Long-Term Behavioral Health Committee Agency Report Adjusted Need Petition for Hospice Inpatient Bed Need Determinations Proposed 2014 State Medical Facilities Plan

Petitioner:

W & B Health Care, Inc. 130 Main Street Red Springs, North Carolina 28377

*Contact:* Ms. Sandra Wilson, CEO

## Request:

W & B Health Care, Inc. is requesting that "an adjustment to a need determination for a hospice residential care facility in Red Springs, N.C." be included in the Proposed 2014 State Medical Facilities Plan (SMFP).

## Background Information:

Chapter 2 of the Proposed 2014 SMFP states that "people who believe that unique or special attributes of a particular geographic area or institution give rise to resource requirements that differ from those provided by application of the standard planning procedures and policies may submit a written petition requesting an adjustment be made to the need determination given in the North Carolina Proposed State Medical Facilities Plan."

Chapter 2 of the Proposed 2014 SMFP lists the following minimum criteria for petitions for adjusted need determination:

- 1. Name, address, email address and phone number of petitioner.
- 2. A statement of the requested adjustment, citing the provision or need determination in the North Carolina Proposed State Medical Facilities Plan for which the adjustment is proposed.
- *3. Reasons for the proposed adjustment, including:* 
  - a. Statement of the adverse effects on the population of the affected area that are likely to ensue if the adjustment is not made, and

- b. A statement of alternatives to the proposed adjustment that were considered and found not feasible.
- 4. Evidence that health service development permitted by the proposed adjustment would not result in unnecessary duplication of health resources in the area.
- 5. Evidence that the requested adjustment is consistent with the three Basic Principles governing the development of the North Carolina State Medical Facilities Plan: Safety and Quality, Access and Value.

## Analysis/Implications:

The petition does not meet the minimum criteria for review as established by the Proposed 2014 SMFP. Specifically, the petition (1) does not provide a statement of adverse effects in the event the request is not granted; (2) does not provide a statement of alternatives that were considered and deemed not feasible; (3) includes no evidence that the health service development permitted by the proposed adjustment would not result in unnecessary duplication of health resources and (4) it does not address safety and quality, access or value. Because these core components are not present in the petition, the Agency was unable to analyze the request.

## Agency Recommendation:

The agency recognizes and supports the state health planning process and policies as identified in the SMFP and approved by the SHCC and the governor. Given available information submitted by the August 15, 2013 deadline and in consideration of factors discussed above, the agency recommends denial of the petition.