



August 6, 2025

State Health Coordinating Council
2704 Mail Service Center
Raleigh, North Carolina 27699-2704
DHSR.SMFP.Petitions-Comments@dhhs.nc.gov

**RE: Public Comment Opposing Petition to Remove Hospice Home Care Office Need Determination
Burke County and McDowell County (Proposed 2026 SMFP)**

PruittHealth respectfully urges the SHCC to retain the standard need determination for one additional hospice home care office in Burke County and one additional hospice home care office in McDowell County, as outlined in the Proposed 2026 SMFP. While we commend AMOREM's longstanding service to the region, we believe that the petition to remove the need determination challenges the integrity of the SMFP's standardized methodology, which exists to ensure objective, consistent, and equitable health planning across North Carolina.

The methodology employed in the 2026 SMFP accounts for multi-year statewide and county-level trends and is intentionally designed to absorb and balance short-term data fluctuations, such as those caused by the COVID-19 pandemic. AMOREM's petition relies on mortality displacement theory to characterize post-pandemic hospice utilization increases as statistically inflated. However, pandemic-related disruptions were experienced across the state, and the SMFP's methodology has proven resilient and reliable in mitigating these effects through a long-term lens. Approving a deviation from the methodology based on one provider's interpretation of local fluctuation would invite future petitions that seek to bypass the established planning process whenever short-term variation occurs.

Moreover, the core function of the SMFP is to identify future needs, not to validate current capacity. Burke County's and McDowell County's demographic profiles, including an aging population, support the conclusion that demand for hospice care will grow. A single provider's recent performance or market share does not justify restricting access for others or limiting consumer choice. On the contrary, modest expansions in hospice capacity promote access, competition, and system resiliency, especially in rural regions where patient needs can vary significantly across geographic and socioeconomic lines.

Lastly, while AMOREM raises valid questions about reviewing the hospice methodology, such efforts should be addressed transparently through a new work group or Task Force, not through the removal of an individual county's need determination. Upholding the methodology in this instance affirms the SHCC's commitment to fair, data-driven planning. For these reasons, PruittHealth respectfully recommends that the SHCC deny the petition to remove the Burke County and McDowell County hospice home care office need determinations and maintain the integrity of the 2026 SMFP as proposed.

Sincerely,

Connor Seim
Director of Planning and Development
PruittHealth