CABINET FOR HEALTH AND FAMILY SERVICES
OFFICE OF INSPECTOR GENERAL

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Steven Stack, MD
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October 14, 2026

Valerie Michael, Attorney
McBrayer PLLC
201 East Main Street, Suite 900
Lexington, KY 40507

RE: CON #097-12-6225(1)
Buckhorn Redwood PRTF
Buckhorn, Perry County
Establish a nine (9) bed Level I psychiatric residential treatment facility (PRTF) to serve children and adolescents ages 6 to 21
Capital Expenditure: $80,000.00

Dear Valerie Michael:

Enclosed is a copy of the final order on the above-referenced Certificate of Need. The decision being final, the Office of Administrative Hearings, Health Services Division in the Office of the Attorney General ("Office of Administrative Hearings"), hereby approves the issuance of a Certificate of Need for Buckhorn Redwood PRTF, CON #097-12-6225(1). In accordance with KRS 216B.085(4), the decision of the Office of Administrative Hearings, shall become final for purposes of judicial appeal unless a reconsideration hearing is requested. This letter serves as notice of the Office of Administrative Hearings' decision. The Certificate of Need will be forwarded forty (40) days after this notice, unless a request for reconsideration is filed or a judicial appeal is taken and issuance is enjoined by the court.

In accordance with KRS 216B.090, any party of the proceedings may, for good cause shown, request in writing a hearing for purposes of reconsideration of a decision by the Office of Administrative Hearings. The request for this public hearing must present significant, relevant information not previously available for consideration by the Office of Administrative Hearings or demonstrate significant changes in the factors or circumstances relied upon by the Office of Administrative Hearings in reaching its decision, or demonstrate that the Office of Administrative Hearings has materially failed to follow its adopted procedures in reaching its decision, or state that a public hearing pursuant to KRS 216B.085 was not conducted prior to a decision to deny a Certificate of Need.

This reconsideration request shall be filed in writing with the Office of Inspector General, Division of Certificate of Need within fifteen (15) days of the date of notice of this decision. If the request for reconsideration is granted by the Office of Administrative Hearings, the public hearing will be held within thirty (30) days after the decision to grant the request for reconsideration.

In accordance with KRS 216B.115, any party to the proceedings may appeal a decision of the Office of Administrative Services by filing a petition for review in the Franklin Circuit Court within thirty (30) days after notice of the final decision unless a request for reconsideration has been filed, in which case the petition shall be filed within fifteen (15) days of the Office of Administrative Hearings decision not to reconsider or notice of its decision on reconsideration.

A Certificate of Need is not a license to operate a health facility and/or health service. Such a license, if required, must be applied for separately. All facilities and services are required to conform to current licensure laws and regulation, where applicable, relative to the construction of facilities and/or the provision of service specified in the certificate before a license to operate can be issued. Information regarding construction, licensure and/or certification requirements and a licensure application may be obtained from the Office of Inspector General, 275 East Main Street, Frankfort, Kentucky 40621, (502) 564-7963. Contact our office at (502) 564-9592, if you have any questions concerning this matter.

Sincerely,

Tricia Steward
Inspector General

COMMONWEALTH OF KENTUCKY
CABINET FOR HEALTH AND FAMILY SERVICES
OFFICE OF INSPECTOR GENERAL
Division of Certificate of Need
Administrative Hearing No. 26-013

IN RE: BUCKHORN REDWOOD PRTF
C/N #097-12-6225(1)
Establish a nine (9) bed Level I psychiatric residential treatment facility (PRTF) to serve children and adolescents ages 6 to 21

FINDINGS OF FACT, CONCLUSIONS OF LAW AND FINAL ORDER

This matter came before this tribunal on the application of Presbyterian Child Welfare Agency of Buckhorn, KY, Inc. d/b/a Buckhorn Children & Family Services ("Buckhorn" or "Applicant") for the issuance of a Certificate of Need ("CON") to establish a nine (9) bed Level 1 Psychiatric Residential Treatment Facility (PRTF) in Perry County, Kentucky ("Application").

Based upon the evidence in the record and the applicable law, this tribunal enters the foregoing Findings of Fact, Conclusions of Law and Final Order.

