

Long-Term and Behavioral Health Committee

May 30, 2012

Recommendations to the North Carolina State Health Coordinating Council

The Long-Term and Behavioral Health (LTBH) Committee met twice after the March Council meeting, first on April 13 and again on May 11.

The topics reviewed and discussed at the April 13 meeting included:

- Current Long-Term and Behavioral Health policies and methodologies.
- A petition, labeled as an Adult Care Home Demonstration Project, to offer an alternative for residents of Special Care Units with Alzheimer's disease.
- An adult care home petition requesting an adjustment to the service areas of Hyde County and Tyrrell County.
- Two petitions were received to amend the Home Health need methodology.
- Three petitions were received to amend the End-Stage Renal Disease need methodology.

The topics reviewed and discussed at the May 11 meeting included:

- Recommendation made by the LTBH Committee to approve the petition submitted by Hospice of Wake County, Inc./Horizons Home Care requesting to modify the home health agency need methodology by increasing the deficit threshold for a need determination, and corresponding placeholder, from 275 patients to 325 patients.
- Preliminary drafts of need projections generated by the standard methodologies.
- The need to form a work group to study the End-Stage Renal Disease methodologies.
- The new Local Management Entities (LME) maps demonstrating 23 LME's transitioning to 11 LME/MCO by January 2013.

Following is an overview of the Committee's recommendations for the Long-Term and Behavioral Health Services Chapters, chapters 10-17, of the Proposed 2013 State Medical Facilities Plan (SMFP). The report is organized by Chapter of the SMFP.

Chapter 10: Nursing Care Facilities

There were no petitions or comments related to this Chapter.

Recommendations Related to Nursing Care Facilities:

The Committee recommends the current assumptions and methodology be accepted for the Proposed 2013 Plan. In addition, references to dates would be advanced one year, as appropriate.

- The inventory has been updated based on available information to reflect any changes and includes placeholders when applicable. The inventory is subject to further changes.
- Application of the methodology based on data and information currently available results in no draft need determinations at this time. Need determinations are subject to change.

Chapter 11: Adult Care Homes

There were two petitions and one comment related to this Chapter.

Petition 1

Petitioner: Meridian Senior Living, LLC

Request: The petitioner, Meridian Senior Living, requests inclusion in the 2013 State Medical Facilities Plan (SMFP) of a special need determination for a multidisciplinary Adult Care Home demonstration project in Alexander County offering an alternative to psychiatric commitment for residents of Special Care Units with Alzheimer's disease who display violent behavior and who the petitioner states require supervision beyond which many Special Care Units in adult care homes can provide. Previous petitions for variations on this demonstration project were submitted to the State Health Coordinating Council (SHCC) in August 2010, March 2011 and August 2011.

Comments: No comments were received.

Committee Recommendation: The committee recommends denying this petition.

Petition 2

Petitioners: Meridian Senior Living, LLC; Hyde County Board of Commissioners; Tyrell County Board of Commissioners

Request: "This petition requests an adjustment to the service areas of Hyde County and Tyrell County to combine them into a single service area with regard to adult care home beds" that would "allow an adult care home to be built that would serve the residents of both counties and would be large enough to take advantage of economies of scale and therefore be financially feasible."

Comments: The North Carolina Northeast Commission submitted a comment in support of this petition.

Committee Recommendation: The committee recommends combining Hyde and Tyrell Counties into a single service area for the Adult Care Home methodology.

Recommendations Related to Adult Care Homes:

The Committee recommends the current assumptions and methodology be accepted for the Proposed 2013 Plan. In addition, references to dates would be advanced one year, as appropriate.

- The inventory has been updated based on available information to reflect any changes and includes placeholders when applicable. The inventory is subject to further changes.
- Application of the methodology based on data and information currently available results in the following draft need determinations at this time.
 - o Alexander County, 20 Adult Care Home beds
 - o Graham County, 20 Adult Care Home beds
 - o Polk County, 40 Adult Care Home beds
 - o Davidson County, 40 Adult Care Home beds
 - o Pamlico County, 30 Adult Care Home beds

Need determinations are subject to change.

Chapter 12: Home Health Services

There were two petitions and one comment related to this Chapter.

Petition 1

Petitioner: Hospice of Wake County, Inc., Horizons Home Care

Request: The petitioner, Hospice of Wake County, Inc., Horizons Home Care submitted a petition requesting to modify the home health agency need methodology by increasing the deficit threshold for need determination, and corresponding placeholder, from 275 patients to 325 patients.

Letter of Support: The Association for Home and Hospice Care of North Carolina submitted a comment in support of this petition.

Committee Recommendation: The committee recommends approving this petition.

Petition 2

Petitioner: Carolinas HealthCare System

Request: Carolina HealthCare System submitted a petition requesting to convene a work group to review the home health agency need methodology.

Comments: No comments were received.

Committee Recommendation: The committee recommends denying this petition.

Recommendations Related to Home Health Services:

The Committee recommends the current assumptions and methodology be accepted except as modified by recommended action on Petition 1 (affecting threshold and placeholder) for the Proposed 2013 Plan. In addition, references to dates would be advanced one year, as appropriate.

- The inventory has been updated based on available information to reflect any changes and includes placeholders when applicable. The inventory is subject to further changes.
- Application of the methodology based on data and information currently available results in the following draft need determinations at this time.

- o Forsyth County, 1 Home Health Agency or Office

Chapter 13: Hospice Services

There were no petitions or comments on this chapter.

