APA-1
Revised 4/2018

TRANSMITTAL SHEET FOR NOTICE OF INTENDED ACTION

State Health Planning and Development Agency

Control 410 Department or Agency (Statewide Health Coordinating Council)
Rule No. 410-2-5
Rule Title: 2020 - 2023 Alabama State Health Plan, Chapter 410-2-5
__X__New ___ ___Amend ___ ___Repeal ___ ___Adopt by Reference

Would the absence of the proposed rule significantly harm or endanger the public health, welfare, or safety?	No
Is there a reasonable relationship between the state's police power and the protection of the public health, safety, or welfare?	Yes
Is there another, less restrictive method of regulation available that could adequately protect the public?	No
Does the proposed rule have the effect of directly or indirectly increasing the costs of any goods or services involved and, if so, to what degree?	No
Is the increase in cost, if any, more harmful to the public than the harm that might result from the absence of the proposed rule?	No
Are all facets of the rulemaking process designed solely for the purpose of, and so they have, as their primary effect, the protection of the public?	Yes
Does the proposed action relate to or affect in any manner any litigation which the agency is a party to concerning the subject matter of the proposed rule?	No

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Does the proposed rule have an economic impact?	No

If the proposed rule has an economic impact, the proposed rule is required to be accompanied by a fiscal note prepared in accordance with subsection (f) of Section 41-22-23, Code of Alabama 1975.

****

Certification of Authorized Official

I certify that the attached proposed rule has been proposed in full compliance with the requirements of Chapter 22, Title 41, Code of Alabama 1975, and that it conforms to all applicable filing requirements of the Administrative Procedure Division of the Legislative Services Agency.

Signature of certifying officer Emily T. Marsaf

Date 12-16-19

DEC 18 2019

(DATE FILED)
(STAMP)

APA-2

(Agency Name)
(Agency Division, if applicable)

NOTICE OF INTENDED ACTION

AGENCY NAME: **State Health Planning and Development Agency (Statewide Health Coordinating Council)**

RULE NO. & TITLE:

2020-2023 Alabama State Health Plan, Chapter 410-2-5

INTENDED ACTION:

The State Health Planning and Development Agency (Statewide Health Coordinating Council) proposes to adopt the 2020 - 2023 Alabama State Health Plan and repeal the 2014 - 2017 Alabama State Health Plan.

SUBSTANCE OF PROPOSED ACTION:

See attached.

TIME, PLACE, MANNER OF PRESENTING VIEWS:

See attached.

FINAL DATE FOR COMMENT AND COMPLETION OF NOTICE:

On March 10, 2020, at 10:00 a.m., the SHCC will conduct a public hearing at the Alabama Department of Agriculture & Industries, 1445 Federal Drive, Montgomery, AL 36106, at which time it shall consider the Proposed 2020-2023 Alabama State Health Plan along with all written and oral submissions in respect to the proposal. Only those interested persons who have made timely written requests will be afforded the opportunity to speak.

CONTACT PERSON AT AGENCY:

Ms. Emily T. Marsal, Executive Director
State Health Planning and Development Agency
100 North Union Street, Suite 870
Montgomery, AL 36104
(334) 242-4103

Emily T. Marsal

(Signature of officer authorized to promulgate and adopt rules or his or her deputy)

STATE HEALTH PLANNING AND DEVELOPMENT AGENCY
(STATEWIDE HEALTH COORDINATING COUNCIL)

NOTICE OF INTENDED ACTION

SUBSTANCE OF PROPOSED ACTION:

This proposal is to replace the 2014-2017 *Alabama State Health Plan* with an updated 2020-2023 *Alabama State Health Plan*, and addresses 410-2-5 (Chapter 5).

Table of Contents
Updated

410-2-5-.01 Introduction
No changes.

410-2-5-.02 Population
Population tables removed, sources contact information provided.

410-2-5-.03 Vital Events
Vital Events tables removed, sources contact information provided.

410-2-5-.04 Plan Revision Procedures
Correction of scrivener and grammatical errors, clarification of requirements.

410-2-5-.05 Application for State Health Plan Adjustment
Correction of scrivener and grammatical errors.

410-2-5-.06 Open Meetings Act
Correction of scrivener and grammatical errors.

