

ROY COOPER • Governor

MANDY COHEN, MD, MPH • Secretary

MARK PAYNE • Director, Division of Health Service Regulation

### VIA EMAIL ONLY

November 24, 2021

Catharine Cummer

Catharine.cummer@duke.edu

Exempt from Review – Replacement Equipment

**Record #:** 3747

Date of Request: November 17, 2021
Facility Name: Duke University Hospital

FID #: 943138

Business Name: Duke University Health System, Inc.

Business #: 640

Project Description: Replace existing cardiac catheterization equipment

County: Durham

Dear Ms. Cummer:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency), determined that the above referenced project is exempt from certificate of need review in accordance with G.S. 131E-184(f). Therefore, you may proceed to acquire without a certificate of need the Philips Azurion 7 M20 to replace the Philips Allura FD20. This determination is based on your representations that the existing unit will be sold or otherwise disposed of and will not be used again in the State without first obtaining a certificate of need if one is required.

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,

Kim Meymandi

Ku Meznandi

Project Analyst

Micheala Mitchell

Micheala Mitchell

Chief

cc: Construction Section, DHSR

Acute & Home Care Licensure & Certification Section, DHSR

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF HEALTH SERVICE REGULATION HEALTHCARE PLANNING AND CERTIFICATE OF NEED SECTION

LOCATION: 809 Ruggles Drive, Edgerton Building, Raleigh, NC 27603

MAILING ADDRESS: 809 Ruggles Drive, 2704 Mail Service Center, Raleigh, NC 27699-2704

https://info.ncdhhs.gov/dhsr/ • TEL: 919-855-3873



## Catharine W. Cummer

Regulatory Counsel, Strategic Planning

November 17, 2021

Via Electronic Mail

Ms. Micheala Mitchell
Ms. Lisa Pittman
Ms. Kimberly Meymandi
Healthcare Planning and Certificate of Need
Division of Health Service Regulation
2704 Mail Service Center
Raleigh, NC 27699-2704

Re: Exempt Replacement Project at Duke University Hospital

Dear Ms. Mitchell:

The purpose of this letter is to request the CON Section's written confirmation that the acquisition of a cardiac catheterization lab at Duke University Hospital satisfies the requirements under N.C.G.S. 131E-184(f) for "replacement equipment that exceeds the two million dollar (\$2,000,000) threshold set forth in G.S. 131E-176(22) if all of the following conditions are met:

- (1) The equipment being replaced is located on the main campus.
- (2) The Department has previously issued a certificate of need for the equipment being replaced. This subdivision does not apply if a certificate of need was not required at the time the equipment being replaced was initially purchased by the licensed health service facility.
- (3) The licensed health service facility proposing to purchase the replacement equipment shall provide prior written notice to the Department, along with supporting documentation to demonstrate that it meets the exemption criteria of this subsection.

As set forth below, we believe that Duke University Hospital's project meets these requirements and is exempt from certificate of need review.

## (1) Main Campus

The purpose of this project is to replace an existing cardiac catheterization located on the 7th floor of Duke North, which is part of the main building of Duke University Hospital. The "main campus" of the facility is defined in N.C.G.S. 131E-176(14n) to include both "[t]he site of the main building from which a licensed health service facility provides clinical patient services and exercises financial and administrative control over the entire facility, including the buildings and grounds adjacent to that main building" and "[o]ther areas and structures that are not strictly contiguous to the main building but are located within 250 yards of the main building."

In this case, Duke University Hospital is a licensed health service facility, and the main hospital building from which Duke University Hospital provides its clinical services and exercises financial and administrative control is the physically contiguous structure that includes Duke South, Duke North, the Duke Children's Hospital, the Duke Medicine Pavilion, the Morris Clinic, the Duke Cancer Center, the Wadsworth Building, and the Hudson Building.

