DUKE UNIVERSITY HEALTH SYSTEM'S PUBLIC HEARING COMMENTS

IN SUPPORT OF PETITION TO ADJUST NEED DETERMINATION
FOR LINEAR ACCELERATORS IN SERVICE AREA 20

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Duke University Health System d/b/a Duke Raleigh Hospital is submitting a petition to adjust the need determination for linear accelerators in the 2014 Proposed State Medical Facilities Plan to add one additional linear accelerator in Service Area 20, which now includes Wake and Franklin Counties. The true need in the area is distorted by low volume equipment and an undeveloped CON which are currently counted in the inventory.

Under the existing methodology, the draft need determination reflects no need for additional linear accelerator capacity in Service Area 20; however this methodology assumes that all existing and approved linear accelerators have comparable utilization rates and that each is generating effective capacity in the area.

The factors that affect the true capacity are:

1) a CON awarded in 2011 to Cancer Centers of North Carolina that is counted in the inventory but has not yet even begun development
2) a very underutilized piece of equipment in Franklin County that does not truly add capacity and
3) a chronic variance in utilization rates between providers in the service area.

Duke presented a similar petition last year, and the SHCC determined that CCNC should have more time to proceed with the development of its new linear accelerator before any action was taken. A full year has passed and no progress has been made, but other providers remain without recourse to address their own overutilization. The population in Service Area 20 is growing rapidly and the need for these critical services will increase accordingly.

Duke Raleigh therefore proposes an adjustment to the need determination to reflect the true capacity of linear accelerator treatments in Service Area 20.