1	10A NCAC 14C .1603	is proposed for readoption with substantive changes as follows:	
2			
3	10A NCAC 14C .1603	PERFORMANCE STANDARDS	
4	(a) An applicant proposing to acquire cardiac catheterization equipment shall demonstrate that the project is capable		
5	of meeting the followir	ng standards:	
6	(1) each	proposed item of cardiac catheterization equipment, including mobile equipment but excluding	
7	share	d fixed cardiac catheterization equipment, shall be utilized at an annual rate of at least 60	
8	perce	ent of capacity excluding procedures not defined as cardiac catheterization procedures in 10A	
9	NCA	C 14C .1601(5), measured during the fourth quarter of the third year following completion of	
10	the p	<del>roject;</del>	
11	$\frac{(2)}{}$ if the	e applicant proposes to perform therapeutic cardiac catheterization procedures, each of the	
12	<del>appli</del>	cant's therapeutic cardiac catheterization teams shall be performing at an annual rate of at leas	
13	100	therapeutic cardiac catheterization procedures, during the third year of operation following	
14	comp	pletion of the project;	
15	$\frac{(3)}{}$ if the	applicant proposes to perform diagnostic cardiac catheterization procedures, each diagnostic	
16	eardi	ac catheterization team shall be performing at an annual rate of at least 200	
17	diagr	nostic equivalent cardiac catheterization procedures by the end of the third year following	
18	eomp	pletion of the project;	
19	(4) at lea	ist 50 percent of the projected cardiac catheterization procedures shall be performed on patients	
20	resid	ing within the primary cardiac catheterization service area;	
21	(b) An applicant propo	osing to acquire mobile cardiac catheterization equipment shall:	
22	(1) demo	onstrate that each existing item of cardiac catheterization equipment, excluding mobile	
23	<del>equi</del> r	oment, located in the proposed primary cardiac catheterization service area of each host facility	
24	shall	have been operated at a level of at least 80 percent of capacity during the 12 month period	
25	reflec	eted in the most recent licensure form on file with the Division of Health Service Regulation;	
26	(2) demo	onstrate that the utilization of each existing or approved item of cardiac catheterization	
27	<del>equir</del>	oment, excluding mobile equipment, located in the proposed primary cardiac catheterization	
28	servi	ce area of each host facility shall not be expected to fall below 60 percent of capacity due to	
29	the a	equisition of the proposed mobile cardiac catheterization equipment;	
30	(3) demo	onstrate that each item of existing mobile equipment operating in the proposed primary cardiac	
31	cathe	sterization service area of each host facility shall have been performing at least an average of	
32	<del>four</del>	diagnostic equivalent cardiac catheterization procedures per day per site in the proposed	
33	eardi	ac catheterization service area in the 12 month period preceding the submittal of the	
34	<del>appli</del>	cation;	
35	(4) demo	onstrate that each item of existing or approved mobile equipment to be operating in the proposed	
36	<del>prim</del> e	ary cardiac catheterization service area of each host facility shall be performing at least ar	

1		average of four diagnostic equivalent cardiac catheterization procedures per day per site in the
2		proposed cardiac catheterization service area in the applicant's third year of operation; and
3		provide documentation of all assumptions and data used in the development of the projections
4		required in this Rule.
5		•
5	catheterization sha	proposing to acquire cardiac catheterization equipment excluding shared fixed and mobile cardiac
6		
7	. ,	demonstrate that its existing items of cardiac catheterization equipment, except mobile equipment,
8		located in the proposed cardiac catheterization service area operated at an average of at least 80
9		percent of capacity during the twelve month period reflected in the most recent licensure renewal
10		application form on file with the Division of Health Service Regulation;
11	(2)	demonstrate that its existing items of cardiac catheterization equipment, except mobile equipment,
12		shall be utilized at an average annual rate of at least 60 percent of capacity, measured during the
13		fourth quarter of the third year following completion of the project; and
14	(3)	provide documentation of all assumptions and data used in the development of the projections
15		required in this Rule.
16	(d) An applicant	proposing to acquire shared fixed cardiac catheterization equipment as defined in the applicable
17	State Medical Fac	ilities Plan shall:
18	(1)	demonstrate that each proposed item of shared fixed cardiac catheterization equipment shall perform
19		a combined total of at least 225 cardiac catheterization and angiography procedures during the fourth
20		quarter of the third year following completion of the project; and
21	(2)	provide documentation of all assumptions and data used in the development of the projections
22		required in this Rule.
23	(e) If the applican	at proposes to perform cardiac catheterization procedures on patients age 14 and under, the applicant
24	shall demonstrate	that it meets the following additional criteria:
25	(1)	the facility has the capability to perform diagnostic and therapeutic cardiac catheterization
26		procedures and open heart surgery services on patients age 14 and under; and
27	<del>(2)</del>	the proposed project shall be performing at an annual rate of at least 100 cardiac catheterization
28		procedures on patients age 14 or under during the fourth quarter of the third year following initiation
29		of the proposed cardiac catheterization procedures for patients age 14 and under.
30	(a) An applicant p	proposing to acquire fixed cardiac catheterization equipment pursuant to a need determination in the
31	annual State Medi	ical Facilities Plan in effect as of the first day of the review period shall:
32	<u>(1)</u>	identify the existing fixed cardiac catheterization equipment owned or operated by the applicant or
33		a related entity and located in the proposed fixed cardiac catheterization equipment service area;
34	<u>(2)</u>	identify the approved fixed cardiac catheterization equipment owned or operated by the applicant
35		or a related entity and located in the proposed fixed cardiac catheterization equipment service area;

