# Technology and Equipment Committee Report Recommendations to the North Carolina State Health Coordinating Council October 3, 2012

On September 19, 2012, the Technology and Equipment Committee met to consider petitions and comments in response to Chapter 9 of the North Carolina Proposed 2013 State Medical Facilities Plan (SMFP). Materials related to this report are included in the material that has been posted to the North Carolina Division of Health Service Regulation's website for this October 3, 2012 State Health Coordinating Council (SHCC) Meeting. The following is an overview of the Committee meeting and recommendations for consideration by the SHCC in preparation for the Technology and Equipment chapter of the NC 2013 SMFP.

# **Chapter 9: Technology and Equipment**

# Cardiac Catheterization Equipment Section

Since the Proposed 2013 SMFP, there have been no changes in need projections for cardiac catheterization equipment. The Proposed 2013 SMFP showed one need determination for an additional fixed unit of cardiac catheterization equipment in the Craven/Jones/Pamlico Service Area, but did not show a need determination for shared fixed cardiac catheterization or mobile cardiac catheterization equipment anywhere else in the state.

## Cardiac Catheterization Data:

During the summer, two petitions for adjusted need determinations and one petition to change the language in the 2013 SMFP were received during the public comment period regarding cardiac catheterization equipment. The petitioner requests and Committee recommendations are summarized below.

# Petitioner 1: Carteret County General Hospital (Carteret General)

- <u>**Request:**</u> Carteret County General Hospital (Carteret General) requested an adjusted need determination for one additional unit of shared fixed cardiac catheterization equipment in Carteret County in the 2013 SMFP.
- <u>Committee Recommendation</u>: The Committee discussed the petition and agency report, which recommended approval of the petition request. The concurrence was that Carteret County has a sufficient number of cardiac patients in need of cardiac catheterization services, a geographically isolated population, support from regional resources and a local health system available to support a shared fixed cardiac catheterization laboratory. Comments from the committee recognized the regional coordination and collaboration of the healthcare providers. The Committee recommends to the SHCC that the petition request be approved for an adjusted need determination for one unit of shared fixed cardiac catheterization equipment in Carteret County.

# **Petitioner 2: Johnston Health**

- <u>**Request**</u>: A petition from Johnston Health requested a change in the 2013 SMFP to include language to enable a change in the Certificate of Need (CON) rules to allow for the provision of interventional cardiac catheterization services in facilities that do not provide open heart surgery.
- <u>Committee Recommendation</u>: The Committee discussed the petition and agency report, which recommended denial of the petition request. The discussion included recognition of the fact that the appropriate mechanism for recommending changes in administrative rules is to submit a petition to the Director of the Division of Health Service Regulation. Members of this committee expressed the desire to present a unanimous voice of concern to the full SHCC about the issue brought forth in the petition of the need to change the rule to more appropriately reflect new guidance and standards of care in dealing with Percutaneous Coronary Intervention (PCI) without surgical back-up. The discussion included concerns about the length of time the process takes to change a rule. Minutes will reflect that the committee agreed that further discussion and action needs to take place to enable the rule change. However, the request of the petition was determined not to be the appropriate method to initiate that change. The Committee recommends to the SHCC for denial of the petition to change the language of the 2013 SMFP.

# Petitioner 3: Southeastern Regional Medical Center (SRMC)

- <u>**Request**</u>: Southeastern Regional Medical Center (SRMC) requested an adjusted need determination for one additional unit of fixed cardiac catheterization equipment in Robeson County.
- <u>Committee Recommendation</u>: The Committee discussed the petition and agency report, which recommended approval of the petition request. Members acknowledged the unique circumstances that support the need for a second unit of cardiac catheterization due to demand, demographics of the county and the lack of backup for emergency cases of cardiac catheterization for the open heart surgery provider. The Committee recommends to the SHCC approval of the petition for an adjusted need determination for one additional unit of fixed cardiac catheterization equipment in Robeson County.

## Linear Accelerator Section

Since the Proposed 2013 SMFP, there have been no changes in need projections for linear accelerators. There is no need indicated anywhere in the state for additional linear accelerators.

# Linear Accelerator Data:

One petition for an adjusted need determination was received during the public comment period regarding linear accelerators. The petitioner request and Committee recommendation is summarized below.

## Petitioner: Duke University Health Systems dba Duke Raleigh Hospital

• <u>**Request**</u>: Duke Raleigh Hospital requested an adjusted need determination for one additional linear accelerator to meet a perceived unmet need in Service area 20 (Wake, Franklin and Harnett Counties).

• <u>Committee Recommendation</u>: The Committee discussed the petition and agency report, which recommended denial of the petition request. The discussion included an update on one CON approved linear accelerator that was approved on February 2011 but has not been developed. This project is still on target to become operational in early 2014. The linear accelerator standard methodology demonstrates that the current inventory, including the CON approved linear accelerator to be developed, is providing sufficient access to linear accelerator services in Service Area 20. The Committee recommends to the SHCC that the petition request be denied for one additional linear accelerator in Service Area 20.

## Positron Emission Tomography (PET) Scanners Section

Since the Proposed 2013 SMFP, there have been no changes in the need projections for PET scanners. There is one need determination for a fixed PET scanner in HSA II as demonstrated in the Proposed 2013 SMFP. There is no need identified for additional mobile dedicated PET scanners anywhere in the state.

The Committee received no petitions but did receive comments over the summer regarding the PET scanner section of the 2013 SMFP. The Committee is not required to act upon comments but did discuss the issues brought forth in the comments. The discussion included comments on the capacity for mobile and fixed PET scanners as well as general comments on the methodology. No motion was required or taken on the comments.

#### Lithotripsy Section

Since the Proposed 2013 SMFP, there have been no changes in the need projections for lithotripsy. There is no need identified for lithotripters anywhere else in the state. The Committee received no petitions or comments over the summer regarding the lithotripsy section of the NC 2013 SMFP.

## Gamma Knife Section

Since the Proposed 2013 SMFP, there have been no changes in the need projections for gamma knife. There is no need identified for gamma knife equipment anywhere else in the state. The Committee received no petitions or comments over the summer regarding the Gamma Knife section of the NC 2013 SMFP.

## Magnetic Resonance Imaging (MRI) Section

#### MRI Scanner Data:

Since the Proposed 2013 SMFP, the Medical Facilities Planning Branch received updated data resulting in two corrections to the MRI scanner inventory table. The changes did not add any MRI scanners to the inventory, increase the total number of MRI scans performed in FY 2011, or result in a projected need determination anywhere in the state. The Committee discussed the updated MRI scanner table, and noted there are no need determinations for fixed or mobile MRI scanners anywhere in the state. The Committee received no petitions or comments over the summer on the MRI Scanner section of the SMFP.

## **Other Action**

The Committee recommends to the State Health Coordinating Council approval of Chapter 9: Technology and Equipment with the understanding that staff is authorized to continue making necessary updates to the narratives, tables and need determinations as indicated.