

Long-Term and Behavioral Health Committee

September 24, 2010 Council Bldg. Room 201 10:00 am

MEMBERS PRESENT: Dr. T.J. Pulliam – Chair, Jerry Parks-Vice-Chair (via phone), Don Beaver (via phone), Senator Anthony Foriest, Ted Griffin, Zach Miller, Pam Tidwell (via phone) MEMBERS ABSENT: Johnnie Farmer STAFF PRESENT: Patrick Baker, Dr. Carol Potter, Elizabeth Brown

DHSR STAFF PRESENT: Craig Smith, Angie Matthes

Standing Agenda	Discussion	Motion/ Seconded	Recommendations/ Actions
Welcome & Announcements	Dr. Pulliam welcomed members and guests. Dr. Pulliam stated Jerry Parks, Don Beaver and Pam Tidwell are unable to attend the meeting in person, and are joining us via phone.		
	Dr. Pulliam stated the purpose of the meeting today was to review Petitions and comments received in response to the Proposed 2011 State Medical Facilities Plan. Dr. Pulliam stated per direction of the Chair of the SHCC, the meeting is open to the public, but due to nature of agenda, deliberations and recommendations are limited to the members of the LT/BH Subcommittee, in order to respect the process of the SHCC.		
Review of Executive Order No. 10: Ethical Standards for the State Health Coordinating Council	Dr. Pulliam reviewed Executive Order No.10, "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.		•
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 on Council and any financial benefits they or members of their families may have with any item on today's agenda. Mr. Don Beaver recused from voting on the Brookdale petition.		

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Approval of minutes from the May 14, 2010 meeting	A motion was made to accept the May 14, 2010 meeting minutes.	Mr. Griffin Senator Foriest	Motion approved
Nursing Care Facilities	Mr. Baker stated the agency received one petition regarding the Nursing Care Facilities. Mr. Baker presented the Agency Report - Brookdale Senior Living Petition. The Agency recommended to approve the petition due to bed deficit analysis of Wake County continuing to grow over the past number of years, current average occupancy rate and utilization of facilities within Wake County, and increasing population of the two age groups with the highest use of nursing care beds continuing to increase in Wake County.		
Petition: Brookdale Senior Living	Brookdale Senior Living petition requesting an adjustment in the need determination for nursing care beds, such that Table 10C in the 2011 State Medical Facilities Plan would be adjusted to reflect a need for 240 beds in Wake County.		
	A motion was made and seconded to accept the Agency's recommendation to approve the petition from Brookdale Senior Living, for Wake County.	Ms. Tidwell Senator Foriest	Motion approved
Review of updated tables for Chapter 10	Mr. Baker presented updated Draft need projection & need determination Tables 10B & 10C. Mr. Baker discussed the systematic review and verification process incorporated once he took over responsibility for the Chapter in mid-July. Mr. Baker discussed his review of utilization information, Licensure Renewal Applications, inventory updates from Providers and database historical review process, which resulted in the updated information.		
Development of recommendations to the SHCC regarding Nursing Care Facilities	A motion was made and seconded to recommend approval of the Nursing Care Facilities policies, assumptions, methodology and need determinations for the final Plan and to allow staff to update tables and need determinations for the Final State Medical Facilities Plan as new and corrected data is received.	Mr. Griffin Senator Foriest	Motion approved
Adult Care Homes	Mr. Baker stated the agency received one petition regarding the Adult Care Homes. Mr. Baker presented the Agency Report-Meridian Senior Living Petition. The Agency acknowledged a need for additional study and analysis of services available to people with Alzheimer's disease whose disorder involves violent and disruptive behaviors; however, conduct of such a demonstration project requires significant preparation as well as investigation into the implications for the adult care bed methodology. Mr. Baker stated based on potential change to methodology for this type of petition, the Agency recommended to deny the petition due to the deadline had passed for submission of such petitions, (spring 2010, versus summer of 2010).		

