
Acute Care Services Committee

Recommendations to the North Carolina State Health Coordinating Council

June 3, 2015

The Acute Care Services Committee met twice after the March Council meeting, first on April 7th and again on May 5th.

Topics reviewed and discussed at the April 7th meeting included:

- Current Acute Care Services policies and methodologies;
- A Petition requesting a change to the Operating Room methodology; and
- A Petition requesting creation of an Operating Room policy to allow an exemption to the standard OR need methodology for certain ambulatory surgery centers dedicated to pediatric dentistry.

Topics reviewed and discussed at the May 5th meeting included:

- Preliminary drafts of need projections generated by the standard methodologies in the Acute Care Services chapters; and
- A comparison between Licensure and Truven Health Analytics data.

The following is an overview of the Committee's recommendations for Acute Care Services (Chapters 5 through 8) in the Proposed 2016 State Medical Facilities Plan (SMFP):

Chapter 5: Acute Care Hospital Beds

- The Committee reviewed and discussed the policies, methodology and assumptions for acute care beds. There were no petitions or comments related to this chapter.
- Licensure and Truven Health Analytics acute days of care were reviewed for discrepancies exceeding $\pm 5\%$. Staff will work with the Sheps Center, Truven, and the hospitals during the summer to improve discrepant data. Staff will notify the Committee if need projections change.
- Committee members reviewed draft Tables 5A, 5B, and 5C. The standard methodology, which uses Truven Health Analytics acute care days of care, indicated a need for
 - **84 additional acute care beds in the Orange County service area.**
- Need determinations are subject to change as data are updated.

Committee Recommendation for Chapter Five:

The Committee recommends accepting the Acute Care Bed policies, methodology and assumptions, and the draft tables, with the understanding that staff will make updates as needed. In addition, references to dates will be advanced one year, as appropriate.

Chapter 6: Operating Rooms

There were two petitions for this Chapter.

1st Petition

Petitioner: Howard, Stallings, From, Hutson, Atkins, Angell & Davis, PA

Request: The petitioner requests that the SHCC review “its methodology for calculating operating rooms needed in the SMFP and change the standard methodology used to calculate OR capacity.”

Comments: No comments were received related to this petition.

Committee Recommendation: The Committee recommends denial of this petition, but acknowledges that the SHCC may want to undertake a new review of the OR methodology.

2nd Petition

Petitioner: Knowles, Smith & Associates, LLP

Request: The petitioner requests the creation of Policy OR-1 to establish certain conditions that would exempt operating rooms in licensed and CMS-certified ambulatory surgical facilities dedicated to pediatric dental surgery from the standard OR methodology in the SMFP.

Comments: By the March 20, 2015 deadline, three comments were received in favor of the petition and three comments were received against the petition.

Committee Recommendation: The Committee recommends denial of this petition, but further recommends the establishment of a stakeholder group or other mechanism to explore options and alternatives to address this request and the issues raised therein. A stakeholder meeting will be held today after the SHCC meeting.

- The Committee reviewed and discussed the methodology and assumptions for operating rooms.
- The Committee reviewed the Operating Room inventory and need determinations in draft Tables 6A, 6B and 6C. Application of the standard methodology indicates need determinations in the following Service Areas as of May 5, 2015:
 - **Brunswick County – 1 OR**
 - **Columbus County – 1 OR**
 - **New Hanover County – 2 ORs**
 - **Rowan County – 1 OR**
- The Committee reviewed Table 6E: Endoscopy Room Inventory.

Committee Recommendation for Chapter Six:

In addition to recommendations regarding the petitions, the Committee recommends accepting the Operating Room methodology, assumptions, and draft tables, with the understanding that staff will make updates as needed. In addition, references to dates will be advanced one year, as appropriate.

Chapter 7: Other Acute Care Services

- No petitions or comments were received related to other acute care services in Chapter 7.
- The Committee reviewed the policy and methodologies for open-heart surgery services, burn intensive care services, and bone marrow and solid organ transplantation services.
- Staff presented draft Tables 7A, 7C, 7E and 7F, and noted that there were no need determinations for additional services at this time.

Committee Recommendation for Chapter Seven:

The Committee recommends accepting the policies, methodology and assumptions for Other Acute Care Services in Chapter 7. The Committee further recommends accepting the draft tables and need projections, with the understanding that staff will make updates as needed. In addition, references to dates will be advanced one year, as appropriate.

Chapter 8: Inpatient Rehabilitation Services

- No petitions or comments were received related to Inpatient Rehabilitation Services.
- The Committee reviewed the methodology and assumptions for Inpatient Rehabilitation Services, as well as a draft of Table 8A.
- Application of the standard methodology indicated no need for additional inpatient rehabilitation beds in the state at this time.

Committee Recommendation for Chapter Eight:

The Committee recommends accepting the methodology and assumptions for Inpatient Rehabilitation Services. The Committee further recommends accepting draft tables and need projections, with the understanding that staff will make updates as needed. In addition, references to dates will be advanced one year, as appropriate.

Other Action

The Committee authorized staff to update narratives, tables, and need determinations for the Proposed 2016 Plan, as updates are received.