410-2-5-.07 Electronic Notice
Correction of scrivener and grammatical errors.

410-2-5-.08 SHCC Committee Responsibilities
Proposed new section, outlines standing committees of the SHCC and State Health Plan sections currently assigned to each committee.

TIME, PLACE, MANNER OF PRESENTING VIEWS:

All interested persons are invited to submit data, views, comments and/or arguments, orally or in writing. Any and all such data, comments, arguments and/or requests to orally address the SHCC

shall be made in writing on or before February 21, 2019, at 5:00 p.m., to the State Health Planning and Development Executive Director.

Copies of this proposal are available for review at 100 North Union Street, RSA Union Building, Suite 870, Montgomery, Alabama, (334) 242-4103, Monday through Friday from 8:00 a.m. to 5:00 p.m., excluding State holidays; and on the Agency's website at www.shpda.alabama.gov.

APA-7

TRANSMITTAL SHEET FOR
BUSINESS ECONOMIC IMPACT STATEMENT
(Section 41-22-5.1)

Control No. **410** Department/Agency **State Health Planning and Development Agency (Statewide Health Coordinating Council)**

Rule No. **410-2-5**

Rule Title: **2020 - 2023 Alabama State Health Plan, Chapter 410-2-5**

___X___New ___ ____Amend ___ ____Repeal ___ ___Adopt by Reference

Attached is a Business Economic Impact Statement filed pursuant to Section 41-22-5.1, Code of Alabama 1975.

Signature of Filing Officer Emily T. Marsal

Date 12-16-19

(DATE FILED)
(STAMP)

ECONOMIC IMPACT STATEMENT
FOR APA RULE
(Section 41-22-23(f))

Control No. **410** Department or Agency **State Health Planning and Development Agency (Statewide Health Coordinating Council)**

Rule No: **410-2-5**

Rule Title: **2020 - 2023 Alabama State Health Plan, Chapter 410-2-5**

__X__ New _____ Amend _____ Repeal _____ Adopt by Reference

__X__ This rule has no economic impact.

_____ This rule has an economic impact, as explained below:

1. NEED/EXPECTED BENEFIT OF RULE:

2. COSTS/BENEFITS OF RULE AND WHY RULE IS THE MOST EFFECTIVE, EFFICIENT, AND FEASIBLE MEANS FOR ALLOCATING RESOURCES AND ACHIEVING THE STATED PURPOSE:

3. EFFECT OF THIS RULE ON COMPETITION:

4. EFFECT OF THIS RULE ON COST-OF-LIVING AND DOING BUSINESS IN THE GEOGRAPHICAL AREA WHERE THE RULE IS TO BE IMPLEMENTED:

5. EFFECT OF THIS RULE ON EMPLOYMENT IN THE GEOGRAPHICAL AREA WHERE THE RULE IS TO BE IMPLEMENTED:

6. SOURCE OF REVENUE TO BE USED FOR IMPLEMENTING AND ENFORCING THIS RULE:

7. THE SHORT-TERM/LONG-TERM ECONOMIC IMPACT OF THIS RULE ON AFFECTED PERSONS, INCLUDING ANALYSIS OF PERSONS WHO WILL BEAR THE COSTS AND THOSE WHO WILL BENEFIT FROM THE RULE:

8. UNCERTAINTIES ASSOCIATED WITH THE ESTIMATED BENEFITS AND BURDENS OF THE RULE, INCLUDING QUALITATIVE/QUANTITATIVE BENEFITS AND BURDEN COMPARISON:

9. THE EFFECT OF THIS RULE ON THE ENVIRONMENT AND PUBLIC HEALTH:

10. DETRIMENTAL EFFECT ON THE ENVIRONMENT AND PUBLIC HEALTH IF THE RULE IS NOT IMPLEMENTED:

****Additional pages may be used if needed.**

ALABAMA
STATE HEALTH PLAN
2020 – 2023
STATE HEALTH PLANNING AND DEVELOPMENT AGENCY

Chapter 410-2-5

Alabama Health Statistics and Revision Procedures

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410-2-5-.01 Introduction
410-2-5-.02 Population
410-2-5-.03 Vital Events
410-2-5-.04 Plan Revision Procedures
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410-2-5-.06 Open Meetings Act
410-2-5-.07 Electronic Notice
410-2-5-.08 SHCC Committee Responsibilities

410-2-5-.01 Introduction

This chapter contains information that is pertinent to the *State Health Plan*, but of such detail that it is best included in this Appendix. Population is based on Center for Business and Economic Research (CBER) The University of Alabama.

