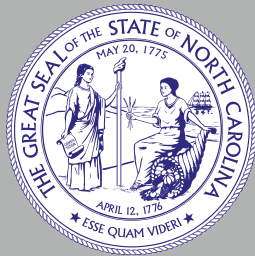


2023

PROPOSED STATE MEDICAL FACILITIES PLAN



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

Division of Health Service Regulation

NORTH CAROLINA PROPOSED 2023 STATE MEDICAL FACILITIES PLAN

Effective July 1, 2022

Prepared by the

North Carolina Department of Health and Human Services
Division of Health Service Regulation
Healthcare Planning and Certificate of Need Section

Under the direction of the

North Carolina State Health Coordinating Council

For information contact the

North Carolina Division of Health Service Regulation
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NC DHSR: State Medical Facilities Plan (ncdhhs.gov)

(919) 855 - 3865

NOTE: Data used in the North Carolina Proposed 2023 State Medical Facilities Plan was last updated on June 3, 2022.

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Chapter 1:

Overview of the North Carolina State Medical Facilities Plan

CHAPTER 1

OVERVIEW OF THE NORTH CAROLINA PROPOSED 2023 STATE MEDICAL FACILITIES PLAN

Purpose

The North Carolina Proposed 2023 State Medical Facilities Plan (SMFP or Plan) was developed by the North Carolina Department of Health and Human Services (DHHS), Division of Health Service Regulation (DHSR), under the direction of the North Carolina State Health Coordinating Council (SHCC), pursuant to G.S.¹ §131E-177. The major objective of the Plan is to provide individuals, institutions, state and local government agencies, and community leadership with policies and projections of need to guide local planning for specific health care facilities and services. Projections of need are provided for the following facilities and services:

- acute care hospitals
- adult care homes
- end-stage renal disease dialysis facilities
- hospice home care and hospice inpatient beds
- inpatient rehabilitation facilities
- Medicare-certified home health agencies
- nursing home facilities
- operating rooms
- other acute care services
- technology and equipment services

Chapters dealing with specific facility/service categories contain summaries of the supply and the utilization of each type of facility or service, a description of any changes in the projection method and policies from the previous planning year, a description of the projection method, and other data relevant to the projections of need.

The projections of need for the various facilities and services are used in conjunction with other statutes and rules in reviewing certificate of need (CON) applications for establishment, expansion, or conversion of health care facilities and services. All parties interested in health care facility and health services planning should consider this Plan a key resource.

¹ General Statutes (North Carolina General Statutes).

Basic Principles Governing the Development of this Plan

1. Safety and Quality Basic Principle

The State of North Carolina recognizes the importance of systematic and ongoing improvement in the quality of health services. Citizens of North Carolina rightfully expect health services to be safe and efficient. To warrant public trust in the regulation of health services, monitoring of safety and quality using established and independently verifiable metrics will be an integral part of the formulation and application of the North Carolina State Medical Facilities Plan.

Scientific quantification of quality and safety is rapidly evolving. Emerging measures of quality address both favorable clinical outcomes and patient satisfaction, while safety measures focus on the elimination of practices that contribute to avoidable injury or death and the adoption of practices that promote and ensure safety. The SHCC recognizes that while safety, clinical outcomes, and satisfaction may be conceptually separable, they are often interconnected in practice. The North Carolina State Medical Facilities Plan should maximize all three elements. Where practicalities require balancing of these elements, priority should be given to safety, followed by clinical outcomes, followed by satisfaction.

The appropriate measures for quality and safety should be specific to the type of facility or service regulated. Clinical outcome and safety measures should be evidence-based and objective. Patient satisfaction measures should be quantifiable. In all cases, metrics should be standardized and widely reported, and preference should be given to those metrics reported on a national level. The SHCC recognizes that metrics meeting these criteria are currently better established for some services than for others. Furthermore, experience and research as well as regulation at the federal level will continue to identify new measures that may be incorporated into the standards applicable to quality and safety. As experience with the application of quality and safety metrics grows, the SHCC should regularly review policies and need methodologies and revise them as needed to address any persistent and significant deficiencies in safety and quality in a particular service area.

2. Access Basic Principle

Equitable access to timely, clinically appropriate and high-quality health care for all the people of North Carolina is a foundational principle for the formulation and application of the North Carolina State Medical Facilities Plan. Barriers to access include, but are not limited to: geography, low income, limited or no insurance coverage, disability, age, race, ethnicity, culture, language, education and health literacy. Individuals whose access to needed health services is impeded by any of these barriers are medically underserved. The formulation and implementation of the Plan seeks to reduce all of these types of barriers to timely and appropriate access. The first priority is to ameliorate economic barriers and the second priority is to mitigate time and distance barriers.

The impact of economic barriers is twofold. First, individuals without insurance, with insufficient insurance, or without sufficient funds to purchase their own health care will often require public funding to support access to regulated services. Second, the preferential selection by providers of well-funded patients may undermine the advantages that can accrue to the public from market competition in health care. A competitive marketplace should favor providers that deliver the highest quality and best value care, but only in the circumstances where all competitors deliver like services to similar populations.

The SHCC assigns the highest priority to a need methodology that favors providers delivering services to a patient population representative of all payer types in need of those services in the service area. Comparisons of value and quality are most likely to be valid when services are provided to like populations. Incentives for quality and process improvement, resource maximization, and innovation are most effective when providers deliver services to a similar and representative mixture of patients.

Access barriers of time and distance are especially critical to rural areas and small communities. However, urban populations can experience similar access barriers. The SHCC recognizes that some essential, but unprofitable, medical services may require support by revenues gained from profitable services or other sources. The SHCC also recognizes a trend to the delivery of some services in more accessible, less complex, and less costly settings. Whenever verifiable data for outcome, satisfaction, safety, and costs for the delivery of such services to representative patient populations justify, the SHCC will balance the advantages of such ambulatory facilities with the needs for financial support of medically necessary but unprofitable care.

The needs of rural and small communities that are distant from comprehensive urban medical facilities merit special consideration. In rural and small communities, selective competition that disproportionately captures profitable services may threaten the viability of sole providers of comprehensive care and emergency services. For this reason, methodologies that balance value, quality, and access in urban and rural areas may differ quantitatively. The SHCC planning process will promote access to an appropriate spectrum of health services at a local level, whenever feasible, under prevailing quality and value standards.

3. Value Basic Principle

The SHCC defines health care value as the maximum health care benefit per dollar expended. Disparity between demand growth and funding constraints for health care services increases the need for affordability and value in health services. Maximizing the health benefit for the entire population of North Carolina that is achieved by expenditures for services regulated by the State Medical Facilities Plan will be a key principle in the formulation and implementation of SHCC recommendations for the Plan.

Measurement of the cost component of the value equation is often easier than measurement of benefit. Cost per unit of service is an appropriate metric when comparing providers of like services for like populations. The cost basis for some providers may be inflated by disproportionate care to indigent and underfunded patients. In such cases the SHCC encourages the adjustment of cost measures to reflect such disparity, but only to the extent such expenditures can be measured according to an established, state-wide standard that is uniformly reported and verifiable. Measurement of benefit is more challenging. Standardized safety and quality measures, when available, can be important factors in achieving improved value in the provision of health services. Prevention, early detection and early intervention are important means for increasing the total population benefit for health expenditures. Development of new technology has the potential to add value by improving outcome and enhancing early detection. Capital costs of such new technology may be greater but justified by the added population benefit. At the same time, overutilization of more costly and/or highly specialized, low-volume services without evidence-based medical indications may contribute to escalating health costs without commensurate population-based health benefit. The SHCC favors methodologies which encourage technological advances for proven and affordable benefit and appropriate utilization for evidence-based indications when available. The SHCC also recognizes the importance of primary care and health education in promoting affordable health care and best utilization of scarce and expensive health resources. Unfortunately, technologically sophisticated and costly services that benefit small numbers of patients may be more readily pursued than simple and less costly detection and prevention measures that benefit the broader population. In the pursuit of maximum population-based health care value, the SHCC recognizes the potential adverse impact for growth of regulated services to supplant services of broad benefit to the larger population.

Long-term enhancement of health care value will result from a State Medical Facilities Plan that promotes a balance of competition and collaboration and encourages innovation in health care delivery. The SHCC encourages the development of value-driven health care by promoting collaborative efforts to create common resources such as shared health databases, purchasing cooperatives, and shared information management, and by promoting coordinated services that reduce duplicative and conflicting care. The

SHCC also recognizes the importance of balanced competition and market advantage in order to encourage innovation, insofar as those innovations improve safety, quality, access, and value in health care delivery.

NOTE

Determinations of need for services and facilities in this Plan do not imply an intent on the part of the North Carolina Department of Health and Human Services, Division of Health Benefits to participate in the reimbursement of the cost of care of patients using services and facilities developed in response to these needs.

North Carolina State Health Coordinating Council Members

<u>Member:</u>	<u>Representing:</u>	<u>From:</u>
Sandra Greene, DrPH, Chair	At-Large	Chapel Hill
Representative Gale B. Adcock, FNP	NC House of Representatives	Cary
Kelli A. Collins	Business and Industry (Large)	Summerfield
Stephen L. DeBiasi, FACHE, CMPE	At-Large	Wilmington
Vanessa Ervin	At-Large	Hubert
William Brian Floyd	Academic Medical Centers	Greenville
Senator Michael Garrett	NC Senate	Greensboro
Charul G. Haugan, MD	Physicians	Raleigh
Valarie Jarvis	At-Large	Durham
Lyndon K. Jordan, III, MD	At-Large	Raleigh
J. Cooper Linton	Hospice	Chapel Hill
James L. Martin, Jr.	Nursing Homes	Hickory
Satish Mathan, MD	At-Large	Raleigh
Robert B. McBride, Jr., MD	At-Large	Charlotte
Commissioner Tonya McDaniel	County Government (Urban)	Winston-Salem
Commissioner Barbara McKoy	County Government (Rural)	Lillington
Denise Mihal	At-Large	Sunset Beach
Vaishali Nadkarni, MD	At-Large	Cary
Pamela A. Oliver, MD, Vice Chair	At-Large	Lewisville
Timothy R. Rogers	Home Care Facilities	Raleigh
Quintana C. Stewart	Public Health Director	Hillsborough
Jessie L. Tucker, III, PhD, FACHE	At-Large	Goldsboro
Mark Werner	Health Insurance Industry	Apex
John E. Young	Hospitals	Wilmington

Committees and Staff Members

Acute Care Services Committee

Planning for acute care beds, operating rooms, open heart surgery services, burn intensive care services, transplantation services (bone marrow transplants and solid organ transplants), end-stage renal disease dialysis facilities, and inpatient rehabilitation services:

Sandra B. Greene, DrPH (Chair); Representative Gale Adcock; Brian Floyd; Charul G. Haugan, MD; Robert B. McBride, Jr., MD; Denise Mihal; Vaishali Nadkarni, MD; Jessie L. Tucker, PhD; John E. Young (Vice Chair)

Staffed by: Elizabeth Brown and Andrea Emanuel, PhD

Long-Term and Behavioral Health Committee

Planning for nursing home facilities, adult care homes, home health services, hospice services, psychiatric inpatient facilities, substance use disorder inpatient and residential services (chemical dependency treatment beds), and intermediate care facilities for individuals with intellectual disabilities:

Valarie Jarvis (Chair); Vanessa Ervin; Senator Michael Garrett; J. Cooper Linton (Vice Chair); James L. Martin, Jr.; Timothy R. Rogers; Quintana C. Stewart

Staffed by: Elizabeth Brown, Andrea Emanuel, PhD, and Trenesse Michael

Technology and Equipment Committee

Planning for cardiac catheterization equipment, gamma knives, linear accelerators, lithotriptors, magnetic resonance imaging scanners, and positron emission tomography scanners:

Lyndon K. Jordan, III, MD (Chair); Kelli A. Collins; Stephen L. DeBiasi, FACHE, CMPE (Vice Chair); Satish Mathan, MD; Commissioner Tonya McDaniel; Commissioner Barbara McKoy; Pamela A. Oliver, MD; Mark Werner

Staffed by: Trenesse Michael

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Mark Payne, Director

Chapter 2:

State Medical Facilities Plan: Process and Adjustments

CHAPTER 2

STATE MEDICAL FACILITIES PLAN: PROCESS AND ADJUSTMENTS

Overview of the State Health Planning Process

Development of the North Carolina State Medical Facilities Plan (SMFP) is a continuous process. It includes meetings of the State Health Coordinating Council (SHCC) and its committees, public hearings and other opportunities for public comment, two opportunities for people to file petitions, data compilation and analysis, preparation of a Proposed SMFP, and preparation of a final SMFP to present to the Governor for review and approval. In the current calendar year, the Department of Health and Human Services, Division of Health Service Regulation (Agency) and the SHCC work on the SMFP for the next calendar year. For example, work on the 2024 SMFP begins in January of 2023, and will include need determinations that may be applied for during calendar year 2024 consistent with the assigned review period for each need determination. With the Governor's approval, the SMFP becomes the official document for health facility and health service planning in North Carolina for the specified calendar year.

