

PLAN, THE INSTITUTION SPECIFIC PLAN SHALL PREVAIL FOR A PERIOD OF 12 MONTHS FROM THE DATE OF ITS ADOPTION.

(C) IN THE DEVELOPMENT OF THE INSTITUTION SPECIFIC PLAN THE COMMISSION SHALL GIVE PRIORITY TO THE CONVERSION OF ACUTE CAPACITY TO ALTERNATIVE USES WHERE APPROPRIATE.

(D) (1) THE COMMISSION SHALL USE THE INSTITUTION SPECIFIC PLAN IN REVIEWING CERTIFICATE OF NEED APPLICATIONS FOR CONVERSION, EXPANSION, CONSOLIDATION, OR INTRODUCTION OF HOSPITAL SERVICES IN CONJUNCTION WITH THE STATE HEALTH PLAN.

(2) IF THERE IS A CONFLICT BETWEEN THE STATE HEALTH PLAN AND ANY RULE OR REGULATION ADOPTED BY THE COMMISSION IN ACCORDANCE WITH TITLE 10, SUBTITLE 1 OF THE STATE GOVERNMENT ARTICLE TO IMPLEMENT AN INSTITUTION SPECIFIC PLAN THAT IS DEVELOPED FOR IDENTIFYING ANY EXCESS CAPACITY IN BEDS AND SERVICES, THE PROVISIONS OF WHICHEVER PLAN THAT IS MOST RECENTLY ADOPTED SHALL CONTROL.

(3) IMMEDIATELY UPON ADOPTION OF THE INSTITUTION SPECIFIC PLAN THE HEALTH RESOURCES PLANNING COMMISSION SHALL BEGIN THE PROCESS OF INCORPORATING THE INSTITUTION SPECIFIC PLAN INTO THE STATE HEALTH PLAN AND SHALL COMPLETE THE INCORPORATION WITHIN 12 MONTHS.

19-115.

(h) (1) A certificate of need is required before the bed capacity of a health care facility is changed.

(2) [This subsection does not apply to any increase or decrease in bed capacity if, during a 2 year period, the increase or decrease would not exceed the lesser of 10 percent of the total bed capacity or 10 beds.] THIS SUBSECTION DOES NOT APPLY TO ANY INCREASE OR DECREASE IN BED CAPACITY IF:

(I) DURING A 2-YEAR PERIOD THE INCREASE OR DECREASE WOULD NOT EXCEED THE LESSER OF 10 PERCENT OF THE TOTAL BED CAPACITY OR 10 BEDS; OR

(II) 1. AT LEAST 30 45 DAYS BEFORE INCREASING OR DECREASING BED CAPACITY, WRITTEN NOTICE OF INTENT TO CHANGE BED CAPACITY IS FILED WITH THE COMMISSION; AND

2. WITHIN--30--DAYS--OF--RECEIVING--NOTICE, THE COMMISSION IN ITS SOLE DISCRETION FINDS THAT THE PROPOSED CHANGE:

A. IS PURSUANT TO THE CONSOLIDATION OR MERGER OF 2 OR MORE HEALTH CARE FACILITIES, OR CONVERSION OF A HEALTH CARE FACILITY OR PART OF A FACILITY TO A NONHEALTH RELATED USE;