**Table 13H: Hospice Home Care Office Need Determination\*** 

County Service Area	Hospice Home Care Office Need Determination	Certificate of Need Application Deadline**	Certificate of Need Beginning Review Date
Cumberland	1	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.			

<sup>\*</sup> Any person can apply to meet the need, not just the health service facility or facilities that generated the need.

<sup>\*\*</sup> Application deadlines are absolute, pursuant to 10A NCAC 14C.0203(b). The filing deadline is <u>5:00 p.m.</u> on the application deadline date.