The following discussion describes the process followed each year to prepare the subsequent year's SMFP.

First Quarter

From January through March, Healthcare Planning receives and compiles data about utilization of the various facilities, services and equipment contained in the SMFP. Planners use this data to calculate need determinations using the methodologies approved by the SHCC.

First SHCC meeting and public hearing. Near the beginning of March, the SHCC holds its first meeting of the year. A public hearing follows immediately. At this hearing, people may make oral remarks regarding petitions they wish to file or any other matter relevant to the development of the Proposed SMFP for the following year.

Spring petitions and proposals. Spring petitions involve requests for changes to the SMFP that have the potential for a statewide effect, such as the addition, deletion or revision of policies or need determination methodologies. That is, the requested changes would apply to all health services or facilities that are the subject of the petitions, not just the services and facilities in a specific service area. (See below for information regarding requirements for writing and submitting petitions.) In addition to petitions from members of the public, the Agency can propose changes to policies and methodologies in the SMFP. The SHCC may also propose any changes it deems appropriate.

These types of changes are considered early in the calendar year to allow time for potential inclusion in the Proposed SMFP for the following year. Petitioners are encouraged to consult with Healthcare Planning staff as early as possible if they wish to discuss these petitions before submitting them. The deadline for these petitions is 5:00 p.m. on the date of the first SHCC meeting of the year. Petitions are normally posted on the Healthcare Planning website within 48 hours after the deadline. A two-week public comment period follows the petition deadline. After the comment period ends, comments are posted to the Healthcare Planning website.

Upon receipt of petitions and proposals and after review of public comments that have been submitted in relation to a petition or proposal, Healthcare Planning staff prepares a report that includes the Agency's recommendation regarding whether to approve, deny or alter the request. The Agency report goes to the

committee that covers the health service involved in the petition or proposal for discussion at its first meeting of the year (see below).

Second Quarter

The SHCC and its three committees hold their first two meetings during the second quarter. Each committee is responsible for a set of chapters in the SMFP (see Chapter 1). The first committee meeting typically occurs in April and the second meeting typically occurs in May. The second SHCC meeting occurs near the beginning of June. In addition, Healthcare Planning staff prepares the Proposed SMFP during this time.

First and second committee meetings. Each committee discusses the Agency report(s) at the first meeting of the year, normally held in April. Petitioners will receive written notification of times and places of meetings at which their petitions will be discussed. At that time, the committee votes to approve, deny, or alter the Agency's recommendation. All committee votes are in the form of recommendations to the SHCC. Alternately, the committee may table the matter and call for further study and consideration before making a recommendation to the SHCC. The SHCC considers all committee recommendations at its second meeting of the year (see below).

At the second set of committee meetings, Healthcare Planning staff presents draft need determinations, based on the data obtained and compiled during the first quarter. These meetings are normally held in May. If a committee voted to alter any methodologies at its first meeting, the draft need determinations presented at the second meeting would reflect the proposed changes. In addition, the Agency and the committees may recommend changes to the draft need determinations, as deemed appropriate. The committee votes and forwards its recommendations regarding the need determinations to the SHCC.

Second SHCC meeting. At the second SHCC meeting, committee chairs present reports of their committees' activities and recommendations from the first two meetings of the year. The SHCC discusses and votes on the recommendations of all committees. It may accept the recommendations in whole or in part or reject them. Taken together, the committee recommendations form the body of the Proposed SMFP for the following year. The final act of the SHCC during this meeting is to adopt the Proposed SMFP.

Third Quarter

On or about July 1, the Agency posts the Proposed SMFP for the following year on the Healthcare Planning website. During July, the SHCC holds at least six public hearings to receive comments on petitions intended to be submitted in the summer, or any issue related to the Proposed SMFP for the following year. The SHCC committees hold their third and final meeting of the year during this quarter, usually in September.

Summer petitions and proposals. Summer petitions involve requests for adjustments to need determinations in the Proposed SMFP. Petitioners may submit a written petition requesting an adjustment to the need determination in the Proposed SMFP if they believe that special attributes of a service area or institution give rise to resource requirements that differ from those provided by the standard methodologies and policies. The Agency may also seek adjusted need determinations during this time. (See below for information regarding requirements for writing and submitting petitions.) Petitioners are encouraged to consult with Healthcare Planning staff as early as possible if they wish to discuss these petitions before submitting them. Summer petitions are due no later than 5:00 p.m. on the date of the last public hearing in July. Petitions are normally posted on the Healthcare Planning website within 48 hours after the deadline. A two-week public comment period follows the petition deadline. After the comment period ends, comments are posted to the Healthcare Planning website. Petitioners will receive written notification of times and places of SHCC committee meetings at which their petitions will be discussed.

Third committee meeting. Upon the receipt of summer petitions or Agency proposals, the process that follows is the same as for spring petitions. The Healthcare Planning staff prepares a report that includes the

Agency's recommendation regarding whether to approve, deny or alter the need determination adjustment(s) requested. The Agency report goes to the committee that covers the health service involved in the request. The committee discusses the Agency report(s) at its third meeting of the year. At that time, it votes to approve, deny, or alter the Agency's recommendation. It may instead table the matter and call for further study and consideration before making a recommendation.

Each committee also makes recommendations regarding the entirety of the chapters that it covers, such as updates to need determinations based on edits and updates to data. The committees forward all recommendations to the SHCC for consideration at its final meeting of the year, which normally occurs near the beginning of the fourth quarter.

Fourth Quarter

SHCC activities culminate in the fourth quarter. The SHCC recommends the following year's SMFP to the Governor. After gubernatorial approval, the Agency posts the approved SMFP on the Healthcare Planning website.

Final SHCC meeting. The final SHCC meeting of the year is usually held at the beginning of the fourth quarter. At this meeting, the SHCC receives reports from all committees. These reports summarize their recommendations regarding summer petitions, proposals and need determinations. Information provided to the SHCC also includes any other updates to data that may affect need determinations. The SHCC discusses all recommendations and data adjustments. At the end of the discussion, the SHCC will have a complete SMFP for the following year to recommend to the Governor for approval. Disposition of all petitions for changes to the following year's SMFP will be made no later than the SHCC meeting at which the Council makes its final recommendation to the Governor.

The final SMFP. The final SMFP for the following year contains the need determinations that delineate the number of additional facilities, operating rooms, equipment, or services that may be applied for and approved by CON during the year. Chapter 3 describes the review categories and review schedule for CON applications.

Near the end of October, Healthcare Planning staff meets with the Department of Health and Human Services leadership and the Governor's representatives to submit the recommended final SMFP for the following year. The Governor may approve the SMFP as submitted or make any adjustments or amendments deemed appropriate by the Governor. The deadline for the Governor to approve an SMFP is December 31.

The Agency normally posts the approved SMFP for the coming year on the Healthcare Planning website during December, but it will be posted no later than January 1 of the year in which the SMFP becomes effective. The date of posting is dependent upon the date that the Agency receives the Governor's approval; this date is not known in advance. After the SMFP is posted, the Agency arranges for production of printed and bound copies that the public may purchase. Copies of the SMFP are generally available by early February each year, but the exact date is not known in advance. The Agency will notify the public when copies are available.

Instructions for Writing and Submitting Spring and Summer Petitions

At a minimum, each written petition must contain all the following:

1. name, address, email address and phone number of the petitioner(s);
2. a statement of the requested change, citing the policy or methodology (spring), need determination (summer), or other aspect of the SMFP for which the change is proposed;

3. reasons for the proposed change, including:
 - a. a statement of the adverse effects on the providers or consumers of health services that are likely to ensue if the change is not made; and
 - b. a statement of alternatives to the proposed change that were considered and found not feasible.
4. evidence that the proposed change would not result in unnecessary duplication of health resources in the area; and
5. evidence that the requested change is consistent with the three Basic Principles governing the development of the SMFP: safety and quality, access, and value (see Chapter 1).

For summer petitions, petitioners should use the same service area definitions in the relevant chapter(s) of the Proposed SMFP.

Petitioners should be aware that Healthcare Planning staff may request additional information and opinions from the petitioner or any other people and organizations who may be affected by the proposed change.

Each written petition must be clearly labeled “Petition” and the North Carolina Division of Health Service Regulation, Healthcare Planning must receive one copy no later than 5:00 p.m. on the deadline date (see below).

Petitions and comments must be submitted by e-mail, US mail, a delivery service, or hand delivery. The Agency cannot accept faxed petitions or comments.

E-Mail: DHSR.SMFP.Petitions-Comments@dhhs.nc.gov

Mail: North Carolina Division of Health Service Regulation
Healthcare Planning
2704 Mail Service Center
Raleigh, North Carolina 27699-2704

The office location and address for hand delivery and use of delivery services is:

809 Ruggles Drive
Raleigh, North Carolina 27603

Workgroups and Interested Parties

As needed, the SHCC Chairperson may appoint a workgroup to address a specific issue of interest. Workgroups are most commonly formed to address revisions to need determination methodologies. The Chairperson will develop a specific charge to outline the workgroup’s tasks. Workgroups generally consist of fewer than 10 people and include SHCC members and members of the public knowledgeable of the issue under study. After one or more meetings, the workgroup votes on a recommendation to the assigned committee or the full SHCC regarding the subject of its charge. The meetings are public, but only the workgroup members participate in the discussion, unless a member requests additional input.

The SHCC Chairperson may also authorize Interested Parties meetings to discuss specific topics of interest. Unlike workgroups, there is no specific charge and no formal recommendation to the SHCC. Rather, everyone in attendance is invited to participate in the discussion.

A public hearing or written public comment period may be part of the activities surrounding workgroups and Interested Parties meetings. The SHCC Chairperson has the discretion to authorize a public hearing or comment period. All written comments received are posted on the Healthcare Planning website. Workgroup and Interested Parties meetings often occur late in the year and into the spring of the following year because they typically involve issues surrounding policies and methodologies. However, their activities may occur at any time of the year.

Contact Information

Healthcare Planning staff may be reached at the mailing address listed above, or by calling (919) 855-3865.

Scheduled State Health Coordinating Council Meetings and Committee Meetings

All meetings are scheduled from 10:00 a.m. until noon in Room 104 of the Brown Building on the Dorothea Dix Campus, 801 Biggs Drive, Raleigh, NC. Directions to the Brown Building can be found at:

<https://info.ncdhhs.gov/dhsr/brown.html>

Any additional changes to Council, committee, workgroup, and Interested Parties meeting dates, times, and locations will be posted on the meeting information web page at:

<https://info.ncdhhs.gov/dhsr/mfp/meetings.html>

North Carolina State Health Coordinating Council Meetings for 2023 **(meets on Wednesdays)**

March 1

May 31

October 4

The Council will conduct a public hearing on statewide issues related to development of the Proposed 2024 SMFP immediately following the business meeting on March 1.

<https://info.ncdhhs.gov/dhsr/mfp/meetings.html>

2023 Spring Public Hearing Date and Deadlines for Spring Petitions and Comments

March 1	The Council will conduct a public hearing on statewide issues related to the development of the Proposed 2024 SMFP immediately following the business meeting. Electronic media may not be used in presentations at the public hearing.
March 1 5:00 p.m.	Deadline for receipt by Healthcare Planning of petitions on statewide issues.
March 15 5:00 p.m.	Deadline for receipt by Healthcare Planning of all written comments regarding petitions submitted by the March 2 deadline and all other comments related to development of the North Carolina Proposed 2024 SMFP.

Committee Meetings for 2023

Acute Care Services Committee (meets on Tuesdays)

April 4
May 16
September 12

Long-Term and Behavioral Health Committee (meets on Thursdays)

April 13
May 11
September 14

Technology and Equipment Committee (meets on Wednesdays)

April 5
May 17
September 13

2023 Schedule of Summer Public Hearings on the NC Proposed 2024 SMFP

(All hearings begin at 1:30 p.m.)

All summer public hearings will be held via WebEx. Instructions for joining the public hearings will be posted on the web page below at least two weeks before the first public hearing. Information will also be emailed to the Interested Parties list.

<https://info.ncdhhs.gov/dhsr/mfp/publichearing.html>

Monday, July 10

Wednesday, July 12

Tuesday, July 18

Thursday, July 20

Tuesday, July 25

Wednesday, July 26

Electronic media may not be used in presentations at any public hearings.