Author: Statewide Health Coordinating Council (SHCC).
Statutory Authority: § 22-21-260(4), Code of Alabama, 1975.
History: Filed October 18, 2004; Effective November 22, 2004. Amended (SHP Year Only): Filed December 2, 2014; Effective January 6, 2015. Repeal and New: Filed _____; Effective _____.

410-2-5-.02 Population

The most current population data supplied to SHPDA by the Center for Business and Economic Research (CBER), University of Alabama, is available by contacting the Data Division as follows:

MAILING ADDRESS
(U. S. Postal Service)

PO BOX 303025
MONTGOMERY, AL 36130-3025

STREET ADDRESS
(Commercial Carrier)

100 NORTH UNION STREET, SUITE 870
MONTGOMERY, AL 36104

TELEPHONE:
(334) 242-4103

FAX:
(334) 242-4113

EMAIL:
Data.submit@shpda.alabama.gov

WEBSITE:
http://www.shpda.alabama.gov

Author: Statewide Health Coordinating Council (SHCC)
Statutory Authority: § 22-21-260(4), Code of Alabama, 1975
History: Filed October 18, 2004; Effective November 22, 2004. Repeal and New: Filed _____; Effective _____

410-2-5-.03 Vital Events

The most recent publicly available information on Vital Events can be obtained from the Center for Health Statistics, Alabama Department of Public Health, at www.alabamapublichealth.gov /healthstats/index.html, or at (334) 206-5429.

For additional assistance with any data related to this section contact the Data Division as follows:

MAILING ADDRESS
(U. S. Postal Service)

PO BOX 303025
MONTGOMERY, AL 36130-3025

TELEPHONE:
(334) 242-4103

EMAIL:
data.submit@shpda.alabama.gov

STREET ADDRESS
(Commercial Carrier)

100 NORTH UNION STREET, SUITE 870
MONTGOMERY, AL 36104

FAX:
(334) 242-4113

WEBSITE:
http://www.shpda.alabama.gov

Author: Statewide Health Coordinating Council (SHCC).
Statutory Authority: § 22-21-260(4), Code of Alabama, 1975.
History: Filed October 18, 2004; Effective November 22, 2004. Amended (SHP Year Only): Filed December 2, 2014; Effective January 6, 2015. Repeal and New: Filed _____; Effective _____.

410-2-5-.04 Plan Revision Procedures

(1) Introduction

The Statewide Health Coordinating Council (SHCC) is responsible for the development of the State Health Plan (SHP) with final approval required by the Governor. The SHCC desires (a) a process that will maintain a viable and current SHP; (b) a coordinated system of revising the SHP; and (c) required information to be provided as outlined in ALA. ADMIN CODE r 410-2-5-.05 by individuals, groups, or other entities seeking a specific revision to the SHP commonly called an adjustment.

(2) There are three types of plan revisions:

(a) Plan Adjustment. In addition to such other criteria that may be set out in the SHP, a requested modification or exception to the SHP of limited duration, to permit additional facilities, beds, services, or equipment to address circumstances and meet the identified needs of a specific, or part thereof, that is less than statewide and identified in the State Health Plan. A Plan Adjustment is not of general applicability and is thus not subject to the AAPA's rulemaking requirements. Unless otherwise provided by the SHCC, a Plan Adjustment shall be valid for only one (1) year from the date the Plan Adjustment becomes effective, subject to the exceptions provided in this paragraph. If an Application is not filed with SHPDA seeking a Certificate of Need for all or part of the additional facilities, beds, services or equipment identified in the Plan Adjustment within one (1) year of the Governor's approval of the Plan Adjustment, the Plan Adjustment shall expire and be null and void. If an Application(s) seeking a Certificate of Need for all or part of the additional facilities, beds, services or equipment identified in the Plan Adjustment is filed prior to the expiration of the one (1) year period, the Plan Adjustment shall remain effective for purposes of such pending Certificate of Need Application(s). Such one (1) year period shall be further extended for the duration of any deadline provided by SHPDA for the filing of applications as part of a batching schedule established in response to a letter of intent filed within nine (9) months of the effective date of the adjustment. Upon the expiration of such deadlines, no Certificate of Need Applications shall be accepted by SHPDA which are based, in whole or in part, upon the expired Plan Adjustment.