Recommendations Related to Hospice Services:

The Committee recommends the current assumptions and methodology be accepted for the Proposed 2013 Plan. In addition, references to dates would be advanced one year, as appropriate.

- The inventory has been updated based on available information to reflect any changes and includes placeholders when applicable. The inventory is subject to further changes.

- Application of the methodologies based on data and information currently available results in the following draft need determinations at this time.
 - o Hospice Home Care:
 - Granville County, 1 office
 - Cumberland County, 1 office
 - o Hospice Inpatient:
 - McDowell County, 6 beds
 - Lincoln County, 6 beds
 - Mecklenburg County, 6 beds
 - Chatham County, 6 beds
 - Craven County, 8 beds
 - Onslow County, 7 beds

Need determinations are subject to change.

Chapter 14: End-Stage Renal Disease Dialysis Facilities

There were three petitions and one comment related to this Chapter.

Petition 1

Petitioner: Fresenius Medical Care, NA

Request: The petition requests the utilization standard for existing facilities be increased from 80 percent to 95 percent before new before new dialysis stations can be added. In addition, the petition seeks to increase the minimum size for a new dialysis facility from 10 to 12 stations, (or 45.6 patients at 3.8 patients per station).

Comments: Comments from DaVita, another major provider of dialysis in North Carolina, indicate that they are “categorically” opposed to requested changes to the dialysis need methodology as proposed in this petition.

Committee Recommendation: The committee recommends denying this petition.

Petition 2

Petitioner: Fresenius Medical Care, NA

Request: The petitioner, Fresenius Medical, requests isolation/separation stations be excluded from the dialysis station methodology, allowing existing and approved dialysis facilities to develop isolation/separation stations outside of the scope of Certificate of Need (CON). The petitioner also requests a database be compiled of all existing and approved dialysis providers to determine the number of isolation stations currently available in North Carolina.

Comments: Comments from DaVita indicated that all additions to hemodialysis stations are subject to Certificate of Need review.

Committee Recommendation: The committee recommends denying this petition.

Petition 3

Petitioner: Bio-Medical Applications of North Carolina, Inc.

Request: The Petition requests the methodology used for determining county need for new dialysis stations be amended by removing Veteran's Administration (VA) patients receiving treatment at VA dialysis clinics from the patient census data by county.

Comments: No comments were received.

Committee Recommendation: The committee recommends approving this petition.

Recommendations Related to End-Stage Dialysis Facilities:

The Committee recommends the current assumptions and methodologies be accepted for the Proposed 2013 Plan. Also, references to dates would be advanced one year, as appropriate.

The need for new dialysis stations is determined two times each calendar year. Determinations are made available in the North Carolina Semiannual Dialysis Report (SDR).

The Committee considered and approved changes to Chapter 14 narrative related to removing Veteran's Administration patients receiving dialysis treatments at VA dialysis clinics from the patient data by county that clarifies the substantive change recommended for the dialysis need methodology in the Proposed 2013 Plan.

The Committee decided not to establish a work group to consider further changes to the ESRD methodology for the Proposed 2014 Plan.

Chapter 15: Psychiatric Inpatient Services

There were no petitions or comments on this Chapter.

Recommendations Related to Psychiatric Inpatient Services:

The Committee recommends the current assumptions and methodology be accepted for the Proposed 2013 Plan. Also, references to dates would be advanced one year, as appropriate.

- The inventory has been updated based on available information to reflect any changes and includes placeholders when applicable. The inventory is subject to further changes.
- Application of the methodology based on data and information currently available results in the following draft need determinations at this time.
 - o Child Psychiatric Inpatient Beds:
 - Smoky Mountain LME-MCO, 5 beds
 - o Adult Psychiatric Inpatient Beds:
 - Durham/Wake/Johnston/ Cumberland LME-MCO, 12 beds
 - Eastern Coastal Care LME-MCO, 17 beds
 - Smoky Mountain LME-MCO, 26 beds

Need determinations are subject to change.

Chapter 16: Substance Abuse Inpatient & Residential Services (Chemical Treatment Beds)

There were no petitions or comments on this Chapter.

Recommendations Related to Substance Abuse Inpatient & Residential Services:

The Committee recommends the current assumptions and methodology be accepted for the Proposed 2013 Plan. In addition, references to dates would be advanced one year, as appropriate.

- The inventory has been updated based on available information to reflect any changes and includes placeholders when applicable. The inventory is subject to further changes.
- Application of the methodology based on data and information currently available results in the following draft need determinations at this time.
 - Child Substance Abuse Inpatient & Residential Service Beds:
 - Eastern Region, 2 beds
 - Central Region, 5 beds
 - Western Region, 13 beds
 - Adult Substance Abuse Inpatient & Residential Service Beds:
 - No draft need determinations at this time

Need determinations are subject to change.

Chapter 17: Intermediate Care Facilities for the Mentally Retarded

There were no petitions or comments on this Chapter.

Recommendations Related to Intermediate Care Facilities for the Mentally Retarded:

The Committee recommends the current assumptions and methodology be accepted for the Proposed 2013 Plan. Also, references to dates would be advanced one year, as appropriate.

- The inventory has been updated based on available information to reflect any changes and includes placeholders when applicable. The inventory is subject to further changes.
- Application of the methodology based on data and information currently available results in no draft need determinations at this time. Need determinations are subject to change.