



Additional Request for a State Task Force to Study Hospice Methodologies

Good afternoon, my name is Shannon Pointer, and I am the Senior Vice President of Hospice & Home Health Services, and Professional Development Director for The Association for Home & Hospice Care of North Carolina. Thank you for the opportunity to speak with you again today during this public hearing.

I previously provided comments on July 7th as part of the public hearing process and want to again, share my thanks and appreciation to the State Health Coordinating Council and the North Carolina Department of Health and Human Services, North Carolina Division of Health Service Regulation Healthcare Planning staff for the important work you do in preparing and submitting each year the recommendations from The State Health Coordinating Council to the Governor of North Carolina regarding the North Carolina State Medical Facilities Plan.

Because there may be some on today's hearing who were not present at the July 7th public hearing, I would like to let those in attendance today know that I am here today on behalf of The Association for Home & Hospice Care of North Carolina, which is a nonprofit trade association representing 98% of providers of home health, 98% of providers in hospice, as well as providers of palliative care, personal care, private duty nursing, companion/sitter services, providers of behavioral health care services that care for and support individuals with intellectual and developmental disabilities, and Program for All-Inclusive Care for the Elderly (PACE) provider members, in addition to other healthcare affiliates. The Association was established in 1972 and currently has a membership of over 750 provider agencies and business partners, who provide products and services to providers.

The Association for Home & Hospice Care of North Carolina's mission is to provide resources, education, advocacy and leadership. The Association has a respected and longstanding history of being recognized as a leader in educating Association members, as well as the public, on the importance of the Certificate of Need laws and processes in North Carolina, and how these laws and processes help to ensure adequate need determinations, while also supporting adequate access to needed services that are covered under the Certificate of Need laws in North Carolina. The Association would first like to emphasize our unwavering support of the North Carolina Certificate of Need laws and required processes, including the processes set forth to implement the North Carolina State Medical Facilities Plan each year, and the work of the State Health Coordinating Council, the North Carolina Governor, and the State of North Carolina.

When I previously spoke on July 7th, I addressed the State Health Coordinating Council on behalf of our Association members, and our Association Board of Directors, to request that the State Health Coordinating Council approve a task force to review Chapter 13, Hospice Services methodologies for hospice home care and hospice inpatient bed methodologies, and make subsequent recommendations for consideration to the State Health Coordinating Council. Today, I am addressing you to re-state this request.

As I shared previously on July 7th, in 2014, the State Health Coordinating Council officially sanctioned a hospice methodology task force to review and make recommendations to the State

Health Coordinating Council for consideration. The methodologies listed in the current State Medical Facilities Plan, Chapter 13 multiple step methodology, are a direct result of the efforts of that task force's work and subsequent approval by the State Health Coordinating Council. We continue to feel strongly that 11 years is an extensive amount of time to have not had a subsequent in-depth review of the hospice methodologies. The creation of a new task force to review the hospice home care and hospice inpatient bed methodologies would offer the opportunity to dedicate time to study and review the methodologies and provide valuable and important feedback for consideration to the State Health Coordinating Council.

As we also shared previously, The Association continues to this day to represent a similar number of hospice organizations in the state of North Carolina, just like the Association did back in 2014. The Association also continues to have dedicated staff who are willing and ready to assist in this task force work, just as the Association did in 2014. The Association has access to national experts and consults through its close relationship with the National Alliance for Care at Home, the national association that was formed through the merger of the National Hospice and Palliative Care Organization (NHPCO) and the National Association for Home Care & Hospice (NAHC).

The Association stands ready and is willing to facilitate a task force for review of the hospice methodologies, if desired by the State Health Coordinating Council. We have been contacted by many of our hospice members, and they support the idea of a new task force and many of them welcome the opportunity to use their expertise to assist as part of this potential task force if desired by the State Health Coordinating Council. The Association has a wealth of historical knowledge, expertise, dedication, and reliability to facilitate interested parties meetings for this proposed task force alongside the state if desired by the State Health Coordinating Council.

The Association also would like to express appreciation to Teleios Collaborative Network (TCN), for their comments that were presented on the July 21, 2025, public hearing, and for their support of our Association's request. The Association for Home & Hospice Care of North Carolina also requests that the State Health Coordinating Council consider the information shared and requests made by Teleios Collaborative Network (TCN) on July 21, 2025. The Association wants to ensure that any need determinations reflect the data.

Thank you for allowing me to speak to you again today, as part of this public hearing. The Association appreciates the opportunity to request the State Health Coordinating Council's consideration of the approval of a new task force to review Chapter 13, Hospice Services methodologies for hospice home care and hospice inpatient bed methodologies, and make subsequent recommendations for consideration as we truly feel this task force could ensure through their review, that our current methodologies utilized as part of the State Medical Facilities Plan processes are effective in the development of adequate need determinations and access to hospice services and hospice inpatient beds in North Carolina.

Sincerely,



Shannon Pointer, DNP, RN, CHPN

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