

State of Tennessee Health Facilities Commission

502 Deaderick Street, Andrew Jackson Building, 9th Floor, Nashville, TN 37243 **www.tn.gov/hfc** Phone: 615-741-2364 hsda.staff@tn.gov

GENERAL GUIDELINES FOR FILING LETTER OF INTENT/PUBLICATION OF INTENT TO FILE A CERTIFICATE OF NEED APPLICATION

Please read the following, the Rules and Regulations of the Commission, and Tennessee Code Annotated, §68-11-1601 *et seq.*, prior to preparation of the Letter of Intent/Publication of Intent (LOI/POI). <u>All Letter of Intents must be filed through HFC's Certificate of Need electronic portal.</u>

REVIEW CYCLES: A review cycle is no more than sixty (60) days. The review cycle begins on the fifteenth day of each month.

COMMUNICATIONS: All documents for filing a LOI/POI with the Health Facilities Commission must be received at the Commission by close of day (4:30pm) on the 15th of the month. For the purpose of filing LOI/POIs, the filing date is the actual date of filing electronically through HFC's e-application portal. In the event that the last appropriate filing date falls on a Saturday, Sunday, or legal holiday, such filing should occur on the <u>next business</u> day.

LETTER OF INTENT: Applications shall be commenced by the filing of the Letter of Intent. The Letter of Intent must be filed electronically through the e-application portal between the first day and the fifteenth day of the month prior to the beginning of the review cycle in which the application is to be considered. This allowable filing period includes the first day and the fifteenth day of the month involved.

Any Letter of Intent that fails to include all information requested in the Letter of Intent instructions and form, or is not timely filed, will be deemed void and the applicant will be notified in writing. The Letter of Intent may be refiled, but if refiled, is subject to the same requirements as set out above.

PUBLICATION OF INTENT: Simultaneously with the Letter of Intent filing, the Letter of Intent should be published in a newspaper of general circulation in the county where the proposed project is to be located. The proof of Publication of Intent will be filed as an attachment with the electronic application. The Letter of Intent should be placed in the Legal Section in the space no smaller than four (4) column inches. Publication must occur between the first day and the fifteenth day of the month, inclusive.

- 1. A "newspaper of general circulation" means a publication bearing a title or name, regularly issued at least as frequently as once a week for a definite price, having a second-class mailing privilege, being not less than four (4) pages, published continuously during the immediately preceding one-year period, which is published for the dissemination of news of general interest, and is circulated generally in the county in which it is published and in which notice is given.
- 2. In any county where a "newspaper of general circulation" does not exist, the Commission's Executive Director is authorized to determine the appropriate publication to receive any required Letter of Intent. A newspaper which is not engaged in the distribution of news of general interest to the public, but which is primarily engaged in the distribution of news of interest to a particular group of citizens, is not a "newspaper of general circulation."
- 3. In the case of an application for or by a home care organization, the Letter of Intent must be published in each county in which the agency will be licensed or in a regional newspaper which qualifies as a newspaper of general circulation in each county. In those cases where the Letter of Intent is published in more than one newspaper, the earliest date of publication shall be the date of publication for the purpose of determining competition deadlines and filing the application.

PROOF OF PUBLICATION: Documentation of publication must be filed with the application. Please submit proof of publication with the application by attaching either a copy of the full page of the newspaper in which the notice appeared, with the **mast and dateline intact**, or a publication affidavit supplied by the newspaper.

SIMULTANEOUS REVIEW: Those persons desiring a simultaneous review for a Certificate of Need for which a Letter of Intent has been filed should file a Letter of Intent with the Commission and the original applicant (as well as any other applicant filing a simultaneous review), and should publish their Letter of Intent concurrently in a newspaper of general circulation in the same county as the original applicant. The Letter of Intent by the applicant seeking simultaneous review must be published between the sixteenth day and the last day of the month of publication by the original applicant.

INSTRUCTIONS SPECIFIC TO COMPLETION OF LETTER OF INTENT/PUBLICATION OF INTENT

- 1. Immediately following identification of the applicant, existing facilities must identify the applicant's type of health care institution, (e.g. hospital, nursing home, ambulatory surgical treatment center, outpatient diagnostic center), as defined in Tennessee Code Annotated, §68-11-1602 (8)(A) or as a professional private practice as defined in Tennessee Code Annotated, §68-11-1602 (8)(B)(iii).
- 2. Ownership type may be included but is not limited to: Sole Proprietorship, Partnership, Limited Partnership (LP), Corporation (Inc.), Governmental (State of Tennessee or Political Subdivision), Limited Liability Company (LLC), Professional Corporation (PC), Professional Limited Liability Company (PLLC), or Joint Venture.
- 3. For applicants proposing new facilities, project description must begin with an establishment of a health care institution (e.g. hospital nursing home, ambulatory surgical treatment center, outpatient diagnostic center) as defined in Tennessee Code Annotated §68-11-1602 (8)(A).
- 4. Project description should include a brief discussion including services to be provided or affected.
- 5. The location of the proposed project must be included with identification of street address, if available, or description of location, e.g. distance from intersection of two roads, and city/town.
- 6. If applicable, identify total number of beds affected, licensure proposed for such beds, and intended uses.
- 7. If applicable, include the initiation of health care services as identified in Tennessee Code Annotated, §68-11-1607 (4).
- 8. All LOI/POIs must include a project cost. Project cost must be at least \$3,000 (minimum CON filing fee).
- 9. For home care organization, list all proposed counties and existing/licensed counties.

