



Acute Care Services Committee Minutes – D R A F T

May 15, 2018

10:00 AM-12:00 PM

Brown Building Room 104

Healthcare Planning & Certificate of Need Section

Members Present: Dr. Sandra Greene, Representative Gale Adcock, Christina Apperson, Dr. Charul Haugan, Allen Feezor, Kenneth Lewis, Dr. Robert McBride, Dr. Christopher Ullrich (<i>ex officio-did not vote</i>)
Members Absent: William (Brian) Floyd
Healthcare Planning Staff: Amy Craddock, Elizabeth Brown, Tom Dickson, Andrea Emanuel, Barbara Johnson
DHSR Staff: Martha Frisone, Greg Yakaboski
Attorney General's Office: Bethany Burgon

Agenda Items	Discussion/Action	Motions	Recommendations/ Actions
Welcome & Announcements	<p>Dr. Greene welcomed members, staff and visitors to the meeting. She stated that the purpose of the meeting was to review preliminary drafts of need projections generated by the standard methodologies in the acute care services chapters.</p> <p>Dr. Greene stated that following this meeting, the Acute Care Services Committee's recommendations will be forwarded to all members of the State Health Coordinating Council (SHCC) for their consideration at the May 30, 2018 meeting. Dr. Greene announced that a series of six public hearings on the Proposed Plan will be held during July.</p> <p>Dr. Greene acknowledged that today's meeting was open to the public. However, discussions, deliberations, and recommendations are limited to the members of the Acute Care Services Committee.</p>		
Review of Executive Order No. 46 Reauthorizing the State Health Coordinating Council and Executive Order No. 122 Extending the State Health Coordinating Council	<p>Dr. Greene reviewed Executive Orders 46 and 122 with committee members and explained procedures to observe before taking action at the meeting.</p> <p>There were no recusals.</p>		
Approval of minutes from the April 3, 2018	A motion was made and seconded to approve the April 3, 2018 minutes.	Ms. Apperson Mr. Lewis	Minutes approved

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<p>Acute Care Hospital Beds – Chapter 5</p>	<p><u>Acute Care Hospital Beds – Chapter 5</u> Dr. Craddock reviewed Chapter 5.</p> <p>Licensure/Truven Data Comparison This report is a table that is not printed in the SMFP. The agency reconciles the acute care days of care between the Hospital License Renewal Applications (LRA) submitted to DHSR and the data submitted to Truven Health Analytics. The report currently contains 25 facilities that show a greater than 5% discrepancy between the two data sources. An updated Discrepancy Report will be presented at the September 11, 2018 Acute Care Services committee meeting, after receipt of the “refreshed” Truven data and any corrections to LRAs submitted to the agency.</p> <p>Data Tables Table 5A shows the inventory of acute care beds, along with the bed surplus and deficit numbers. Based on the draft Table 5A, there was a 2.4% increase in days of care from last year.</p> <p>Table 5B shows draft bed need determinations for 2019: Gaston County – 32 beds Mecklenburg County – 152 beds Moore County – 31 beds</p> <p>When Truven data is refreshed later in the year and if any corrections are made to the data, the need determinations may change.</p> <p>Table 5C is an inventory of beds in Long-Term Care Hospitals; it was presented for information purposes only.</p> <p><u>Committee Recommendations</u> A motion was made and seconded to forward Chapter 5, Acute Care Hospital Beds, to the full SHCC for approval.</p>	<p>Ms. Apperson Rep. Adcock</p>	<p>Motion approved</p>
<p>Operating Rooms – Chapter 6</p>	<p><u>Operating Rooms – Chapter 6</u></p> <p>Dr. Craddock reviewed several aspects of Chapter 6, reflective of the new methodology. She noted that staff needs to make a wording change to the Chapter 6 narrative that does not require a vote but that will be reviewed by Dr. Greene. In addition, she verified that, as expected, the change from 1312.5 to 1312 hours for</p>		

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	<p>full utilization for ambulatory surgical centers approved at the April 3 2018 meeting does not affect surpluses or deficits reported in the SMFP.</p> <p>Data Tables Dr. Craddock reported a 1.3% increase in the number of inpatient surgical cases from last year and a 2.5% increase in ambulatory cases.</p> <p>Table 6C shows draft need determinations for 24 ORs across the following service areas: Cabarrus – 2 Mecklenburg – 11 New Hanover – 6 Orange – 3 Wake – 2</p> <p>Dr. Craddock reminded the Committee that the 2018 SMFP included a 6-OR cap on need determinations for a single service area, and noted that this cap would be reviewed in preparation of the Proposed 2019 SMFP. The Committee discussed whether it was necessary to continue to place a 6-OR cap on need determinations. Ms. Frisone pointed out that the most important factor for processing CON applications is the number of service areas in which needs exist rather than the total number of ORs needed. Given the number service areas with draft needs, she indicated that she did not deem it necessary to place a cap on OR need determinations. The Committee concurred and determined that a cap was not necessary.</p> <p><u>Committee Recommendation</u> A motion was made and seconded to forward the operating room data and need projections to the full SHCC for approval.</p>	<p>Ms. Apperson Rep. Adcock</p>	<p>Motion approved</p>
<p>Other Acute Care Services - Chapter 7</p>	<p><u>Other Acute Care Services – Chapter 7</u></p> <p>Dr. Craddock reviewed Chapter 7. Chapter 7 covers several areas of acute care services.</p> <p>Table 7A and graph: Open-Heart Surgery Procedures. This table shows the number of procedures. This service has no need determination methodology.</p>		

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	<p>Table 7C and graph: Burn ICU Services. Utilization is slightly down from last year. There is no need determination for the Proposed 2019 SMFP.</p> <p>Table 7E and graph: Bone Marrow Transplants. This service has no need determination methodology.</p> <p>Table 7G and graph: Solid Organ Transplants. This service has no need determination methodology.</p> <p><u>Committee Recommendation</u> A motion was made and seconded to forward the Other Acute Care bed data and need projections to the full SHCC for approval.</p>	Mr. Lewis Mr. Feezor	Motion approved
Inpatient Rehabilitation Services – Chapter 8	<p><u>Inpatient Rehabilitation Services – Chapter 8</u></p> <p>Dr. Craddock reviewed Chapter 8.</p> <p>Table 8A shows the inventory and utilization of Inpatient Rehabilitation Beds. Utilization is at 59.1%, which is a slight decrease from last year. There is no need determination for inpatient rehabilitation beds in the Proposed 2019 SMFP.</p> <p><u>Committee Recommendation</u> A motion was made and seconded to forward the Inpatient Rehabilitation Services bed data and need projections to the full SHCC for approval.</p>	Ms. Apperson Rep. Adcock	Motion approved
Committee Recommendation	A motion was made and seconded to accept the data and need projections for Chapters 5, 6, 7, and 8, with the understanding that staff will make necessary corrections and changes, and to authorize staff to make updates to all tables and narratives as needed.	Mr. Lewis Rep. Adcock	Motion approved
Other Business	There was no other business.		
Adjournment	Dr. Greene called for a motion to adjourn.	Rep. Adcock Dr. McBride	Motion approved