

State Health Coordinating Council Meeting DRAFT Minutes March 4, 2015 10:00 am – 12:00 pm Brown Building, Raleigh, North Carolina

Members Present: Dr. Christopher Ullrich, Chairman; Trey Adams, Dr. Richard Akers, Christina Apperson, Peter Brunnick, Jim Burgin, Stephen DeBiasi, Dr. Mark Ellis, Dr. Sandra Greene, Kelly Hollis, Kurt Jakusz, Stephen Lawler, Kenneth Lewis, Dr. Robert McBride, Denise Michaud, Dr. Jeffrey Moore, Dr. Jaylan Parikh, Dr. Prashant Patel, Dr. T.J. Pulliam

Members Absent: Donald Beaver, Senator Ralph Hise, Representative Donny Lambeth, Gloria Whisenhunt

Healthcare Planning and Certificate of Need Section Staff Present: Shelley Carraway, Greg Yakaboski, Paige Bennett, Elizabeth Brown, Amy Craddock, Tom

Dickson, Martha Frisone, Lisa Pittman, Gloria Hale

DHSR Staff Present: Drexdal Pratt, Cheryl Ouimet, Patsy Christian,

AG's Office: Bethany Burgon, June Ferrell, Derek Hunter

Standing Agenda	Discussion	Motions	Recommendations/ Actions
Welcome & Introductions	Dr. Ullrich welcomed Council members, staff and visitors to the first meeting of the planning cycle for the 2016 State Medical Facilities Plan. Dr. Ullrich explained the meeting had two parts; The first is a business meeting that was open to the public, but not a public hearing. The second part will allow for a public hearing for anyone asking to address the State Health Coordinating Council (SHCC) and make comments on issues they wish to bring before the Council. He noted that this was the first of seven public hearings to be held this year with the other six to be held this summer, following the adoption of the Proposed 2016 SMFP.		
Introductions	All Council members introduced themselves, stating their workplace and position on the council. Mr. Drexdal Pratt, DHSR Division Director, stated that on January 1, 2015 the Medical Facilities Planning Branch and Certificate of Need Section, consolidated into one section Healthcare Planning and Certificate of Need. Mr. Pratt stated that Ms. Shelley Carraway is the Chief of Certificate of Need, Martha Frisone is the Assistant Chief for Certificate of Need and the agency is in the process of hiring an Assistant Chief for Planning. Mr. Pratt asked DHSR staff and staff from the AG's Office to introduce themselves. Mr. Jim Burgin a new member was welcomed to the Council.		
Review of Executive Order No. 46 Ethical Standards for the State Health Coordinating Council	Dr. Ullrich gave an overview of the procedures to observe before taking action at the meeting, as outlined in Executive Order 46. Dr. Ullrich inquired if any member had a conflict of interest, needed to declare if they were deriving a financial benefit from any agenda matter, or if any members intended to recuse themselves from voting on any agenda item. No member affirmed having a conflict of interest, potentially deriving a financial		

Standing Agenda	Discussion	Motions	Recommendations/ Actions
	benefit from any matter on the agenda and no member recused himself or herself from voting on any agenda item. Dr. Ullrich requested that if a conflict of interest arose for a member during the meeting, the member would make a declaration of the conflict.		
Approval of Minutes from October 1, 2014	A motion for approval of the October 1, 2014 minutes was presented and seconded for approval.	Mr. Lewis Dr. Ellis	Motion approved
Committee Assignments and Business Meeting	Dr. Ullrich laid out the foundation for each Committee Assignment, committee Chairman's were announced, and the various reviews each will conduct under their committee titles. Dr. Ullrich stated there would be discussion related to the MRI section of Chapter 9 about using CPT codes data rather than procedure submission data in the future. Parallel data has been collected for a number of years. The agency had previously received a petition requesting to end the parallel data collection. Dr. Ullrich stated there would also be a discussion regarding radiation oncology to determine whether to collect parallel data for CPT codes instead of continuing to depend on ESTV. Dr. Ullrich stated there was no data to back test the methodology. The committee will discuss if the agency will be asking for dual submission with current data and CPT code Data for the next 2 years to have adequate data to back test the methodology to make sure the new data if adopted produces similar results to the prior data. Dr. Ullrich stated Dr. Pulliam would chair a workgroup charged with reviewing the Nursing Home Beds methodology. This workgroup will report to the LTBH Committee.		
Recess Business Meeting	Dr. Ullrich concluded the business meeting.		
Convening of the Public Hearing Regarding the Proposed 2016 SMFP	Dr. Ullrich called the Public Hearing to order. There were nine individuals signed up to speak. Dr. Ullrich asked each speaker to limit their comments to five minutes. First Speaker: Anuj James, DDS – Village Family Dental – Dr. James presented a brief history of their practice, their specialties, and the geographical areas their services cover. Pediatric services through charity work and other state programs are some of the top priorities of services their doctors provide but, they are experiencing a decrease in access to surgical care for these patients. They are looking for solutions, and have proposed Policy OR1 as one option to help alleviate the problem.		

