Current wording in Chapter 16 of the North Carolina 2014 State Medical Facilities Plan, page 395 (*excerpt only*):

Application of the Methodology

A chemical dependency treatment bed's service area is the mental health planning region in which the bed is located. The local management entities-managed care organizations comprising the three mental health planning regions are listed in Table 16B. The counties comprising each of the 23 local management entity-managed care organization catchment areas for mental health, developmental disabilities, and substance abuse services are listed in Table 15B Part 1 & Part 2. Each step explained below is applied individually to the 23 mental health local management entities-managed care organizations, and then bed surpluses/deficits in the local management entities-managed care organizations are combined to arrive at the total surpluses/deficits for the three mental health planning regions. Treatment utilization data from acute care and specialty hospitals and from residential treatment facilities were incorporated into the methodology.

Staff proposes the additional clarifying language, which is shaded and in bold print:

Application of the Methodology

A chemical dependency treatment bed's service area is the mental planning region in which the bed is located. The local management entities-managed care organizations (LME-MCOs) comprising the three mental health planning regions are listed in Table 16B. The counties comprising each of the 23 local management entity-managed care organization **LME-MCO** catchment areas for mental health, developmental disabilities and substance abuse services are listed in Table 15 B Part 1 & Part 2. Two LME-MCOs are divided into separate service areas for the purposes of inventory and need projections. The Cardinal Innovations LME-MCO appears as two separate LME-MCOs, with the Sandhills Center located between these two service areas. The Smoky Mountain Center LME-MCO also appears as two separate LME-MCOs, with the Western Highland Network located between these two service areas. Additionally, Durham, Wake, Johnston and Cumberland are treated as separate **LME-MCOs.** Each step explained below is applied individually to the 23 16 mental health local management entities managed care organizations LME-MCOs, and then bed surpluses/deficits in the local management entities managed care organizations LME-**MCOs** are combined to arrive at the total surpluses/deficits for the three mental health planning regions. Treatment utilization data from acute care and specialty hospitals and from residential treatment facilities were incorporated into the methodology.