

**Table 15D: Child/Adolescent Psychiatric Inpatient Bed Need Determination**

<b>Local Management Entity-Managed Care Organization (LME-MCO) and Counties</b>	<b>HSA</b>	<b>Child/Adolescent Psychiatric Bed Need Determination*</b>	<b>Certificate of Need Application Due Date**</b>	<b>Certificate of Need Beginning Review Date</b>
<b>Alliance Behavioral Healthcare:</b> Cumberland, Durham, Johnston, Wake	IV, V	10	To be determined	To be determined
<b>Eastpointe:</b> Bladen, Duplin, Edgecombe, Greene, Lenoir, Robeson, Sampson, Scotland, Wayne, Wilson	V, VI	7	To be determined	To be determined
<b>Partners:</b> Burke, Catawba, Cleveland, Gaston, Iredell, Lincoln, Surry, Yadkin	I, II, III	8	To be determined	To be determined
<b>Sandhills Center:</b> Anson, Guilford, Harnett, Hoke, Lee, Montgomery, Moore, Randolph, Richmond	II, IV, V	7	To be determined	To be determined
<b>Vaya Health:</b> Alexander, Alleghany, Ashe, Avery, Buncombe, Caldwell, Cherokee, Clay, Graham, Haywood, Henderson, Jackson, Macon, Madison, McDowell, Mitchell, Polk, Rutherford, Swain, Transylvania, Watauga, Wilkes, Yancey	I	9	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 (see Chapter 3).