

(2) The plan shall include:

(i) A description of the components that should comprise the health care system;

(ii) The goals and policies for Maryland's health care system;

(iii) Identification of unmet needs, excess services, minimum access criteria, and services to be regionalized;

(iv) An assessment of the financial resources required and available for the health care system; [and]

(v) The methodologies, standards, and criteria for certificate of need review[.]; AND

(VI) PRIORITY FOR CONVERSION OF ACUTE CAPACITY TO ALTERNATIVE USES WHERE APPROPRIATE.

19-114.1.

(A) THE COMMISSION SHALL DEVELOP AND ADOPT AN INSTITUTION SPECIFIC PLAN IN ACCORDANCE WITH THE PROCEDURES OF THE ADMINISTRATIVE PROCEDURE ACT. SPECIFIC PLAN TO GUIDE POSSIBLE CAPACITY REDUCTION.

(B) THE INSTITUTION SPECIFIC PLAN SHALL ADDRESS:

(1) ACCURATE BED COUNT DATA FOR LICENSED BEDS AND STAFFED AND OPERATED BEDS;

(2) COST DATA ASSOCIATED WITH ALL HOSPITAL BEDS AND ASSOCIATED SERVICES ON A HOSPITAL SPECIFIC BASIS;

(3) MIGRATION PATTERNS AND CURRENT AND FUTURE PROJECTED POPULATION DATA;

(4) ACCESSIBILITY AND AVAILABILITY OF BEDS;

(5) QUALITY OF CARE; AND

(6) CURRENT HEALTH CARE NEEDS, AS WELL AS GROWTH TRENDS FOR SUCH NEEDS, FOR THE AREA SERVED BY EACH HOSPITAL;

(7) HOSPITALS IN HIGH GROWTH AREAS; AND

(8) UTILIZATION.

(C) THE COMMISSION SHALL UTILIZE THE PLAN IN APPROVING CERTIFICATE OF NEED APPLICATIONS FOR CONVERSION, EXPANSION, CONSOLIDATION, OR INTRODUCTION OF HOSPITAL SERVICES IN CONJUNCTION WITH THE STATE HEALTH PLAN, WHERE AN INCONSISTENCY EXISTS BETWEEN THE INSTITUTION SPECIFIC PLAN AND THE STATE HEALTH