

Table 11D: Adult Care Home Bed Need Determination

County	HSA	Adult Care Home Bed Need Determination*	Certificate of Need Application Due Date**	Certificate of Need Beginning Review Date
Gates	VI	100	To be determined	To be determined
Pamlico	VI	90	To be determined	To be determined
Surry	II	50	To be determined	To be determined
Tyrrell	VI	80	To be determined	To be determined
It is determined that there is no need anywhere else in the state and no other reviews are scheduled.				

- * Need determinations shown in this document may be increased or decreased during the year pursuant to Policy GEN-2 (see Chapter 4).
- ** Application due dates are absolute deadlines. The filing deadline is 5:30 p.m. on the application due date. The filing deadline is absolute (see Chapter 3).