



DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF HEALTH SERVICE REGULATION

ROY COOPER
GOVERNOR

MANDY COHEN, MD, MPH
SECRETARY

MARK PAYNE
DIRECTOR

December 28, 2017

Shirley Harkey
2700 Wayne Memorial Drive
Goldsboro, North Carolina 27534

No Review

Record #: 2464
Facility Name: Wayne Memorial Hospital
FID #: 933535
Business Name: Wayne UNC Health Care
Business #: 2734
Project Description: Redesignate the existing fixed cardiac catheterization equipment as existing angiography equipment and redesignate the existing angiography equipment as existing fixed cardiac catheterization equipment
County: Wayne

Dear Ms. Harkey:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency) received your letter December 18, 2017 regarding the above referenced proposal. Based on the CON law **in effect on the date of this response to your request**, the proposal described in your correspondence is not governed by, and therefore, does not currently require a certificate of need. However, please note that if the CON law is subsequently amended such that the above referenced proposal would require a certificate of need, this determination does not authorize you to proceed to develop the above referenced proposal when the new law becomes effective.

However, you need to contact the Agency's Construction Section and Acute and Home Care Licensure and Certification Section to determine if they have any requirements for development of the proposed project.

It should be noted that this determination is binding only for the facts represented in your correspondence. Consequently, if changes are made in the project or in the facts provided in your correspondence referenced above, a new determination as to whether a certificate of need is required would need to be made by this office. Changes in a project include, but are not limited

HEALTHCARE PLANNING AND CERTIFICATE OF NEED SECTION
WWW.NCDHHS.GOV
TELEPHONE 919-855-3873
LOCATION: EDGERTON BUILDING • 809 RUGGLES DRIVE • RALEIGH, NC 27603
MAILING ADDRESS: 2704 MAIL SERVICE CENTER • RALEIGH, NC 27699-2704
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to: (1) increases in the capital cost; (2) acquisition of medical equipment not included in the original cost estimate; (3) modifications in the design of the project; (4) change in location; and (5) any increase in the number of square feet to be constructed.

Please contact this office if you have any questions. Also, in all future correspondence you should reference the Facility ID # (FID) if the facility is licensed.

Sincerely,


Jane Rhoe-Jones
Project Analyst


Martha J. Frisone, Chief
Healthcare Planning and Certificate of Need Section

cc: Construction Section, DHSR
Acute and Home Care Licensure and Certification Section, DHSR
Sharetta Blackwell, Program Assistant, Healthcare Planning, DHSR

 **WAYNE**
UNC HEALTH CARE

December 18, 2017

Ms. Martha Frisone, Chief
Healthcare Planning and Certificate of Need Section
Division of Health Service Regulation
2704 Mail Service Center
Raleigh, NC 27699-2704



RE: Replacement of cardiac catheterization equipment with existing angiography equipment at Wayne Memorial Hospital

License #: HO257

FID #: 933535

Dear Ms. Frisone:

I am writing to inform you of Wayne Memorial Hospital's (WMH's) plans to permanently replace its existing fixed cardiac catheterization equipment with existing angiography equipment. The existing fixed cardiac catheterization equipment will be retained for use as angiography equipment. No equipment will be relocated or acquired as part of the project. Rather, the proposed project will only switch the designation of two existing pieces of equipment. As such, there are no capital costs associated with the project. Further, WMH will not at any time operate more than one cardiac catheterization lab.

WMH is an existing acute care hospital (see Attachment 1) in Goldsboro licensed to operate one cardiac catheterization lab. In the past, the equipment in the cardiac catheterization lab has failed and WMH has received permission from the Healthcare Planning and Certificate of Need Section to temporarily replace its existing fixed cardiac catheterization equipment with its existing angiography equipment until the cardiac catheterization equipment was repaired (see Attachment 2). The proposed project seeks to permanently replace its existing fixed cardiac catheterization equipment with existing angiography equipment.

