

AMERICAN COLLEGE OF RADIOLOGY

State-By-State
Certificate of Need Law Analysis

No Certificate of Need Law

- Arizona
- California
- Colorado
- Idaho
- Indiana
- Kansas
- Minnesota
- New Mexico
- North Dakota
- Pennsylvania
- South Dakota
- Texas
- Utah
- Wyoming

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State-By-State
Certificate of Need Law Analysis

Limited Certificate of Need Coverage

State	Activities/Facilities Covered By CON Statute
Arkansas	Long-term care facilities and home health care services agencies
Florida	Certain “health-care-related projects” listed in Fla. Stat. § 408.036, including facility construction projects, facility conversions, and changes in the number of inpatient beds, but not including acquisition of major medical equipment, and only including the initiation of tertiary health services (a term which does not encompass diagnostic imaging or radiation therapy services).
Louisiana	Long-term care beds and intermediate care facilities for persons with mental retardation.
Nebraska	The initial establishment, increase, relocation or conversion of long-term care beds or rehabilitation beds requires a certificate of need.
Nevada	Hospital construction in certain counties designated by population.
Ohio	Long term care facilities only.
Oklahoma	Long term care, psychiatric and chemical dependency facilities only.
Oregon	Long term care facilities only.
Wisconsin	Only the construction of a new nursing home, an increase in bed capacity in a nursing home, a capital expenditure over \$1,000,000.00 on behalf of a nursing home or an expenditure for equipment over \$600,000.00 by a nursing home

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**State-By-State
Certificate of Need Law Analysis**

**Comprehensive Certificate of Need Laws/
No Jurisdiction Over Physician Activities**

- Illinois (provided notice is filed in accordance with exemption requirements).
- Montana
- Maryland
- Washington

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**State-By-State
Certificate of Need Law Analysis**

**Comprehensive Certificate of Need Laws/
Jurisdiction Over Certain Physician Activities**

State	Description of Covered Activity/Exceptions
Alabama	Physician office exemption, provided physicians are offering services providing those services which are “normally performed in a physician’s or dentist’s office as opposed to a hospital or other health care facility,” and which are not reimbursed for services on a global or facility fee basis. Alabama law provides that “services which will be deemed not to be those which are normally performed in a physician’s or dentist’s office” include oncology centers and diagnostic centers (including but not limited to MRI, CT, and mammography services).
Alaska	Physician office exemption, but the extent of the exemption has not yet been clarified. Alaska CON law applies to “health facilities” in that the definition of “health facility” excludes physician offices. However, an Alaska official said regulations will likely be issued in the summer of 2005 clarifying this physician office exemption.
Connecticut	No physician office exemption for the purchases of imaging equipment and linear accelerators in excess of the medical equipment threshold.
Delaware	Physician office exemption except for the acquisition of major medical equipment. “Major medical equipment” only includes capital expenditures which exceed \$5,000,000; medical technology not available in Delaware; or medical technology designated by the Delaware Board as subject to review. The replacement by a physician’s office of major medical equipment with similar equipment is not subject to review. Also, in the case of major medical equipment acquired by an entity outside of Delaware, the use of that major medical equipment within Delaware by a physician’s office, whether or not on a mobile basis, is subject to

	review.
District of Columbia	Physician office exemption, unless “one or more pieces of major medical equipment is located within the offices and the offices have an annual operating budget of at least \$250,000”.
Georgia	Physician office exemption; however, CON requirements do apply if the office is seeking to offer clinical health services, such as radiation therapy, which were not offered in the office on a regular basis or through that office within the 12 month period prior to the time such services would be offered. Further, certificate of need requirements apply if the office seeks to purchase, lease or otherwise use diagnostic or therapeutic equipment with a value in excess of \$734,695. Finally, if an office seeks licensure as a health care institution, it is acting as inherently not an office, and must secure a certificate of need.
Hawaii	Physician office exemption, except in any case of purchase or acquisition of equipment attendant to the delivery of health care service and the instruction or supervision for any private office or clinic involving a total expenditure in excess of the expenditure minimum (\$1 million for new or replacement medical equipment; \$400,000 for used medical equipment).
Iowa	Physician office exception, except CON review is required for: (1) acquisition of equipment in excess of \$1,500,000 which results in the offering or development of a health service not previously provided; (2) acquisition of replacement equipment in excess of \$1,500,000; or (3) radiation therapy services.
Kentucky	Physician office exception, unless the physician’s office requests a major medical equipment expenditure in excess of \$1,951,612.
Maine	The capital expenditure threshold does not apply to the offices of private health care practitioners. However, the addition, in the private office of a health care practitioner, of new technology that costs \$1.2 million or more is a “new health service” requiring CON review.
Massachusetts	The use of any new technology or provision of any innovative service in a physician's office is subject to review. However, the capital expenditure threshold does not apply to physicians’ offices.
Michigan	Physicians’ offices are excluded from the capital expenditure threshold. “Covered clinical services”, however, apply to all settings. Thus, the initiation,

	replacement, or expansion of extracorporeal shock wave lithotripsy, megavoltage radiation therapy, PET, MRI services or CT services requires CON review, even when specific to a physician's office.
Mississippi	Physician office exception, except for the purchase of the purchase of medical equipment that exceeds the threshold, or if the office provides "institutional health services."
Missouri	The definition of "health care facility" specifically excludes "private offices of physicians", making physicians' offices exempt from CON review for capital expenditures. However, the acquisition or replacement of major medical equipment in this setting is not exempt.
New Hampshire	CON is not required for private offices or clinics of physicians, unless diagnostic or therapeutic equipment that exceeds \$400,000 threshold is proposed to be located or used therein.
New Jersey	CON is not required for physicians in private practice, except for acquisition of major moveable equipment (cardiac catheterization only).
New York	CON is not required for physicians in private practice, except for acquisition of major equipment, the addition of highly specialized services, or initiation of regulated services.[CONFIRM]
North Carolina	Physicians' offices are included in the definition of "diagnostic center." Thus, physicians' offices which acquire medical diagnostic equipment exceeding \$500,000 in cost must apply for a CON.
Rhode Island	Physician offices are not exempt from the requirements of the certificate of need program.
South Carolina	Activities undertaken by licensed private practitioners, whether in individual or group practice, do not require a certificate of need, except for the acquisition of major medical equipment in excess of \$600,000.
Tennessee	CON regulations contain an a "professional practice exemption" for premises occupied exclusively for the professional practice office of a medical doctor, osteopathic doctor, or dentist, stating that such premises are not a "health care institution," however, exemption is quite limited and physicians still must obtain CON if engaging in otherwise reviewable activity, i.e. acquisition of major medical equipment.
Vermont	There is a physician office exception, however, if a physician intends to purchase diagnostic imaging resources, he or she must send a letter of intent to the

	Commissioner, who will then look at the cost of the equipment and determine whether the office is still an office, which does not require a CON, or has become a diagnostic facility, which does require a CON.
Virginia	Certificate of need laws do not apply in physician offices except the portion of the office that is developed for the provision of outpatient or ambulatory surgery, cardiac catheterization, computed tomographic (CT) scanning, gamma knife surgery, lithotripsy, magnetic resonance imaging (MRI), magnetic source imaging (MSI), positron emission tomographic (PET) scanning, radiation therapy, and nuclear medicine imaging (but not nuclear cardiac imaging).
West Virginia	Physician's offices are "exempt" from a certificate of need, however, if the practice acquires major medical equipment it must first obtain a CON.