2023 Deadlines for Summer Petitions and Comments

July 26 5:00 p.m.	Deadline for receipt by Healthcare Planning of petitions for adjustments to need determinations and comments regarding other issues related to the Proposed 2024 SMFP.
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August 9 5:00 p.m.	Deadline for receipt by Healthcare Planning of any written comments on petitions submitted by the July 26 deadline and all comments regarding other issues related to the Proposed 2024 SMFP.
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Chapter 3:

Certificate of Need Review Categories and Schedule

CHAPTER 3

CERTIFICATE OF NEED

REVIEW CATEGORIES AND SCHEDULE

A certificate of need (CON) is required prior to the development of a new institutional health service. Pursuant to 10A NCAC¹ 14C .0203, Certificate of Need shall determine the appropriate review category or categories in which an application shall be submitted. For proposals which fall into more than one category, an applicant must contact Certificate of Need prior to submittal of the application for a determination regarding the appropriate review category or categories and the applicable review period or periods in which the proposal must be submitted.

The categories are as follows:

Category A: Acute Care Services

- new acute care hospitals;
- new or additional campus of an existing acute care hospital;
- new or additional acute care beds;
- relocation of existing or approved acute care beds within the same service area;
- relocation of existing acute care hospital within the same service area;
- new or additional intensive care services, including but not limited to burn and neonatal;
- new or expanded satellite emergency department;
- offering inpatient dialysis services;
- new transplantation services;
- new open heart surgery services;
- new long-term care hospitals or beds, including conversion of acute care beds to long-term care hospital beds; and
- Policy AC-3 projects.

Category B: Nursing and Adult Care Services

Category B.1

- new nursing home facilities or beds pursuant to a need determination;
- relocation of existing or approved nursing home facility beds within the same service area;
- transfer of nursing home facility beds from state psychiatric hospitals pursuant to Policy NH-5;
- new adult care home facilities or beds pursuant to a need determination;
- relocation of existing or approved adult care home beds within the same service area; and
- new or existing continuing care retirement communities applying pursuant to Policy NH-2 or Policy LTC-1.

Category B.2 (Relocation of Existing Beds to Another Service Area)

- relocation of existing nursing home facility beds to another service area pursuant to Policy NH-6; and
- relocation of existing adult care home beds to a another service area pursuant to Policy LTC-2.

¹ North Carolina Administrative Code

Category C: Psychiatric, Substance Use Disorder or Intellectual Disability Services

- new psychiatric facilities or beds;
- relocation of existing or approved psychiatric beds within the same service area;
- transfer of psychiatric beds from state psychiatric hospitals pursuant to Policy PSY-1;
- new substance use disorder facilities or beds;
- relocation of existing or approved substance use disorder beds within the same service area;
- new intermediate care facilities or beds for individuals with intellectual disabilities (ICF/IID);
- relocation of existing or approved ICF/IID beds within the same service area; and
- transfer of ICF/IID beds from state developmental centers pursuant to Policy ICF/IID-5.

Category D: Dialysis Services

Category D.1 (County or Facility Need)

- new certified dialysis stations pursuant to the facility need methodology; and
- new kidney disease treatment centers or certified dialysis stations pursuant to the county need methodology.

Category D.2 (Relocation to a Contiguous County)

- relocation of existing kidney disease treatment centers or existing certified dialysis stations to a contiguous county pursuant to Policy ESRD-2.

Category D.3 (All Other Proposals)

- relocation of existing kidney disease treatment centers or existing certified dialysis stations within the same service area;
- new kidney disease treatment centers for home hemodialysis or peritoneal dialysis services; and
- development of or expansion of a kidney disease treatment center on a hospital campus pursuant to Policy ESRD-3.
- all other proposals involving dialysis services that do not fit into Category D.1 or D.2.

Category E: Surgical Services

- new licensed ambulatory surgical facilities;
- new operating rooms;
- relocation of existing or approved operating rooms within the same service area; and
- relocation of existing ambulatory surgical facility within the same service area.

Category F: Home Health and Hospice Services

- new Medicare-certified home health agencies or offices;
- new hospices or hospice offices;
- new hospice inpatient facility beds;
- relocation of existing or approved hospice inpatient facility beds within the same service area;
- new hospice residential care facility beds; and
- relocation of existing or approved hospice residential care facility beds within the same service area.

Category G: Inpatient Rehabilitation Services

- new inpatient rehabilitation facilities or beds; and
- relocation of existing or approved inpatient rehabilitation beds within the same service area.

Category H: Medical Equipment

- cardiac catheterization equipment or new cardiac catheterization services;
- heart-lung bypass machines;
- gamma knives;
- lithotripters;
- magnetic resonance imaging scanners;
- positron emission tomography scanners;
- linear accelerators;
- simulators;
- major medical equipment as defined in G.S. 131E-176(14o);
- diagnostic centers as defined in G.S. 131E-176(7a);
- replacement equipment that does not result in an increase in the inventory of the equipment;
- conversion of an existing or approved fixed PET scanner to mobile pursuant to Policy TE-1 (July 1st Review Cycle only);
- intraoperative magnetic resonance imaging scanners acquired pursuant to Policy TE-2;
- fixed magnetic resonance imaging scanners acquired pursuant to Policy TE-3; and

Category I: Gastrointestinal Endoscopy Services

- new or additional gastrointestinal endoscopy rooms as defined in G.S. 131E-176(7d); and
- relocation of existing or approved gastrointestinal endoscopy rooms within the same service area.

Category J: Miscellaneous

- changes of scope and cost overruns;
- reallocation of beds or services pursuant to Policy GEN-1; and
- projects not included in Categories A through I.

Review Dates

Table 3A shows the review schedule, by category, for CON applications requiring review. However, except for proposals involving new dialysis stations pursuant to the facility need methodology, a service, facility, or equipment for which a need determination is identified in the North Carolina State Medical Facilities Plan will have only one scheduled review date and one corresponding application deadline in the calendar year, even though the table shows multiple review dates for the broad category. In order to determine the designated application deadline for a specific need determination in the North Carolina State Medical Facilities Plan, an applicant must refer to the applicable need determination table for that service in the related chapter in the Plan. Applications for certificates of need for new institutional health services not specified in other chapters of the Plan shall be reviewed pursuant to the following review schedule, with the exception that no reviews are scheduled if there is no need determination.

In order to give Certificate of Need sufficient time to provide public notice of review and public notice of public hearings as required by G.S. 131E-185, pursuant to 10A NCAC 14C.0203(b), the deadline for filing CON applications is **5:00 p.m.** on the 15th day of the month preceding the “CON Beginning Review Date.” In instances when the 15th day of the month falls on a weekend or holiday, the application deadline is **5:00 p.m.** on the next business day. **The application deadline is absolute and applications received after the deadline shall not be reviewed in that review period.** Applicants are strongly encouraged to complete all materials at least one day prior to the application deadline and to submit material early on the application deadline.

Table 3A: 2023 Certificate of Need Review Schedule

CON Beginning Review Date	Category (All HSAs)									
February 1, 2023			C	D.3						
March 1, 2023	A	B.1			E	F	G	H	I	J
April 1, 2023			C	D.1						
May 1, 2023	A	B.2			E	F	G	H		J
June 1, 2023			C	D.2					I	
July 1, 2023	A				E	F	G	H		J
August 1, 2023		B.1	C	D.1						
September 1, 2023	A		C		E			H	I	J
October 1, 2023				D.3			G	H		
November 1, 2023	A	B.1			E	F		H		J
December 1, 2023				D.1					I	

For further information about specific schedules, timetables, and CON application forms, contact:

North Carolina Division of Health Service Regulation
Certificate of Need
2704 Mail Service Center
Raleigh, North Carolina 27699-2704

Phone: (919) 855-3873

Chapter 4:

Statement of Policies:

- Acute Care Facilities and Services
 - Acute Care Hospitals
 - End-Stage Renal Disease Dialysis Facilities
- Long-Term Care Facilities and Services
 - Nursing Home Facilities
 - Adult Care Homes
 - Home Health Services
 - All Mental Health, Developmental Disabilities, and Substance Use Disorder Facilities
 - Psychiatric Inpatient Services Facilities
 - Intermediate Care Facilities for Individuals with Intellectual Disabilities
- Technology and Equipment
- All Health Services

CHAPTER 4

STATEMENT OF POLICIES

Summary of Policy Changes for 2023

The State Health Coordinating Council (SHCC) approved removal of policy AC-5, based on a petition. The SHCC also approved two changes that established need determinations. Specifically, the SHCC approved an edit to Policy AC-6 to clarify how a hospital with one heart-lung bypass machine may apply for a second machine. Also, the SHCC approved the removal of Policy HH-3. The provisions of HH-3 have been moved to Chapter 12. The Agency requested these changes because it is more transparent to place and explain need determinations in the relevant chapters rather than in a policy alone.

Finally, based on a petition, the SHCC approved revisions to policy TE-3 to allow development of a new fixed MRI scanner on a satellite acute care hospital campus separate from the main hospital campus.

POLICIES APPLICABLE TO ACUTE CARE FACILITIES AND SERVICES

Acute Care Hospitals (AC)

Policy AC-1: Use of Licensed Bed Capacity Data for Planning Purposes

For planning purposes, the number of licensed beds shall be determined by the Division of Health Service Regulation in accordance with standards found in 10A NCAC 13B - Section .6200 and Section .3102 (d).

Licensed bed capacity of each hospital is used for planning purposes. It is the hospital's responsibility to notify the Division of Health Service Regulation promptly when any of the space allocated to its licensed bed capacity is converted to another use, including purposes not directly related to health care.

Policy AC-3: Exemption from Plan Provisions for Certain Academic Medical Center Teaching Hospital Projects

Projects for which certificates of need are sought by academic medical center teaching hospitals (Appendix F) may qualify for exemption from the need determinations of this document. The Healthcare Planning and Certificate of Need Section shall designate as an academic medical center teaching hospital any facility whose application for such designation demonstrates the following characteristics of the hospital:

1. serves as a primary teaching site for a school of medicine and at least one other health professional school, providing undergraduate, graduate and postgraduate education;
2. houses extensive basic medical science and clinical research programs, patients and equipment; and
3. serves the treatment needs of patients from a broad geographic area through multiple medical specialties.

Exemption from the provisions of need determinations of the North Carolina State Medical Facilities Plan shall be granted to projects submitted by academic medical center teaching hospitals designated prior to January 1, 1990 provided the projects are necessary to meet one of the following unique academic medical needs:

1. necessary to complement a specified and approved expansion of the number or types of students, residents or faculty that are specifically required for an expansion of students or residents, as certified by the head of the relevant associated professional school; the applicant shall provide documentation that the project is consistent with any relevant standards, recommendations or guidance from specialty education accrediting bodies; or
2. with respect to the acquisition of equipment, is necessary to accommodate the recruitment or retention of a full-time faculty member who will devote a majority of their time to the combined activities of teaching (including teaching within the clinical setting), research, administrative or other academic responsibilities within the academic medical center teaching hospital or medical school; or
3. necessary to accommodate patients, staff or equipment for a specified and approved expansion of research activities, as certified by the head of the entity sponsoring the research; and including, to the extent applicable, documentation pertaining to grants, funding, accrediting or other requirements, and any proposed clinical application of the asset; or
4. necessary to accommodate changes in requirements of specialty education accrediting bodies, as evidenced by copies of documents issued by such bodies.

A project submitted by an academic medical center teaching hospital under this policy that meets one of the above conditions shall demonstrate that the academic medical center teaching hospital's teaching or research need for the proposed project cannot be achieved effectively at any non-academic medical center teaching hospital provider which currently offers and has capacity within the service for which the exemption is requested and which is within 20 miles of the academic medical center teaching hospital.

The academic medical center teaching hospital shall include in its application an analysis of the cost, benefits and feasibility of engaging that provider in a collaborative effort that achieves the academic goals of the project as compared with the certificate of need application proposal. The academic medical center teaching hospital shall also provide a summary of a discussion or documentation of its attempt to engage the provider in discussion regarding its analysis and conclusions.

The academic medical center teaching hospital shall include in its application a discussion of any similar assets within 20 miles that are under the control of the applicant or the associated professional school and the feasibility of using those assets to meet the unique teaching or research needs of the academic medical center teaching hospital.

For each of the first five years of operation the approved applicant shall submit to Certificate of Need a detailed description of how the project achieves the academic requirements of the appropriate section(s) of Policy AC-3, paragraph 2 (items 1 through 4) as proposed in the certificate of need application.

