

Carolinas HealthCare System

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James E.S. Hynes Chairman

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> > July 31, 2009

Ms. Victoria McClanahan, Planner
Ms. Carol Potter, Planner
Medical Facilities Planning Section
North Carolina Division of Health Service Regulation
2714 Mail Service Center
Raleigh, North Carolina 27699-2714

Re: Comments on the Proposed 2010 State Medical Facilities Plan

Dear Ms. McClanahan and Ms. Potter:

I offer the following comments and requests regarding the Proposed 2010 State Medical Facilities Plan on behalf of Carolinas HealthCare System:

- ☐ Mobile MRI. We support the finding that there is no need for any additional mobile MRI scanners anywhere in the state. Further, we recommend the Technology and Equipment Committee examine the potential of developing a single methodology for both mobile and fixed MRI scanners. We believe this recommendation is in line with the current situation and trends as follows:
 - All counties in the state with a hospital (and thus some level of acute care services) currently have direct access to MRI technology;
 - There are many counties in the state with access to multiple fixed and mobile MRI scanners;
 - The current growth rate in total state-wide MRI volumes is negative;
 - Scans per equivalent MRI unit have declined over the last year; and
 - Application of the current fixed MRI need methodology only reflects a need for two additional fixed scanners statewide, further suggesting adequate access to MRI technology across the state.
- ☐ Acute care bed need methodology. The Acute Care Bed Need Methodology Work Group met on February 23, 2009. During this meeting there was robust discussion

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regarding the methodology and its key variables, including but not limited to annual patient day growth rate factors, occupancy targets, service area definitions and average length of stay. As you are aware no official recommendations resulted from this initial meeting as work group members were concerned with the current economic climate and its potential impact on hospital utilization rates and financing related to a significant number of additional beds being placed in the plan. In addition, the work group concluded it should reconvene in the fall of 2009 to consider its discussions with the benefit of more current inpatient utilization data. These data are now available. We request the work group be reconvened in September in order to afford the maximum amount of time to formulate recommendations for the Proposed 2011 State Medical Facilities Plan.

We appreciate the opportunity to provide these comments. If you have any questions regarding any aspect of our recommendations please let us know.

Sincerely,

F. Del Murphy, Jr.

Vice President – Planning