Table 17C: Adult ICF/MR Bed Need Determinations

(Scheduled for Certificate of Need Review Commencing in 2013)

It is determined that the counties listed in the table below need additional adult ICF/MR beds as specified.

Local Management Entity (LME)	HSA	Bed Need Determination	CON Application Due Date**	CON Beginning Review Date
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It is determined that there is no need for additional adult ICF/MR beds anywhere in the state and no reviews are scheduled.

Table 17D: Child ICF/MR Bed Need Determinations

(Scheduled for Certificate of Need Review Commencing in 2013)

It is determined that the counties listed in the table below need additional child ICF/MR beds as specified.

Date**

It is determined that there is no need for additional adult ICF/MR beds anywhere in the state and no reviews are scheduled.

^{*}Need determinations as shown in this document may be increased or decreased during the year pursuant to Policy GEN-2 (See Chapter 4).

^{**}Application Due Dates are absolute deadlines. The filing deadline is 5:30 p.m. on the Application Due Date. The filing deadline is absolute (see Chapter 3).

^{*}Need determinations as shown in this document may be increased or decreased during the year pursuant to Policy GEN-2 (See Chapter 4).

^{**}Application Due Dates are absolute deadlines. The filing deadline is 5:30 p.m. on the Application Due Date. The filing deadline is absolute (see Chapter 3).