FINDINGS OF FACT

I. INTRODUCTORY MATTERS

1. Buckhorn Children & Family Services is the applicant in this matter. Buckhorn Children & Family Services is the assumed name of Presbyterian Child Welfare Agency of Buckhorn, KY, Inc., and is located in Buckhorn, Perry County, Kentucky. *Additional Information, p. 1.*

2. The Application proposes to establish a nine (9) bed Level 1 Psychiatric Residential Treatment Facility in Buckhorn, Kentucky, at an estimated total capital cost of $80,000. If the application is granted, an 8,000 square foot residential structure on Buckhorn's campus will be renovated to create the new facility. *Additional Information, p. 3, 14.*

3. Buckhorn initially submitted the Application on May 27, 2026, and submitted additional information on June 26, 2026. The Office of Health Policy of the Cabinet for Health and Family Services declared the Application complete, and gave public notice of the Application in the July 16, 2026 CON newsletter.

4. Buckhorn requested a public hearing on the Application by letter dated July 31, 2026. When no Affected Party entered to challenge the Application, Buckhorn withdrew its hearing request in a letter dated August 10, 2026.

5. As the only request for hearing on this Application has been withdrawn, this matter stands ready for decision on the record. *900 KAR 6:090§3(5).*

II. CONSISTENCY WITH PLANS

6. The January 2026 Edition of the 2025 Update to the State Health Plan ("State Health Plan") is the version of the State Health Plan in effect at the time of the public notice of the Application, and thus will be used in reviewing this Application. *900 KAR 6:070 § 2(1)(b).*

7. The State Health Plan defines "psychiatric residential treatment facility" as "either a licensed Level I community-based, and home-like facility with a maximum of nine (9) beds that provides inpatient psychiatric residential treatment to residents age six (6) to twenty-one (21) years who have an emotional disability or severe emotional disability as defined by KRS 200.503, with an age range of no greater than five (5) years at the time of admission in a living unit; or Level II home-like facility that provides twenty-four (24) hour inpatient psychiatric residential treatment and rehabilitation to persons who are ages four (4) to twenty-one (21) years, with an age range of no greater than five (5) years at the time of admission to the facility; have a severe emotional disability as defined by KRS 200.503 in addition to severe and persistent aggressive behaviors, intellectual disability, sexually acting out behaviors, or developmental disability; and do not meet

the medical necessity criteria for an acute care hospital or a psychiatric hospital and whose treatment needs cannot be met in an ambulatory care setting, Level I psychiatric residential treatment facility, or other less restrictive environment." The Plan further defines "specialty program" as "a program offered by a Level II psychiatric residential treatment facility to treat a person who has a severe emotional disability as defined by KRS 200.503 in addition to severe and persistent aggressive behaviors, intellectual disability, sexually acting out behaviors, or developmental disability." *State Health Plan, p. 27.*

8. The State Health Plan states that "[a]n application for to establish a Level I PRTF or expand an existing Level I PRTF shall be consistent with this Plan if the following criteria are met:

> *1. Approval of the application does not cause the total number of Level I PRTF beds to exceed 315 beds statewide;*
>
> *2. The applicant shall document the need for additional Level I PRTF services and its ability to provide those services by demonstrating the following:*
>
> > *a. An analysis of the number and characteristics of persons ages six (6) to twenty-one (21) in the proposed service area who require this level of care;*
> >
> > *b. The defined geographic service area that the proposed facility will serve;*
> >
> > *c. The anticipated average length of stay, average daily census, and occupancy rate;*
> >
> > *d. The projected payor mix of the patients;*
> >
> > *e. The anticipated referral sources including the projected number of Department for Community Based Services (DCBS) children in state custody who would be admitted; and*
> >
> > *f. Clear admission and discharge criteria with specific descriptions of any special defining characteristics of the population that is proposed to be served, including age, sex, developmental status, legal status, and diagnostic characteristics;*
>
> *3. The applicant shall include an inventory of all types of treatment oriented residential programs including other Level I PRTFs that serve children ages six (6) to twenty-one (21) in the proposed service area and how the proposed facility or additional beds fit into*

the array of current services;

4. The applicant shall clearly describe the treatment planning and the discharge planning process, including how the family or legal guardian would be included in the treatment and discharge process. For children in state custody, describe how DCBS staff will be included in the treatment and discharge planning process. For children who attain age twenty-one (21) that need to be transitioned to the adult system, describe the transition and discharge planning process to the adult system;

