

**Table 5B: Acute Care Bed Need Determination\***

Service Area	Acute Care Bed Need Determination	Certificate of Need Application Deadline**	Certificate of Need Beginning Review Date
Anson	4	To be determined	To be determined
Brunswick	18	To be determined	To be determined
Buncombe/Graham/Madison/Yancey/Clay	92	To be determined	To be determined
Cabarrus	128	To be determined	To be determined
Cleveland	111	To be determined	To be determined
Davie	6	To be determined	To be determined
Durham	199	To be determined	To be determined
Forsyth/Yadkin	141	To be determined	To be determined
Johnston	62	To be determined	To be determined
Lincoln	32	To be determined	To be determined
Mecklenburg	463	To be determined	To be determined
New Hanover	228	To be determined	To be determined
Onslow	30	To be determined	To be determined
Orange	40	To be determined	To be determined
Pender	605	To be determined	To be determined
Union	107	To be determined	To be determined
Wake	252	To be determined	To be determined
Wilkes	21	To be determined	To be determined
It is determined that there is no need anywhere else in the state and no other reviews are scheduled.			

\* Any person can apply for a CON to meet the need, not just the health service facility or facilities that generated the need.

\*\* Application deadlines are absolute, pursuant to 10A NCAC 14C.0202(2). The filing deadline is 5:00 p.m. on the application deadline date.