The following Letter of Intent/Publication of Intent are to be used for drafting purposes. Letter of Intents/Publication of Intents can only be submitted through the Certificate of Need electronic portal.



State of Tennessee Health Facilities Commission

502 Deaderick Street, Andrew Jackson Building, 9th Floor, Nashville, TN 37243 **www.tn.gov/hfc** Phone: 615-741-2364 hsda.staff@tn.gov

LETTER OF INTENT

The Publication of Intent is to be published in the (<u>Insert Name of Newspaper</u>) which is a newspaper of general circulation in (<u>Insert County Name</u>), Tennessee, on or before (<u>Insert Month, Day, Year</u>) for one day.

This is to provide official notice to the Health Facilities Commission and all interested parties, in accordance with T.C.A. §68-11-1601 et seq., and the Rules of the Health Facilities Commission, that (*Insert Name of Applicant*), (*Insert Facility Type-Existing*) owned by (*Insert Owner's Name*) with an ownership type of (*Insert Ownership Type*) and to be managed by (*Insert Management Name*) intends to file an application for a Certificate of Need for (*Insert Project Description Here*).

The anticipated date of filing the application is (Insert Possible Date of Submitting with month, day, and year).

The contact person for this project is (<u>Insert Contact Name and Title</u>) who may be reached at (<u>Insert Company Name – Address with Street, City, State and Zip Code – Contact's Phone Number</u>)

Signature of Contact	Date	Contact's Email Address

The Letter of Intent must be received between the first and the fifteenth day of the month. If the last day for filing is a Saturday, Sunday, or State Holiday, filing must occur on the next business day. File this form at the following email address: hsda.staff@tn.gov. Applicants seeking simultaneous review must publish between the sixteenth day and the last day of the month of publication by the original applicant.

The published Letter of Intent must contain the following statement pursuant to T.C.A. §68-11-1607 (c)(1). (A) Any healthcare institution wishing to oppose a Certificate of Need application must file a written notice with the Health Facilities Commission no later than fifteen (15) days before the regularly scheduled Health Facilities Commission meeting at which the application is originally scheduled; and (B) Any other person wishing to oppose the application may file a written objection with the Health Facilities Commission at or prior to the consideration of the application by the Commission, or may appear in person to express opposition. Written notice of opposition may be sent to: Health Facilities Commission, Andrew Jackson Building, 9th Floor, 503 Deaderick Street, Nashville, TN 37243 or email at <a href="https://nsanton.org/n



State of Tennessee Health Facilities Commission

502 Deaderick Street, Andrew Jackson Building, 9th Floor, Nashville, TN 37243 **www.tn.gov/hfc** Phone: 615-741-2364 hsda.staff@tn.gov

PUBLICATION OF INTENT

The following shall be published in the "Legal Notices" section of the newspaper in a space no smaller than two (2) columns by two (2) inches.

NOTIFICATION OF INTENT TO APPLY FOR A CERTIFICATE OF NEED

This is to provide official notice to the Health Facilities Commission and all interested parties, in accordance with T.C.A. §68-11-1601 et seq., and the Rules of the Health Facilities Commission, that (*Insert Name of Applicant*), (*Insert Facility Type-Existing*) owned by (*Insert Owner's Name*) with an ownership type of (*Insert Ownership Type*) and to be managed by (*Insert Management Name*) intends to file an application for a Certificate of Need for (*Insert Project Description Here*).

The anticipated date of filing the application is (*Insert Possible Date of Submitting with month, day, and year*).

The contact person for this project is (<u>Insert Contact Name and Title</u>) who may be reached at (<u>Insert Company Name – Address with Street, City, State and Zip Code – Contact's Phone Number</u>)

The published Letter of Intent must contain the following statement pursuant to T.C.A. §68-11-1607 (c)(1). (A) Any healthcare institution wishing to oppose a Certificate of Need application must file a written notice with the Health Facilities Commission no later than fifteen (15) days before the regularly scheduled Health Facilities Commission meeting at which the application is originally scheduled; and (B) Any other person wishing to oppose the application may file a written objection with the Health Facilities Commission at or prior to the consideration of the application by the Commission, or may appear in person to express opposition. Written notice of opposition may be sent to: Health Facilities Commission, Andrew Jackson Building, 9th Floor, 503 Deaderick Street, Nashville, TN 37243 or email at <a href="https://dx.doi.org/10.1007/nc