(b) Statistical Update – An update of a specific section of the SHP to reflect more current population, utilization, or other statistical data.

(c) Plan Amendment – The alteration or adoption of rules, policies, methodologies, or any other plan revision that does not meet the plan adjustment or statistical update definition. An amendment is of "general applicability" and subject to the AAPA's rulemaking requirements.

(3) Application Procedures

(a) Application Procedure for Plan Adjustment. Any person may propose an adjustment to the SHP, which will be considered in accordance with the provisions of

SHPDA Rule 410-2-5-.04(4). The proposal will state with specificity the proposed language of the adjustment and shall meet the electronic filing requirements of SHPDA Rule 410-1-3-.09 (Electronic Filing).

(b) Procedure for Statistical Update. SHPDA staff shall make statistical updates to the SHP as needed. The SHCC shall be informed at its next regularly scheduled meeting of such updates.

(c) Application Procedure for Plan Amendment. Any person may propose an amendment to the SHP by submitting a detailed description of the proposal to the SHPDA in accordance with the electronic filing requirements of SHPDA Rule 410-1-3-.09 (Electronic Filing). Such amendment shall be considered in accordance with the provisions of Rule 410-2-5-.04(4). The proposal will state with specificity the proposed language of the amendment. If it is to amend a methodology, the exact formula will be included, as well as the results of the application of the formula. The SHCC may also consider Plan Amendments on its own motion.

(4) Review Cycle

(a) Within fifteen (15) days from the date of receipt of an application for an amendment or adjustment, the SHPDA staff shall determine if the applicant has furnished all required information for SHCC review and may thus be accepted as complete. The SHCC Chairman and the applicant will be notified when the application is accepted as complete.

(b) Within forty-five (45) days after the application is deemed complete, the application will be added to the SHCC calendar for review. SHPDA shall provide notice of the application for an amendment or adjustment when the application is deemed complete to: (1) all certificated health care facilities known to provide similar services in the county or planning region where the adjustment is requested; (2) all certificated health care facilities known to provide similar services in adjacent counties when the planning area is the county; and (3) such health care associations, state agencies and other entities that have requested to be placed on SHPDA's general notice list for such planning area or service. Once an application is deemed complete, persons other than the applicant will have thirty (30) days from the date of completion to electronically file statements in opposition to or in support of the application, as well as any other documentation to be considered by the SHCC. All such documentation shall be filed with SHPDA in accordance with the provisions of Rule 410-1-3-.09 (Electronic Filing), together with a certification that it has been served on the applicant and/or any other persons that have filed notices of support or opposition to the application. No documentation may be submitted beyond the deadlines in this subsection and subsection (3) unless authorized by written order issued by the Chairperson. All persons shall adhere to SHPDA's rules governing electronic filing.

(c) Procedure for Consideration of Plan Adjustments. Proposed Plan Adjustments deemed complete will be placed on the SHCC agenda (individually or

collectively) for a public hearing without further action by the SHCC. Unless otherwise provided herein, all written documentation to be considered by the SHCC at the public hearing shall be filed with the State Agency and served on the applicant and any intervenors and opponents of record not less than fourteen (14) days prior to the public hearing. Interested parties may address the proposed Plan Adjustments at the SHCC meeting, subject to such time limits and notice requirements as may be imposed by the SHCC Chairman. If the SHCC approves the Plan Adjustment in whole or in part, the adjustment, along with the SHCC's favorable recommendation, will be sent to the Governor for consideration and approval/disapproval. A Plan Adjustment shall be deemed disapproved by the Governor if not acted upon within fifteen (15) days. SHPDA, upon the approval of a Plan Adjustment, shall publish a copy of the Adjustment to its website, www.shpda.alabama.gov.

