



July 28, 2010

Gene DePorter, Assistant Chief  
Medical Facilities Planning Section  
NC Division of Health Service Regulation  
2714 Mail Service Center  
Raleigh, NC 27699-2714

NC Health Planning  
RECEIVED  
AUG 02 2010  
Medical Facilities  
Planning Section

RE: Hospice Cleveland County Petition for Special Need Adjustment to the 2011  
State Medical Facilities Plan Hospice Inpatient Bed Need Determination

Dear Mr. DePorter:

Recognizing that you must often read letters from well meaning people supporting a cause, I will try to be brief and to the point with mine.

I have worked in healthcare for more than 30 years, most of it in an acute care setting. Part of my responsibilities for many years involved "planning," including the actual writing of CON Applications. I fully understand many of the demands placed upon you in your role. I think that is the only preamble needed here.

Specifically addressing the Petition by Hospice Cleveland County, I am uniquely familiar with the organization. I served on its first Board of Directors and then again at a later date. I assisted them with their first CON application and I had organizational oversight for their organization when it joined the HealthCare Enterprise referred to in the Petition.

It is my opinion that their growth has been extremely uncommon for a healthcare entity. Many factors have played a role, including greater acceptance and understanding of the Hospice mission by our country, reimbursement programs and even the demographics of baby boomers. I can also tell you without any doubt that this mission driven organization has achieved a level of trust and respect that no other health care provider in our county has. These may be the most important of all the reasons for this organization's success.

While I understand that the type of care provided is a part of this acceptance, it is the organization's board, its management team and its staff who translate mission to healthcare delivery. In the end, this is why any of us are in healthcare, whether it is delivering hands-on care or trying to make the system work for everyone.

I can tell you without any doubt that this petition is coming to you because of the need of patients. Hospice care, such as the organization delivers, is not about finance, it is about compassion. But make no mistake; the organization would not submit such a petition

simply because a need is shown. My experience with them in the past is that they have waited until it was logical to request a petition, not that it was simply possible to petition.

I have read their complete Petition and it seems to me their logic is sound for submitting it. As a former administrator, I could not help but ask them a couple of questions about things I would want to know if I were the one reviewing it and I was pleased to see their final version addressing further logic on how they might accomplish adding a bed if it were approved and ultimately in the SMFP.

So, from my experience with the organization for more than 25 years, my understanding of the quality of the organization at all levels and the fact that their data seems to indicate they could utilize an additional Hospice inpatient bed fully and ensure more patients have access to this special type of healthcare, I offer you my full and unconditional support for their Petition.

Should you have any questions about any of my comments, I would be happy to discuss them with you at your convenience.

Sincerely,

A handwritten signature in cursive script that reads "Mark Alan Hudson".

Mark Alan Hudson, FACHE  
President

Cc Myra McGinnis, Executive Director