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Petition: Meridian Senior Living	Meridian Senior Living petition requesting an adjustment for an inclusion of a special need determination for a 50 Bed Adult Care Home Demonstration Project for Alexander County.		
	A motion was made and seconded to accept the Agency's recommendation to deny the petition from Meridian Senior Living, for Alexander County.	Mr. Beaver Mr. Parks	Motion approved
Comments related to Adult Care Homes Chapter – Phillip Brosseau	Committee reviewed comment (separate from petition) from Phillip Brosseau re: current methodology not calculating/projecting need for ACH beds for patients with Alzheimer's, (rather, need based on utilization of beds by age groups per county—not diagnosis, or level of acuity or type of acuity per age group and county).		
	Dr. Pulliam asked Mr. Baker if there had been updates to any Tables for this Chapter of the State Medical Facilities Plan. Mr. Baker stated there were no updates at this time.		
Development of recommendations to the SHCC regarding Adult Care Homes	A motion was made and seconded to recommend approval of the Adult Care Home policies, assumptions, methodology and need determinations for the final Plan and to allow staff to update tables and need determinations for the Final State Medical Facilities Plan as new and corrected data is received.	Senator Foriest Mr. Miller	Motion approved
Home Health Services	Dr. Potter stated the agency did not receive any petitions or comments regarding Home Health Services.		
	Dr. Potter reviewed table 12-B with the committee members concerning updates of data. Dr. Potter stated based on the standard methodology and updating of the data, there were three counties with need determinations for Medicare-certified Home Health Offices, Guilford – one; Mecklenburg – two and Cabarrus – one. Additionally, for Wake County, due to updates in placeholders being applied, there was, at this time, no longer a need determination for Wake County.		
Development of recommendations to the SHCC regarding Home Health Services	A motion was made and seconded to recommend approval of the Home Health policies, assumptions, methodology and need determinations for the final Plan and to allow staff to update tables and need determinations for the Final State Medical Facilities Plan as new and corrected data is received.	Mr. Parks Ms. Tidwell	Motion approved
Hospice Services	Dr. Potter stated the six Hospice petitions are located together under one Agency Report.		
Petition: Crystal Coast Hospice House	Crystal Coast Hospice House petition requesting an adjustment in the need determination for six additional hospice inpatient beds for Carteret County. Dr. Potter stated that due to lack of hospice inpatient facilities in Carteret County, population demographics, increasing utilization of hospice services in surrounding counties and topographical size and travel issues across the county, the Agency recommends approving six beds for Carteret County.		
	determination for six additional hospice inpatient beds for Carteret County. Dr. Potter stated that due to lack of hospice inpatient facilities in Carteret County, population demographics, increasing utilization of hospice services in surrounding counties and topographical size and travel issues across the county, the Agency recommends	Mr. Griffin	Motion appro

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	six additional hospice inpatient beds for Carteret County.	Mr. Beaver	
Petition: Gordon Hospice House/Hospice of Iredell County	Gordon Hospice House/Hospice of Iredell County petition requesting an adjustment in the need determination for six additional hospice inpatient beds for Iredell County. Dr. Potter stated due to Provider reporting they are operating at 100 percent capacity, previous deficit of three beds in Iredell County under past methodology, while current methodology displays no need, and considering 100 percent current occupancy and continued increase in days of care, the Agency recommends approving three beds for Iredell County.		
	A motion was made and seconded to accept the Agency's recommendation for approval for three of the six additional hospice inpatient beds for Iredell County.	Ms. Tidwell Senator Foriest	Motion approved
Petition: Hospice of Cleveland County	Hospice of Cleveland County petition requesting an adjustment in the need determination for one additional hospice inpatient bed for Cleveland County. Dr. Potter stated due to increasing utilization the last three years and current utilization of over 100 percent of existing inpatient beds and waiting list of patients in skilled nursing facilities who were denied access due to Medicare regulations prohibiting hospice services to patients residing in skilled facilities, the Agency recommends approving 1 bed for Cleveland County.		
	A motion was made and seconded to accept the Agency's recommendation to approve one additional hospice impatient bed for Cleveland County.	Senator Foriest Mr. Beaver	Motion approved.
Petition: Hospice of the Piedmont	Hospice of the Piedmont County petition requesting an adjustment in the need determination for six additional hospice inpatient beds for Guilford County. Dr. Potter stated due to opposite physical site locations of the two hospice service providers (southwest Guilford County provider operating a lower occupancy and below 85 percent threshold and northeast Guilford County provider now operating at 100 percent occupancy), and increasing days of care the past several years, the Agency recommends approving four beds for Guilford County.		
	Dr. Pulliam stated a review of comment letters from a number of Triad area Hospice Providers supported this petition.		
	A motion was made and seconded to accept the Agency's recommendation to approve four of the six hospice inpatient beds for Guilford County.	Mr. Griffin Senator Foriest	Motion approved
Petition: Hospice of Wilson	Hospice of Wilson County petition requesting an adjustment in the need determination		

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County	for three additional hospice inpatient beds for Wilson County. Dr. Potter stated presently there is a lack of hospice inpatient beds in Wilson County; however, due to a previous need determination in 2009 which resulted in no applications, current utilization data displaying no need determinations per the current methodology, and utilization of hospice facilities (residential and inpatient) in counties surrounding Wilson County by Wilson County residents decreasing since 2007, the Agency recommends denial of the petition.		
	Ms. Tidwell asked if there was increased utilization in surrounding counties (non-Wilson County residents). The information was not immediately available at the meeting.		
	A motion was made and seconded to accept the Agency's recommendation to deny the petition for Wilson County.	Mr. Parks Mr. Beaver	Motion approved
Petition: Lower Cape Fear Hospice	Lower Cape Fear Hospice petition requesting an adjustment in the need determination for six additional hospice inpatient beds for New Hanover County. Dr. Potter stated due to utilization increasing in 2008 from 99 percent to over 100 percent annualized for 2010 and increase in contracted days and days of care to meet need, the Agency recommends approving 6 beds for New Hanover County.		
	A motion was made and seconded to accept the Agency's recommendation for approval of six additional hospice inpatient beds for New Hanover County.	Senator Foriest Ms. Tidwell	Motion approved
Comments related to Hospice Services Chapter – Peter Brunnick	Dr. Potter reviewed Mr. Brunnick's comments re: need for additional inpatient hospice beds in Mecklenburg County.		
	Dr. Pulliam asked Dr. Potter if there had been updates to any Tables for this Chapter of the State Medical Facilities Plan. Dr. Potter stated there was an update concerning Craven County; no applications were received for the 2010 SMFP CON need determination of seven beds, per GEN-1 policy placeholder was taken out, now resulting in a need determination of six beds for the 2011 SMFP.		
Development of recommendations to the SHCC regarding Hospice Services	A motion was made and seconded to recommend approval of the Hospice assumptions, methodology and need determinations for the final Plan and to allow staff to update tables and need determinations for the Final State Medical Facilities Plan as new and corrected data is received.	Senator Foriest Mr. Miller	Motion approved
End-Stage Renal Disease Dialysis Facilities	Dr. Potter stated last Semi-Annual Dialysis Report was posted online in July 2010 with next Semi-Annual Report to be posted online January 1, 2011. Dr. Potter stated no Petitions or Comments were filed for this Chapter and need determinations were identified within the July 2010 posted report.		

