Table 14D: Child/Adolescent Psychiatric Inpatient Bed Need Determination*

Service Area	Child/ Adolescent Psychiatric Bed Need Determination**	Certificate of Need Application Deadline***	Certificate of Need Beginning Review Date
Eastpointe: Bladen, Duplin, Edgecombe, Greene, Lenoir, Robeson, Sampson, Scotland, Wayne, Wilson	25	To be determined	To be determined
Partners Behavioral Health Management: Burke, Catawba, Cleveland, Gaston, Iredell, Lincoln, Rutherford, Surry, Yadkin	2	To be determined	To be determined
Sandhills Center: Anson, Guilford, Harnett, Hoke, Lee, Montgomery, Moore, Randolph, Richmond	12	To be determined	To be determined
Vaya Health: Alexander, Alleghany, Ashe, Avery, Buncombe, Caldwell, Cherokee, Clay, Graham, Haywood, Henderson, Jackson, Macon, Madison, McDowell, Mitchell, Polk, Swain, Transylvania, Watauga, Wilkes, Yancey	17	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.

^{*} Any person can apply to meet the need, not just the health service facility or facilities that generated the need.

^{**} Need determinations shown in this document may be increased or decreased during the year pursuant to Policy GEN-1 (see Chapter 4).

^{***} Application deadlines are absolute. The filing deadline is 5:30 p.m. on the application deadline date (see Chapter 3).