



Medical Facilities Planning

Long-Term and Behavioral Health Committee Minutes

September 16, 2011
Brown Building – Room 104

MEMBERS PRESENT: Dr. T.J. Pulliam – Chair, Jerry Parks-Vice-Chair, Don Beaver, Johnnie Farmer, Anthony Foriest, Ted Griffin, Pam Tidwell
MEMBERS ABSENT: Frances Mauney, Zach Miller
STAFF PRESENT: Patrick Baker, Elizabeth Brown, Erin Glendening, Kelli Fisk
DHSR STAFF PRESENT: Drexdal Pratt, Pasty Christian, Jim Keene, Craig Smith

Agenda Items	Discussion/Actions	Motions	Recommendations/ Actions
Welcome & Announcements	Dr. Pulliam welcomed members and guests. Dr. Pulliam announced Frances Mauney and Zach Miller are unable to attend today's meeting. Dr. Pulliam stated the purpose of the meeting was to review petitions and comments received in response to the <u>Proposed 2012 State Medical Facilities Plan</u>. Dr. Pulliam stated per direction of the Chair of the SHCC, the meeting is open to the public, but due to nature of agenda, the vast majority of the deliberations and recommendations are limited to the members of the LTBH Subcommittee. Dr. Pulliam also stated the Committee does reserve the right to call on any member of the audience if additional information is needed to assist Committee members in their deliberations in order to make the best possible decision the Committee can.		
Review of Executive Order No. 10 & 67	Dr. Pulliam reviewed Executive Orders No.10 and 67, "Ethical Standards for the State Health Coordinating Council" Guide, asking all members that as they introduce themselves to include if they would be recusing themselves from any items on today's agenda. Dr. Pulliam discussed the letter dated September 12, 2011 received by all SHCC members clarifying Executive Order 10.		.
Introductions	Dr. Pulliam inquired if anyone had a conflict or needed to declare that they would derive a benefit from any matter on the agenda or intended to recuse themselves from voting on the matter. Dr. Pulliam asked members to declare conflicts as agenda items come up. At this time, all members introduced themselves, stating their workplace, position		

Agenda Items	Discussion/Actions	Motions	Recommendations/ Actions
Review of Updated Tables – Chapter 11 Recommendations to the SHCC- Chapter 11	The petition lacks quantitative information defining the existence of the problem, lacks evaluative criteria that would be necessary to measure the success of the project if approved and seeks to specify an existing building within a specific county as the project site when in general, statewide demonstration projects are available for competitive review. Based on these factors and acknowledging the significant growth in the number of Special Care Beds already approved statewide, the Agency recommends the petition be denied. Mr. Don Beaver recused himself from voting on the Meridian Senior Living petition. A motion made and seconded to accept the Agency's recommendation to deny the petition. Dr. Pulliam asked if the Petitioner was present for discussion. The Petitioner was not present. Deliberations between Committee members then occurred. Mr. Baker presented updated Draft need projections and need determinations for Table 11C. A motion was made and seconded to allow staff to update tables and need determinations as new and corrected data are received.	Mr. Parks Ms. Tidwell Mr. Farmer Mr. Beaver	Motion approved Motion approved
Home Health Services Petition: Personal Home Care of N.C. Agency Recommendation	Ms. Brown addressed the Home Health & Hospice Data comments and the steps the Agency has completed in working with Providers and Association for Home Health & Hospice Association of North Carolina & South Carolina and the Carolina Center for Hospice and End of Life Care, in obtaining the best data possible for the Plan. Ms. Brown stated the agency received one petition regarding Home Health Services. Ms. Brown presented the Agency Report – Personal Home Care of N.C. The Petition requests an adjusted need determination for Medicare-certified Home Health Agencies or Offices in Mecklenburg County. Specifically, the petition asks that the projected need be reduced from two to one additional home health agency office in Chapter 12 of the Proposed 2012 State Medical Facilities Plan (SMFP). Since the methodology does not allow a placeholder for a new agency when it is developed in response to an adjusted need determination, need is projected by patients served instead of number of agencies, corrections of provider submitted data has been addressed and the methodology continues to project need for two agencies, the Agency recommends the petition be denied. A motion was made and seconded to accept the Agency's recommendation to deny the petition. Dr. Pulliam asked if the Petitioner was present for discussion. The Petitioner was not present; Ms. Nancy Lane of PDA Consulting firm was offered the opportunity to introduce herself and speak on behalf of petitioner if there were any questions.	Mr. Beaver Ms. Tidwell	Motion approved