Standing Agenda	Discussion	Motions	Recommendations/ Actions
	Second Speaker: Faith McGibbon, DDS – Village Family Dental – Dr. McGibbon presented the obstacles the dentists are experiencing in the ability to serve pediatric patients. Patient loads are increasing, but block time available in operating rooms is decreasing, making it impossible to perform their services. A large number of their patients need dental treatment in the hospital setting due to various circumstances, but the ORs often schedule more lucrative surgeries, bumping the dentists off the schedule.		
	Third Speaker: Virginia Jones – Village Family Dental – Ms. Jones spoke about the legislative hindrances that affect them. The Joint Commission defines pediatric dentists as physicians, but the North Carolina Hospital Act does not. She also presented the summary of their petition for SMFP changes.		
	Fourth Speaker: Mike Mullowney – Carolinas Healthcare System (CHS) - CHS requested the State Health Coordinating Council create a special allocation for one dedicated intraoperative MRI Unit in the western portion of the state (HSA's I, II, III) for the 2016 SMFP. The unit would be located adjacent from the OR, but not used for typical MRI procedures. The petition will outline the benefits, access, and justification for the request of the petition.		
	Fifth Speaker: Tony Asher, MD – Carolina Neurosurgery and Spine Associates Charlotte – Dr. Asher noted the extensive expertise, associations and committees he serves. He presented the essential reasoning, purpose, and required medical usage of the requested petition for the iMRI Unit.		
	Mr. Mullowney stated the request would also eliminate the need for a follow-up MRI after surgeries, if the iMRI Unit was utilized during the initial surgery. An iMRI is currently operating at Duke University. The petition requests an iMRI need for western portion of North Carolina.		
	Sixth Speaker: Richard Leissner – Howard, Stallings, From, Hutson, Atkins, Angell & Davis, P.A. Mr. Leissner (an attorney with the aforementioned firm) requested changing the methodology used in Chapter 6 of SMFP for Operating Room needs. He stated that the method is outdated,		

Standing Agenda	Discussion	Motions	Recommendations/ Actions
	which in turn creates an artificial surplus of ORs . In addition, the underutilized and dormant ORs are not represented in the methodology.		
	Seventh Speaker: Carol Meyer – The Carolinas Center for Hospice and End of Life Care - Requested a change to the statewide Hospice inpatient bed methodology for the 2016 SMFP. TCC requested the approval for Hospice changes to ensure the equitable access and high quality care for all people of North Carolina.		
	Eighth Speaker: Tim Rogers – Association for Home & Hospice Care of North Carolina – Reviewed that AHHC and TCC organized a workgroup to evaluate the SMFP hospice inpatient bed methodology and to consider possible changes to ensure the methodology is consistent with current utilization patterns and trends. Their proposal is to modify Step 7 of the Hospice inpatient bed methodology.		
	Ninth Speaker: Dan Porter – J. Arthur Dosher Memorial Hospital - Requested changes in the MRI policies, or at least changes to the methodology of MRI's for the 2016 SMFP. In addition, they requested a reduction on the threshold of the annual volume requirements.		
Recess Public Meeting	Dr. Ullrich asked if there were any other individuals to speak, there were none. Dr. Ullrich adjourned the public hearing and reconvened the business meeting		
Council Meeting	Dr. Ullrich called the Council Meeting to order. Dr. Ullrich noted the deadline for petitions is March 4, 2015, by 5:00 pm. Dr. Ullrich asked if there was any other business.		
Adjournment	With no other business, Dr. Ullrich adjourned the meeting.		