Applicants who are approved for Policy AC-3 projects after January 1, 2012 shall report those Policy AC-3 assets (including beds, operating rooms and equipment) on the appropriate annual license renewal application or registration form for the asset. The information to be reported for the Policy AC-3 assets shall include: (a) inventory or number of units of Policy AC-3 Certificate of Need-approved assets (including all beds, operating rooms and equipment); (b) the annual volume of days, cases or procedures

performed for the reporting year on the Policy AC-3 approved asset; and (c) the patient origin by county. Except for operating rooms, neither the assets under (a) above nor the utilization from (b) above shall be used in the annual State Medical Facilities Plan need determination formulas, but both the assets and the utilization will be available for informational purposes to users of the State Medical Facilities Plan. Operating rooms approved under Policy AC-3 and their utilization shall be reported on the license renewal application and included in the inventory, regardless of the date of Certificate of Need approval.

This policy does not apply to a proposed project or the portion thereof that is based solely upon the inability of the State Medical Facilities Plan methodology to accurately project need for the proposed service(s), due to documented differences in patient treatment times that are attributed to education or research components in the delivery of patient care or to differences in patient acuity or case mix that are related to the applicant's academic mission. However, the applicant may submit a petition pursuant to the State Medical Facilities Plan Petitions for Adjustments to Need Determinations process to meet that need or portion thereof (see Chapter 2).

Policy AC-3 projects are required to materially comply with representations made in the certificate of need application regarding academic based need. If an asset originally developed or acquired pursuant to Policy AC-3 is no longer used for research and/or teaching, the academic medical center teaching hospital shall surrender the certificate of need.

Policy AC-4: Reconversion to Acute Care

Facilities that have redistributed beds from acute care bed capacity to psychiatric, rehabilitation, nursing home, or long-term care hospital use, shall obtain a certificate of need to convert this capacity back to acute care. Applicants proposing to reconvert psychiatric, rehabilitation, nursing home, or long-term care hospital beds back to acute care beds shall demonstrate that the hospital's average annual utilization of licensed acute care beds as calculated using the most recent days of care provided to Healthcare Planning by The Cecil G. Sheps Center for Health Services Research at the University of North Carolina at Chapel Hill is equal to or greater than the target occupancies shown below, but shall not be evaluated against the acute care bed need determinations shown in Chapter 5 of the North Carolina State Medical Facilities Plan. In determining utilization rates and average daily census, only acute care bed days of care are counted.

Facility Average Daily Census	Target Occupancy of Licensed Acute Care Beds
1 – 99	66.7%
100 – 200	71.4%
Greater than 200	75.2%

Policy AC-6: Heart-Lung Bypass Machines for Emergency Coverage

To protect cardiac surgery patients, who may require emergency procedures while scheduled procedures are underway,, any hospital with an open-heart surgery program that has only one heart-lung bypass machine may submit a certificate of need application for a second machine. The additional machine is to be used to assure appropriate coverage for emergencies and in no instance shall this machine be scheduled for use at the same time as the machine used to support scheduled open-heart surgery procedures. A certificate of need application for a machine acquired in accordance with this provision shall be exempt from compliance with the performance standards set forth in 10A NCAC 14C .1703.

End-Stage Renal Disease Dialysis Facilities (ESRD)

Policy ESRD-2: Relocation of Dialysis Stations

Relocations of existing dialysis stations to contiguous counties are allowed. Certificate of need applicants proposing to relocate dialysis stations to a contiguous county shall:

1. demonstrate that the facility losing dialysis stations or moving to a contiguous county is currently serving residents of that contiguous county; and
2. demonstrate that the proposal shall not result in a deficit or increase an existing deficit in the number of dialysis stations in the county that would be losing stations as a result of the proposed project, as reflected in the most recent North Carolina State Medical Facilities Plan; and
3. demonstrate that the proposal shall not result in a surplus or increase an existing surplus of dialysis stations in the county that would gain stations as a result of the proposed project, as reflected in the most recent North Carolina State Medical Facilities Plan.

Policy ESRD-3: Development or Expansion of a Kidney Disease Treatment Center on a Hospital Campus

Licensed acute care hospitals (see stipulations in G.S. 131E-77 (e1)) may apply for a certificate of need to develop or expand an existing Medicare-certified kidney disease treatment center (outpatient dialysis facility) without regard to a county or facility need determination if all the following are true:

1. The hospital proposes to develop or expand the facility on any campus on its license where general acute beds are located.
2. The hospital must own the outpatient dialysis facility, but the hospital may contract with another legal entity to operate the facility.
3. The hospital must document that the patients it proposes to serve in an outpatient dialysis facility developed or expanded pursuant to this policy are inappropriate for treatment in an outpatient dialysis facility not located on a hospital campus.
4. The hospital must establish a relationship with a community-based outpatient dialysis facility to assist in the transition of patients from the hospital outpatient dialysis facility to a community-based facility wherever possible.

The hospital shall propose to develop at least the minimum number of stations allowed for Medicare certification by the Centers for Medicare & Medicaid Services (CMS). Certificate of Need will impose a condition requiring the hospital to document that it has applied for Medicare certification no later than three (3) years from the effective date on the certificate of need.

The performance standards in 10A NCAC 14C .2203 do not apply to a proposal submitted by a hospital pursuant to this policy.

Dialysis stations developed pursuant to this policy are excluded from the inventory in the State Medical Facilities Plan and excluded from the facility and county need methodologies. Certified outpatient dialysis stations that existed in hospitals as of the date of implementation of this policy will be removed from the

inventory and methodologies; these facilities will be treated as though the stations were developed pursuant to this policy.

Outpatient dialysis facilities developed or expanded pursuant to this policy shall report utilization to the Agency in the same manner as other facilities with outpatient dialysis stations.

POLICIES APPLICABLE TO LONG-TERM CARE FACILITIES AND SERVICES

Nursing Home Facilities (NH)

Policy NH-2: Plan Exemption for Continuing Care Retirement Communities

Qualified continuing care retirement communities (CCRC) may include from the outset or add or convert bed capacity for nursing care without regard to the nursing home bed need shown in Chapter 10: Nursing Home Facilities. To qualify for such exemption, the applicant shall document that the proposal meets all the following requirements:

1. will only be developed concurrently with or subsequent to construction on the same site of facilities for both of the following levels of care:
 - a. independent living accommodations (apartments and homes) for people who are able to carry out normal activities of daily living without assistance; such accommodations may be in the form of apartments, flats, houses, cottages and rooms;
 - b. licensed adult care home beds for use by people who, because of age or disability, require some personal services, incidental medical services and room and board to assure their safety and comfort.
2. will be used exclusively to meet the needs of people with whom the facility has continuing care contracts (in compliance with the North Carolina Department of Insurance statutes and rules) who have lived in a non-nursing unit of the continuing care retirement community for a period of at least 30 days. Exceptions shall be allowed when one spouse or sibling is admitted to the nursing unit at the time the other spouse or sibling moves into a non-nursing unit, or when the medical condition requiring nursing care was not known to exist or be imminent when the individual became a party to the continuing care contract.
3. reflects the number of nursing home facility beds required to meet the current or projected needs of residents with whom the facility has an agreement to provide continuing care after making use of all feasible alternatives to institutional nursing care.
4. will not be certified for participation in the Medicaid program.

One hundred percent of the nursing home facility beds developed under this exemption shall be excluded from the inventory and the occupancy rate used to project nursing home bed need for the general population. Certificates of need issued under policies analogous to this policy in the North Carolina State Medical Facilities Plans subsequent to the 1985 State Medical Facilities Plan are automatically amended to conform

to the provisions of this policy at the effective date of this policy. Certificates of need awarded pursuant to the provisions of Chapter 920, Session Laws 1983 or Chapter 445, Session Laws 1985 shall not be amended.

Policy NH-5: Transfer of Nursing Home Facility Beds from State Psychiatric Hospital Nursing Facilities to Community Facilities

Beds in state psychiatric hospitals that are certified as nursing home facility beds may be relocated to licensed nursing home facilities. However, before nursing home facility beds are transferred out of the state psychiatric hospitals, services shall be available in the community. State psychiatric hospital nursing home facility beds that are relocated to licensed nursing home facilities shall be closed within 90 days following the date the transferred beds become operational in the community.

Licensed nursing home facilities proposing to operate transferred nursing home facility beds shall commit to serve the type of residents who are normally placed in nursing home facility beds at the state psychiatric hospitals. To help ensure that relocated nursing home facility beds will serve those people who would have been served by state psychiatric hospitals in nursing home facility beds, a certificate of need application to transfer nursing home facility beds from a state hospital shall include a written memorandum of agreement between the director of the applicable state psychiatric hospital, the director of the North Carolina Division of State Operated Healthcare Facilities, the secretary of the North Carolina Department of Health and Human Services, and the person submitting the proposal.

This policy does not allow the development of new nursing home facility beds. Nursing home facility beds transferred from state psychiatric hospitals to the community pursuant to Policy NH-5 shall be excluded from the inventory.

Policy NH-6: Relocation of Nursing Home Facility Beds

Relocations of existing licensed nursing home facility beds to another service area are allowed. Certificate of need applicants proposing to relocate licensed nursing home facility beds to another service area shall:

1. demonstrate that the proposal shall not result in a deficit, or increase an existing deficit in the number of licensed nursing home facility beds in the county that would be losing nursing home facility beds as a result of the proposed project, as reflected in the North Carolina State Medical Facilities Plan in effect at the time the certificate of need review begins; and
2. demonstrate that the proposal shall not result in a surplus or increase an existing surplus of licensed nursing home facility beds in the county that would gain nursing home facility beds as a result of the proposed project, as reflected in the North Carolina State Medical Facilities Plan in effect at the time the certificate of need review begins.

Policy NH-8: Innovations in Nursing Home Facility Design

Certificate of need applicants proposing new nursing home facilities and replacement nursing home facilities shall pursue innovative approaches in environmental design that address quality of care and quality of life needs of the residents. These plans could include innovative design elements that encourage less institutional, more home-like settings, privacy, autonomy and resident choice, among others.

Adult Care Homes (LTC)

Policy LTC-1: Plan Exemption for Continuing Care Retirement Communities – Adult Care Home Beds

Qualified continuing care retirement communities may include from the outset or add or convert bed capacity for adult care without regard to the adult care home bed need shown in Chapter 11: Adult Care Homes. To qualify for such exemption, the applicant shall document that the proposal meets all the following requirements:

1. will only be developed concurrently with, or subsequent to, construction on the same site of independent living accommodations (apartments and homes) for people who are able to carry out normal activities of daily living without assistance; such accommodations may be in the form of apartments, flats, houses, cottages, and rooms.
2. will provide for the provision of nursing services, medical services or other health related services as required for licensure by the North Carolina Department of Insurance.
3. will be used exclusively to meet the needs of people with whom the facility has continuing care contracts (in compliance with the North Carolina Department of Insurance statutes and rules) who have lived in a non-nursing or adult care unit of the continuing care retirement community for a period of at least 30 days. Exceptions shall be allowed when one spouse or sibling is admitted to the adult care home unit at the time the other spouse or sibling moves into a non-nursing or adult care unit, or when the medical condition requiring nursing or adult care home care was not known to exist or be imminent when the individual became a party to the continuing care contract.
4. reflects the number of adult care home beds required to meet the current or projected needs of residents with whom the facility has an agreement to provide continuing care after making use of all feasible alternatives to institutional adult care home care.
5. will not participate in the Medicaid program or serve State-County Special Assistance recipients.

One hundred percent of the adult care home beds developed under this exemption shall be excluded from the inventory used to project adult care home bed need for the general population. Certificates of need issued under policies analogous to this policy in the North Carolina State Medical Facilities Plans subsequent to the North Carolina 2002 State Medical Facilities Plan are automatically amended to conform with the provisions of this policy at the effective date of this policy.

Policy LTC-2: Relocation of Adult Care Home Beds

Relocations of existing licensed adult care home beds to another service area are allowed. Certificate of need applicants proposing to relocate licensed adult care home beds to another service area shall:

1. demonstrate that the proposal shall not result in a deficit, or increase an existing deficit in the number of licensed adult care home beds in the county that would be losing adult care home beds as a result of the proposed project, as reflected in the North Carolina State Medical Facilities Plan in effect at the time the certificate of need review begins; and
2. demonstrate that the proposal shall not result in a surplus or increase an existing surplus of licensed adult care home beds in the county that would gain adult care home beds as a result of

the proposed project, as reflected in the North Carolina State Medical Facilities Plan in effect at the time the certificate of need review begins.

Policy LTC-3: Certification of Beds for Special Assistance

Certificate of need applicants proposing to develop new adult care home beds pursuant to a need determination shall demonstrate that the proposed beds will be certified for special assistance and that at least 5% of the projected days of care in the third full fiscal year of operation shall be provided to residents receiving State-County Special Assistance.

All Mental Health, Developmental Disabilities and Substance Use Disorder Facilities (MH)

Policy MH-1: Linkages between Treatment Settings

An applicant for a certificate of need for psychiatric, substance use disorder or intermediate care facilities for individuals with intellectual disabilities (ICF/IID) beds shall document that the affected local management entity-managed care organization has been contacted and invited to comment on the proposed services.

