

(i) Shall address the availability, accessibility, cost, and quality of health care; and

(ii) Are to be reviewed and revised periodically to reflect new developments in health planning, delivery, and technology.

(3) In adopting standards regarding cost, efficiency, cost-effectiveness, or financial feasibility, the Commission shall take into account the relevant methodologies of the Health Services Cost Review Commission.

[(f)] (E) Annually, the Secretary shall make recommendations to the Commission on the plan. The Secretary may review and comment on State specifications to be used in the development of the State health plan.

[(g)] (F) All State agencies and departments, directly or indirectly involved with or responsible for any aspect of regulating, funding, or planning for the health care industry or persons involved in it, shall carry out their responsibilities in a manner consistent with the State health plan and available fiscal resources.

[(h)] (G) In carrying out their responsibilities under this Part II of this subtitle for hospitals, the Commission and the Secretary shall recognize, but may not apply, develop, or duplicate standards or requirements related to quality which have been adopted and enforced by national or State licensing or accrediting authorities.

[(i)] (H) The Commission shall transfer to the Department of Health and Mental Hygiene health planning functions and necessary staff resources for licensed entities in the State health plan that are not required to obtain a certificate of need or an exemption from the certificate of need program.

19-122.

(d) (4) A State health plan developed or adopted after the incorporation of the institution-specific plan into the State health plan shall include the criteria in subsection (b) of this section in addition to the criteria in [§ 19-121] § 19-118 of this subtitle.

19-123.

(l) A certificate of need is not required to close any hospital or part of a hospital as defined in § 19-301 of this title if:

(2) (i) For a hospital located in a county with fewer than three hospitals, at least 45 days before the closing or partial closing of the hospital, a person proposing to close all or part of the hospital files notice of the proposed closing or partial closing with the Commission; and

(ii) The Commission finds that the closing:

1. Is in the public interest; and
2. Is not inconsistent with:
 - A. The State health plan; or