

March 15, 2022

Elizabeth Brown and Andrea Emanuel, PhD
Acute Care Services Committee Staff
Department of Health and Human Services
Division of Health Service Regulation
Healthcare Planning
809 Ruggles Drive
Edgerton Building
Raleigh, NC 27603

Dear Acute Care Services Committee,

We are writing regarding the “Long Term Care Management Services, LLC d/b/a Liberty Healthcare and Rehabilitation Services (“Liberty”) request for a Policy to be added to the 2023 State Medical Facilities Plan (“SMFP”), Policy ESRD-4, which will allow for the development or expansion of a kidney disease treatment center at a skilled nursing facility.”

We have reviewed the request by “Liberty” to allow them to add dialysis stations to multiple skilled nursing facilities across the state without the standard CON need-based oversight. As a group of Board-Certified Nephrologists who provide care to patients with ESRD in Wake, Harnett, Johnston, and Franklin Counties of North Carolina, we find this request to be inappropriate. We would like to highlight the following concerns:

- 1) The application describes a “state-of-the-art dialysis machine (unnamed)”, but there exists no explanation of how “Liberty” will deliver dialysis to their patients. I find no description of planning for staff, such as nurses trained in dialysis, patient care technicians trained in dialysis, or attending nephrologists, mentioned in the proposal. The provision of dialysis represents a complex medical procedure. Dialysis requires certified care providers and the oversight of Board-Certified Nephrologists. Without the proper staff and oversight, “Liberty” does not demonstrate how they will ensure patient safety. As a result, this proposal represents a risk to ESRD patients who reside in a skilled nursing facility, and this risk outweighs any benefit to the “patient experience” related to “reducing travel time”.
- 2) The request appears to allow for the building of freestanding dialysis facilities without CON by adding this paragraph: “*An independently certified End-Stage Renal Disease (“ESRD”) facility may be located within or proximal to an independently certified nursing home. Each facility is responsible for meeting the Medicare conditions or requirements for Medicare participation for the specific provider/supplier type and would be separately surveyed. Therefore, the certified ESRD facility must be owned by the same individual, parent or affiliated company as the nursing home.” This change to the need-based CON at the county level would create quite a temptation for “Liberty” and other skilled nursing facilities to pursue such programs in metro areas, building their dialysis programs where there exists no current need, rather than meeting the “needs of their patients”, as they claim.

Dr. Michael Casey, Dr. Jason Eckel, Dr. William Fan, Dr. James Godwin, Dr. Karn Gupta, Dr. Jeffrey Hoggard,
Dr. So Yoon Jang, Dr. Fred Jones, Dr. Dan Koenig, Dr. Kevin Lee, Dr. Sammy Moghazi,
Dr. Michael Monahan, Dr. Rushi Nayak, Dr. Michael Oliverio, Dr. Robert Olivo, Dr. Sejan Patel,
Dr. Eric Raasch, Dr. Samsheer Sonawane, Dr. Adam Stern, Dr. Phillip Timmons

- 3) This proposal does not truly provide “home dialysis therapy” to the patients in question. Thus, it certainly does not meet the spirit of the Advancing American Kidney Health Initiative.
- 4) Using CON at the county level, and partnering with local dialysis providers’ home therapy programs, there already exists the ability to provide hemodialysis at skilled nursing facilities. The only requirement is the formation of agreements between dialysis providers and skilled nursing facilities, thereby creating programs where licensed dialysis nurses administer on-site treatments to patients at those nursing facilities. Thus, the only “new” service outlined in this proposal is the elimination of CON on a statewide level.

Based on our experience in dialysis, and with skilled nursing facilities, it is our view that the proposal by “Liberty” represents an attempt to subvert CON across the state, with intentions that seem to be more focused on the bottom line, rather than on the needs of the ESRD patients. As a result, we strongly recommend that the request by “Liberty” be denied.

Thank you,

A handwritten signature in black ink, appearing to read "Eric W. Raasch MD". The signature is fluid and cursive, with the letters "E", "R", and "M" being particularly prominent.

Eric W. Raasch MD, and the Board of Directors
North Carolina Nephrology, PA

Dr. Michael Casey, Dr. Jason Eckel, Dr. William Fan, Dr. James Godwin, Dr. Karn Gupta, Dr. Jeffrey Hoggard,
Dr. So Yoon Jang, Dr. Fred Jones, Dr. Dan Koenig, Dr. Kevin Lee, Dr. Sammy Moghazi,
Dr. Michael Monahan, Dr. Rushi Nayak, Dr. Michael Oliverio, Dr. Robert Olivo, Dr. Sejan Patel,
Dr. Eric Raasch, Dr. Samsheer Sonawane, Dr. Adam Stern, Dr. Phillip Timmons