Technology and Equipment Committee

Recommendations to the North Carolina State Health Coordinating Council

May 26, 2010

The Technology and Equipment Committee has met once since the March Council meeting, on May 12th.

At the May 12th meeting the Committee:

- Reviewed and discussed standard methodologies;
- Reviewed and discussed draft tables for equipment types; and
- Reviewed and discussed preliminary drafts of need projections resulting from the standard methodologies and data and information available at the time.

The Committee received one petition, which was withdrawn prior to the Committee meeting, and no comments. Following is a report of the Committee's recommendations for Chapter Nine of the Proposed 2011 State Medical Facilities Plan (SMFP).

Lithotripsy

- The Committee reviewed and discussed standard methodologies and assumptions for the Lithotripsy section of the <u>Proposed 2011 SMFP</u>, as well as draft tables, noting that there is no need at this time for additional lithotripters anywhere in the state.
- The Committee recommends acceptance of lithotripsy assumptions and methodologies for the <u>Proposed 2011 SMFP</u>, and to advance references to years by one as appropriate.

Gamma Knife

- The Committee reviewed and discussed standard methodologies and assumptions for the Gamma Knife section of the <u>Proposed 2011 SMFP</u>, noting that there is no need at this time for an additional gamma knife anywhere in the state.
- The Committee recommends acceptance of gamma knife assumptions and methodologies for the <u>Proposed 2011 SMFP</u>, and to advance references to years by one as appropriate.

Linear Accelerator

- The Committee reviewed and discussed standard methodologies and assumptions for the Linear Accelerator section of the <u>Proposed 2011 SMFP</u>, noting that there is no need at this time for additional linear accelerators anywhere in the state.
- The Committee reviewed draft tables, including Table 9D, which contains CPT codes and ESTV values for procedures on the data collection form.
- The Committee recommends acceptance of the linear accelerator assumptions and methodologies for the <u>Proposed 2011 SMFP</u>, and to advance references to years by one as appropriate.

Technology and Equipment Committee Report State Health Coordinating Council 05/26/2010

Positron Emission Tomography (PET) Scanners

- The Committee reviewed and discussed standard methodologies and assumptions for the PET scanners section of the <u>Proposed 2011 SMFP</u>, as well as draft tables, noting that there is no need at this time for additional PET scanners anywhere in the state.
- The Committee recommends acceptance of the PET scanners assumptions and methodologies for the <u>Proposed 2011 SMFP</u>, and to advance references to years by one as appropriate.

Magnetic Resonance Imaging (MRI) Scanners

- The Committee reviewed the Agency recommendation about service areas for MRI scanners and cardiac catheterization equipment. The Committee recommends the continued use of the Acute Care Bed Service Areas for MRI scanners and cardiac catheterization equipment. The Committee further recommends that the following language be added at the end of Step 4 of the MRI methodology in the <u>Proposed 2011 SMFP</u>: "If procedures are provided in a county that is part of more than one MRI Service Area, the procedures will be divided equally between the Service Areas."
- The Committee reviewed and discussed standard methodologies and assumptions, as well as draft tables, for the MRI section of the <u>Proposed 2011 SMFP</u>.
- The standard methodology and data available at the time of the Committee meeting resulted in need determinations for fixed MRI scanners in Gaston, Mecklenburg and Pitt/Greene service areas. There is no need for additional fixed MRI scanners anywhere else in the state for the <u>Proposed 2011 SMFP</u>. There is no need for additional mobile MRI scanners anywhere in the state for the <u>Proposed 2011 SMFP</u>.

Cardiac Catheterization Equipment

- As noted above in the MRI section, the Committee recommends the continued use of Acute Care Bed Service Areas for cardiac catheterization equipment. The Committee further recommends that the following language be added at the end of Step 2 of the cardiac catheterization equipment methodology in the <u>Proposed 2011 SMFP</u>: "If procedures are provided in a county that is part of more than one Cardiac Catheterization Equipment Service Area, the procedures will be divided equally between the Service Areas."
- The Committee reviewed and discussed standard methodologies and assumptions for the Cardiac Catheterization Equipment section of the <u>Proposed 2011 SMFP</u>, as well as draft tables, noting that there is no need at this time for additional Cardiac Catheterization Equipment anywhere in the state.
- The Committee recommends acceptance of the Cardiac Catheterization Equipment assumptions and methodologies for the <u>Proposed 2011 SMFP</u>, and to advance references to years by one as appropriate.

In other business, the Committee authorized staff to update narratives, tables and need determinations for the <u>Proposed 2011 SMFP</u> as new and updated data is received.