

Frequently Asked Questions

The information provided below should not be considered legal opinion. The answers do not cover all conceivable circumstances. Specific questions should be directed to the Certification of Need Program office.

**All correspondence should be emailed to CONP@health.mo.gov or mailed to 920 Wildwood Drive, Jefferson City, MO 65102.*

General Questions

When is the last time a CON rule became effective, or was amended or rescinded?

The latest rule amendments became effective November 30, 2024.

I was told that I needed a CON. What do I do now?

First, become familiar with CON [laws and regulations](#). Then, contact CON staff to discuss your project (573-751-6403 or CONP@health.mo.gov). A [Letter of Intent](#) form under the [Applications & Forms](#) tab is the first official filed document required. Then depending on your project proposal, you would follow the applicable CON Application checklist under the [Applications & Forms](#) tab.

What is required for a Non-Applicability proposal?

The following items are needed for the non-applicability package:

- ☐ *Letter of Intent (LOI) form. *Population and bed need calculation are not required with LTC non-applicability proposals.*
- ☐ *Proposed Expenditures form (top portion only for LTC projects).*
 - The total project cost listed on the Proposed Expenditures form must match the \$ amount listed on the LOI.
- ☐ *Proposed Expenditures Detail that:*
 - Lists what is included in each expenditure line item. (A worksheet is available upon request.)
 - States all methods and assumptions used to determine the cost of each line item.
- ☐ Third-party documentation of costs.
- ☐ Schematic drawings of the proposed facility with all use of space, dimensions and licensed bed locations clearly marked. **Not required for major medical equipment projects.*
- ☐ Evidence of site control if a new facility (i.e. Warranty Deed, Option to Purchase, or similar executed documentation).
- ☐ Other information may be requested.

Is a CON required to purchase a licensed and operational hospital or long-term facility?

A CON is not required to purchase an existing licensed and operational health facility.

How is the CON application fee calculated?

The nonrefundable application fee is a minimum of \$1,000, or one-tenth of one percent of the total cost of the proposed project, whichever is greater (i.e. Project cost is \$10,542,489, CON fee is \$10,542.48)

What is the difference between a “full” and an “expedited” application?

A full application takes at least 71 days with a comprehensive set of contents, whereby an expedited application takes a minimum of 41 days with a minimal set of contents. There is no difference in the application fee. A full review requires attendance at a CON meeting. An expedited review is conducted

through a ballot which is emailed to the Missouri Health Facilities Review Committee (MHFRC). However, any member may vote to defer the hearing to a CON meeting.

What projects require a full review?

New/Replacement Hospital
New/Add LTC Beds
New/Add LTCH Beds/Equipment
New/Additional Equipment

What projects are reviewed under the expedited review process?

6-mile RCF/ALF Replacement
15-mile LTC Replacement
30-mile LTC Replacement
LTC Renovation/Modernization
Equipment Replacement previously approved (has CON)
Equipment Replacement not previously approved

How often does the Missouri Health Facilities Review Committee meet to make decisions regarding full applications?

Approximately every eight weeks. See [Calendars & Events tab](#) for dates.

How often are expedited application decisions made?

There is a ballot decision cycle each month. See [Calendars & Events tab](#) for dates.

How can the Contact Person be changed for a project?

Submit a completed [Contact Person Correction](#) form under the [Applications & Forms tab](#) to CONP@health.mo.gov.

Is a CON required to replace a hospital?

A CON is required for a proposed newly-licensed facility at a specific location costing more than \$1,000,000.

Is a CON required to add beds to a hospital?

A CON is not required to add hospital beds to an existing licensed hospital, unless they are long-term care hospital beds, residential care, assisted living, intermediate care or skilled nursing facility beds.

Is a CON required for an Ambulatory Surgery Center or a Freestanding Clinic?

If the space would be licensed as a hospital under Chapter 197.020.2, a CON would be required.

