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JUDITH M. PERSICHILLI, RN, BSN, MA Commissioner

December 3, 2021

VIA ELECTRONIC & FIRST-CLASS MAIL

James McCreath, Ph.D., LCSW Trinitas Regional Medical Center 655 East Jersey Street Elizabeth, New Jersey 07206

> Re: CN-ER# 2021-05244-20;01 Trinitas Regional Medical Center

> > License #12007

Total Project Cost: \$3000.00

Expiration Date: December 3, 2026

Dear Dr. McCreath:

Please be advised that the Department of Health (Department) is approving the Expedited Review Certificate of Need (ERCN) application filed by Trinitas Regional Medical Center for the addition of 12 new adult acute psychiatric beds to its existing 10-bed closed adult acute psychiatric dual-diagnosis beds. The unit will now have a total of 22-bed closed adult acute psychiatric dual-diagnosis beds. In this context, "dual-diagnosis" refers to a diagnosis of intellectual and developmental disabilities (IDD) along with a major psychiatric disorder. This application is being approved at the total project cost as noted above.

The Department has taken into consideration the applicable regulations for the services subject to expedited review (i.e., N.J.A.C. 8:33-5.3 and 8:33H-1.16), and finds that Trinitas Regional Medical Center has provided an appropriate project description. The project description includes information as to the total project cost, operating costs and revenues, services affected, equipment involved, source of funds, utilization statistics, and justification for the proposed project (N.J.A.C. 8:33-5.3(a)(1)); assurance that all residents of the area, particularly the medically underserved, will have access to services (N.J.A.C. 8:33-5.3(a)(2)); and documentation that it will meet appropriate licensing and construction standards (N.J.A.C. 8:33-5.3(a)(3)(i)).

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Please be advised that this approval is limited to the application as presented and reviewed. The application, related correspondences and any completeness questions and responses are incorporated and made a part of this approval. An additional review by the Department may be necessary if there is any change in scope, as defined at N.J.A.C. 8:33-3.9. However, a change in cost of an approved certificate of need is exempt from certificate of need review subject to the following:

- 1. The applicant shall file a signed certification as to the final total project cost expended for the project at the time of the application for licensure for the beds/services with the Certificate of Need and Healthcare Facility Licensure Program.
- 2. Where the actual total project cost exceeds the certificate of need approved total project cost and is greater than \$1,000,000, the applicant shall remit the additional certificate of need application fee due to the Certificate of Need and Healthcare Facility Licensure Program. The required additional fee shall be 0.25 percent of the total project cost in excess of the certificate of need approved total project cost.
- 3. The Department will not issue a license for beds/services until the additional fee is remitted in full.

The Department, in approving this application, has relied solely on the facts and information presented. The Department has not undertaken an independent investigation of such information. If material facts have not been disclosed or have been misrepresented as part of this application, the Department may take appropriate administrative regulatory action to rescind the approval or refer the matter to the Office of the Attorney General.

Any approval granted by this Department relates to certificate of need and/or licensing requirements only and does not imply acceptance by a reimbursing entity. This letter is not intended as an approval of any arrangement affecting reimbursement or any remuneration involving claims for health care services.

This approval is not intended to preempt in any way the authority of any municipality to regulate land use within its borders and shall not be used by the applicant to represent that the Department has made any findings or determination relative to the use of any specific property.

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Please be advised that services may not commence until a license has been issued by the Certificate of Need and Healthcare Facility Licensure Program to operate this facility. A survey by Department staff will be required prior to commencing services.

The Department looks forward to working with the applicant to provide high quality of care to the proposed recipients. If you have any questions concerning this Certificate of Need approval, please do not hesitate to contact Michael Kennedy, Executive Director, Division of Certificate of Need and Licensing at Michael.Kennedy@doh.nj.gov.

Sincerely,

Robin C. Ford

Robin C. Ford, MS Deputy Commissioner Health Systems

CC: F. Jacobs, DOH

M. Kennedy, DOH

L. Alexopoulos, DOH

T. D'Errico, DOH

K. Hanson, DOH

A. Sousa, DOH

Intake Unit, DOH

R. Santiago, DOH

D. Baxter-Still, DOH