I am Tim Rogers, President and CEO of the Association for Home and Hospice Care of North Carolina. As many of you know, I also have served on the State Health Coordinating Council as the representative for home health and hospice from 2003-2009. I have a first hand understanding and an appreciation for the public service that you provide by being members of the Council. I also have that same level of respect for DHSR staff members.

I am here today to make a statement on behalf of Granville-Vance Home Health Agency. Granville-Vance Home Health Agency is a county-owned and operated home health agency that currently serves both Granville and Vance Counties from an office in Vance County. I understand that the draft home health section to be considered by the Long-Term Care Committee may include an allocation for a home health agency in Granville County based upon Policy HH-3 which provides that regardless of the methodology, a Medicare certified home health agency will be allocated to a county that has a population of more than 20,000 people and does not have an existing home health agency located in the county.

In the special case of Granville County, Policy HH-3 does not serve its intended purpose if it allows a home health agency other than Granville-Vance Home Health Agency to open an office in Granville County. Granville-Vance Home Health Agency is already serving Granville County. As the County owned home health agency, it has a statutory obligation to provide home health services. In these special circumstances, another home health agency in her here.

I would ask that the SHCC and Long Term Care Committee consider the special circumstances of Granville County and its county owned home health agency in determining whether Policy HH-3 needs to be revised and whether an allocation for an additional home health agency should be included in the 2014 Plan. Thank you.

## **HOSPICE:**

The Association of Home and Hospice Care of North Carolina, along wit numerous other hospices throughout North Carolina, worked with and assisted Mr. John Thoma in the Hospice of Wake County petition to change Step 7 - the hospice inpatient bed methodology form 6.0% to 3.5%. We wholeheartedly support this change and look forward to working with DHSR staff, particularly Elizabeth Brown, and members of the LTBH committee in answering any questions. 17 a gencies Sewe Crawlle Carolina Carolina (Carolina) and the committee in answering any questions.

Tim Rogers
March 6, 2013

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