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Development of recommendations to the SHCC regarding End-Stage Renal Dialysis Facilities		Mr. Griffin Senator Foriest	Motion approved
Mental Health Chapters 15, 16, & 17 LME Coverage Area Changes	 Mr. Baker reviewed LME Coverage Area Map changes as instituted by the Division of Mental Health, Development Disabilities & Substance Abuse Services. Mr. Baker stated these changes would be further identified in a review of Chapters 15, 16 & 17 proposed changes due to changes in LME coverage areas and resulting updates in Tables and data within these three Chapters based on this change. Senator Foriest asked when LME's merge, how important is it to merge with an LME beside them and what are the requirements based on service complaints and assurances that services are not affected by this change? Senator Foriest stated he understands dollars are involved, but has heard of service problems as reported to the Legislature. Senator Foriest stated due to these changes, he requested some assurances from somebody that these changes are working towards the goal of improved mental health services. Mr. Baker responded by stating the implemented LME changes and evaluation of mental health services is completed by the Division of Mental Health. The Division of Mental Health's goal continues to have mental health services available locally and this goal has resulted in numerous organization changes he has been aware of since coming on board with the State of North Carolina. Mr. Baker stated his Section does not have the specific data to directly answer the Senator's questions since these issues are managed directly by the Division of Mental Health. Dr. Pulliam stated any changes brought forward from staff re: the process of identifying changes and appropriately applying them to the SMFP, results in better planning. Ms. Brown stated the Senator's questions should be directed to the Secretary of the Department of Health. 		
Psychiatric Inpatient Services	No Petitions or Comments were filed for this Chapter. Mr. Baker presented updated proposed need projection & need determination Tables 15B Part 1, 15 B Part 2, 15 C1 and 15 C2. Mr. Baker explained all changes were based on LME coverage changes implemented by the Division of Mental Health.		

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Development of recommendations to the SHCC regarding Psychiatric Inpatient Services		Mr. Parks Mr. Beaver	Motion approved
Substance Abuse Inpatient and Residential Services (Chemical Dependency Treatment Beds)	No Petitions or Comments were filed for this Chapter. Mr. Baker presented the updated proposed need projection & need determination Tables 16B, 16C & 16D. Mr. Baker explained all changes were based on LME coverage changes implemented by the Division of Mental Health, per the grouping of LME's per each of the Mental Health Planning regions for this Chapter.		
Development of recommendations to the SHCC regarding Substance Abuse Inpatient and Residential Services (Chemical Dependency Treatment Beds)	A motion was made and seconded to allow staff to implement proposed LME changes and to recommend approval of the Substance Abuse Inpatient and Residential Services policies, assumptions, methodology and need determinations for the final Plan and to allow staff to update tables and need determinations for the Final State Medical Facilities Plan as new and corrected data is received.	Senator Foriest Mr. Miller	Motion approved
Intermediate Care Facilities (ICF- MR) for the Mentally Retarded.	No Petitions or Comments were filed for this Chapter. Mr. Baker presented proposed changes to Tables 17A, 17B & 17C. Proposed changes concerning LME coverage area changes and Thomas S. Bed Inventory funding changes as implemented by the Division of Mental Health. Proposed changes of historical data proposed by the Division of Health Service Regulation.		
Development of recommendations to the SHCC regarding Intermediate Care Facilities (ICF- MR) for the Mentally Retarded	A motion was made and seconded to recommend acceptance of the Intermediate Care Facilities policies, assumptions and methodology for the Final 2011 State Medical Facilities Plan and to allow staff to implement all proposed changes and update tables and need determinations for the Final State Medical Facilities Plan as new and corrected data is received.	Mr. Griffin Senator Foriest	Motion approved
Other Business	Dr. Pulliam indicated that the Council will meet on October 13, 2010 at the McKimmon Center in Raleigh and the Committee will meet on Friday, May 13 and Friday, September 16, 2010. There was no other business at this time.		
Adjournment	There being no further business, a motion was made and seconded to adjourn the meeting.	Senator Foriest Mr. Miller	Meeting adjourned.