

**Certificate of Need
Activity Report - Decisions 6/1/2016 to 6/30/2016**

Final Decision Date	CON ID	Facility ID	Facility Name	City	County	Project Description	Decision	Project Cost
06/01/2016	15-0184	70-0020	HOLLAND COMMUNITY HOSPITAL	HOLLAND	OTTAWA	ADD 1 OR [TOTAL 7 SEE 15-0183]	CONDITIONAL-AP	\$2,292,521
06/06/2016	15-0412	47-4020	MEDILODGE OF HOWELL	HOWELL	LIVINGSTON	ADD 44 NH BEDS FR WHITE PINE	APPROVED	\$0
06/06/2016	16-0011	47-4010	WHITE PINE REHABILITATION &	HOWELL	LIVINGSTON	ADD 40 VENT BEDS-SPCIAL POOL	APPROVED	\$0
06/06/2016	15-0371	65-0010	WEST BRANCH REGIONAL MEDICAL	WEST BRANCH	OGEMAW	REPLACE CT SCANNER	APPROVED	\$499,000
06/06/2016	16-0010	25-4240	MEDILODGE OF GRAND BLANC	GRAND BLANC	GENESEE	ADD 8 NH VENTILATOR BEDS [PA-	APPROVED	\$0
06/06/2016	15-0413	47-4010	WHITE PINE REHABILITATION &	HOWELL	LIVINGSTON	RELOCATE 44 NH BEDS TO	APPROVED	\$0
06/08/2016	16-0087	50-0110	HENRY FORD MACOMB HOSPITAL	CLINTON	MACOMB	REPLACE 1 CARD CATH LAB	CONDITIONAL-AP	\$969,645
06/08/2016	15-0425	25-6001	MICHIGAN EYE SURGERY CENTER	FLINT	GENESEE	ADD 1 OR [TOTAL 2]	CONDITIONAL-AP	\$50,000
06/08/2016	16-0085	50-4060	THE VILLAGE REHABILITATION AND	ARMADA	MACOMB	ACQ 67 [18 ALZ] BED NH BY	APPROVED	\$3,990,000
06/09/2016	16-0071	56-0020	MIDMICHIGAN MEDICAL CENTER-	MIDLAND	MIDLAND	REPLACE 1 CARD CATH LAB	CONDITIONAL-AP	\$832,311
06/09/2016	16-0106	63-C756	NATIONAL DIAGNOSTIC SERV/NOVI	NOVI	OAKLAND	REPLACE CT NETWORK NO. 192	CONDITIONAL-AP	\$190,000
06/13/2016	16-0199	81-4110	CARE AND REHABILITATION CENTER	ANN ARBOR	WASHTENAW	REORGANIZE GLACIER HILLS, INC.	WAIVED/NOT REVIEWABLE	\$0
06/16/2016	15-0433	63-C888	METROPOLITAN DIAGNOSTIC	SOUTHFIELD	OAKLAND	RELOCATE MRI HOST ON #216 &	APPROVED	\$316,656
06/16/2016	15-0423	63-0160	BEAUMONT HOSPITAL, TROY	TROY	OAKLAND	ADD 3 ORS [TOTAL 19]	APPROVED	\$560,000
06/16/2016	16-0005	56-C007	DAVIS AND DAVIS ORTHODONTICS	MIDLAND	MIDLAND	INITIATE DENTAL CT SCANNER	APPROVED	\$159,700
06/16/2016	16-0048	73-8653	MED-TRANS CORPORATION DBA	SAGINAW	SAGINAW	REPLACE AIR AMBULANCE	APPROVED	\$0
06/21/2016	16-0128	50-C021	PREMIER IMAGING	CLINTON	MACOMB	MRI NETWORK #79 [NOTICE]	APPROVED	\$0
06/23/2016	16-0012	28-0010	MUNSON MEDICAL CENTER	TRAVERSE CITY	GRAND	ADD 4 ADULT PSYCH BEDS, REPL	APPROVED	\$10,161,084
06/23/2016	15-0419	25-4190	GENESEE CARE CENTER	GRAND BLANC	GENESEE	ACQ AND REPLACE 128-BED NH BY	APPROVED	\$16,000,000
06/23/2016	16-0013	83-4996	RIVERVIEW HEALTH & REHAB CENTER	DETROIT	WAYNE	ADD 20 NH BEHAVIORAL BEDS [PA-	APPROVED	\$3,306,126

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06/23/2016	16-0017	73-4150	SAGINAW GERIATRICS HOME	SAGINAW	SAGINAW	REPLACE 55 BED NH [OUTSIDE ZONE	CONDITIONAL-AP	\$825,000
06/23/2016	15-0414	63-0080	ST JOHN MACOMB-OAKLAND	MADISON	OAKLAND	RENOVATE PATIENT SPACE ON 2ND	APPROVED	\$5,000,000
06/28/2016	16-0180	46-0020	PROMEDICA BIXBY HOSPITAL	ADRIAN	LENAWEE	PET NETWORK NO. 118 [NOTICE]	APPROVED	\$0
06/29/2016	16-0178	63-C087	PRECISE MRI OF MICHIGAN	LATHRUP	OAKLAND	MRI NETWORK NO. 28 [NOTICE]	APPROVED	\$0
06/30/2016	15-0328	39-C006	HOSPITAL NETWORK SUPPORT	KALAMAZOO	KALAMAZOO	REPLACE MRI NETWORK NO. 109	APPROVED	\$2,670,603
06/30/2016	16-0089	63-C870	EAGAN ORTHODONTICS, P. C.	SOUTHFIELD	OAKLAND	REPLACE DENTAL CT SCANNER	APPROVED	\$154,759
06/30/2016	16-0126	52-0050	UP HEALTH SYSTEM - MARQUETTE	MARQUETTE	MARQUETTE	REPLACE CARD CATH	CONDITIONAL-AP	\$2,945,250
06/30/2016	15-0228	74-0020	MCLAREN PORT HURON	PORT HURON	ST CLAIR	NEW TOWER REPL 163 BEDS, 23	APPROVED	\$156,227,322
06/30/2016	16-0074	41-3090	SPECTRUM HEALTH REHAB &	GRAND RAPIDS	KENT	REPLACE 10 NH BEDS INTO NEW	CONDITIONAL-AP	\$0
06/30/2016	15-0301	63-0176	HENRY FORD WEST BLOOMFIELD	WEST	OAKLAND	INITIATE ELECTIVE PCI	CONDITIONAL-AP	\$0
06/30/2016	16-0129	83-0500	DETROIT RECEIVING HOSPITAL &	DETROIT	WAYNE	REPLACE 1 OR	CONDITIONAL-AP	\$100,000
6/1/2016 - 6/30/2016 Decisions		31		6/1/2016 - 6/30/2016 Costs			\$207,249,977	
YTD Decisions		185		YTD Costs			\$705,641,188	