Psychiatric Inpatient Services Facilities (PSY)

Policy PSY-1: Transfer of Beds from State Psychiatric Hospitals to Community Facilities

Beds in the state psychiatric hospitals used to serve short-term psychiatric patients may be relocated to community facilities through the certificate of need process. However, before beds are transferred out of the state psychiatric hospitals, services and programs shall be available in the community. State psychiatric hospital beds that are relocated to community facilities shall be closed within 90 days following the date the transferred beds become operational in the community.

Facilities proposing to operate transferred beds shall submit an application to Certificate of Need of the North Carolina Department of Health and Human Services and commit to serve the type of short-term patients normally placed at the state psychiatric hospitals. To help ensure that relocated beds will serve those people who would have been served by the state psychiatric hospitals, a proposal to transfer beds from a state hospital shall include a written memorandum of agreement between the local management entity-managed care organization serving the county where the beds are to be located, the secretary of the North Carolina Department of Health and Human Services, and the person submitting the proposal.

Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID)

Policy ICF/IID-5: Transfer of ICF/IID Beds from State Operated Developmental Centers to Community-Based Facilities

Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID) beds in state operated developmental centers may be relocated to existing community-based facilities through the certificate of need process. This policy covers the relocation of beds only and does not provide for or preclude transfer

of residents with the beds. State operated developmental center ICF/IID beds that are relocated to a community-based facility shall be closed upon licensure of the transferred beds.

Applicants proposing to relocate beds from a state operated developmental center shall be required to submit a certificate of need application. The application shall include a written agreement signed by all the following:

1. director of the local management entity/managed care organization serving the county where the community-based facility is or will be located;
2. director of the state operated developmental center transferring the beds;
3. director of the North Carolina Division of State Operated Healthcare Facilities;
4. secretary of the North Carolina Department of Health and Human Services; and
5. operator of the community-based facility.

The maximum number of beds in the facility upon project completion shall not exceed 15 beds.

The project shall not result in more than three facilities housing a combined total of 18 people being developed on contiguous pieces of property.

POLICIES APPLICABLE TO TECHNOLOGY AND EQUIPMENT (TE)

Policy TE-1: Conversion of Fixed PET Scanners to Mobile PET Scanners

Facilities with an existing or approved fixed PET scanner may apply for a Certificate of Need (CON) to convert the existing or approved fixed PET scanner to a mobile PET scanner if the applicant(s) demonstrates in the CON application that the converted mobile PET scanner:

1. shall continue to operate as a mobile PET scanner at the facility, including satellite campuses, where the fixed PET scanner is located or was approved to be located;
2. shall be moved at least weekly to provide services at two or more host facilities; and
3. shall not serve any mobile host site that is not owned by the PET certificate holder or an entity related to the PET certificate holder such as a parent or subsidiary that is located in the county where any existing or approved fixed PET scanner is located, except as required by subpart (1).

There will be one certificate of need application filing opportunity each calendar year.

Policy TE-2: Intraoperative Magnetic Resonance Imaging Scanners

Qualified applicants may apply for an intraoperative Magnetic Resonance Imaging Scanner (iMRI) to be used in an operating room suite.

To qualify, the health service facility proposing to acquire the iMRI scanner shall demonstrate in its certificate of need application that it is a licensed acute care hospital which:

1. performed at least 500 inpatient neurosurgical cases during the 12 months immediately preceding the submission of the application; and
2. has at least two neurosurgeons that perform intracranial surgeries currently on its Active Medical Staff; and
3. is located in a metropolitan statistical area as defined by the US Census Bureau with at least 350,000 residents.

The iMRI scanner shall not be used for outpatients and may not be replaced with a conventional MRI scanner.

The performance standards in 10A NCAC 14C .2703 would not be applicable.

Intraoperative procedures and inpatient procedures performed on the iMRI shall be reported separately on the Hospital License Renewal Application.

These scanners shall not be counted in the inventory of fixed MRI scanners; the procedures performed on the iMRI will not be used in calculating the need methodology and will be reported in a separate table in Chapter 17.

Policy TE-3: Plan Exemption for Fixed Magnetic Resonance Imaging Scanners

The applicant proposing to acquire a fixed magnetic resonance imaging (MRI) scanner shall demonstrate in its certificate of need (CON) application that it is a licensed North Carolina acute care hospital:

1. that has licensed acute care beds;
2. that provides emergency care coverage 24 hours a day, seven days a week; and
3. for which the inventory in the SMFP does not reflect an existing or approved fixed MRI scanner in the five years immediately preceding the filing of the CON application for the proposed scanner.

The applicant shall demonstrate that the proposed fixed MRI scanner will perform at least 850 weighted MRI procedures during the third full operating year.

The performance standards in 10A NCAC 14C .2703 would not be applicable.

The fixed MRI scanner must be located either:

1. on the main campus of the hospital as defined in G.S. 131E-176(14n); or
2. at another acute care hospital on a campus that operates under the hospital's license.

The proposed scanner may operate as part of the hospital, a diagnostic center, or an independent diagnostic testing facility (IDTF) location that does not currently provide fixed MRI services.

POLICIES APPLICABLE TO ALL HEALTH SERVICES (GEN)

Policy GEN-1 applies to all health services except end-stage renal disease dialysis services. Policies GEN-3 and GEN-4 apply to all health services.

Policy GEN-1: Reallocations

In this policy, the term *reallocated* means that the need determination will be scheduled for review in the following year. Furthermore, the terms *this Plan*, or *the Proposed Plan* mean the State Medical Facilities Plan (SMFP) or Proposed SMFP, respectively, in effect at the time the policy is to be applied.

1. Need determinations in this Plan, except for need determinations for dialysis stations, may be reallocated in the following year if either 1.a or 1.b is true:
 - a. The review period for the need determination was scheduled to begin on October 1, November 1, or December 1 of the current year, and
 - i. no applications were received for the need determination, or
 - ii. applications were received but not all the beds, operating rooms, services or equipment that were available were applied for.
 - b. Resolution of litigation between August 16 and December 15 of the current year would have resulted in a need determination if the litigation had been resolved on or before August 15. Resolution of litigation means that all contested case petitions have been withdrawn with prejudice and all certificates of need, if any, have been issued.
2. The need determination may be reallocated in the following year if Healthcare Planning determines that a need still exists:
 - a. based on the inventory in the Proposed Plan in effect at the time of the reallocation, and
 - b. application of the need methodology in the Proposed Plan in effect at the time of reallocation results in a need determination.
3. Any reallocated need determination shall be limited to the number of beds, operating rooms, services or equipment needed based on application of the need methodology in the Proposed Plan.
4. CON will schedule the review for a reallocated need determination no sooner than the second review period in the year after the policy is applied for the review category as determined by Certificate of Need (CON).
5. CON will notify people on the CON Interested Parties List and the State Medical Facilities Plan-Interested Parties List of the reallocated need determination no less than 60 days prior to the application deadline.

Illustrative Examples:

- 1.a. Need determination for 20 adult care home beds in the 2019 SMFP
Review is scheduled to begin November 1, 2019 and applications are due October 15, 2019. No applications are received. CON notifies Healthcare Planning. Healthcare Planning removes the

placeholder for the need determination from the Proposed 2020 SMFP and recalculates the need based on the need methodology in the Proposed 2020 SMFP. If there is a need, CON schedules a review in 2020.

1.b. Need determination for two operating rooms in the 2018 SMFP

Two applications are received, each proposing to develop the two operating rooms. The denied applicant appeals. The litigation is finally resolved on November 15, 2019. CON notifies Healthcare Planning. Healthcare Planning removes the placeholder for the need determination in the Proposed 2020 SMFP, adjusts the inventory, and recalculates the need based on the need methodology in the Proposed 2020 SMFP. If there is a need, CON schedules a review in 2020.

Policy GEN-3: Basic Principles

A certificate of need applicant applying to develop or offer a new institutional health service for which there is a need determination in the North Carolina State Medical Facilities Plan shall demonstrate how the project will promote safety and quality in the delivery of health care services while promoting equitable access and maximizing healthcare value for resources expended. A certificate of need applicant shall document its plans for providing access to services for patients with limited financial resources and demonstrate the availability of capacity to provide these services. A certificate of need applicant shall also document how its projected volumes incorporate these concepts in meeting the need identified in the State Medical Facilities Plan as well as addressing the needs of all residents in the proposed service area.

Policy GEN-4: Energy Efficiency and Sustainability for Health Service Facilities

Any person proposing a capital expenditure greater than \$4 million to develop, replace, renovate or add to a health service facility pursuant to G.S. 131E-178 shall include in its certificate of need application a written statement describing the project's plan to assure improved energy efficiency and water conservation.

In approving a certificate of need proposing an expenditure greater than \$5 million to develop, replace, renovate or add to a health service facility pursuant to G.S. 131E-178, Certificate of Need shall impose a condition requiring the applicant to develop and implement an Energy Efficiency and Sustainability Plan for the project that conforms to or exceeds energy efficiency and water conservation standards incorporated in the latest editions of the North Carolina State Building Codes. The plan must be consistent with the applicant's representation in the written statement as described in paragraph one of Policy GEN-4.

Any person awarded a certificate of need for a project or an exemption from review pursuant to G.S. 131E-184 is required to submit a plan for energy efficiency and water conservation that conforms to the rules, codes and standards implemented by the Construction Section of the Division of Health Service Regulation. The plan must be consistent with the applicant's representation in the written statement as described in paragraph one of Policy GEN-4. The plan shall not adversely affect patient or resident health, safety or infection control.

Chapter 5:

Acute Care Hospital Beds

CHAPTER 5

ACUTE CARE HOSPITAL BEDS

Introduction

G.S. 131E-176(13) defines a hospital as “a public or private institution which is primarily engaged in providing to inpatients, by or under supervision of physicians, diagnostic services and therapeutic services for medical diagnosis, treatment, and care of injured, disabled, or sick persons, or rehabilitation services for the rehabilitation of injured, disabled or sick persons. The term includes all facilities licensed pursuant to G.S. 131E-77, except long-term care hospitals (LTCHs).”

There are 108 licensed acute care hospitals in the state. The occupancy rate for acute care beds is 62.9%. Table 5A shows that certificates of need have been issued to decrease the number of beds in some areas and increase the number of beds in other areas, resulting in a net of 1,262 new beds to be developed.

Definitions

An acute care hospital bed’s service area is the single or multicounty grouping shown in Figure 5.1. See below for the delineation of service areas.

The **reporting year** is October 1 through September 30. The **current** reporting year is October 1, 2020 through September 30, 2021.

The methodology projects bed need four years beyond the current reporting year. The **current projection year** is 2025.

The **planning inventory** is the number of beds used in need determination calculations. It is the number of licensed beds as of the last day of the reporting year as submitted by the hospital, plus any new beds approved by CON that are under development as of the last day of the reporting year, minus any beds delicensed after the end of the reporting year, minus any beds approved or licensed pursuant to Policy AC-3 as of the last day of the reporting year.

A **hospital under common ownership** is a hospital that is owned by the same or a related legal entity as at least one other acute care hospital in the same service area. All other hospitals are **single** hospitals.

Changes from the Previous Plan

This chapter contains substantive changes from the previous State Medical Facilities Plan (SMFP). Due to sustained impacts of the COVID-19 pandemic, and in response to a petition to remove neonatal intensive care unit (NICU) beds from the acute care need methodology, the State Health Coordinating Council (SHCC) decided to adjust calculations for determining acute care bed need in the 2023 SMFP. The changes are described below under “Application of the Methodology.”

Basic Principles

1. Acute care hospitals are the providers of essential health care services, one of the state’s largest employers, the largest single investment of public funds in many communities, magnets for physicians deciding where to practice, and building blocks in the economic development of their communities. North Carolina must safeguard the future of its hospitals.

Even so, it is not the policy of the state to guarantee the survival and continued operation of all the state's hospitals, or even any one of them. In a dynamic, fast-changing environment, which is moving away from inpatient hospital services, the survival and future activities of hospitals will be a function of many factors beyond the realm of state policy.

The state can, however, facilitate the survival of its hospitals and promote the development of needed health care services, acute and non-acute, by encouraging hospitals to convert unused acute care inpatient facilities to new purposes, to collaborate with other health care providers, and to develop health care delivery networks.

2. The North Carolina Department of Health and Human Services supports the use of swing beds in providing long-term nursing care services in rural acute care hospitals. Section 1883 of the Social Security Act provides that certain small rural hospitals may use their inpatient facilities to furnish skilled nursing facility (SNF) services to Medicare and Medicaid beneficiaries and intermediate care facility (ICF) services to Medicaid beneficiaries.

