



*State of New Jersey*  
**DEPARTMENT OF HEALTH**  
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[www.nj.gov/health](http://www.nj.gov/health)

PHILIP D. MURPHY  
*Governor*

SHEILA Y. OLIVER  
*Lt. Governor*

JUDITH M. PERSICILLI, RN, BSN, MA  
*Commissioner*

April 28, 2022

**VIA ELECTRONIC & FIRST- CLASS MAIL**

Ryan Meeuf  
Chief Hospital Executive, Bayonne Medical Center  
Chief Information Officer  
CarePoint Health  
29 East 29<sup>th</sup> Street  
Bayonne, New Jersey 07002

Re: CarePoint Health – Bayonne  
Medical Center  
CN# ER 2019-9155-09;01  
CN# ER 2020-11206-09;01  
License #10901  
Total Project Cost: \$2,278,000  
Expiration date: June 30, 2023

Dear Mr. Meeuf:

Please be advised that the Department of Health (Department) is approving the extension of time Expedited Review Certificate of Need (ERCN) applications, dated September 17, 2019, and October 14, 2020, for CarePoint Health – Bayonne Medical Center (BMC) to add 27 Adult Acute Psychiatric Voluntary beds, also known as “open beds”, to be located at the above address in Hudson County.

BMC’s initial Full Review CN (FR 17 0510-09-01) was approved on November 17, 2017, for a period of 2 years or November 17, 2019. The Department has determined to extend the expiration date for the implementation of these beds to June 30, 2023. Please be advised that this will be the final extension of time permitted by the Department for the implementation of the approved beds. The Department has determined that all facilities awarded adult acute psychiatric beds in the November 17, 2017, decision must

implement their awarded beds by June 30, 2023. If these beds are not ready for occupancy and inspection by the Department by June 30, 2023, then BMC will forfeit the ability to seek licensure of these beds.

This approval for an extension of time is limited to the application as presented and reviewed. The application, related correspondence 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 to us. We have not undertaken an independent investigation of such information. If material facts have not been disclosed or have been misrepresented, the Department may take 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.

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

If you have any questions concerning this approval, please do not hesitate to contact Michael J. Kennedy, J.D., Executive Director, Division of Certificate of Need and Licensing at [Michael.Kennedy@doh.nj.gov](mailto:Michael.Kennedy@doh.nj.gov).

Sincerely,

*Robin C. Ford*

Robin C. Ford, MS  
Deputy Commissioner  
Health Systems