Technology and Equipment Committee

Recommendations to the N. C. State Health Coordinating Council
October 7, 2020

The Technology and Equipment Committee held its final meeting of the year on September 9. In preparation for this meeting, staff updated data tables to reflect any changes in inventories, utilization, and need determinations since release of the Proposed SMFP. Data presented here is current as of that meeting.

The following is an overview of the Committee's recommendations for consideration by the SHCC in preparation for Chapter 17 of the 2021 Plan. This report's organization is by equipment and aligns with the organization of the chapter.

Cardiac Catheterization Equipment

The Committee received no petitions and no comments regarding cardiac catheterization equipment.

Data Updates

Since the Proposed 2021 SMFP there have been updates in the draft tables. Based on data and information currently available, application of the methodology results in need determinations for three units of cardiac catheterization equipment.

- 1 in Cabarrus County
- 1 in Haywood County
- 1 in New Hanover County

Gamma Knives

The Committee received no petitions and no comments regarding gamma knife equipment. Since the Proposed 2021 SMFP, there have been no changes in the reported data. There is no need determination methodology for gamma knife equipment.

Linear Accelerators

The Committee received one petition regarding linear accelerators.

Petition: The Charlotte-Mecklenburg Hospital Authority d/b/a Atrium Health requested an adjusted need determination for one additional LINAC in Service Area 7, which consists of Anson, Mecklenburg, and Union counties. The Agency received two comments in opposition to this Petition.

Committee Recommendation: Service Area 7 currently operates 11 LINACs and has an additional CON-approved LINAC that is not yet operational. LINACs in Service Area 7 operate at an average of 6,278 procedures per LINAC; an average of 6,750 would trigger a need determination. Although the number of procedures increased in the last five years, annual changes have not been consistently positive. Based on the utilization history in Service Area 7 and a recently approved LINAC, the Agency sees no immediate need for an additional LINAC. The Technology and Equipment committee denied the petition.

Data Updates

Since the Proposed 2021 SMFP there have been updates to the draft tables. The need determinations remain the same, projecting a need determination for one LINAC in Service Area 19 (which consists of Brunswick, Columbus, New Hanover, and Pender counties).

Lithotripters

The Committee received no petitions or comments regarding lithotripters. Since the Proposed 2021 SMFP, there have been no changes in the reported data. There are no projected need determinations for lithotripters.

Magnetic Resonance Imaging Scanners

The Committee received four petitions regarding MRIs.

Petition 1: Atrium Health petitioned to remove the need for one MRI scanner in the Stanly County service area from the 2021 SMFP. The Agency received no comments regarding this petition.

Committee Recommendation: The Petitioner has shown that although utilization is high for the existing scanner, there is not enough growth to support an additional fixed MRI scanner. The Technology and Equipment Committee approved the petition.

Petition 2: Sentara Albemarle Medical Center petitioned to remove the need for one MRI scanner in the Pasquotank/Camden/Currituck/Perquimans service area from the 2021 SMFP.

Committee Recommendation: Similar to the Atrium Petition, this Petitioner demonstrated that although utilization is high for the existing scanner, there is not enough growth to support an additional fixed MRI scanner. The Technology and Equipment Committee approved the petition.

Petition 3: Novant Health and Petition 4: Williams Mullen (on behalf of Alliance Healthcare Services) requested the removal of Policy TE-4 from the 2021 SMFP. Policy TE-4 has two parts, one that covers fixed scanners and one that covers mobile scanners. The petitions requested removal of the entire policy. The Agency received two comments opposing the removal of the part of Policy TE-4 that addresses fixed scanners; these comments supported the need to further develop the part of the policy that addresses mobile scanners. One comment was received from

Alliance Healthcare Services in favor of the Williams Mullen/Alliance petition in its entirety. Considering that the petitions each requested removal of Policy TE-4, the Agency prepared a single set of recommendations covering both petitions. The Agency recommended approval of the relief requested by the current Petitioners, i.e., the removal of Policy TE-4 from the 2021 SMFP. This recommendation does not imply agreement with all assertions presented in the current Petitions, public written comments, or the oral remarks made at the public hearings. Rather, the totality of information gathered from public hearings, petitions and comments led the Agency to determine that the language of the policy should be further developed. The Agency also recommended creating an opportunity for interested parties to offer more input regarding the proposed policy. The Technology and Equipment Committee voted in favor of the Agency's recommendations.

Data Updates

Since the Proposed 2021 SMFP there have been updates to the draft tables, but the projected need determinations have not changed. Based on data and information currently available, application of the methodology results in need determinations for seven MRI scanners.

- 1 in the Buncombe/Graham/Madison/Yancey service area
- 1 in Mecklenburg County
- 1 in New Hanover County
- 1 in Orange County
- 1 in the Pasquotank/Camden/Currituck/Perquimans service area
- 1 in Stanly County
- 1 in Wake County

Positron Emission Tomography

The Committee received one petition regarding PET equipment.

Petition: DMS Health Technologies petitioned for an adjusted need determination for one additional mobile PET scanner to provide statewide coverage. The Agency received two comments in opposition to this Petition. The SMFP does not have a methodology to project a need for additional mobile PET scanners. The state has seen an increase in mobile PET utilization over the past 5 years. One of the three existing PET scanners operates at about 80% capacity, while the other two operate at well over 100% capacity. The fourth scanner has been approved but is not yet operational. On average, the three existing scanners performed 2,440 procedures; 2,600 procedures is considered full utilization. Even if the fourth scanner performs no procedures, the combined utilization of the existing scanners is very close to projecting a need for an additional scanner. The Technology and Equipment Committee approved the petition.

Data Updates

Since the Proposed 2021 SMFP there have been no changes to the reported data. Based on data and information currently available, application of the methodology results in need determinations for four dedicated fixed PET scanners

- 1 in HSA I
- 1 in HSA IV
- 1 in HSA V
- 1 in HSA VI

Recommendations for Chapter 17

The Committee recommends that the SHCC approve Chapter 17, Technology and Equipment, with the understanding that staff is authorized to continue making necessary updates to all narratives, tables, and need determinations for the Final 2021 SMFP.