Table 5B: Acute Care Bed Need Determination

Service Area	Acute Care Bed Need Determination*	Certificate of Need Application Deadline**	Certificate of Need Beginning Review Date
Buncombe/Graham/Madison/Yancey	67	To be determined	To be determined
Cumberland	29	To be determined	To be determined
Durham/Caswell	68	To be determined	To be determined
Mecklenburg	96	To be determined	To be determined
Pitt/Greene/Hyde/Tyrrell	43	To be determined	To be determined
Wake	45	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.

^{**} Application deadlines are absolute, pursuant to 10A NCAC 14C.0203(b). The filing deadline is $\underline{5:00}$ $\underline{p.m}$. on the application deadline date.