Technology and Equipment Committee

Recommendations to the N. C. State Health Coordinating Council September 29, 2021

The Technology and Equipment Committee held its last meeting of the year on September 1. The following is an overview of the Committee's recommendations for consideration by the SHCC in preparation for Chapter 17 of the 2022 Plan. This report's organization is by equipment and aligns with the organization of the chapter.

Cardiac Catheterization

The Committee received two petitions with comments regarding cardiac catheterization equipment.

Iredell Health requested a special need adjustment for one unit of shared fixed cardiac catheterization equipment in the Iredell County service area. The Agency received one comment in opposition and four letters of support for the petition. Pursuant to Executive Order 139, Iredell Health was able to use angiography equipment for cardiac catheterization during the COVID-19 pandemic. The Petitioner reported that use of this equipment allowed the hospital to operate more efficiently and provide better quality of care. The hospital petitioned to continue being able to use this equipment after the pandemic ends, which would require an adjusted need determination and issuance of a CON. The equipment that is the subject of the petition would not be the primarily catheterization unit. Rather, it would continue to be used primarily for vascular procedures, but could serve as a backup catheterization lab to facilitate efficient scheduling of patients. The Agency recommended approval of the Petition for an adjusted need determination for one unit of shared fixed cardiac catheterization equipment in Iredell County, with the added stipulation that the equipment be located at Iredell

Memorial Hospital. The Committee concurred with the Agency's recommendation.

Novant Health Matthews Medical Center requested an adjusted need determination for one unit of fixed cardiac catheterization equipment for the Mecklenburg County service area. The Agency received six letters of support, one comment in support and one comment in opposition to the petition. Despite an overall decrease of almost 15% in cardiac catheterization in Mecklenburg County during the past five years, utilization at Novant Health Matthews increased by 158% over the same period. Novant Health Presbyterian Medical Center relocated cardiac catherization equipment to suburban hospitals in Matthews and Huntersville. The Petition indicated that this approach has been popular with patients, primarily because of convenience. Even after relocating two units to the suburban hospitals, Novant Presbyterian still reports high utilization of its two remaining units of equipment; thus relocation of additional equipment may not be appropriate. The Petitioner has shown sufficient utilization and growth to support the need for an additional unit of fixed cardiac catheterization equipment. The Agency recommended approval of the petition to add a need determination for an additional unit of fixed cardiac catheterization equipment for the Mecklenburg County service area in the 2022 SMFP. The Committee concurred with the Agency's recommendation.

Data Updates

Since the Proposed 2022 SMFP there have been updates to the draft tables. The updates did not change the need determinations for cardiac catheterization equipment. There is currently no need for cardiac catheterization equipment. However, approval of the petitions would add one unit of shared fixed equipment in Carteret County and one unit of fixed equipment in Mecklenburg County.

Gamma Knives

The Committee received no petitions and no comments regarding gamma knife equipment. The SMFP has no need determination methodology for Gamma Knives. Therefore, there are no draft need determinations.

Linear Accelerators

The Committee received two petitions with comments regarding linear accelerators.

WakeMed submitted a petition for an adjusted need determination to add a LINAC in Service Area 20, which consists of Franklin and Wake counties. The Agency received one comment in support and one comment in opposition to the petition. None of the existing providers is operating above the need determination threshold. WakeMed does not currently operate a LINAC, but argued that having their own LINAC would improve service to their patients. While this concern may have some validity, there is ample access to LINAC services for patients in Wake County. Based on the utilization history in Service Area 20 and minimal growth, the Agency sees no immediate need for an additional LINAC. The Agency recommended denial of the petition for an adjusted need determination for an additional LINAC in Service Area 20. The Committee concurred with the Agency's recommendation.

Carteret Health requested an adjusted need determination for one additional LINAC in Service Area 24, to be designated for a licensed acute care hospital in Carteret County. Service area 24 consists of Carteret, Craven, Jones and Pamlico counties. The Agency received three letters of support for this petition. Carteret Health's 2020 utilization of 6,870 ESTVs exceeded the need determination threshold of 6,750. Also, from 2016-2020, Carteret Health experienced a 149% growth in utilization, compared to a 50% growth for the service area as a whole. The Petitioner accurately pointed out that if Carteret County were its own service area, it would have a need determination. In addition, Carteret Health's utilization substantially exceeds that of other counties with similar populations that also operate

only one LINAC. The Agency recommended approval of the petition for an adjusted need determination for an additional LINAC in Carteret County. The Committee concurred with the Agency's recommendation.