Agenda Items	Discussion/Actions	Motions	Recommendations/ Actions
Review of Updated Tables – Chapter 12 Recommendations to the SHCC- Chapter 12	Ms. Tidwell thanked the staff concerning for working with the Association for Home Health & Hospice concerning data preparations for the Plan. Ms. Brown presented updated Draft need projections and need determinations for Table 12D. A motion was made and seconded to allow staff to update tables and need determinations as new and corrected data are received.	Mr. Griffin Mr. Foriest	Motion approved
Hospice Services Petition: Carolina East Home Care & Hospice Agency Recommendation Petition: Gordon Hospice House Agency Recommendation	Ms. Brown stated the four Hospice petitions are located together under one Agency Report. Carolina East Home Care & Hospice requests an adjusted need determination for three hospice inpatient beds (Duplin County). Carolina East Home Care & Hospice - Based on the minimal size of the existing facility and the significant increase in hospice days of care, the Agency recommends an adjusted need determination for three additional inpatient beds in Duplin County A motion was made and seconded to accept the Agency's recommendation to approve three hospice inpatient beds (Duplin County). Gordon Hospice House requests an adjusted need determination for three hospice inpatient beds (Iredell County). Gordon Hospice House (Iredell County) - Because the adjusted need for three additional hospice inpatient beds from the 2011 SMFP are not yet operational and the standard methodology shows a projected surplus of one bed when that expansion is implemented, the Agency recommends that the petition for an additional adjustment in the 2012 SMFP be denied. Current utilization will be reflected in the Proposed 2013 SMFP and may generate additional need by the standard methodology. A motion was made and seconded to accept the Agency's recommendation to deny Gordon House Hospice request for an adjusted need determination for three hospice inpatient beds (Iredell County). Dr. Pulliam asked if the petitioner was present. Ms. Terri Phillips from Gordon House Hospice was present and Dr. Pulliam asked that she limit her comments to five minutes. Dr. Pulliam called a vote among the members to approve the petition. A motion was made to deny the Agency's recommendation and to approve the Gordon House Hospice request for an adjusted need determination for three hospice inpatient beds (Iredell County).	Mr. Foriest Mr. Farmer Mr. Farmer Mr. Foriest Ms. Tidwell Mr. Griffin	Motion approved Motion denied Vote 4-2 Motion carries Vote 6-0

Agenda Items	Discussion/Actions	Motions	Recommendations/ Actions
Petition: Hospice of Rockingham County Agency Recommendation	Hospice of Rockingham County requests an adjusted need determination for three hospice inpatient beds (Rockingham County). Hospice of Rockingham County requested an adjusted need determination for three hospice inpatient beds for Rockingham County. Based on the extremely high occupancy rate for the previous reporting period and the minimal size of this new facility, the Agency recommends an adjusted need determination for two additional inpatient beds in Rockingham County. A motion was made and seconded to accept the Agency's recommendation to approve an adjusted need determination for two additional inpatient beds in Rockingham County. Dr. Pulliam asked if the petitioner was present; the petitioner was not present and Mr. Dave French was offered the opportunity to speak on behalf of petitioner. Dr. Pulliam asked that he limit his comments to five minutes. Petition: Hospice of Scotland County Agency Recommendation Hospice of Scotland County requests an adjusted need determination for two hospice inpatient beds (Scotland County). Hospice of Scotland County – The reported utilization indicates that the current capacity is sufficient through 2015 and shows a projected surplus of two beds. Therefore, the Agency recommends the request for an adjusted need determination in Scotland County for two inpatient beds be denied A motion was made and seconded to accept the Agency's recommendation to deny the petition of Hospice of Scotland County. Dr. Pulliam asked if the petitioner was present; the petitioner was not present and a representative was offered the opportunity to speak on behalf of petitioner if there were any questions. Review of Updated Tables – Chapter 13 Ms. Brown presented updated Draft need projections and need determinations for Tables 13G and 13H. Recommendations to the SHCC- Chapter 13 A motion was made and seconded to allow staff to update tables and need determinations as new and corrected data are received.	Ms. Tidwell Mr. Griffin Mr. Farmer Mr. Beaver Mr. Foriest Mr. Griffin	Motion approved Motion approved Motion approved
End-Stage Renal Disease Dialysis Facilities Petition: Board of County Commissioners – Macon County Agency Recommendation	Ms. Brown stated that one petition from Macon County was received regarding ESRD-Dialysis Services. The Petition requests an adjusted need determination for a new dialysis facility to be located in Macon County, in Franklin, to serve the residents of Macon County. The Agency believes that a sufficient number of dialysis patients is essential to the development and maintenance of a quality dialysis facility; however, the Agency also acknowledges the extreme hardship of commuting three times a week for in-center		