197.020.2 "Hospital" means a place devoted primarily to the maintenance and operation of facilities for the diagnosis, treatment or care for not less than twenty-four consecutive hours in any week of three or more nonrelated individuals suffering from illness, disease, injury, deformity or other abnormal physical conditions; or a place devoted primarily to provide for not less than twenty-four consecutive hours in any week medical or nursing care for three or more nonrelated individuals. The term "hospital" does not include convalescent, nursing, shelter or boarding homes as defined in chapter 198.

Is a CON required to purchase medical equipment?

A CON is required if it is major medical equipment costing more than \$1,000,000, regardless of the proposed location (hospital, clinic, etc.).

Is a CON required to replace a piece of major medical equipment?

A CON is required if the replacement equipment cost is more than \$1,000,000.

What is the difference between new and additional major medical equipment?

New would be a new piece of equipment that your facility location (address specific) does **not** currently have/offer (i.e Robotic Surgery Unit). “New” equipment questions and utilization standards would apply.

Additional would be a new piece of equipment that your facility location (address specific) currently has/offers. If you currently have 2 MRI’s and want to acquire a 3rd MRI, “Additional” equipment questions and utilization standards would apply. If you currently have 1 PET/CT and plan to acquire a 2nd PET/CT but this unit would be solely dedicated to a new cardiology department in the facility, this would be considered “Additional” equipment.

What are “New” major medical equipment utilization standards?

Provider(s) in the applicant’s geographic service area should achieve at least the following community need rates for the most recent three (3) full years, if applicable, as follows by the final year:

Magnetic resonance imaging procedures: 2,000

Positron emission tomography/computed tomography procedures: 1,000

Lithotripsy treatments: 1,000

Linear accelerator treatments: 3,500

Cardiac catheterization procedures (include coronary angioplasties): 500

Gamma knife treatments: 200

Computed tomography: 3,500

Robotic surgery system: 240

*If the equipment you are acquiring is not listed above, it does not currently have a CON utilization standard.

What are “Additional” major medical equipment utilization standards?

The applicant should achieve at least the following community need rates, for the most recent three (3) full years, if applicable, as follows by the final year:

Magnetic resonance imaging procedures: 3,000

Positron emission tomography/computed tomography procedures: 1,000

Lithotripsy treatments: 1,000

Linear accelerator treatments: 6,000

Cardiac catheterization procedures: 750

Gamma knife treatments: 200

Computed tomography: 4,000

Robotic surgery system: 240

*If the equipment you are adding is not listed above, it does not currently have a CON utilization standard.

What is included in equipment cost?

Cost includes the unit and any functionally-related devices required and necessary to make the equipment operational, including shielding, installation and software and other items including but not limited to rigging, freight, and electric/plumbing/HVAC/mechanics specific to the unit.

Is the 15-mile radius service area applicable to new hospital projects?

A proposed hospital’s service area can be an appropriate geographic region documented by the applicant and approved by the MHFRC. Normally, the area consists of a set of counties or zip codes.

Is a non-applicability letter required if my project cost is less than the expenditure minimum?

If the project is for a new hospital or long-term care facility, a non-applicability letter is required if the project cost is below the \$ threshold; if the project is for major medical equipment below the \$ threshold, a non-applicability letter is not required but can be requested by the applicant.

What do I have to do to establish a long-term care facility?

A CON is required if the cost is \$600,000 or more. If the cost is less than \$600,000, a non-applicability letter is required to license the facility. Consult with the Section for Long-term Care especially the DHSS Engineering Consultation Unit for building and life-safety code requirements.

For licensure information, contact Shay Patterson at shay.patterson@health.mo.gov or 573-526-8522; or Shah Kelly at shahrina.kelly@health.mo.gov or 573-526-8506 early in the process. For building regulations, contact DHSS engineer David East at 573-526-8521; or Carrie Schaumburg at 573-526-5350; email contact is: ECU@health.mo.gov

Do I need a CON to reopen a long-term care facility?