5. The applicant shall provide clear descriptions of which evidence based clinical practices will be utilized and how they will meet the clinical needs of the proposed population to be served;

6. Applicants shall describe the types and qualification of personnel required to provide services, including certification specific to the programs being proposed, and a detailed description of the availability of qualified staff;

7. The applicant shall provide a description of the proposed facility, physical layout, description of individual unit sizes, and proximity to other programs and facilities that might be housed on the same campus or in close proximity, either operated by the same applicant or other organizations, or demonstrating clearly defined relationships;

8. The applicant shall provide a description of how the proposed Level I PRTF's individual living units and program spaces will provide a safe environment and be community based and home-like in physical appearance and structure, but also in terms of family visitation policies and contact with significant adults in the residents' lives;

9. An application to establish a Level I PRTF shall include formal written agreements of cooperation that identify the nature and extent of the proposed working relationship between the facility and the following agencies, organizations, or entities located in the primary service area of the proposed facility:

a. Regional interagency council for services to children with an emotional disability created under KRS 200.509;

b. Community board for mental health or individuals with an intellectual disability established under KRS 210.380;

c. The Department for Community Based Services;

d. Local school districts in the county where the PRTF is located;

e. At least one (1) psychiatric hospital; and

f. Linkages with other child and adolescent serving agencies in the proposed service area; and

10. Priority shall be given to applicants that demonstrate the capacity to provide or have access to a full array of other community-based services, and applicants that demonstrate the adoption of system of care principles and the wraparound process that includes family driven and youth guided programming and treatment.

State Health Plan, p. 21-23.

9. The most recent Inventory of Kentucky Health Facilities indicates that there is a total of 214 Level I PRTF beds currently in operation. Addition of the nine (9) beds proposed in this Application will not cause the total number of Level I PRTF beds to exceed 315 beds statewide. *Additional Information, p. 5.*

10. There are currently no Level I PRTF beds operating within Area Development District (ADD) 12, which encompasses Perry, Knott, Letcher, Leslie, Owsley, Lee, Wolfe, and Breathitt Counties. As an existing provider of private youth residential treatment services, Buckhorn is aware of a need for some of its own current residents for the higher level of care that a Level I PRTF can provide, and also receives inquiries for PRTF placement from area psychiatric facilities. *Additional Information, p. 5.*

11. The proposed facility will primarily serve ADD 12, though Buckhorn also anticipates receiving some referrals from other areas of the Commonwealth due to the overall lack of Level I PRTF beds statewide. *Additional Information, p. 5.*

12. Buckhorn anticipates that, if approved, the nine (9) beds proposed in this Application will be filled within six (6) months of operation, based upon historical utilization trends, average length of stay, and the overall need for this type of service. *Additional Information, p. 5.*

13. The proposed facility will primarily serve Medicaid-eligible children and youth. A limited number of residents with private insurance or other approved payor sources may be

admitted, but Buckhorn anticipates a payor mix of 100% Medicaid. *Additional Information, p. 5, 6.*

14. The primary referral sources for the proposed facility will include the Department for Community-Based Services (DCBS), community mental health centers, psychiatric hospitals, crisis stabilization programs, courts, schools, and other child-serving agencies. Buckhorn anticipates that the majority of the beds will be filled with children in DCBS custody at any given time. *Additional Information, p. 6.*

15. Buckhorn has developed a comprehensive set of admission and discharge criteria. These criteria are based upon characteristics such as age, sex, developmental status, legal status, diagnostic characteristics, and functional impairment. Discharge planning will begin upon admission, and will be an ongoing process driven by each resident's individual progress and treatment goals. *Additional Information, p. 6, 7.*

16. There are currently no existing Level I PRTF facilities within the proposed service area. Other residential youth treatment facilities in the area include Private Child-Caring Residential Treatment Agencies, Mountain Comprehensive Care Center Therapeutic Foster Care, and Hope Hill/Family Connection, Inc. Buckhorn has established relationships with these facilities, and anticipates that they will serve as a referral source. *Additional Information, p. 7.*

17. Family members and legal guardians will be actively engaged in treatment planning, service delivery, and discharge planning. For children in DCBS custody, DCBS staff will participate in all aspects of treatment and transition planning. *Additional Information, p. 7.*