Data Sources

The inventory of acute care beds comes from the Hospital License Renewal Applications for the reporting year, as submitted to the North Carolina Department of Health and Human Services, Division of Health Service Regulation (Agency).

Annual acute inpatient days of care (DOC) come from Hospital Industry Data Institute (HIDI), a collector of hospital patient discharge information. Hospitals report to HIDI using the UB04 form. HIDI provides general acute care DOC by facility and data on patients' county of residence to the Cecil G. Sheps Center for Health Services Research at the University of North Carolina at Chapel Hill. The Sheps Center provides the Agency with aggregate data from the patient records that have been categorized as an "acute care/general discharge."

Basic Assumptions of the Methodology

1. Target occupancies of hospitals should encourage efficiency of operation, and vary with average daily census.
2. In determining utilization rates and average daily census, the methodology counts only acute care bed DOC.
3. When a hospital receives approval to increase or decrease acute care bed capacity, the planning inventory includes this change regardless of the licensure status of the beds.
4. Beginning with the 2011 SMFP, the Agency updates service areas every three years. The updates use inpatient DOC by county of residence and county of service to delineate service areas. To update service areas, the Agency uses data on inpatient DOC by county of residence and county of service from the three most recent years of data available from the Sheps Center.

Delineation of Service Areas

The SMFP contains two types of acute care bed service areas: single county and multicounty. Counties with at least one licensed acute care hospital that are not grouped with another county are single county service areas. A multicounty service area is created under two conditions: 1) counties without a licensed acute care hospital are grouped with the single county where the largest proportion of its patients received inpatient acute care services; 2) if two counties with at least one licensed acute care hospital each provided inpatient acute care services to at least 35% of the residents of a county without a licensed acute care hospital, then

the county without a licensed acute care hospital is grouped with both of the counties with a licensed acute care hospital.

If an entity has a certificate of need (CON) to develop an acute care hospital in a county without an acute care hospital, the planning inventory in Table 5A will include these beds upon licensure. Before licensure, the beds remain under development in the multicounty service area. Upon licensure of the beds, the county where they are licensed becomes a single county service area.

Application of the Methodology (Table 5A)

Step 1: Determine the number of acute care beds in the inventory by totaling:

- a. the number of licensed acute care beds at each hospital (*Column D*) exclusive of beds licensed or approved at academic medical center teaching hospitals (listed in Appendix F) pursuant to Policy AC-3, and exclusive of beds that provide Level II, III and IV NICU services; and
- b. the number of acute care beds for which certificates of need have been issued, but for which changes in the license were not made by the end of the reporting year (i.e., additions, reductions, and relocations) (*Column E*); and
- c. the number of acute care beds for which a need determination in the SMFP is pending review or appeal (*Column E*); and
- d. the number of beds delicensed after the end of the reporting year (*Column E*).

Step 2: Enter the total number of inpatient days of care provided by each hospital for the reporting year, exclusive of days of care provided in Level II, III and IV NICU services (*Column F*).

Step 3: Calculate the projected inpatient DOC for each service area for the projection year as follows:

- a. Determine the total number of inpatient DOC during each of the reporting years between 2015 and 2019.
- b. Calculate the difference in the number of inpatient DOC provided from year to year.
- c. For DOC for 2016-2019, determine the percentage change from the previous reporting year by dividing the calculated difference in inpatient DOC by the total number of inpatient days provided during the previous reporting year $[(\{\text{current reporting year} - \text{previous reporting year}\} / \text{previous reporting year})]$.

Step 4: Determine the Service Area Growth Rate Multiplier (*Column G*). For each service area, total the annual percentages of change and divide by four to determine the average annual change rate. For positive change, add 1 to obtain the County Growth Rate Multiplier.

Step 5: Determine the Projected DOC (*Column H*). If the County Growth Rate Multiplier is negative, carry forward the inpatient DOC for the reporting year unchanged to Column H. If the County Growth Rate Multiplier is positive, calculate the compounded growth factor projected for the next four reporting years by using the County Growth Rate Multiplier (from Step 4) in the first year and compound the change each year thereafter at the same rate $[\text{Inpatient DOC} \times (\text{County Growth Rate Multiplier})^4]$.

Step 6: Calculate the projected midnight average daily census for each hospital for the projection year by dividing the projected DOC provided at the hospital (from Step 5) by 365.25 days (*Column I*).

Step 7: Multiply each hospital's projected midnight average daily census from Step 6 by the appropriate target occupancy factor below and enter in Column J:

Average Daily Census	Target Occupancy Percentage	Occupancy Factor
Average Daily Census less than 100	66.7%	1.50
Average Daily Census 100-200	71.4%	1.40
Average Daily Census greater than 200 and <=400	75.2%	1.33
Average Daily Census greater than 400	78.0%	1.28

Step 8: Determine the surplus or deficit of beds for each licensed hospital by subtracting the planning inventory of beds (*Column D plus Column E*) from the number of beds generated in Step 7 (*Column J*). Deficits are positive numbers and surpluses are negative numbers (*Column K*).

Step 9: Calculate the projected acute care bed surplus or deficit in a service area as follows:

- If a service area has hospitals under common ownership, total the surpluses and deficits of beds (from Step 8) for each of those hospitals to determine the surplus or deficit of beds for each group of hospitals under common ownership.
- The threshold for a need determination for consideration of additional acute care beds is a projected deficit that equals or exceeds 20 beds or 10% of the planning inventory for a single hospital or a group of hospitals under common ownership.
- When any single hospital or group of hospitals under common ownership reaches the threshold in Step 9b, sum the deficits of all single hospitals and groups of hospitals under common ownership in the service area. Then subtract from that number any beds for prior year need determinations for which a CON has not yet been issued.

Step 10: If the difference resulting from Step 9c equals or exceeds (a) 20 beds or (b) 10% of the inventory of the single hospital with the fewest acute care beds in its planning inventory or (c) 10% of the inventory of the group of hospitals under common ownership with the fewest acute care beds in its planning inventory, then the need is equal to the difference. Otherwise the need is zero. (*Column L*).

Unless otherwise specified by the methodology, calculations do not use rounded values. However, fractional values are rounded automatically when displayed.

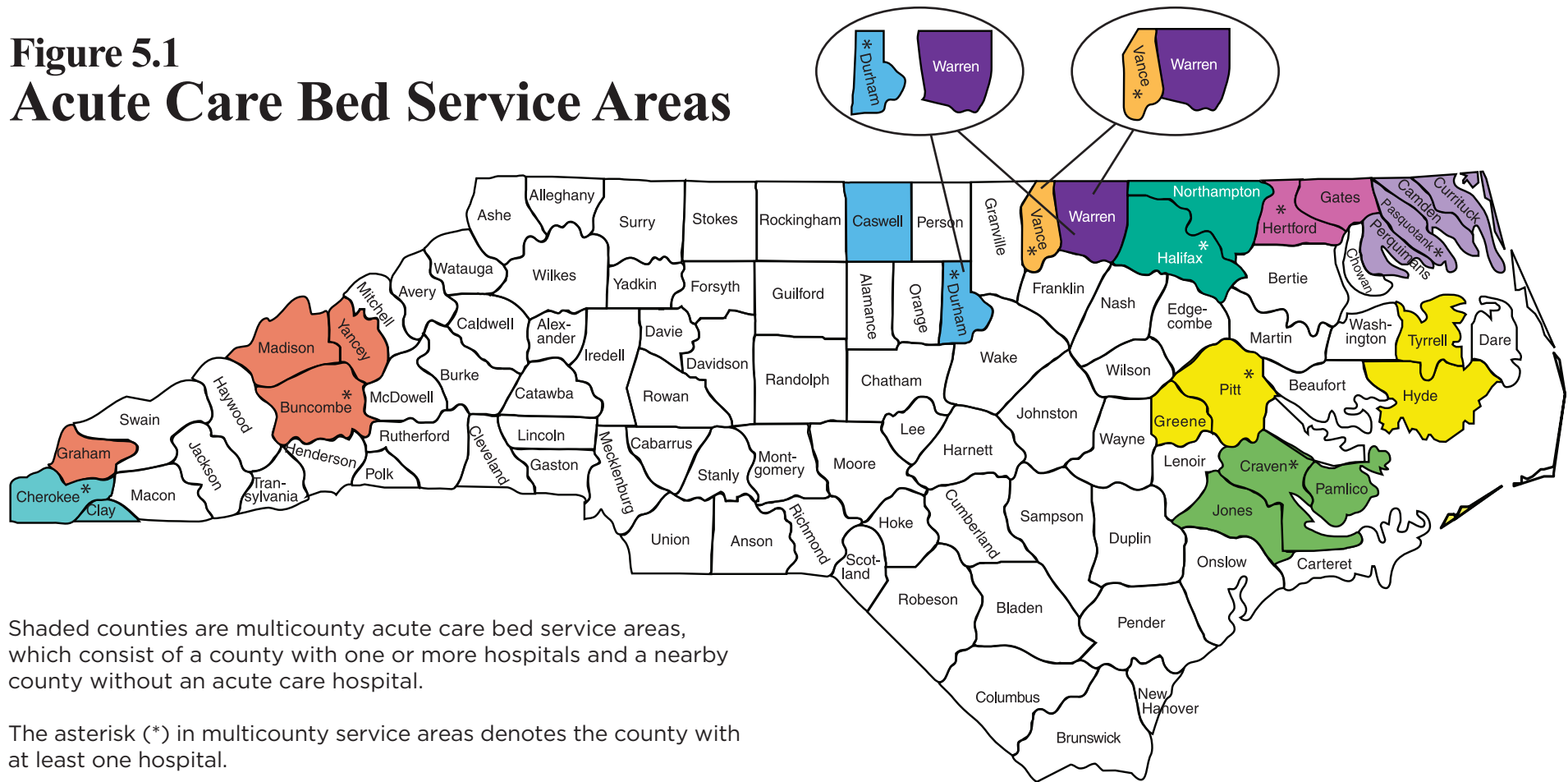
Applying for Acute Care Beds

A person who proposes to operate additional acute care beds in a hospital must show that the hospital will provide:

- a 24-hour emergency services department;
- inpatient medical services to both surgical and non-surgical patients; and
- if proposing a new licensed hospital, medical and surgical services on a daily basis within at least five of the following major diagnostic categories (MDC) recognized by the Centers for Medicare & Medicaid Services (CMS) listed below:

- MDC 1: Diseases and disorders of the nervous system
- MDC 2: Diseases and disorders of the eye
- MDC 3: Diseases and disorders of the ear, nose, mouth and throat
- MDC 4: Diseases and disorders of the respiratory system
- MDC 5: Diseases and disorders of the circulatory system
- MDC 6: Diseases and disorders of the digestive system
- MDC 7: Diseases and disorders of the hepatobiliary system and pancreas
- MDC 8: Diseases and disorders of the musculoskeletal system and connective tissue
- MDC 9: Diseases and disorders of the skin, subcutaneous tissue and breast
- MDC 10: Endocrine, nutritional and metabolic diseases and disorders
- MDC 11: Diseases and disorders of the kidney and urinary tract
- MDC 12: Diseases and disorders of the male reproductive system
- MDC 13: Diseases and disorders of the female reproductive system
- MDC 14: Pregnancy, childbirth and the puerperium
- MDC 15: Newborns/other neonates with conditions originating in the perinatal period
- MDC 16: Diseases and disorders of the blood and blood-forming organs and immunological disorders
- MDC 17: Myeloproliferative diseases and disorders and poorly differentiated neoplasms
- MDC 18: Infectious and parasitic diseases
- MDC 19: Mental diseases and disorders
- MDC 20: Alcohol/drug use and alcohol/drug-induced organic mental disorders
- MDC 21: Injury, poisoning and toxic effects of drugs
- MDC 22: Burns
- MDC 23: Factors influencing health status and other contacts with health services
- MDC 24: Multiple significant trauma
- MDC 25: Human immunodeficiency virus infections

Figure 5.1
Acute Care Bed Service Areas



Hospitals	Multicounty Service Area	Color Code
CarolinaEast Medical Center	Craven, Jones, Pamlico	
Duke Regional Hospital, Duke University Hospital, North Carolina Specialty Hospital	Durham, Caswell, Warren	
Erlanger Murphy Medical Center	Cherokee, Clay	
Halifax Regional Medical Center	Halifax, Northampton	
Maria Parham Health	Vance, Warren	
Mission Hospital	Buncombe, Graham, Madison, Yancey	
Sentara Albemarle Medical Center	Pasquotank, Camden, Currituck, Perquimans	
Vidant Medical Center	Pitt, Greene, Hyde, Tyrrell	
Vidant Roanoke-Chowan Hospital	Hertford, Gates	