A facility can be reopened within twelve months of the last day that the facility ceased offering resident care services without obtaining a new CON, as long as the number and type of beds remain the same. To reopen it, you must submit a “relicensure” request to the CON program that includes the previous and new name of the facility, address, date that it closed and the new owner and operator information. If the twelve month period has surpassed, a full CON application or non-applicability package is required to reopen/relicense the facility.

Is a CON required to add beds to an existing long-term care facility?

An existing facility may ask for a non-applicability letter for 10 beds or 10% licensed bed capacity, whichever is less, as long as the project cost is under \$600,000, and this provision was not used within two years of licensing beds under the provision, if applicable. If the addition does not qualify under the 10/10% provision, a full CON is required to add LTC beds.

What are the population-based bed-need formulas for long-term care?

See 19 CSR 60-50.450 (1) (A), (B), or (C) at this link:
<https://health.mo.gov/information/boards/certificateofneed/pdf/19c60-50.pdf>.

How is population calculated?

See 19 CSR 60-50.430 (4)(D) at this link: <http://www.sos.mo.gov/adrules/csr/current/19csr/19c60-50.pdf>.
To request population data and maps to use in calculating population for the service area, submit a *Missouri Population Data and Maps Order form* to the Bureau of Health Care Analysis and Data Dissemination (BHCADD), and allow at least two weeks response time.

*Instructions for completing population are available upon request.

Post-Decision Requirements

Are there any requirements following an issued non-applicability letter or CON?

A capital expenditure through above-ground construction or lease/purchase of the proposed equipment is required six months following issuance of the non-applicability letter or CON. A *Periodic Progress Report* form under the *Applications & Forms tab* are required every six months until project completion and a final *Periodic Progress Report* and documentation of costs are required at the time of project completion.

What is required if a capital expenditure is not incurred by the deadline?

If a capital expenditure is not incurred by the deadline, a request for an extension of the deadline must be submitted and approved. Fill out and submit the *Request for Extension* form under the *Applications & Forms tab*. CON staff issues the first 6-month extension on behalf of the MHFRC, any additional extensions for a full or expedited CON project require Committee approval at an in-person CON meeting. Only one six-month extension is allowed for non-applicability projects; if capital expenditure is still not incurred, the non-applicability letter will become null & void.

*If you have an extension request on an upcoming CON meeting agenda and capital expenditure is incurred before the CON meeting, contact CON staff with the applicable documentation and the request will be removed from the agenda.

What do I do if the project cost will be more than the approved cost?

If the actual project cost will be more than 10% over the approved cost, send a written request to the CONP office asking the Missouri Health Facilities Review Committee to change the CON. See 19 CSR 60-50.700 (7) at this link: <http://www.sos.mo.gov/adrules/csr/current/19csr/19c60-50.pdf>

Do modifications to a CON require committee review and approval?

Approval from the Missouri Health Facilities Review Committee is required if an owner, operator, site change or cost overrun occurs before the project is completed/licensed. See 19 CSR 60-50.700 (8) through (11) at this link: <http://www.sos.mo.gov/adrules/csr/current/19csr/19c60-50.pdf>

Modifications are reviewed by the MHFRC at an in-person CON meeting and require applicant attendance.

I no longer want to proceed with my approved CON project or non-applicability project, what do I do?

Submit a written request to CONP@health.mo.gov regarding the voluntary forfeiture of the specified CON project and provide a brief explanation for the forfeiture. Voluntary forfeitures of an entire full/expedited CON project must be approved by the MHFRC at an in-person CON meeting, but applicant attendance is not required. Voluntary forfeitures of a non-applicability project become null & void immediately.

What if USPS or the City issues my project site a new address that does not match what my CON is issued for and my facility is not yet licensed?

If an address update only is requested and the site is not changing, Committee approval is not required. CON staff will review the request and issue an amended CON. The applicant may submit:

1. Written request. This may be in the form of an email.
2. Reason(s) for request;
3. Applicant ID & Certification form;
4. Street map with location of facility clearly marked;
5. Documentation from USPS of the address update.