18. The proposed facility will use evidence-based clinical interventions, tailored to the needs of children and adolescents with serious emotional disturbance. The facility will be staffed by an interdisciplinary team of qualified professionals including licensed clinicians, nursing staff,

behavioral health specialists, and psychiatric providers. These providers will render a number of clinical intervention techniques, including the Sanctuary Model, Dialectical Behavior Therapy, Attachment-Based Family Therapy, Trauma-Focused Cognitive Behavioral Therapy, and Motivational Interviewing. *Additional Information, p. 7, 8.*

19. Buckhorn already employs many of the personnel necessary to support the proposed facility in its other programs. Buckhorn plans to hire additional personnel as necessary to fully meet the needed staffing ratios required for Level I licensure and Medicaid compliance. Buckhorn's existing orientation and training system will allow it to efficiently integrate the new staff members. *Additional Information, p. 8, 9.*

20. The proposed facility will be an 8,000 square foot cottage, formerly used when Buckhorn held Certificates of Need for Level I PRTF facilities. The facility will feature bedroom, office, and other areas in a home-like environment. Policies will support family visitation, communication with significant adults, and opportunities for youth to maintain meaningful connections while in treatment. *Additional Information, p. 9.*

21. Buckhorn intends to enter into a formal agreements of cooperation with Kentucky River Community Care, DCBS, Perry County Schools, and Appalachian Regional Healthcare upon approval of the Application. It already maintains relationships with many child and adolescent care providers through operations of its existing facilities. *Additional Information, p. 9, 10.*

22. The proposed facility will offer or ensure access to a full array of community-based services, in alignment with system-of-care principles and the wraparound process. Buckhorn offers a broad continuum of care, including screening, assessment, crisis intervention, individual,

group, family, and collateral outpatient therapy, service planning, and targeted case management. *Additional Information, p. 10.*

III. NEED AND ACCESSIBILITY

23. The facility proposed in this Application will serve the residents of ADD 12, which encompasses Perry, Knott, Letcher, Lee, Owsley, Leslie, Wolfe, and Breathitt Counties. There are currently no Level I PRTF beds operating within this area. Buckhorn receives inquiries from community and potential referral sources, indicating a need for services in the area. *Additional Information, p. 10.*

24. Buckhorn has a history of providing residential treatment services to children and youth in the area. The Buckhorn campus previously contained two PRTF cottages which provided a higher level of care with individualized services for female youth aged 12 to 18. Concurrently, Buckhorn operated a Residential Treatment Program offering 24 hour care for youth with severe emotional disturbances. This history demonstrates Buckhorn's ability to provide services consistent with the requirements of a Level I PRTF. *Additional Information, p. 10.*

25. Buckhorn currently operates as a Private Child Care Residential Treatment Facility with a Qualified Residential Treatment Program designation. Operation of a QRTP requires adherence to trauma-informed practices, youth-centered and family-engaging programming, structured treatment environments, and close collaboration with child-serving systems, including DCBS and the courts. This experience further demonstrates Buckhorn's ability to properly render residential treatment. *Additional Information, p. 10, 11.*

26. Based upon projected needs, Buckhorn believes that the proposed facility will be operating at 100% capacity within 90 to 180 days of opening. Each resident admitted to the facility

will be individually evaluated to ensure that their placement is clinically appropriate. *Additional Information, p. 11.*

27. Buckhorn estimates that the proposed facility will serve twenty-five (25) patients in its first year of operation. This number will grow to thirty (30) for its second year of operation. *Additional Information, p. 11, 12.*

28. Buckhorn has pledged to serve any youth in need of Level I PRTF services, regardless of county of origin or referral source. While it expects many of its clients will come from the surrounding area, Buckhorn's prior experience as a PRTF suggests that it will also receive referrals from across the Commonwealth. Given the lack of Level I PRTF beds in the region and overall shortage in the state, Buckhorn anticipates serving youth from a broad range of Kentucky counties. *Additional Information, p. 13.*

IV. INTERRELATIONSHIPS AND LINKAGES.

29. Due to its years of providing residential youth treatment services, Buckhorn has established a network of relationships and linkages with providers across the Commonwealth. Buckhorn has obtained several letters from Perry County community leaders in support of this Application. *Additional Information, p. 13.*

