



## Technology & Equipment Committee - **DRAFT** Minutes

April 17, 2019

10:00 am – 12 Noon

Brown Building, Room 104, Raleigh, N.C.

<b>Members Present:</b> Dr. Lyndon Jordan III (Chair), Hon. Barbara McKoy, Kelli Collins, Dr. Dwight Perry, Dr. Robert Bashford, Dr. Christopher Ullrich
<b>Members Absent:</b> Vincent Morgus, Stephen DeBiasi
<b>Other SHCC Members Present:</b>
<b>Healthcare Planning Staff:</b> Elizabeth Brown, Amy Craddock, Tom Dickson, Andrea Emanuel, Melinda Boyette, Trenesse Michael
<b>DHSR Staff Present:</b> Martha Frisone, Celia Inman, Tanya Saporito, Mike McKillip, Ena Lightbourne
<b>Attorney General's Office:</b> Kimberly Randolph

Agenda Items	Discussion/Action	Motions	Recommendations/ Actions
<b>Welcome &amp; Introductions</b>	Dr. Jordan presided at the meeting. He welcomed members, staff and guests to the first Technology and Equipment Committee meeting scheduled for this year. He noted the meeting was open to the public, but that the meeting was not a public hearing. Therefore, discussion would be limited to members of the committee and staff. He stated that following the meeting, the Committee will forward its recommendations for review at our next Committee meeting on May 15, 2019.		
<b>Review of Executive Order No. 46 Reauthorizing the State Health Coordinating Council and Executive Order No. 122 Extending the State Health Coordinating Council</b>	<p>Dr. Jordan reviewed Executive Order No. 46: Reauthorizing the State Health Coordinating Council and Executive Order 122: Extending the State Health Coordinating Council.</p> <p>Dr. Jordan mentioned he is part owner and president of Wake Radiology. He does not see any conflicts of interest with respect to any items on today's agenda.</p> <p>Dr. Ullrich mentioned that he is not employed by nor has any interest in Atrium Health. He works with Charlotte Radiology and they do not have interest in Atrium Health. This is not for recusal but for information purposes only as the Gamma Knife Petition submitted by Atrium Health will be discussed.</p>		
<b>Approval of minutes from September 12, 2018</b>	A motion was made and seconded to approve the minutes.	Dr. Ullrich Dr. Bashford	Motion approved

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<b>Lithotripsy</b>	<p>The Agency received no petitions or comments for lithotripsy.</p> <p>Ms. Michael reviewed the policies and need methodology for the lithotripsy section of Chapter 9.</p> <p><b><u>Review of Policy &amp; Need Methodology</u></b> Ms. Michael noted there are no policies pertaining to lithotripsy. The lithotripsy planning area is the entire state. Need determinations are based on incidence of urinary stone disease in the general population.</p> <p><b><u>Committee Recommendation:</u></b> The Agency recommends to the Committee forwarding the Lithotripsy section to the SHCC for the 2020 SMFP.</p>	Dr. Ullrich Dr. Bashford	Motion approved
<b>Gamma Knife®</b>	<p>The Agency received one petition regarding the Gamma Knife® section.</p> <p><b>Petitioner: The Charlotte-Mecklenburg Hospital Authority d/b/a Atrium Health</b> The Petition requests special allocation of one Gamma Knife in Western North Carolina (HSA I, II, &amp; III). The Agency received two comments in favor of the petition and one comment in opposition.</p> <p><b><u>Recommendation:</u></b> The agency recommends denial of the petition. The committee voted to accept the Agency’s recommendation because the petition is appropriate for the Summer petition period, rather than Spring.</p> <p>Ms. Michael reviewed the policies and need methodology regarding the Gamma Knife section of Chapter 9.</p> <p><b><u>Review of Policy &amp; Need Methodology</u></b> Ms. Michael noted there are no policies or a need methodology pertaining to Gamma Knife. There are two planning regions, West region (HSA I, II, &amp; III) and East region (HSA IV, V &amp; VI).</p> <p><b><u>Committee Recommendation:</u></b> The Agency recommends to the Committee forwarding the Gamma Knife section to the SHCC for the 2020 SMFP.</p>	Dr. Ullrich Dr. Bashford          Dr. Ullrich Ms. Collins	Motion approved          Motion approved
<b>Linear Accelerator</b>	The Agency received no petitions or comments for LINAC.		