(d) Procedure for Consideration of Plan Amendments. A proposed Plan Amendment deemed complete will be placed on the SHCC agenda (individually or along with other proposed amendments) for an initial determination if the proposed amendment should be published in accordance with the AAPA and set for public hearing. At the Chairman's discretion, interested parties may be allowed to address the SHCC regarding the proposed amendments prior to such initial consideration. If the SHCC accepts the amendment for publication and hearing in accordance with the AAPA, SHPDA shall cause such publication and notice to be issued in accordance with the AAPA and the provisions of Rule 410-1-3-.10. Interested parties may address the proposed Plan Amendment at the SHCC meeting, subject to such time limits and notice requirements as may be imposed by the SHCC Chairman.

(e) If approved by the SHCC, a Plan Amendment, along with the SHCC's favorable recommendation, will be sent to the Governor for approval or disapproval. A Plan Amendment shall be deemed disapproved by the Governor if not acted upon within fifteen (15) days. Upon approval by the Governor, a Plan Amendment shall be filed with the Legislative Services Agency for further review in accordance with the AAPA. No party shall have any rights of administrative review, reconsideration or appeal of the approval or denial of a Plan Amendment except as may be specifically provided in the AAPA. SHPDA, upon final approval of a Plan Amendment, shall publish a copy of the amended section of the Plan to its website, www.shpda.alabama.gov, including the effective date of the Amendment.

(f) MEDIATION. At the discretion of the Chairman of the SHCC, non-binding mediation may be used to resolve differences between interested parties in regard to any pending matter before the SHCC. Said mediation will be conducted by the Chairman of the SHCC or his or her designee. Any modification or compromise relating to a pending proposal resulting from the mediation shall be sent to all interested parties as defined in paragraph (4)(b). No statement, representation or comment by any party to the Mediation shall be used, cited to, referenced or otherwise introduced at the SHCC's hearing on the proposal in question. Any proposed compromise or other agreement between the parties shall not be binding upon the SHCC.

(5) Filing Fees

Any person proposing a Plan Adjustment shall be required to pay an administrative fee equal to the minimum fee set by SHPDA for the filing of a Certificate of Need Application. Such fees shall be non-refundable and shall be used to defray costs associated with the processing and consideration of Plan Adjustment requests. All required filing fees must be submitted to the State Agency via overnight mail or other delivery method and marked in such a way as to clearly identify the fee with the electronic submission; or the fee may be submitted electronically via the payment portal available through the State Agency's website.

Author: Statewide Health Coordinating Council (SHCC).
Statutory Authority: §§ 22-21-260 (13), (15), Code of Alabama, 1975.
History: Filed October 18, 2004; Effective November 22, 2004. Amended: Filed February 1, 2013; Effective: March 8, 2013. Amended: Filed September 8, 2014; effective October 13, 2014. Amended (SHP Year Only): Filed December 2, 2014; Effective January 6, 2015. Amended: Filed December 22, 2016; Effective: February 5, 2017. Amended: Filed: February 6, 2018; effective: March 23, 2018. Repeal and New: Filed _____; Effective _____.

410-2-5-.05 Application for State Health Plan Adjustment

(1) Requirements

(a) Applicant Identification. An application for a Plan Adjustment must be filed in accordance with SHPDA Rule 410-1-3-.09, and accompanied by the administrative fee specified in Rule 410-2-5-.04(c)(5). The application must include the name of the applicant, physical address, telephone number, the contact person and mailing address, telephone number, and e-mail address.

(b) Project Description. Provide a narrative statement explaining the nature of the request, with details of the plan adjustment desired. (If the request is for additional beds, indicate the number and type, i.e., Psychiatric, Rehabilitation, Pediatric, Nursing Home, etc.) The narrative should address availability, accessibility, cost, quality of the health care in question, and state with specificity the proposed language of the adjustment.

(c) Service Area. Describe the geographical area to be served. (Provide an 8½" x 11" map of the service area. The map should indicate the location of other similar health care facilities in the area.)

(d) Population Projections. Provide population projections for the service area. In the case of beds for a specific age group, such as pediatric beds or nursing home beds, document the existence of the affected population. An example for nursing home beds is the number of persons 65 and older. The applicant must include the source of all information provided.