30. Buckhorn has built and maintained a network of healthcare and community partnerships that support comprehensive care, proper utilization of services, and efficient functioning of the healthcare system. Referrals to the proposed PRTF are anticipated through the Children's Review Program, which serves as a centralized clinical referral and coordination mechanism, ensuring that admissions are clinically appropriate and aligned with Medicaid and state placement standards. *Additional Information, p. 13.*

V. COSTS, ECONOMIC FEASIBILITY AND RESOURCE AVAILABILITY.

31. Buckhorn's proposal will require an estimated capital expenditure of $80,000. This expenditure includes the cost of renovations, as well as the purchase of new and replacement equipment for the facility. *Additional Information, p. 13, 14.*

32. Based upon its projected utilization, Buckhorn expects that the proposed project will reach the break-even point within its fifth month of operation. *Additional Information, p. 18.*

33. The Application projects gross revenues of $1,221,500 in the first year of operation and $1,478,000 in the second year of operation. The Application projects a net loss of $72,000 in its first year of operation and revenue of $72,000 in its second year of operation. These projections are based upon Buckhorn providing 2,443 patient-days of care in its first year of operation, and 2,956 in its second. *Additional Information, p. 21.*

VI. QUALITY OF SERVICES.

34. The officers who have been proposed to oversee the PRTF have many years of experience in operating healthcare facilities. Many of the officers hold multiple licenses and accreditations relevant to the proposed service. *Additional Information, p. 24.*

35. Buckhorn currently holds a number of licenses and accreditations related to the services it is already offering, including a Child Care Facility license, Child Placing Agency Licenses, Behavioral Health Services Organization (BHSO) license, Alcohol and Other Drug Entity Licenses, and a Qualified Residential Treatment Program Designation. If the Application is approved, Buckhorn will obtain a Level I PRTF license in accordance with 902 KAR 20:320. *Additional Information, p. 25.*

CONCLUSIONS OF LAW

1. This matter is before this tribunal pursuant to KRS Chapter 216B and 900 KAR 6:090 § 3(1)(a).

2. CON applications are governed by the considerations set forth in KRS 216B.040(2), 900 KAR 6:070 § 2, and, as mandated by 900 KAR 6:070 § 2(1)(b), the version of the State Health Plan in effect at the time of the public notice, or the January 2026 Edition of the 2025 Update to the State Health Plan, incorporated by reference in 900 KAR 5:020.

3. In order to be approved pursuant to formal review, a CON application must meet the following criteria: consistency with plans; need and accessibility; interrelationships and linkages; costs, economic feasibility and resource availability; and quality of services. *See* KRS 216B.040(2)(a)2.a.-e. *and* 900 KAR 6:070 § 2(1)-(6).

I. CONSISTENCY WITH PLANS

4. KRS 216B.040(2)(a)2.a. states that "[e]ach proposal approved by the cabinet shall be consistent with the state health plan, and shall be subject to biennial budget authorizations and limitations, and with consideration given to the proposal's impact on health care costs in the Commonwealth."

5. 900 KAR 6:070 § 2(1)(a)-(b) states that, "[t]o be approved, a proposal shall be consistent with the State Health Plan established in 900 KAR 5:020," and that, "[i]n determining whether an application is consistent with the State Health Plan, the cabinet shall apply the latest criteria, inventories, and need analysis figures maintained by the cabinet and the version of the State Health Plan in effect at the time of the public notice."

6. Based on the evidence in the record as set forth in Findings of Fact 6 through 22, *supra*, Buckhorn has met its burden of proof to demonstrate that its Application is consistent with the State Health Plan.

7. Therefore, this tribunal concludes that the Application is consistent with Criterion I, Consistency With Plans.

II. NEED AND ACCESSIBILITY.

8. KRS 216B.040(2)(a)2.b. states that a "proposal shall meet an identified need in a defined geographic area and be accessible to all residents of the area." The statute further defines "defined geographic area" as "the area the proposal seeks to serve, including its demographics, and shall not be limited to geographical boundaries."

9. 900 KAR 6:070 § 2(2) states that "[t]he cabinet shall determine: (a) if the applicant has identified a need for the proposal in the geographic service area defined in the application; and (b) [i]f the applicant has demonstrated that it is able to meet the need identified in the geographic service area defined in the application."

10. 900 KAR 6:070 § 2(3) states that "[t]he cabinet shall determine if the health facility or health service proposed in the application will be accessible in terms of timeliness, amount, duration and personnel sufficient to provide the services proposed."