Agenda Items	Discussion/Actions	Motions	Recommendations/ Actions
Issues related to ESRD- Dialysis Services Recommendations to the SHCC- Chapter 14	dialysis treatment over difficult terrain and in adverse weather conditions. Therefore, the Agency recommends approval of the request for an adjusted need determination for a new dialysis facility in Macon County, with a minimum of 5 dialysis stations, as projected in the July 2011 Semiannual Dialysis Report and a maximum of the number “projected as needed” in the most recent “Semiannual Dialysis Report” available prior to the Certificate of Need application due date. The Agency encourages Macon County, and any prospective applicants to explore coordination of services, and perhaps sharing of staff, with existing providers in contiguous counties. A motion made and seconded to accept the agency’s recommendation to approve an adjusted need determination for a new dialysis facility to be located in Macon County, in Franklin, to serve the residents of Macon County. Dr. Pulliam asked if the petitioner was present; the petitioner was present and thanked the Agency and Committee. Ms. Brown stated there were no Comments received and changes to data at this time. A motion was made and seconded to accept the materials provided by staff regarding dialysis services and to allow staff to update the tables and need determinations for the NC 2012 State Medical Facilities Plan as new and corrected data are received.	Mr. Griffin Mr. Farmer Mr. Farmer Mr. Griffin	Motion approved Motion approved
Mental Health - LME Coverage Areas	Mr. Baker reviewed LME Coverage Area Map Mental Health areas and potential of significant coverage area changes in future months. Any of the proposed changes, which are not established or finalized by the Division of Mental Health, could result in a reduction of LME Coverage Areas from the current 23 to possibly 10. The changes are to be established by a new managed care process via a competitive application process, which may result in additional ongoing changes after the first changes are implemented in future months. Due to LME Coverage Areas being the basis for determining need for the Mental Health Chapters of the Plan, Mr. Baker stated the Agency wanted to bring this situation to the attention of the Committee to consider, at the discretion of the Committee, for determining the timeline to initiate a Work Group in upcoming months to consider alternative coverage areas. Via deliberations, the Committee did not vote on creating a Work Group until the Division of Mental Health notifies the Agency of the finalized to be implemented changes.		
Psychiatric Inpatient Services Review of Updated Tables – Chapter 15	No Petitions or Comments were filed for this Chapter. Mr. Baker presented updated Draft need projections and need determinations for Tables 15(C1) and 15C(2).		

Agenda Items	Discussion/Actions	Motions	Recommendations/ Actions
Recommendations to the SHCC- Chapter 15	A motion was made and seconded to allow staff to update tables and need determinations as new and corrected data are received.	Mr. Foriest Mr. Griffin	Motion approved
Substance Abuse Inpatient and Residential Services (Chemical Dependency Treatment Beds) Petition: W & B Health Care Agency Recommendation	Mr. Baker stated one petition was received from W & B Health Care regarding the Substance Abuse Inpatient and Residential Services (Chemical Dependency Treatment Beds). As stated by the petitioner: "W & B Health Care, Inc is writing this letter to petition an adjustment to the need determination for a Substance Abuse Residential/Rehabilitation Treatment Facility in the Southeastern Regional area. Recently, W & B Health Care, Inc submitted a Letter of Intent to the Certificate of Need Division, in request to provide Substance Abuse Residential/Rehabilitation Treatment services in the Robeson County area." The petitioner requests an adjusted need determination due to unique or special attributes of this particular geographic area. The petition is incomplete as the petitioner has not quantified how many Adult Substance Abuse beds they are seeking, nor has the petitioner, at the request of the Agency, provided supporting information to document the necessity of the requested adjusted need determination. Since the petition is incomplete, there is a pattern of declining Adult Substance Abuse services bed need for the Southeastern Regional LME, evidence of a variety of types of Substance Abuse Services available within the region of North Carolina where Robeson County is located, the Agency recommends the petition be denied. A motion made and seconded to accept the Agency's recommendation to deny the petition. Dr. Pulliam asked if the Petitioner was present for discussion. The Petitioner was not present.		
Review of Updated Tables – Chapter 16	Mr. Baker presented updated Draft need projections and need determinations for Tables 16(C)-Child/Adolescent Services and stated there was currently a lack of need for Adult Services.	Mr. Parks Mr. Griffin	Motion approved
Recommendations to the SHCC- Chapter 16	A motion was made and seconded to allow staff to update tables and need determinations as new and corrected data are received.	Mr. Griffin Mr. Beaver	Motion approved
Intermediate Care Facilities (ICF-MR)	No Petitions or Comments were filed for this Chapter.		
Review of Updated Tables – Chapter 17	Mr. Baker presented updated Draft inventory for Tables 17A & 17B and stated the Agency position continues to be there is a lack of need for additional ICF/MR beds at this time.		

Agenda Items	Discussion/Actions	Motions	Recommendations/ Actions
Additional Data Request	A motion was made to allow staff and DHSR Mental Health Licensure Section to contact the NC Association of Community Based ICF/MR and CAP Service Providers to work together to obtain additional data from providers in order to establish baseline occupancy and patient origin data in future years via the Licensure Renewal Process.	Mr. Griffin Mr. Farmer	Motion approved
Recommendations to the SHCC- Chapter 17	A motion was made and seconded to allow staff to update tables and need determinations as new and corrected data are received.	Mr. Farmer Mr. Foriest	Motion approved
NC 2012 SMFP	Dr. Pulliam entertained a motion to allow staff to update narratives, tables, and need determinations for the publication of the recommended NC 2012 State Medical Facilities Plan as new and corrective data are received.	Ms. Tidwell Mr. Griffin	Motion approved
Other Business	Dr. Pulliam indicated that the Council will meet on September 28, 2011 at the Brown Building in room 104. Dr. Pulliam stated the committee dates for year 2012 are May 11, 2012 beginning at 1:00 p.m. and September 14, 2012 beginning at 10:00 a.m. He stated the meetings will be held at the Brown Building in room 104. There was no other business at this time.		
Adjournment	There being no further business, a motion was made and seconded to adjourn the meeting.	Mr. Farmer Mr. Griffin	Meeting adjourned.