Table 5A: Acute Care Bed Need Projections

A	B	C	D	E	F	G	H	I	J	K	L
Service Area	License Number	Facility Name	Licensed Acute Care Beds	Adjustments for CONs/ Previous Need	Inpatient Days of Care	County Growth Rate Multiplier	Projected Days of Care	2025 Projected Average Daily Census (ADC)	2025 Beds Adjusted for Target Occupancy	Projected 2025 Deficit or Surplus (surplus shows as a "-")	2025 Need Determination
Alamance	H0272	Alamance Regional Medical Center	170	0	41,580	-1.0104	41,580	114	159	-11	
Alamance Total			170	0							0
Alexander	H0274	Alexander Hospital (closed)*	25	-25		0.0000	0	0	0	0	
Alexander Total			25	-25							0
Alleghany	H0108	Alleghany Memorial Hospital**	41	-38	427	-1.1922	427	1	2	-1	
Alleghany Total			41	-38							0
Anson	H0082	Atrium Health Anson	15	0	1,883	1.2993	5,366	15	22	7	
Anson Total			15	0							7
Ashe	H0099	Ashe Memorial Hospital	76	0	4,012	1.0014	4,034	11	17	-59	
Ashe Total			76	0							0
Avery	H0037	Charles A. Cannon, Jr. Memorial Hospital****/†	30	0	1,020	-1.1491	1,020	3	4	-26	
Avery Total			30	0							0
Beaufort	H0188	Vidant Beaufort Hospital, A campus of Vidant Medical Center	120	0	14,464	1.0658	18,663	51	77	-43	
Beaufort Total			120	0							0
Bertie	H0268	Vidant Bertie Hospital	6	0	1,149	-1.0014	1,149	3	5	-1	
Bertie Total			6	0							0
Bladen	H0154	Cape Fear Valley-Bladen County Hospital**	48	0	6,145	-1.0066	6,145	17	25	-23	
Bladen Total			48	0							0
Brunswick	H0150	Dosher Memorial Hospital	25	0	1,591	-1.0307	1,591	4	7	-18	
Brunswick	H0250	Novant Health Brunswick Medical Center**	74	0	16,820	-1.0307	16,820	46	69	-5	
Brunswick Total			99	0							0
Buncombe		2022 Acute Care Bed Need Determination	0	67		1.0157	0	0	0	-67	
Buncombe	H0036	Mission Hospital	682	0	208,988	1.0157	222,454	609	780	98	
Buncombe/Graham/Madison/Yancey Total			682	67							31
Burke	H0062	UNC Health Blue Ridge	289	0	22,546	-1.0345	22,546	62	93	-196	
Burke Total			289	0							0
Cabarrus	H0031	Atrium Health Cabarrus	427	22	123,397	1.0343	141,218	387	514	65	
Cabarrus Total			427	22							65
Caldwell	H0061	Caldwell UNC Health Care	110	0	23,346	1.0287	26,140	72	107	-3	
Caldwell Total			110	0							0
Carteret	H0222	Carteret General Hospital	132	0	22,564	-1.0007	22,564	62	93	-39	
Carteret Total			132	0							0

Table 5A: Acute Care Bed Need Projections

A	B	C	D	E	F	G	H	I	J	K	L
Service Area	License Number	Facility Name	Licensed Acute Care Beds	Adjustments for CONs/ Previous Need	Inpatient Days of Care	County Growth Rate Multiplier	Projected Days of Care	2025 Projected Average Daily Census (ADC)	2025 Beds Adjusted for Target Occupancy	Projected 2025 Deficit or Surplus (surplus shows as a "-")	2025 Need Determination
Catawba	H0223	Catawba Valley Medical Center	180	0	44,685	1.0113	46,732	128	179	-1	
Catawba	H0053	Frye Regional Medical Center	203	0	32,178	1.0113	33,652	92	138	-65	
Catawba Total			383	0							
Chatham	H0007	Chatham Hospital**	25	0	3,122	-1.0075	3,122	9	13	-12	
Chatham Total			25	0							
Cherokee	H0239	Erlanger Murphy Medical Center**	57	0	5,133	-1.0321	5,133	14	21	-36	
Cherokee/Clay Total			57	0							
Chowan	H0063	Vidant Chowan Hospital	47	0	5,283	1.0088	5,471	15	22	-25	
Chowan Total			47	0							
Cleveland	H0024	Atrium Health Cleveland	280	0	54,866	1.0633	70,131	192	269	-11	
Cleveland Total			280	0							
Columbus	H0045	Columbus Regional Healthcare System**	154	0	30,668	-1.1178	30,668	84	126	-28	
Columbus Total			154	0							
Craven	H0201	CarolinaEast Medical Center	307	0	60,479	1.0717	79,787	218	291	-16	
Craven/Jones/Pamlico Total			307	0							
Cumberland		2022 Acute Care Bed Need Determination	0	29		1.0162	0	0	0	-29	
Cumberland	H0213	Cape Fear Valley Medical Center	480	65	156,470	1.0162	166,864	457	585	40	
Cumberland Total			480	94							
Dare	H0273	The Outer Banks Hospital	20	0	2,801	-1.0324	2,801	8	12	-8	
Dare Total			20	0							
Davidson	H0027	Lexington Medical Center	94	0	13,710	1.0534	16,883	46	69	-25	
Davidson	H0112	Novant Health Thomasville Medical Center	101	0	13,829	1.0534	17,030	47	70	-31	
Davidson Total			195	0							
Davie	H0171	Davie Medical Center	50	0	5,448	1.1932	11,042	30	45	-5	
Davie Total			50	0							
Duplin	H0166	Vidant Duplin Hospital	56	0	11,316	1.0737	15,041	41	62	6	
Duplin Total			56	0							
Durham		2021 Acute Care Bed Need Determination	0	40		1.0216	0	0	0	-40	
Durham		2022 Acute Care Bed Need Determination	0	68		1.0216	0	0	0	-68	
Durham	H0233	Duke Regional Hospital	302	0	67,507	1.0216	73,532	201	268	-34	
Durham	H0015	Duke University Hospital***	967	14	289,982	1.0216	315,864	865	1,107	126	
Duke University Health System Total			1,269	14	357,489		389,397	1,066	1,375	92	
Durham	H0075	North Carolina Specialty Hospital	18	6	1,777	1.0216	1,936	5	8	-16	

Table 5A: Acute Care Bed Need Projections

A	B	C	D	E	F	G	H	I	J	K	L
Service Area	License Number	Facility Name	Licensed Acute Care Beds	Adjustments for CONs/ Previous Need	Inpatient Days of Care	County Growth Rate Multiplier	Projected Days of Care	2025 Projected Average Daily Census (ADC)	2025 Beds Adjusted for Target Occupancy	Projected 2025 Deficit or Surplus (surplus shows as a "-")	2025 Need Determination
Durham/Caswell/Warren Total			1,287	128							
Edgecombe	H0258	Vidant Edgecombe Hospital	91	0	13,309	-1.0134	13,309	36	55	-36	
Edgecombe Total			91	0							
Forsyth	H0209	Novant Health Forsyth Medical Center	809	20	219,575	1.0127	230,916	632	809	-20	
Forsyth	H0229	Novant Health Medical Park Hospital**	22	0	3,037	1.0127	3,194	9	13	-9	
Novant Health Total			831	20	222,612		234,110	641	822	-29	
Forsyth	H0011	Atrium Health Wake Forest Baptist	722	52	201,827	1.0127	212,251	581	744	-30	
Forsyth Total			1,553	72							
Franklin	H0267-B	Maria Parham-Franklin	70	0		0.0000	0	0	0	-70	
Franklin Total			70	0							
Gaston	H0105	CaroMont Regional Medical Center	356	43	109,492	1.0587	137,553	377	501	102	
Gaston		CaroMont Regional Medical Center - Belmont	0	54		1.0587	0	0	0	-54	
CaroMont Health Total			356	97	109,492		137,553	377	501	48	
Gaston Total			356	97							
Granville	H0098	Granville Health System	62	0	6,711	-1.0575	6,711	18	28	-34	
Granville Total			62	0							
Guilford	H0159	Cone Health	709	0	178,978	1.0107	186,774	511	655	-54	
Guilford	H0052	High Point Regional Health	301	0	56,217	1.0107	58,666	161	225	-76	
Guilford Total			1,010	0							
Halifax	H0230	Vidant North Hospital	184	0	22,741	-1.0089	22,741	62	93	-91	
Halifax/Northampton Total			184	0							
Harnett	H0224	Cape Fear Valley Betsy Johnson Hospital**	126	0	24,716	-1.0804	24,716	68	102	-24	
Harnett Total			126	0							
Haywood	H0025	Haywood Regional Medical Center**	121	0	19,840	1.0533	24,422	67	100	-21	
Haywood Total			121	0							
Henderson	H0019	AdventHealth Hendersonville**	62	0	11,341	1.0204	12,297	34	51	-11	
Henderson	H0161	Margaret R. Pardee Memorial Hospital	201	0	24,467	1.0204	26,529	73	109	-92	
Henderson Total			263	0							
Hertford	H0001	Vidant Roanoke-Chowan Hospital	86	0	14,709	1.0085	15,216	42	62	-24	
Hertford/Gates Total			86	0							
Hoke	H0288	Cape Fear Valley Hoke Hospital	41	0	5,925	1.4045	23,052	63	95	54	
Hoke	H0287	FirstHealth Moore Regional Hospital - Hoke Campus**	8	28	1,332	1.4045	5,182	14	21	-15	

Table 5A: Acute Care Bed Need Projections

A	B	C	D	E	F	G	H	I	J	K	L
								2025 Projected Average Daily Census (ADC)	2025 Beds Adjusted for Target Occupancy	Projected 2025 Deficit or Surplus (surplus shows as a "-")	
Service Area	License Number	Facility Name	Licensed Acute Care Beds	Adjustments for CONs/ Previous Need	Inpatient Days of Care	County Growth Rate Multiplier	Projected Days of Care				2025 Need Determination
Hoke Total			49	28	54						
Iredell	H0248	Davis Regional Medical Center	102	0	6,827	-1.0223	6,827	19	28	-74	
Iredell	H0259	Lake Norman Regional Medical Center	115	0	14,474	-1.0223	14,474	40	59	-56	
Community Health Systems Total			217	0	21,301		21,301	58	87	-130	
Iredell	H0164	Iredell Memorial Hospital	199	0	36,846	-1.0223	36,846	101	141	-58	
Iredell Total			416	0	0						
Jackson	H0087	Harris Regional Hospital	82	0	13,947	1.0119	14,623	40	60	-22	
Jackson Total			82	0	0						
Johnston	H0151	Johnston Health	176	0	41,988	1.0062	43,035	118	165	-11	
Johnston Total			176	0	0						
Lee	H0243	Central Carolina Hospital	126	0	13,489	-1.0503	13,489	37	55	-71	
Lee Total			126	0	0						
Lenoir	H0043	UNC Lenoir Health Care	182	0	23,884	-1.0130	23,884	65	98	-84	
Lenoir Total			182	0	0						
Lincoln	H0225	Atrium Health Lincoln	97	0	22,821	1.0245	25,146	69	103	6	
Lincoln Total			97	0	0						
Macon	H0034	Angel Medical Center	59	-29	5,335	1.0715	7,033	19	29	-1	
Macon	H0193	Highlands-Cashiers Hospital**	24	0	1,971	1.0715	2,598	7	11	-13	
Macon Total			83	-29	0						
Martin	H0078	Martin General Hospital	49	0	3,275	1.0218	3,571	10	15	-34	
Martin Total			49	0	0						
McDowell	H0097	Mission Hospital McDowell	65	0	6,735	1.0241	7,408	20	30	-35	
McDowell Total			65	0	0						
Mecklenburg		2022 Acute Care Bed Need Determination	0	65		1.0325	0	0	0	-65	
Mecklenburg		Atrium Health Lake Norman	0	30		1.0325	0	0	0	-30	
Mecklenburg	H0042	Atrium Health Pineville	223	70	78,542	1.0325	89,271	244	325	32	
Mecklenburg	H0255	Atrium Health University City	95	8	31,404	1.0325	35,694	98	147	44	
Mecklenburg	H0071	Carolinas Medical Center/Center for Mental Health	970	162	312,739	1.0325	355,461	973	1,246	114	
Atrium Health Total			1,288	270	422,685		480,426	1,315	1,717	159	
Mecklenburg		Novant Health Ballantyne Medical Center	0	36		1.0325	0	0	0	-36	
Mecklenburg	H0282	Novant Health Huntersville Medical Center**	135	12	31,139	1.0325	35,393	97	145	-2	
Mecklenburg	H0270	Novant Health Matthews Medical Center**	146	20	44,913	1.0325	51,048	140	196	30	