11. Based on the evidence in the record as set forth in Findings of Fact 23 through 28, *supra*, Buckhorn has met its burden of proof to demonstrate that its proposal would be accessible to all residents of the defined geographic area and has met its burden to demonstrate that its proposal meets an identified need in a defined geographic area.

12. For these reasons, this tribunal concludes that the Application is consistent with Criterion II, Need and Accessibility.

III. INTERRELATIONSHIPS AND LINKAGES.

13. KRS 216B.040(2)(a)2.c. states that a "proposal shall serve to accomplish appropriate and effective linkages with other services, facilities, and elements of the health care system in the region and state, accompanied by assurance of effort to achieve comprehensive care, proper utilization of services, and efficient functioning of the health care system."

14. 900 KAR 6:070 § 2(4) requires the Cabinet to determine whether a proposal meets the requirements set forth in KRS 216B.040(2)(a)2.c.

15. Based on the evidence in the record as set forth in Findings of Fact 29 and 30, *supra*, Buckhorn has met its burden of proof to demonstrate that its proposal serves to accomplish appropriate and effective linkages with other services, facilities and elements of the healthcare system in the region and the state.

16. Therefore, this tribunal concludes that the Application is consistent with Criterion III, Interrelationships and Linkages.

IV. COSTS, ECONOMIC FEASIBILITY AND RESOURCE AVAILABILITY.

17. KRS 216B.040(2)(a)2.d. states that a "proposal, when measured against the cost of alternatives for meeting needs, shall be judged to be an effective and economical use of resources, not only of capital investment, but also ongoing requirements for health manpower and operational financing."

18. 900 KAR 6:070 § 2(5) states that "the cabinet shall determine: (a) if it is economically feasible for the applicant to implement and operate the proposal; and (b) [i]f applicable, if the cost of alternative ways of meeting the need identified in the geographic area defined in the application would be a more effective and economical use of resources."

19. Based on the evidence in the record as set forth in Findings of Fact 31 through 33, *supra*, Buckhorn has met its burden of proof to demonstrate that its proposal, when measured against the cost of alternatives for meeting needs, is an effective and economical use of resources of capital investment and ongoing requirements for health manpower and operational financing, and that it is economically feasible for Buckhorn to implement and operate its proposal.

20. Therefore, this tribunal concludes that the Application is consistent with Criterion IV, Costs, Economic Feasibility and Resource Availability.

V. QUALITY OF SERVICES.

21. KRS 216B.040(2)(a)2.e. states that "[t]he applicant shall be prepared to and capable of undertaking and carrying out the responsibilities involved in the proposal in a manner consistent with appropriate standards and requirements, assuring the provision of quality health care services, as established by the cabinet."

22. 900 KAR 6:070 § 2(6) requires the Cabinet to determine whether the proposal meets these requirements as well as whether "the applicant...[h]as the ability to comply with applicable licensure requirements."

23. Based on the evidence in the record as set forth in Findings of Fact 34 and 35, *supra*, Buckhorn has met its burden of proof to demonstrate that it is prepared to and capable of undertaking and carrying out the responsibilities involved in the proposal in a manner consistent with appropriate standards and requirements, assuring the provision of quality health care services, as established by the Cabinet.

24. Therefore, this tribunal concludes that the Application is consistent with Criterion V, Quality of Services.

FINAL ORDER

For the reasons set forth above, it is **ORDERED** that the application of Presbyterian Child Welfare Agency of Buckhorn, KY, Inc. d/b/a Buckhorn Children & Family Services for the issuance of a Certificate of Need to establish a nine (9) bed Level 1 Psychiatric Residential Treatment Facility in Perry County, Kentucky is hereby **APPROVED**.

Pursuant to KRS 216B.090(1), any party may file a request for reconsideration with the Cabinet for Health and Family Services, Office of Health Policy within fifteen (15) days from the notice of this decision.

Pursuant to KRS 216B.115(1), any party may file an appeal to the Franklin Circuit Court within thirty (30) days of notice of this decision or within fifteen (15) days from the notice of a decision to deny reconsideration or a decision on reconsideration.

Entered this 14th day of October, 2026.

SEAN CUTSHALL
Administrative Law Judge

Distribution to be made by the Office of Inspector General, Division of Certificate of Need.