

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
Alamance	46	To be determined	To be determined
Buncombe/Graham/Madison/Yancey	129	To be determined	To be determined
Cabarrus	126	To be determined	To be determined
Durham/Caswell/Warren	82	To be determined	To be determined
Mecklenburg	210	To be determined	To be determined
Union	136	To be determined	To be determined
Vance/Warren	31	To be determined	To be determined
Wake	267	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 for a CON 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.0202(2). The filing deadline is 5:00 p.m. on the application deadline date.