(e) Need for the Adjustment. Address the current need methodology. If the application is to increase beds or services in a planning area, give evidence that those beds or services have not been available and/or accessible to the population of the area.

(f) Current and Projected Utilization. Provide current and projected utilization of similar facilities or services within the proposed service area.

(g) If additional staffing will be required to support the additional need, indicate the availability of such staffing.

(h) Effect on Existing Facilities or Services. Address the impact this plan adjustment will have on other facilities in the area both in occupancy and manpower.

(i) Community Reaction. Give evidence of project support demonstrated by local community, civic and other organizations. (Testimony and/or comments regarding plan adjustment provided by community leaders, health care professionals, and other interested citizens.)

(j) Provide any other information or data available in justification of the plan adjustment request.

Author: Statewide Health Coordinating Council (SHCC).
Statutory Authority: § 22-21-260(4), Code of Alabama, 1975.
History: Filed October 18, 2004; Effective November 22, 2004. Amended (SHP Year Only): Filed December 2, 2014; Effective January 6, 2015. Amended: Filed February 6, 2018; Effective: March 23, 2018. Repeal and New: Filed_____; Effective _____.

410-2-5-.06 Open Meetings Act

All meetings of the Statewide Health Coordinating Council (SHCC) shall be held in compliance with the provisions of the "Alabama Open Meetings Act" ("Act") ALA. CODE §§ 36-25A-1 through -11 (1975 as amended), which requires public notice of any gathering, whether or not prearranged, of a quorum of a governmental body, committee or subcommittee during which the members deliberate specific matters expected to come before the body, committee or subcommittee at a later date. To ensure compliance with the letter and spirit of the Act, entities seeking to sponsor inspection or educational sessions for multiple SHCC members relating, directly or indirectly, to a pending or contemplated plan adjustment or amendment must first file a written request for approval from the Chairman, with a copy to all other entities that have filed comments or pleadings relating to the matter. Such requests will only be granted in extraordinary circumstances, and will be publicized and conducted in accordance with the provisions of the Act relating to meetings involving a quorum of the SHCC.

Author: Statewide Health Coordinating Council (SHCC).
Statutory Authority: § 22-21-260(13), (15), Code of Alabama, 1975.
History: Filed September 9, 2010; Effective: October 14, 2010. Amended (SHP Year Only): Filed 2, 2014; Effective January 6, 2015. Repeal and New: Filed _____; Effective _____.

410-2-5-.07 Electronic Notice

SHPDA shall provide any written notice required under these rules in electronic PDF format, which shall be considered delivered upon the date of transmission. All health care providers holding a certificate of need from SHPDA, as well as other interested parties seeking to be included in SHPDA's general distribution list, shall maintain with the agency a current e-mail address for purposes of this rule.

Author: Statewide Health Coordinating Council (SHCC).
Statutory Authority: § 22-21-260(4), Code of Alabama, 1975.
History: Filed February 1, 2013; Effective March 8, 2013. Amended (SHP Year Only): Filed December 2, 2014; Effective January 6, 2015. Repeal and New: Filed _____; Effective _____.

410-2-5-.08 SHCC Committee Responsibilities

(1) Discussion.

In order to assist the SHCC with the process of reviewing and revising the State Health Plan, the Chair of the SHCC may create committees tasked with the purpose of reviewing certain assigned sections of the Plan. The Chair of the SHCC shall assign various members to individual committees based on their knowledge and experience and shall have the authority to nominate chairs of the individual committees at the time of the committee assignments. Historically, the SHCC has kept six (6) standing committees, with additional committees and/or task forces created by the Chair as needed. The six (6) standing committees of the SHCC, and the current sections of the Plan assigned to each committee are as follows:

(a) General Items

The General Items Committee shall have responsibility over the section(s) of the Plan related to an introduction to health planning, as well as any healthcare or health-related priorities set forth by the Governor. The section(s) of the Plan the General Items Committee are responsible for include:

