Table 17C: Adult ICF/IID Bed Need Determinations
DRAFT 5/9/13

(Proposed for Certificate of Need Review Commencing in 2014)

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

<table>
<thead>
<tr>
<th>Local Management Entity-Managed Care Organization (LME-MCO)</th>
<th>HSA</th>
<th>Bed Need Determination*</th>
<th>CON Application Due Date**</th>
<th>CON Beginning Review Date</th>
</tr>
</thead>
</table>

It is determined that there is no need for additional adult ICF/IID 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).