WMH's existing fixed cardiac catheterization lab is a "grandfathered" lab acquired in the late 1980's. WMH's existing fixed angiography lab was acquired pursuant to Project ID # P-10228-13. As shown in Attachment 3, the existing units of equipment are functionally comparable. However, the existing fixed cardiac catheterization equipment is older and has failed multiple times recently resulting in canceled or delayed procedures for patients in need of cardiac catheterization. While both labs are located on the ground floor of the main hospital building of WMH and share reception, waiting, and pre/post procedure areas, the existing angiography lab is located adjacent to the pre/post procedure area while the existing cardiac catheterization lab is located further away requiring longer patient transport. As such, the proposed project will benefit cardiac catheterization patients by providing newer, more reliable equipment and greater proximity to support areas. The proposed project will have no effect on patient charges or operating expenses.

Sincerely,



Shirley Harkey
Senior Vice President
Operations

Attachments

Attachment 1

State of North Carolina

Department of Health and Human Services Division of Health Service Regulation

Effective January 01, 2017, this license is issued to

Wayne Memorial Hospital, Inc.

to operate a hospital known as

Wayne Memorial Hospital, Inc.

located in Goldsboro, North Carolina, Wayne County.

*This license is issued subject to the statutes of the
State of North Carolina, is not transferable and shall remain
in effect until amended by the issuing agency.*

Facility ID: 933535

License Number: H0257

Bed Capacity: 316

General Acute 255, Psych 61,

Dedicated Inpatient Surgical Operating Rooms: 1

Dedicated Ambulatory Surgical Operating Rooms: 2

Shared Surgical Operating Rooms: 10

Dedicated Endoscopy Rooms: 3

Authorized by:


Secretary, N.C. Department of Health and
Human Services




Director, Division of Health Service Regulation

Attachment 2



DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF HEALTH SERVICE REGULATION

ROY COOPER
GOVERNOR

MANDY COHEN, MD, MPH
SECRETARY

MARK PAYNE
DIRECTOR

November 22, 2017

Shirley Harkey
Wayne UNC Health Care
2700 Wayne Memorial Drive
Goldsboro, North Carolina 27534

Exempt from Review – Replacement Equipment

Record #: 2443
Facility Name: Wayne Memorial Hospital
FID #: 933535
Business Name: Wayne UNC Health Care
Business #: 2734
Project Description: Temporarily replace cardiac catheterization equipment with existing angiography equipment until cardiac catheterization equipment is repaired
County: Wayne

Dear Ms. Harkey:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency), determined that based on your correspondence of November 21, 2017, the above referenced proposal is exempt from certificate of need review in accordance with N.C. Gen. Stat. §131E-184(a)(7). Therefore, you may proceed to temporarily replace without a certificate of need the existing fixed cardiac catheterization equipment with the existing angiography equipment until the cardiac catheterization equipment is repaired.

Moreover, you need to contact the Agency's Acute and Home Care Licensure and Certification Section to determine if they have any requirements for development of the proposed project.

It should be noted that the Agency's position is based solely on the facts represented by you and that any change in facts as represented would require further consideration by this office and a separate determination. If you have any questions concerning this matter, please feel free to contact this office.

Sincerely,

Jane Rhoe-Jones
Jane Rhoe-Jones
Project Analyst

Martha J. Frisone
Martha J. Frisone
Chief, Healthcare Planning and
Certificate of Need Section

cc: Acute and Home Care Licensure and Certification Section, DHSR
Shareta Blackwell, Program Assistant, Healthcare Planning, DHSR

HEALTHCARE PLANNING AND CERTIFICATE OF NEED SECTION

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Attachment 3

Equipment Comparison Table

	Current Cath Lab Equipment	Current Anglo Lab Equipment
Type of Equipment	Angiography/Cath	Angiography/Cath
Manufacturer of Equipment	General Electric	Philips
Model Number	Innova 3100	FD20
Serial Number	544144BU2	7389
Specify if Mobile or Fixed	Fixed	Fixed
Date of Acquisition	06/02/2007	11/14/2016
Does WMH Hold Title to Equipment or Have Capital Lease?	WMH Owned	WMH Owned
Specify if Equipment Was/Is New or Used When Acquired	New	New
Fair Market Value of Equipment	\$121,446.40	\$839,594.61
Type of Procedures Performed on Equipment	Cardiac Cath/Vascular Procedures	Vascular Procedures