Data Updates

Since the Proposed 2022 SMFP there have been updates to the draft tables. There is a need determination for one LINAC in Service Area 7, which consists of Anson, Mecklenburg, and Union counties. If the SHCC approves the petition, there would also be a need for one LINAC in Service Area 24.

Lithotriptors

The Committee received no petitions and no comments regarding lithotripsy equipment. Application of the methodology based on data and information currently available results in no need determinations lithotriptors.

Magnetic Resonance Imaging (MRI)

The Committee received three petitions regarding magnetic resonance imaging equipment.

Novant Health and MedQuest Associates requested that Novant's dedicated breast MRI scanner be included in the MRI inventory of the SMFP. The Agency received no comments for this petition. Novant's dedicated breast scanner is currently non-operational. In addition, the dedicated breast scanner technology is obsolete. As a specialized scanner, it is excluded from the need determination methodology and the standard MRI planning inventory. Novant has CON approval to replace the breast scanner with a general-purpose scanner that is capable of breast imaging; the new scanner has not yet been developed. However, the conditions of the original CON limit the scanner to breast imaging. The Petitioners ultimately want to relocate the new scanner to a freestanding imaging center so that it can be used for general diagnostic scanning purposes. Inclusion of the scanner in the planning inventory is the first step to achieving this goal. If approved, the scanner could still only be used for

breast imaging. As such it would have relatively low utilization. The Petitioners would next need to obtain CON approval to use the scanner for general diagnostic purposes. This decision is outside the purview of the SHCC. CON approval would enable Novant to obtain a general-purpose scanner irrespective of a need determination. If CON decides not to approve Novant's request, inclusion of the scanner would depress the need for MRI scanners in Forsyth County. The Agency recommended denial of the Petition to include the fixed dedicated breast MRI scanner in the MRI inventory (Table 17E-1) of the final 2022 SMFP. The Committee did not support the Agency's recommendation and approved the petition.

Atrium Health requested removal of the need for an additional fixed MRI scanner in Stanly County. The Agency received no comments for this petition. This is the second year that Atrium had submitted the request to remove the need determination. The Petitioner has shown that there is still not sufficient growth to support an additional fixed MRI scanner. The Agency recommends approval of the petition to remove the need determination for an additional unit of fixed MRI scanner for the Stanly County service area. The Committee concurred with the Agency's recommendation.

Sentara Albemarle Medical Center requested removal of the need for an additional fixed MRI scanner in the Pasquotank/Camden/Currituck/ Perquimans service area. The Agency received ten letters in opposition and two comments in opposition to the petition. The need determination is based on the hospital's MRI utilization of 5,511 total weighted scans. The threshold for a need determination is 3,775 weighted scans. The service area had an almost 10% compound annual growth rate in MRI procedures over the past five years. If this growth rate were used to project the number of procedures in the service area after three years, the total number of projected procedures would be 7,298. This projection is very close to the number required to meet the certificate of need performance standard for a second scanner, which is 7,550 weighted scans by the third year of operation. Therefore, the Agency found that the need determination is accurate and recommended denial of the petition. The Committee concurred with the Agency's recommendation.

Data Updates

Since the Proposed 2022 SMFP there have been updates to the draft tables. The projected need determinations for one MRI scanner each remain in Stanly and Mecklenburg counties, as well as one each in the multi-county service areas of Pitt/Greene/Hyde/Terrell and Pasquotank/Camden/Currituck/Perquimans counties. If the SHCC approves the Committee's recommendations, the need determination in Stanly County will be removed.

Positron Emission Tomography Scanners

The Committee received no petitions and no comments regarding PET equipment. Application of the methodology based on data and information currently available results in no need determination for fixed PET scanners.

Recommendation for Chapter 17, Technology and Equipment

The Committee recommends that the current assumptions, methodologies and draft tables for cardiac catheterization equipment, gamma knives, linear accelerators, lithotriptors, MRI scanners, and PET scanners be accepted for the Final 2022 Plan. The Committee also recommends that the SHCC authorize the staff to update all narratives, tables and need determinations for the Final 2022 Plan as new and corrected data are received.