The Acute Care Services (ACS) Committee met once after the May Council meeting, on September 18, 2013.

Following is an overview of the Committee’s recommendations for the Acute Care Services, Chapters 5-8, of the Proposed 2014 State Medical Facilities Plan.

**Chapter 5: Acute Care Hospital Beds**

One petition was received on this chapter.

**Petition**

Petitioner: Cape Fear Valley Health System  
Request: The petitioner requests an adjusted need determination to reduce the number of beds in Cumberland County from 126 to 34 if the FirstHealth Hoke Community Hospital is licensed in 2013.

Comments: Two comments received were in support of the petition.

Committee Recommendation: The standard methodology created a need for 126 acute care beds in the proposed plan in Cumberland County. The committee determined that two special circumstances, spikes in the population and approved facilities yet to be open in the contiguous service area of Hoke County, significantly inflated the number of acute care beds needed in the Cumberland Service area. The committee recommends approving the petition.

**Data Discrepancy Report**

The Committee originally reviewed a list of 22 hospitals with discrepancies between their 2012 Truven Health Analytics (“Truven”) and Division of Health Services Regulation Hospital License Renewal Application (“Licensure”) acute days of care data greater than ± five percent. The Medical Facilities Planning Branch received the resubmitted Truven data from the Cecil G. Sheps Center in September. After the data has been refreshed, the current discrepancy report denotes 13 hospitals that have a ± five percent discrepancy. Out of those, seven hospitals did not provide an update. Pioneer Community Hospital of Stokes corrected their Truven data. The refreshed data removed the need from the plan, but they still maintained a greater than 5% discrepancy. It appears that further attempts to reconcile the data would not change the projection of no need for new beds in any of the affected service areas.

The inventory has been updated based on available information to reflect any changes and includes placeholders when applicable. The inventory is subject to further changes.
Application of the methodology based on data and information currently available results in the following draft need determinations.

- Cumberland County, 127 Acute Care Beds (Need is contingent on the licensure of FirstHealth Hoke Community Hospital in 2013)
- Moore County, 51 Acute Care Beds
- Pitt-Greene-Hyde-Tyrrell Service Area, 85 Acute Care Beds

**Chapter 6: Operating Rooms**

One petition was received on this chapter.

**Petition**

**Petitioner:** Blue Ridge Bone and Joint Clinic

**Request:** The petitioner requests an adjusted need determination for a demonstration project, single specialty, two operating room, in the Buncombe-Madison-Yancey Service Area.

**Comments:** Two comments were received that were not in support of the petition.

**Committee Recommendation:** The Single Specialty Ambulatory Surgery Demonstration Project was intended to test the model in NC. The committee felt there was not enough evaluation data on the three approved sites before approving a new, fourth location. The Committee recommends denying this petition.

The inventory has been updated based on available information to reflect any changes and includes placeholders when applicable. The inventory is subject to further change.

Application of the methodology based on data and information currently available results in no draft need determinations at this time. Need determinations are subject to change.

**Chapter 7: Other Acute Care Services**

There were no petitions or comments related to this chapter.

The inventory has been updated based on available information to reflect any changes and includes placeholders when applicable. The inventory is subject to further changes.

Application of the methodology based on data and information currently available results in no draft need determinations at this time. Need determinations are subject to change.

**Chapter 8: Inpatient Rehabilitation**

There were no petitions or comments related to this chapter.

The inventory has been updated based on available information to reflect any changes and includes placeholders when applicable. The inventory is subject to further changes.
Application of the methodology based on data and information currently available results in no draft need determinations at this time. Need determinations are subject to change.

**Recommendations Related to All Chapters**
The Committee recommends the current assumptions and methodologies for these chapters be accepted for the 2014 SMFP. In addition, references to dates would be advanced one year, as appropriate.

Committee members authorized staff to update narratives, tables and need determinations for the 2014 SMFP as new and corrected data are received.