## (2) Previous Certificate of Need

Duke University Hospital currently operates seven cardiac catheterization labs including the two labs that will be replaced (excluding hybrid OR equipment). The CON for Project J-5327-86 documents that Duke was previously approved to operate eight cardiac catheterization labs. In 2004, DUH was approved to replace a cardiac lab with a bi-plane vascular system, leaving the number of cath labs at seven (see August 2, 2004 correspondence). While there have been replacements of the approved cath labs over time, Duke University Hospital has continued to operate a total of seven cath labs.

## (3) Replacement equipment

The equipment qualifies as replacement equipment pursuant to the existing statutory and regulatory definitions. A completed Equipment Comparison form is enclosed. Both the existing equipment and the replacement equipment provide cardiac catheterization procedures. The total project cost exceeds \$2,000,000 reflecting equipment and installation expenses. Copies of the equipment quotations are available upon request. Duke will not acquire any other major medical equipment or develop any other new institutional health services other than those described in Section 131E-176(16)(b). Upon installation of the replacement equipment, the existing equipment will be taken out of service in the state.

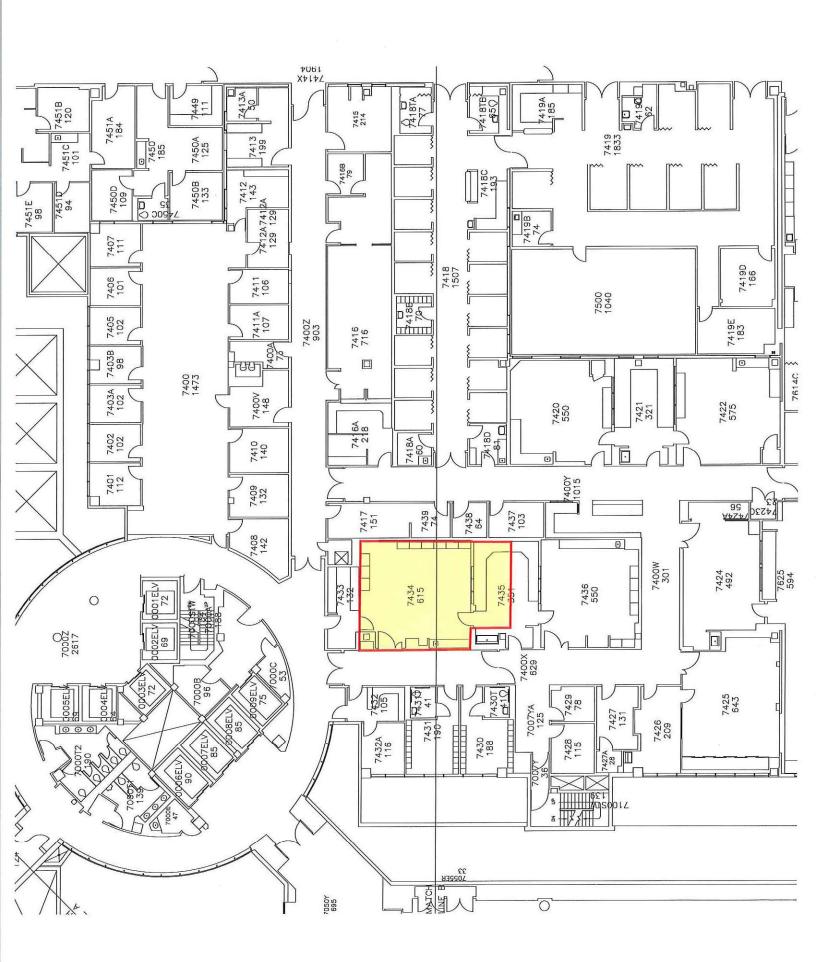
Thank you for your attention to this request. If you have questions about this information, please let me know.