1.	410-2-1	Introduction to Health Planning
2.	410-2-1-.01	Statutory Authority
3.	410-2-1-.02	Overview of Chapters
4.	410-2-1-.03	Health Planning Structure in Alabama
5.	410-2-1-.04	Alabama Health Policy Analysis
6.	410-2-1-.05	Data Collection and Publication
7.	410-2-2	Health Priorities
8.	410-2-2-.01	Introduction
9.	410-2-2-.02	Maternal and Child Health
10.	410-2-2-.03	Care of the Elderly and Chronically Ill
11.	410-2-2-.04	Rural Health Care
12.	410-2-2-.05	Diseases - Prevention and Management
13.	410-2-2-.06	Health Care for the Medically Indigent
14.	410-2-2-.07	Substance Use Disorders
15.	410-2-2-.08	RESERVED

(b) Home Health

The Home Health Committee shall have responsibility over the section(s) of the Plan related to Home Health Care. The section of the Plan the Home Health Committee is responsible for includes:

1. 410-2-4-.07 Home Health

(c) Hospital

The Hospital Committee shall have responsibility over the section(s) of the Plan related to Hospitals, whether general acute care facilities or specialized facilities, and any or all related functions separately governed by Certificate of Need that are offered as a part of a general acute care hospital's overall institutional health services. The section(s) of the Plan the Hospital Committee are responsible for include:

1. 410-2-3-.03 Cardiac Services
2. 410-2-4 Facilities
3. 410-2-4-.01 Introduction
4. 410-2-4-.02 Acute Care (Hospitals)
5. 410-2-4-.08 Inpatient Physical Rehabilitation
6. 410-2-4-.09 Swing Beds
7. 410-2-4-.10 Psychiatric Care
8. 410-2-4-.11 Substance Abuse
9. 410-2-4-.13 Renovations
10. 410-2-4-.14 Replacements
11. 410-2-4-.16 Freestanding Emergency Departments

(d) Long Term Care

The Long Term Care Committee shall have responsibility over the section(s) of the Plan related to providers that serve patients over an extended period of time, especially in regard to elder care. The section(s) of the Plan the Long Term Care Committee are responsible for include:

1. 410-2-4-.03 Nursing Homes
2. 410-2-4-.04 Limited Care Facilities, Specialty Care Assisted Living Facilities

3.	410-2-4-.05	Assisted Living Facilities
4.	410-2-4-.06	Adult Day Care Programs

(e) Special Needs and Assessments

The Special Needs and Assessments Committee shall have responsibility over the section(s) of the Plan related to information required by applicants, health planners, and SHCC members to make the health planning process function, and shall have responsibility for reviewing current health planning mechanisms to provide for a more efficient and effective health planning process. The section(s) of the Plan the Special Needs and Assessments Committee are responsible for include:

1.	410-2-4-.12	Ambulatory Surgery (To be developed)
2.	410-2-5	Alabama Health Statistics and Revision Procedures
3.	410-2-5-.01	Introduction
4.	410-2-5-.02	Population
5.	410-2-5-.03	Vital Events
6.	410-2-5-.04	Plan Revision Procedures
7.	410-2-5-.05	Application for State Health Plan Adjustment
8.	410-2-5-.06	Open Meetings Act
9.	410-2-5-.07	Electronic Notice
10.	410-2-5-.08	SHCC Committee Responsibilities

(f) Specialty Services

The Specialty Services Committee shall have responsibility over the section(s) of the Plan that are not specific to the responsibilities of the other committees. These usually involve various services that are unique to health planning, and do not conveniently tie in with other sections of the Plan assigned to other committees. The section(s) of the Plan the Specialty Services Committee are responsible for include:

1.	410-2-3	Specialty Services
2.	410-2-3-.01	Introduction
3.	410-2-3-.02	Neonatal Services
4.	410-2-3-.04	Oncology-Radiation Therapy Services

5.	410-2-3-.05	End Stage Renal Disease Services
6.	410-2-3-.0	New Technology
7.	410-2-3-.09	Transplantation Services
8.	410-2-3-.10	Hospice Services
9.	410-2-3-.11	Air Ambulance
10.	410-2-4-.15	Inpatient Hospice Services

Author: Statewide Health Coordinating Council (SHCC)
Statutory Authority: § 22-21-260(4), Code of Alabama, 1975.
History: Filed_____; Effective _____.