

PUBLIC NOTICE

HEALTH

THE COMMISSIONER

**Notice of Rescheduling of Certificate of Need Call for Applications for Mobile Intensive Care Units
pursuant to N.J.A.C. 8:33-4.1(a)2**

Take notice that, in compliance with N.J.S.A. 26:2H-1 et seq. and the provisions of N.J.A.C. 8:33-4.1(a), Cathleen Bennett, Commissioner, New Jersey Department of Health, is inviting certificate of need applications on a full review basis to establish a new mobile intensive care service in accordance with the provisions of N.J.A.C. 8:41 and N.J.S.A. 26:2K-7 et seq. Acceptance of applications pursuant to this notice does not constitute a finding by the Department of Health of a need for the services proposed in the application(s).

Any applicant seeking a certificate of need to establish a new mobile intensive care service in response to this Call must demonstrate:

1. That there is an unmet need for an additional mobile intensive care provider in the area proposed to be served by the applicant; and
2. How and why the mobile intensive care provider currently serving the area proposed to be served by the applicant cannot meet that need.

The applicant must comply with the certificate of need requirements in N.J.S.A. 26:2H-8 and N.J.A.C. 8:33-4.10, and must demonstrate compliance with the requirements of N.J.A.C. 8:41.

Certificate of need applications shall be filed and reviewed in accordance with the certificate of need application and review process set forth at N.J.A.C. 8:33.

Geographic area to be served: Statewide.

Date application is due: November 1, 2016.

Date completeness review decision anticipated to be issued: February 1, 2017.

Date State Health Planning Board anticipated to review the applications and submit recommendations to the Commissioner: On or before May 4, 2017.

Prospective applicants may obtain a certificate of need application for full review on the Department's website at www.nj.gov/health/forms and shall submit the completed application using electronic media and 35 paper copies of the application to:

Office of Certificate of Need and Healthcare Facility Licensure

New Jersey Department of Health

PO Box 358

Trenton, NJ 08625-0358

(609) 292-6552 or 292-7228