Very truly yours,

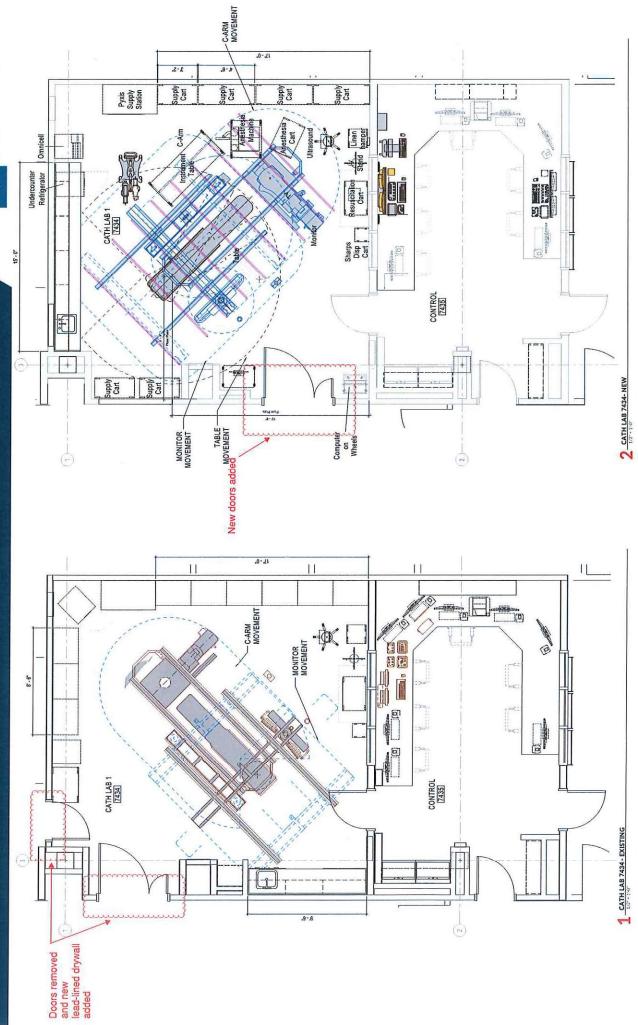
Catharine W. Cummer

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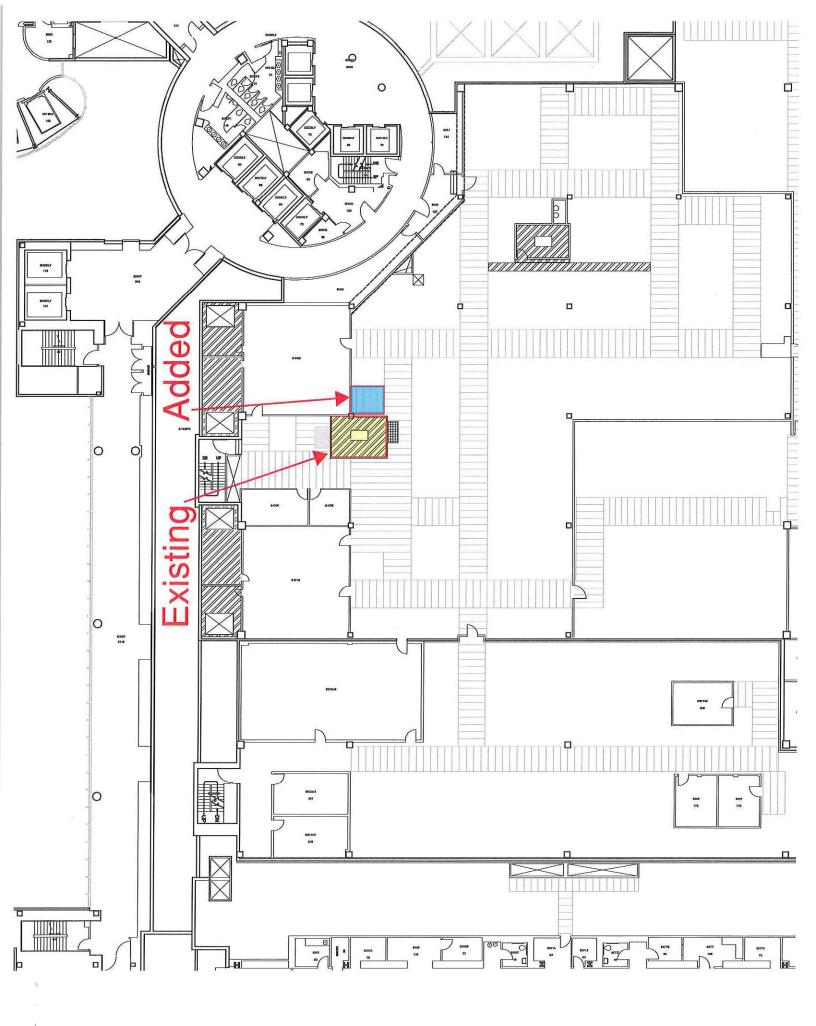
**Enclosures** 











