Mr. Chairman and members of the Committee, thank you for the opportunity to offer brief remarks concerning the Certificate of Need program.

My name is Doug Bryant, I worked for over twenty-five years with DHEC, the last eight serving as the Commissioner so I have been involved in more CON debates than I care to remember.

I am here today representing Carolina Regional Cancer Centers (CRCC) which is wholly owned by 21st Century Oncology. CRCC is located in Myrtle Beach and their staff has provided radiation therapy services to patients for thirty-one years in the Grand Strand and Pee Dee areas of South Carolina. The staff annually provides over 21,000 radiation therapy treatments. The parent company, 21st Century Oncology, also operates numerous radiation treatment facilities nationwide.

CRCC fully supports the Certificate of Need Program and believes the program can and does meet its' three main objectives: IMPROVE ACCESS, ASSURE QUALITY and COST CONTAINMENT.

There are areas where the program should be changed in order to streamline the process allowing services to be made available without delaying projects for years with endless litigation. I would suggest the issue is not the intent or purpose of the law.

The issue is the manner in which the program has been manipulated to delay implementation of projects. I have worked for many years with most of the stake holders involved in the CON process. We were very close to a reasonable compromise last legislative session but obviously were unsuccessful.

I welcome the opportunity to provide input and work with everyone involved to produce a successful outcome this year. I respectfully submit the following recommended changes to the program:

- Require a staff decision within 120 days of filing an application;
- Remove the DHEC Board from the appeals process allowing the staff decision be the final agency decision;
- Place additional restrictions on the manner in which appeals are handled by limiting the number of witnesses and depositions allowed at the Administrative Law Court level;
- Limit the time for an Administrative Law Court decision to 12 months;
- Increase the equipment threshold from the current \$600,000 level to \$1.2 Million; and
- Require legislative overview of the State Health Plan.

The State Health Plan, the document utilized by the DHEC staff to determine CON decisions, is approved by the State Health Planning Committee and adopted by the DHEC Board. All of the members of the State Health Planning Committee, except the State Consumer Advocate, are appointed by the Governor. The DHEC Board members are appointed by the Governor with the advice and consent of the Senate. The State Health Plan is in fact a document like a regulation used to make key health care decisions. However the State Health Plan never receives review or oversight by the General Assembly. It is possible for the two bodies, the DHEC Board and the State Health Planning Committee, to totally eliminate the review of programs and activities without involving the General Assembly.

Thank you for the opportunity to offer these recommendations.