
Long Term and Behavioral Health Committee

Recommendations to the North Carolina State Health Coordinating Council

October 5, 2016

The Long-Term and Behavioral Health (LTBH) Committee met once after the May Council meeting, on September 9, 2016.

Following is an overview of the Committee's recommendations for the Long-Term Care Facilities and Services, Chapters 10-17, of the *2017 State Medical Facilities Plan (SMFP)*.

Chapter 10: Nursing Care Facilities

There were no petitions or comments on this chapter.

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

The application of the methodology based on data and information currently available results in no draft need determinations.

Need determinations are subject to change.

Chapter 11: Adult Care Homes

There were three petitions related to this chapter.

Petition 1

- **Request:** Sandy Ridge Homes Holding, Corporation requests an adjusted need determination for 16 adult care home (ACH) beds in Montgomery County be included in the *2017 SMFP*. There were 55 documents received in support of this Petition.
- **Committee Recommendation:** The standard methodology has identified that there is no need for new ACH beds in Montgomery County. However, Agency review of the utilization and occupancy rates specific to Montgomery County shows that applying the standard methodology may under-estimate the need for individuals who require the level of care provided by special care unit (SCU) beds. Therefore, the Agency has recommended approval of this Petition, with a preference for the addition of SCU beds. After review of the Agency report and opportunity for discussion, the Committee advanced the recommendation to the SHCC to also approve the Petition with a preference for the addition of SCU beds.

Petition 2

- **Request:** Artis Senior Living, LLC requests an adjusted need determination for 331 adult care home (ACH) beds, all of which would be part of a special care unit (SCU) bed in Buncombe County, and an adjusted need determination for 79 ACH beds, all of which would be part of a SCU in Cabarrus County, in *2017 SMFP*. One document was submitted by the petitioner in support of this petition.

- **Committee Recommendation:** The petitioner has based its request for an adjusted need determination for special care unit beds on a methodology developed by Sloane and Zimmerman (2016). As explained in the *2016 SMFP*, “people who wish to recommend changes that may have a statewide effect are asked to contact Healthcare Planning and Certificate of Need Section staff as early in the year as possible, and to submit petitions no later than March 2, 2016.” In this instance, the agency determined that if the suggested methodology were used, it would have a statewide effect. Thus, the Petition does not comply with the standards of the petition process as outlined in the *SMFP*. Therefore, the Agency has recommended denial of this Petition. After review of the Agency report and opportunity for discussion, the Committee advanced the recommendation to the SHCC to deny the Petition.

Petition 3

- **Request:** Singh Development, LLC requests an adjusted need determination for transfer of up to 100 adult care home (ACH) beds from Harnett to Wake County in the *2017 SMFP*. One document was received in support of this petition.
- **Committee Recommendation:** The Petitioner has based this request on a methodology that uses facility-level data from Wake County Department of Health and Human Services that are not vetted by our agency. As explained in the *2016 SMFP*, “people who wish to recommend changes that may have a statewide effect are asked to contact Healthcare Planning and Certificate of Need Section staff as early in the year as possible, and to submit petitions no later than March 2, 2016.” In this instance, the Petitioner has suggested a methodology that, if applied, likely would have inconsistent impacts on planning areas across the state. Thus, the Petition does not comply with the standards of the petition process as outlined in the *SMFP*. For these reasons, the Agency recommended denial of this Petition. After review of the Agency report and opportunity for discussion, the Committee voted four in favor and one in opposition to the recommendation presented by the Agency. As such, the Committee recommends to the SHCC to deny the Petition.

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

The application of the methodology based on data and information currently available results in no draft need determinations.

Need determinations are subject to change.

In the final *2017 SMFP*, Table 11D will be included to show the nursing facilities that have six or fewer adult care home beds.

Chapter 12: Home Health Services

There was one petition related to this chapter.

Petition

- **Request:** Mother’s Helper Home Healthcare, Inc. requests an adjusted need determination be included in the *2017 SMFP* for one Medicare-certified home health agency or office for Wake County to address a special segment of the population identified as high-risk mothers and babies. Four documents were received in support of this petition, including two from Mother’s Helper. Four documents were also received in opposition to the Petition.
- **Committee Recommendation:** The standard methodology has determined there is no need for a new Medicare-certified home health agency or office in Wake County. The Petitioner provides various types of information regarding high-risk pregnancies. However, no specific data is provided to demonstrate the size of the population that needs these services or to demonstrate that the population is not currently being served by existing licensed Medicare-certified home health providers. Wake county residents are well served by 76 Medicare-certified home health providers who are eligible to provide services to this high-risk population and therefore, the Agency recommended not approving the Petition’s request for an adjusted need determination for a Medicare-certified home health agency or office in Wake County in the 2017 SMFP. The committee concurred with the Agency’s recommendation to deny this Petition.

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

The application of the methodology based on data and information currently available results in the following need determination:

- Mecklenburg County – one new Medicare-certified home health agency or office

Need determinations are subject to change.

Chapter 13: Hospice Services

One petition was received related to this chapter.