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	<p>Ms. Michael reviewed the policies and need methodology regarding the LINAC section of Chapter 9.</p> <p><b><u>Review of Policy &amp; Need Methodology</u></b>  Ms. Michael noted there are no policies pertaining to LINAC. The LINAC planning areas are the 28 multi-county groupings shown in the LINAC section of the SMFP. The methodology to determine a need must consider 3 criteria: accessibility, patient origin &amp; efficiency. LINAC does have an exception for a county with a population over 120,000 and no LINAC located in that county.</p> <p><b><u>Committee Recommendation:</u></b> The Agency recommends to the Committee forwarding the LINAC section to the SHCC for the 2020 SMFP.</p>	<p>Dr. Ullrich  Dr. Bashford</p>	<p>Motion approved</p>
<p><b>Positron Emission Tomography (PET) Scanner</b></p>	<p>The Agency received no petitions or comments regarding the Positron Emission Tomography section.</p> <p>Ms. Michael reviewed the policies and need methodology regarding the PET section of Chapter 9.</p> <p><b><u>Review of Policy &amp; Need Methodology</u></b>  Ms. Michael Reviewed Policy TE-1 which allows for the conversion of a fixed PET scanner to a mobile PET scanner under specific conditions.</p> <p>Ms. Michael stated that fixed PET service areas are the HSAs in which the scanner is located. The mobile PET scanner’s service area is the entire state. The methodology to determine a need for a fixed PET is calculated based on facility utilization. There is no methodology for mobile PET scanners. There is an exception that no more than two fixed PET scanners can be added to a service area in any one year.</p> <p><b><u>Committee Recommendation:</u></b> The Agency recommends to the Committee forwarding the PET section to the SHCC for the 2020 SMFP.</p>	<p>Dr. Ullrich  Dr. Bashford</p>	<p>Motion approved</p>
<p><b>Magnetic Resonance Imaging (MRI)</b></p>	<p>The Agency received no petitions or comments regarding the magnetic resonance imaging section of Chapter 9.</p>		

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	<p>Ms. Michael reviewed the policies and need methodology regarding the MRI section of Chapter 9.</p> <p><b><u>Review of Policies &amp; Need Methodology</u></b>  Ms. Michael reviewed the two Policies for this section. Policy TE-2 allows qualified applicants to apply for an intraoperative MRI scanner to be used in an operating suite. Policy TE-3 allows a licensed facility with 24 hour/7 day a week emergency care without a fixed MRI scanner to apply for one if the facility can demonstrate the machine will perform 850 weighted procedures.</p> <p>Ms. Michael noted that the MRI scanner service areas are the same as the Acute Care Bed Service areas. The methodology to determine a need for MRI scanners is calculated by the weighted average of procedures based on the complexity of scans and the thresholds located in the tables in the chapter. There is an exception that no more than one MRI can be added to a service area unless there is an approved adjusted need determination.</p> <p><b><u>Committee Recommendation:</u></b> The Agency recommends to the Committee forwarding the MRI section to the SHCC for the 2020 SMFP.</p> <p><b><u>Demonstration Project</u></b>  The Bone &amp; Joint Surgery Clinic participated in a Demonstration Project for an Extremity MRI Scanner in 2006. The project was scheduled for 3 years and has been completed.</p> <p><b><u>Recusal:</u></b> Dr. Jordan disclosed that he is part owner of Wake Radiology. His company is involved in a legal matter with The Bone &amp; Joint Surgery Clinic.</p> <p><b><u>Recommendation:</u></b> The agency recommends adding the Extremity MRI Scanner into regular inventory in the 2020 SMFP. The committee voted to accept the Agency’s recommendation.</p>	<p>Dr. Ullrich  Dr. Bashford</p> <p>Dr. Ullrich  Dr. Bashford</p>	<p>Motion approved</p> <p>Motion approved</p>
<p><b>Cardiac Catheterization Equipment</b></p>	<p>The Agency received no petitions or comments for cardiac catheterization.</p> <p>Ms. Michael reviewed the policies and need methodology regarding the Cardiac Catheterization section of Chapter 9.</p>		

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	<p><b><u>Review of Policy &amp; Need Methodology</u></b>  Ms. Michael noted there are no policies pertaining to cardiac catheterization equipment. The cardiac catheterization service areas are the same as the acute care bed &amp; MRI service areas. The methodology to determine a need for fixed cardiac catheterization equipment is calculated by the average weight of the complexity of the procedures verses the number of units. The methodology to determine a need for shared fixed cardiac catheterization equipment is based on the number of procedures completed at the service site within the service area.</p> <p><b><u>Committee Recommendation:</u></b> The Agency recommends to the Committee forwarding the Cardiac Catheterization section to the SHCC for the 2020 SMFP.</p>	<p>Dr. Ullrich  Dr. Bashford</p>	<p>Motion approved</p>
<b>Chapter 9 Technical Edits</b>	<p><b><u>Technical Edits Review</u></b>  Dr. Craddock reviewed the technical edits to Chapter 9 that will aid in uniformity of the language within the SMFP. There was mention of removal of step 2d in the MRI section of the chapter due to the step no longer being valid. Due to the rearrangement of chapters, Technology &amp; Equipment will become Chapter 17 in the 2020 SMFP.</p> <p><b><u>Committee Recommendation:</u></b> Authorize staff the make updates and changes as necessary to complete the 2020 SMFP and forward the recommendation to the SHCC for approval.</p>	<p>Dr. Ullrich  Dr. Bashford</p>	<p>Motion approved</p>
<b>Other Business</b>	<p>Dr. Jordan asked if there was any other business that the committee needs to address.</p> <p>There was no other business to discuss. Dr. Jordan noted that the next committee meeting will be on Wednesday, May 15, 2019 and the next full SHCC meeting is Wednesday, May 29, 2019 both starting at 10:00 a.m. in this room.</p>		
<b>Adjournment</b>	<p>Dr. Jordan requested a motion to adjourn.</p>	<p>Dr. Ullrich  Dr. Bashford</p>	<p>Motion approved</p>