1	(3)	provide projected utilization of the cardiac catheterization equipment identified in Subparagraphs
2		(a)(1) and (a)(2) of this Paragraph and the proposed fixed cardiac catheterization equipment during
3		each of the first three full fiscal years of operation following completion of the project;
4	(4)	provide the assumptions and methodology used to project the utilization required by Subparagraph
5		(a)(3) of this Paragraph; and
6	<u>(5)</u>	project that the cardiac catheterization equipment identified in Subparagraphs (a)(1) and (a)(2) of
7		this Paragraph and the proposed fixed cardiac catheterization equipment shall perform 900 or more
8		diagnostic-equivalent cardiac catheterization procedures per unit of cardiac catheterization
9		equipment during the third full fiscal year of operation following completion of the project.
10	(b) An applicant	t proposing to acquire shared fixed cardiac catheterization equipment pursuant to a need determination
11	in the annual Sta	ate Medical Facilities Plan in effect as of the first day of the review period shall:
12	<u>(1)</u>	provide projected utilization of the proposed shared fixed cardiac catheterization equipment during
13		each of the first three full fiscal years of operation following completion of the project;
14	(2)	provide the assumptions and methodology used to project the utilization required by Subparagraph
15		(b)(1) of this Paragraph; and
16	(3)	project that the proposed shared fixed cardiac catheterization equipment shall perform 225 or more
17		diagnostic-equivalent cardiac catheterization and angiography procedures during the third full fiscal
18		year of operation following completion of the project.
19	(c) An applican	at proposing to acquire mobile cardiac catheterization equipment pursuant to a need determination in
20	the State Medica	al Facilities Plan in effect as of the first day of the review period shall:
21	<u>(1)</u>	identify the existing mobile cardiac catheterization equipment owned or operated by the applicant
22		or a related entity that provides cardiac catheterization services at host sites located in the proposed
23		mobile cardiac catheterization equipment service area;
24	(2)	identify the approved mobile cardiac catheterization equipment owned or operated by the applicant
25		or a related entity that will provide cardiac catheterization services at host sites located in the
26		proposed mobile cardiac catheterization equipment service area;
27	(3)	provide projected utilization of the cardiac catheterization equipment identified in Subparagraphs
28		(c)(1) and (c)(2) of this Paragraph and the proposed mobile cardiac catheterization equipment during
29		each of the first three full fiscal years of operation following completion of the project;
30	<u>(4)</u>	provide the assumptions and methodology used to project the utilization required by Subparagraph
31		(c)(3) of this Paragraph; and
32	<u>(5)</u>	project that the cardiac catheterization equipment identified in Subparagraphs (c)(1) and (c)(2) of
33		this Paragraph and the proposed mobile cardiac catheterization equipment shall perform 225 or more
34		diagnostic-equivalent cardiac catheterization procedures per unit of cardiac catheterization
35		equipment during the third full fiscal year of operation following completion of the project.
36		
37	History Note:	Authority G.S. 131E-177(1); 131E-183(b);

	1	Eff. January 1, 1987;
	2	Temporary Amendment Eff. September 1, 1993 for a period of 180 days or until the permanent rule
	3	becomes effective, whichever is sooner;
	4	Amended Eff. November 1, 1996; February 1, 1994;
	5	Temporary Amendment Eff. January 1, 1999;
	6	Temporary Eff. January 1, 1999 Expired on October 12, 1999;
	7	Temporary Amendment Eff. January 1, 2000;
	8	Temporary Amendment effective January 1, 2000 amends and replaces a permanent rulemaking
	9	originally proposed to be effective August 2000;
1	0	Temporary Amendment Eff. January 1, 2001;
1	1	Temporary Amendment effective January 1, 2001 amends and replaces a permanent rulemaking
1	2	originally proposed to be effective April 1, 2001;
1	3	Temporary Amendment Eff. January 1, 2002;
1	4	Amended Eff. August 1, 2002;
1	5	Temporary Amendment effective January 1, 2002 amends and replaces the permanent rule effective
1	6	August 1, 2002;
1	7	Amended Eff. April 1, 2003;
1	8	Temporary Amendment Eff. February 1, 2006;
1	9	Amended Eff. November 1, <del>2006.</del> 2006;
2	0	Readopted Eff. January 1, 2022.