Petition

- **Request:** Transitions LifeCare (TL) requests the removal of a need determination for seven hospice inpatient beds for Wake County from the *2017 SMFP*.
- **Committee Recommendation:** The Committee discussed the Petition and Agency Report, which recommended denial of the Petition request. The concurrence was that the additional 10 hospice inpatient beds currently under development by TL should be brought on-line and the bed utilization reassessed before more hospice inpatient beds are released for Wake County. Mr. Brunnick shared a report issued by the US Department of Health and Human Services Office of Inspector General from March 2016 titled, “Hospices Inappropriately Billed Medicare Over \$250 Million for General Inpatient Care” with the committee. North Carolina may see hospice inpatient bed utilization patterns shift in the future based on the report and continued CMS audits of inpatient facilities. The Committee recommends to the SHCC that the Petition request be approved to remove the need determination for seven hospice inpatient beds for Wake County from the *2017 SMFP*.

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

Application of the methodologies based on data and information currently available results in the following draft need determinations:

- Hospice Home Care Office
 - Cumberland County – one need determination for a new hospice home care office
- Hospice Inpatient Beds
 - It is determined that there is no draft need for additional hospice inpatient beds anywhere else in the state.

Need determinations are subject to change.

Chapter 14: End-Stage Renal Disease Dialysis Facilities

There was one petition related to this chapter.

Petition

- **Request:** Graham County Commissioners requests an adjusted need determination for a new dialysis facility in Graham County, with a minimum of five dialysis stations, and a maximum number of “projected as needed” [stations] in the most recent “*Semiannual Dialysis Report*” available prior to the certificate of need application due date in the 2017 SMFP.
- **Committee Recommendation:** The Petition cites long and sometimes dangerous commutes for in-center dialysis treatments over treacherous mountain roads, often in adverse weather conditions, as a principle reason for the request. In addition, most of the Petitioner’s cited travel distances exceed the goal of “Basic Principle” # 10a, which encourages the provision of End-Stage Renal Disease treatment, “...in a facility no farther than 30 miles from the patient’s homes...”

Data from *The North Carolina Semiannual Dialysis Report-July 2016* indicates 10 residents of Graham County were receiving chronic outpatient dialysis services and five were receiving “home dialysis” as of December 31, 2015. Based on the most recent patient origin data, 65% of the residents receiving in-center dialysis travel 46.6 miles one-way (93.2 miles round trip) to Swain County three times a week . Based on these factors, the Agency recommends approval of the Petitioner’s request for a new dialysis facility in Graham County. The Committee agreed with the Agency’s recommendation for an adjusted need determination for a minimum of five dialysis stations and a maximum projected as needed for Graham County in the Semiannual Dialysis Report available prior to the certificate of need application due date. Certificate of Need shall impose a condition requiring the approved applicant to document that it has applied for Medicare certification no later than three (3) years from the effective date on the certificate of need.

Application of the County Need methodology for the 2017 SMFP determined there is no need for additional dialysis stations anywhere in the state.

The need for additional new dialysis stations is determined two times each calendar year. Determinations are made available in the *North Carolina Semiannual Dialysis Report (SDR)*.

Chapter 15: Psychiatric Inpatient Services

There is an update that applies to Chapters 15, 16, and 17. Cardinal Innovations Healthcare Solutions and CenterPoint Human Services merged on July 1. The new LME-MCO retains the Cardinal name.

There were no petitions or comments for Chapter 15.

The inventory has been updated based on available information to reflect any changes, and includes placeholders where applicable.

The application of the methodology based on data and information currently available results in 106 draft need determinations for child/adolescent beds psychiatric inpatient beds and 40 draft need determinations for adult beds in the following LME-MCOs:

- Child/Adolescent Psychiatric Inpatient Beds
 - Alliance Behavioral Healthcare – 36 beds
 - Eastpointe – 36 beds
 - Partners Behavioral Health Management – 1 bed
 - Sandhills Center – 18 beds
 - Smoky Mountain Center – 15 beds

- Adult Psychiatric Inpatient Beds:
 - Alliance Behavioral Healthcare – 25 beds
 - Sandhills Center – 15 beds

The inventory and need determinations are subject to change.

Chapter 16: Substance Use Disorder Inpatient & Residential Services (Chemical Dependency Treatment Beds)

There were no petitions or comments for this chapter.

The inventory has been updated based on available information to reflect any changes, and includes placeholders where applicable.

The application of the methodology based on data and information currently available results in the following draft need determinations:

- Child/Adolescent Substance Use Disorder Inpatient & Residential Service Beds:
 - Central Region – 17 beds
- Adult Substance Use Disorder Inpatient & Residential Service Beds:
 - None

The inventory and need determinations are subject to change.

Chapter 17: Intermediate Care Facilities for Individuals with Intellectual Disabilities

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 where applicable.

The application of the methodology based on data and information currently available results in no draft need determinations.

The inventory and need determinations are subject to change.

Recommendations Related to All Chapters

The Committee recommends to the State Health Coordinating Council approval of **Chapters 10 - 17: Long-Term Care Facilities and Services** with the understanding that staff is authorized to continue making necessary updates to the narratives, tables and need determinations as indicated.