this section or any extension of it under	492
division $(C)(5)$ of this section, that the certificate of need be	493
granted; 4	494
(b) The director receives no written objections to the	495
application from any affected person by the later of May 20, 1995,	496
or thirty days after the director mails the notice of	497
completeness. 4	498
(2) In the case of applications under comparative review, the	499

(a) The board of trustees of the health service agency of

director shall grant certificates of need for the entire projects

that are the subject of the applications immediately after both of

the following conditions are met:

each health service area in which the reviewable activities are	504
proposed to be conducted recommends, prior to the deadline	505
specified in division (C)(4) of this section or any extension of	506
it under division (C)(5) of this section, that certificates of	507
need be granted for each of the reviewable activities to be	508
conducted in its health service area;	509

(b) The director receives no written objections to any of the 510 applications from any affected person by the later of May 20, 511 1995, or thirty days after the director mails the last notice of 512 completeness. 513

The director's grant of a certificate of need under division 514

(C)(1) or (2) of this section does not affect, and sets no 515

precedent for, the director's decision to grant or deny other 516

applications for similar reviewable activities proposed to be 517

conducted in the same or different health service areas. 518

(3) If the director receives written objections to an 519 application from any affected person by the later of May 20, 1995, 520 or thirty days after mailing the notice of completeness, 521 regardless of the health service agency's recommendation, the 522 director shall notify the applicant and assign a hearing examiner 523 to conduct an adjudication hearing concerning the application in 524 accordance with Chapter 119. of the Revised Code. In the case of 525 applications under comparative review, if the director receives 526 written objections to any of the applications from any affected 527 person by the later of May 20, 1995, or thirty days after the 528 director mails the last notice of completeness, regardless of the 529 health service agencies' recommendation, the director shall notify 530 all of the applicants and appoint a hearing examiner to conduct a 531 consolidated adjudication hearing concerning the applications in 532 accordance with Chapter 119. of the Revised Code. The hearing 533 examiner shall be employed by or under contract with the 534 department of health. 535

The adjudication hearings may be conducted in the health 536 service area in which the reviewable activity is proposed to be 537 conducted. Consolidated adjudication hearings for applications in 538 comparative review may be conducted in the geographic region in 539 which all of the reviewable activities will be conducted. The 540 applicant, the director, and the affected persons that filed 541 objections to the application shall be parties to the hearing. If 542 none of the affected persons that submitted written objections to 543 the application appears or prosecutes the hearing, the hearing 544 examiner shall dismiss the hearing and the director shall grant a 545 certificate of need for the entire project that is the subject of 546 the application. The affected persons bear the burden of proving 547 by a preponderance of evidence that the project is not needed or 548 that granting the certificate would not be in accordance with 549 sections 3702.51 to 3702.62 of the Revised Code or the rules 550 adopted under section 3702.57 of the Revised Code. 551

(4) Except as provided in divisions (C)(1) and (2) of this 552 section, the director shall grant or deny certificate of need 553 applications for which an adjudication hearing is not conducted 554 under division (C)(3) of this section not later than ninety days 555 after mailing the notice of completeness or, in the case of an 556 application proposing addition of long-term care beds, not later 557 than ninety days after such other time as is specified in rules 558 adopted under section 3702.57 of the Revised Code. The director 559 shall grant or deny certificate of need applications for which an 560 adjudication hearing is conducted under division (C)(3) of this 561 section not later than thirty days after the expiration of the 562 time for filing objections to the report and recommendation of the 563 hearing examiner under section 119.09 of the Revised Code. The 564 director shall base decisions concerning applications for which an 565 adjudication hearing is conducted under division (C)(3) of this 566 section on the report and recommendations of the hearing examiner. 567

(5) Except as otherwise provided in division (C)(1), (2), or	568
(6) of this section, the director or the applicant may extend the	569
deadline prescribed in division $(C)(4)$ of this section once, for	570
no longer than thirty days, by written notice before the end of	571
the original thirty-day period. An extension by the director under	572
division (C)(5) of this section shall apply to all applications	573
that are in comparative review.	574
(6) No applicant in a comparative review may extend the	575

- deadline specified in division (C)(4) of this section. 576
- (7) Except as provided in divisions (C)(1) and (2) of this 577 section, the director may grant a certificate of need for all or 578 part of the project that is the subject of an application. If the 579 director does not grant or deny the certificate by the applicable 580 deadline specified in division (C)(4) of this section or any 581 extension of it under division (C)(5) of this section, the 582 certificate shall be considered to have been granted. The 583 director, in reviewing certificate of need applications for solid 584 organ transplantation services, may ask for assistance from a 585 statewide transplantation advisory group consisting of qualified 586 professionals and administrators. Such consultation shall not 587 cause the review period for any application to be extended beyond 588 the applicable deadline specified in division (C)(4) of this 589 section or any extension of it under division (C)(5) of this 590 section. 591
- (D) In granting a certificate of need, the director shall 592 specify as the maximum capital expenditure the certificate holder 593 may obligate under the certificate a figure equal to one hundred 594 ten per cent of the approved project cost. 595
- (E) The director shall monitor the activities of persons 596 granted certificates of need concerning long-term care beds during 597 the period beginning with the granting of the certificate of need 598 and ending five years after implementation of the activity for 599

which the certificate was granted. 600

In the case of any other certificate of need, the director
shall monitor the activities of persons granted certificates of
need during the period beginning with the granting of the
certificate of need and ending when the activity for which the
certificate was granted ceases to be a reviewable activity in
accordance with section 3702.511 of the Revised Code.

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- (F) When reviewing applications for certificates of need or monitoring activities of persons granted certificates of need, the director may issue and enforce, in the manner provided in section 119.09 of the Revised Code, subpoenas duces tecum to compel the production of documents relevant to review of the application or monitoring of the activities. In addition, the director or the director's designee, which may include a health service agency, may visit the sites where the activities are or will be conducted.
  - (G) The director may withdraw certificates of need.
- (H) The director shall conduct, on a regular basis, health 616 system data collection and analysis activities and prepare 617 reports. The director shall make recommendations based upon these 618 activities to the public health council concerning the adoption of 619 appropriate rules under section 3702.57 of the Revised Code. All 620 health care facilities and other health care providers shall 621 submit to the director, upon request, any information that is 622 necessary to conduct reviews of certificate of need applications 623 and to develop recommendations for criteria for reviews, and that 624 is prescribed by rules adopted under division (H) of section 625 3702.57 of the Revised Code. 626
- (I) Any decision to grant or deny a certificate of need shall 627 consider the special needs and circumstances resulting from moral 628 and ethical values and the free exercise of religious rights of 629 health care facilities administered by religious organizations, 630

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and the special needs and circumstances of children's hospitals,	631
inner city hospitals, and small rural hospitals.	632
Section 2. That existing sections 3702.51, 3702.511, and	633
3702.52 of the Revised Code are hereby repealed.	634