PARTIAL EIGHTH FLOOR PLANS - EP & CATH LABS

# **EQUIPMENT COMPARISON**

|  | EXISTING EQUIPMENT   | REPLACEMENT EQUIPMENT  |
|--|--|--|
| Type of Equipment  | Cath Lab   | Cath Lab   |
| Manufacturer of Equipment  | Philips  | Philips  |
| Tesla Rating for MRIs  | NA   | NA   |
| Model Number   | Allura FD 20   | Azurion 7 M20  |
| Serial Number  | 591  | NA   |
| Provider's Method of Identifying Equipment   | Cath I   | Cath I   |
| Specify if Mobile or Fixed   | Fixed  | Fixed  |
| Mobile Trailer Serial Number/VIN #   | NA   | NA   |
| Mobile Tractor Serial Number/VIN #   | NA   | NA   |
| Date Acquired  | Feb 8, 2008  | NA   |
| Does Provider Hold Title to Equipment or Have a Capital Lease?   | Owned  | Owned  |
| Specify if Equipment Was/Is New or Used When Acquired  | New  | New  |
| Total Capital Cost of Project (Including Construction, etc.) <use attached="" form=""></use>   | NA   | \$3,083,000.00   |
| Total Cost of Equipment  | \$1,186,040.82   | \$1,093,642.34   |
| Fair Market Value of Equipment   | NA   | \$1,093,642.34   |
| Net Purchase Price of Equipment  | NA   | \$1,093,642.34   |
| Locations Where Operated   | Duke University Hospital   | Duke University Hospital   |
| Number of Times Existing Equipment was Used to Provide a Health Service during the 12 months prior to the Date of the Written Notice | 1,073  | NA   |
| Type of Procedures Currently Performed on Existing Equipment   | R/L Heart Caths, Coronary Angiography and Stents, Biopsy, Peripheral Arteriogram, Peripheral Artery Angioplasty and Stents, IABP | NA   |
| Type of Procedures New Equipment is Capable of Performing  | NA   | R/L Heart Caths, Coronary<br>Angiography and Stents,<br>Biopsy, Peripheral<br>Arteriogram, Peripheral Artery<br>Angioplasty and Stents, IABP |

Date of last revision: 12/4/2020

From: Catharine Cummer
To: Waller, Martha K

**Subject:** [External] Equipment replacement notice -- Duke University Hospital

Date: Wednesday, November 17, 2021 3:40:04 PM

Attachments: To State Exemption Notice DUH Cardiac Cath replacement 2021.pdf

Replacement Equipment Comparison Form -- DUH Cath Lab 1.docx

DUH Cath Lab 1 replacement plans.pdf

**CAUTION:** External email. Do not click links or open attachments unless you verify. Send all suspicious email as an attachment to <a href="Report Spam">Report Spam</a>.

## Martha,

I hope you're doing well! Attached please find an equipment exemption notice and accompanying exhibits. Please let me know if you have any questions. Thank you!

#### Catharine

#### Catharine Cummer

Regulatory Counsel, Strategic Planning, Duke University Health System 3100 Tower Blvd, Suite 1300, Durham NC 27707 <a href="mailto:catharine.cummer@duke.edu">catharine.cummer@duke.edu</a> | DukeHealth.org | (919) 668-0857 (office) | (919) 423-6928 (cell)





In support of Duke Health's values, I stand for Black lives and against systemic racism.