Table 5A: Acute Care Bed Need Projections

A	B	C	D	E	F	G	H	I	J	K	L
Service Area	License Number	Facility Name	Licensed Acute Care Beds	Adjustments for CONs/ Previous Need	Inpatient Days of Care	County Growth Rate Multiplier	Projected Days of Care	2025 Projected Average Daily Census (ADC)	2025 Beds Adjusted for Target Occupancy	Projected 2025 Deficit or Surplus (surplus shows as a "-")	2025 Need Determination
Mecklenburg	H0290	Novant Health Mint Hill Medical Center**	36	0	11,231	1.0325	12,765	35	52	16	
Mecklenburg	H0010	Novant Health Presbyterian Medical Center	481	-7	142,504	1.0325	161,971	443	568	94	
Mecklenburg		Novant Health Steele Creek Medical Center	0	32		1.0325	0	0	0	-32	
Novant Health Total			798	93	229,787		261,177	715	961	70	
Mecklenburg Total			2,086	428							
Mitchell	H0169	Blue Ridge Regional Hospital**	46	0	4,774	1.1439	8,175	22	34	-12	
Mitchell Total			46	0							
Montgomery	H0003	FirstHealth Montgomery Memorial Hospital**	37	0	1,056	1.0207	1,146	3	5	-32	
Montgomery Total			37	0							
Moore	H0100	FirstHealth Moore Regional Hospital and Pinehurst Treatment Cntr.	324	47	90,469	1.0230	99,087	271	361	-10	
Moore Total			324	47							
Nash	H0228	Nash General Hospital	250	0	44,485	-1.0133	44,485	122	171	-79	
Nash Total			250	0							
New Hanover	H0221	New Hanover Regional Medical Center**	633	71	183,898	1.0260	203,758	558	714	10	
New Hanover Total			633	71							
Onslow	H0048	Onslow Memorial Hospital**	144	0	27,064	-1.0068	27,064	74	111	-33	
Onslow Total			144	0							
Orange	H0157	University of North Carolina Hospitals	759	114	231,444	1.0202	250,745	687	879	6	
Orange Total			759	114							
Pasquotank	H0054	Sentara Albemarle Medical Center	182	0	18,262	-1.0147	18,262	50	75	-107	
Pasquotank/Camden/Currituck/Perquimans Total			182	0							
Pender	H0115	Pender Memorial Hospital**	43	0	335	-1.0945	335	1	1	-42	
Pender Total			43	0							
Person	H0066	Person Memorial Hospital	38	0	3,077	-1.0417	3,077	8	13	-25	
Person Total			38	0							
Pitt	H0104	Vidant Medical Center	776	85	199,444	1.0309	225,263	617	789	-72	
Pitt/Greene/Hyde/Tyrrell Total			776	85							
Polk	H0079	St. Luke's Hospital**	25	0	3,053	1.0339	3,488	10	14	-11	
Polk Total			25	0							
Randolph	H0013	Randolph Hospital	145	0	14,820	-1.0596	14,820	41	61	-84	
Randolph Total			145	0							

Table 5A: Acute Care Bed Need Projections

A	B	C	D	E	F	G	H	I	J	K	L
Service Area	License Number	Facility Name	Licensed Acute Care Beds	Adjustments for CONs/ Previous Need	Inpatient Days of Care	County Growth Rate Multiplier	Projected Days of Care	2025 Projected Average Daily Census (ADC)	2025 Beds Adjusted for Target Occupancy	Projected 2025 Deficit or Surplus (surplus shows as a "-")	2025 Need Determination
Richmond	H0158	FirstHealth Moore Regional Hospital - Richmond**	99	0	8,164	-1.0805	8,164	22	34	-65	
Richmond Total			99	0	0						
Robeson	H0064	Southeastern Regional Medical Center**	285	0	49,784	-1.0439	49,784	136	191	-94	
Robeson Total			285	0	0						
Rockingham	H0023	Annie Penn Hospital**	110	0	12,223	-1.0006	12,223	33	50	-60	
Rockingham	H0072	UNC Rockingham Hospital**	108	0	10,395	-1.0006	10,395	28	43	-65	
Rockingham Total			218	0	0						
Rowan	H0040	Novant Health Rowan Medical Center**	198	0	46,028	-1.0071	46,028	126	176	-22	
Rowan Total			198	0	0						
Rutherford	H0039	Rutherford Regional Medical Center	129	0	10,347	-1.0538	10,347	28	42	-87	
Rutherford Total			129	0	0						
Sampson	H0067	Sampson Regional Medical Center**	116	0	9,369	-1.0292	9,369	26	38	-78	
Sampson Total			116	0	0						
Scotland	H0107	Scotland Memorial Hospital**	92	0	26,213	1.0278	29,249	80	120	28	
Scotland Total			92	0	28						
Stanly	H0008	Atrium Health Stanly	97	0	15,374	1.0361	17,717	49	73	-24	
Stanly Total			97	0	0						
Stokes	H0165	LifeBrite Community Hospital of Stokes**	53	0	1,813	-1.1623	1,813	5	7	-46	
Stokes Total			53	0	0						
Surry	H0049	Hugh Chatham Memorial Hospital	81	0	13,463	-1.0164	13,463	37	55	-26	
Surry	H0184	Northern Regional Hospital*	100	-17	17,573	-1.0164	17,573	48	72	-11	
Surry Total			181	-17	0						
Swain	H0069	Swain Community Hospital**	48	0	2,971	-1.1331	2,971	8	12	-36	
Swain Total			48	0	0						
Transylvania	H0111	Transylvania Regional Hospital**	42	0	5,877	-1.0018	5,877	16	24	-18	
Transylvania Total			42	0	0						
Union	H0050	Atrium Health Union	178	0	43,881	1.0432	51,959	142	199	21	
Union Total			178	0	21						
Vance	H0267-A	Maria Parham Health**/****	88	0	15,260	-1.0521	15,260	42	63	-25	
Vance/Warren Total			88	0	0						
Wake		2022 Acute Care Bed Need Determination	0	45		1.0119	0	0	0	-45	
Wake		Duke Green Level Hospital	0	40		1.0119	0	0	0	-40	

Table 5A: Acute Care Bed Need Projections

A	B	C	D	E	F	G	H	I	J	K	L
Service Area	License Number	Facility Name	Licensed Acute Care Beds	Adjustments for CONs/ Previous Need	Inpatient Days of Care	County Growth Rate Multiplier	Projected Days of Care	2025 Projected Average Daily Census (ADC)	2025 Beds Adjusted for Target Occupancy	Projected 2025 Deficit or Surplus (surplus shows as a "-")	2025 Need Determination
Wake	H0238	Duke Raleigh Hospital	186	-40	50,545	1.0119	52,998	145	203	57	
Duke University Health System Total			186	0	50,545		52,998	145	203	17	
Wake	H0065	Rex Hospital	418	50	126,507	1.0119	132,647	363	483	15	
Wake	H0199	WakeMed	574	36	177,096	1.0119	185,691	508	651	41	
Wake	H0276	WakeMed Cary Hospital	200	0	53,859	1.0119	56,473	155	216	16	
WakeMed Health & Hospitals Total			774	36	230,955		242,164	663	867	57	
Wake Total			1,378	131							
Washington	H0006	Washington Regional Medical Center	25	-13	1,227	-1.2469	1,227	3	5	-7	
Washington Total			25	-13							
Watauga	H0077	Watauga Medical Center	113	0	20,812	1.0174	22,301	61	92	-21	
Watauga Total			113	0							
Wayne	H0257	Wayne UNC Health Care	251	0	45,705	1.0044	46,509	127	178	-73	
Wayne Total			251	0							
Wilkes	H0153	Wilkes Medical Center**	120	0	12,653	-1.0592	12,653	35	52	-68	
Wilkes Total			120	0							
Wilson	H0210	Wilson Medical Center	267	0	28,451	-1.0454	28,451	78	117	-150	
Wilson Total			267	0							
Yadkin	H0155	Yadkin Valley Community Hospital (closed)^	22	0		0.0000	0	0	0	-22	
Yadkin Total			22	0							

Table 5A: Acute Care Bed Need Projections

A	B	C	D	E	F	G	H	I	J	K	L
Service Area	License Number	Facility Name	Licensed Acute Care Beds	Adjustments for CONs/Previous Need	Inpatient Days of Care	County Growth Rate Multiplier	Projected Days of Care	2025 Projected Average Daily Census (ADC)	2025 Beds Adjusted for Target Occupancy	Projected 2025 Deficit or Surplus (surplus shows as a "-")	2025 Need Determination
Grand Total All Hospitals			20,346	1,262	4,675,238		5,112,318				468

* Acute care beds in the "Adjustments for CONs/Previous Need" column are to be converted to inpatient psychiatric beds. This conversion is exempt from certificate of need review, pursuant to G.S. 131E-184(c).

** HIDI acute inpatient days of care data and the Division of Health Service Regulation Hospital License Renewal Application days of care data have a greater than $\pm 5\%$ discrepancy between the two data sources.

*** Duke University Hospital is licensed for 14 acute care beds under Policy AC-3. The 14 beds are not counted when determining acute care bed need.

**** In the past SMFP, Maria Parham had a CON to develop 11 acute care beds pursuant to the need determination in the 2015 SMFP. They relinquished the CON on July 15, 2021.

^ Yadkin Valley Community Hospital has received a CON exemption to reopen no later than January 18, 2025.

† Charles A. Cannon, Jr. Memorial Hospital received a grant from the Dorothea Dix Hospital Property Fund to convert 27 acute care beds to adult psychiatric beds. This project is exempt from certificate of need review and the beds are not yet accounted for in Table 5A.

Note: The decimal part of a number resulting from a calculation is not displayed, but it is used in subsequent calculations. Therefore, calculated totals may not be identical to displayed totals.

Table 5B: Acute Care Bed Need Determination*
(Proposed for Certificate of Need Review Commencing in 2023)

Service Area	Acute Care Bed Need Determination	Certificate of Need Application Deadline**	Certificate of Need Beginning Review Date
Anson	7	To be determined	To be determined
Buncombe/Graham/Madison/Yancey	31	To be determined	To be determined
Cabarrus	65	To be determined	To be determined
Duplin	6	To be determined	To be determined
Gaston	48	To be determined	To be determined
Hoke	54	To be determined	To be determined
Mecklenburg	164	To be determined	To be determined
Scotland	28	To be determined	To be determined
Union	21	To be determined	To be determined
Wake	44	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.0203(b). The filing deadline is 5:00 p.m. on the application deadline date.

Long-Term Care Hospitals

As a result of the August 2005 change in the CON statute, which made LTCH beds a separate category of health service facility beds, the bed days associated with LTCHs have been removed from the acute care bed need determinations. Table 5C shows LTCH inventory data and DOC for the current reporting year.

Table 5C: Long-Term Care Hospital Bed Inventory and Days of Care

License Number	Facility Name	County	Licensed LTCH Beds	DOC	Adjustments for Certificates of Need and Previous Need
H0279	Asheville Specialty Hospital	Buncombe	34	8,539	0
H0275	Highsmith-Rainey Specialty Hospital	Cumberland	66	16,580	0
H0280	Select Specialty Hospital –Durham	Durham	30	9,885	0
H0073	Kindred Hospital-Greensboro	Guilford	101	14,500	0
H0284	Select Specialty Hospital –Greensboro	Guilford	30	10,136	0
H0278	Carolinas ContinueCare Hospital at Pineville	Mecklenburg	40	10,806	0
H0289	Carolinas ContinueCare Hospital at University	Mecklenburg	17	5,598	0
H0242	PAM Specialty Hospital of Rocky Mount (formerly LifeCare Hospitals of North Carolina)	Nash	50	10,405	0

Chapter 6:

Operating Rooms

CHAPTER 6

OPERATING ROOMS

Introduction

G.S. 131E-76(6a) defines an **operating room** (OR) as “...a room used for the performance of surgical procedures requiring one or more incisions and that is required to comply with all applicable licensure codes and standards for an operating room.”

Across all hospitals and ambulatory surgical facilities, 74.9% of surgical cases were ambulatory and 25.1% were inpatient (*Table 6B*).

Definitions

An OR’s service area is the single or multicounty grouping shown in Figure 6.1. See below for the delineation of service areas.

The **reporting year** is October 1 through September 30. The **current** reporting year is October 1, 2020 through September 30, 2021.

The methodology projects OR need two years beyond the publication year of the current State Medical Facilities Plan (SMFP). The current **projection year** is 2025.

The **planning inventory** is the number of ORs used in need determination calculations. It consists of the number of ORs as of the last day of the reporting year, plus any new ORs approved by CON that are under development by the end of the reporting year, minus any ORs delicensed by the end of the reporting year.

For the purposes of the OR methodology, a **health system** includes all licensed health service facilities with ORs located in the same service area that are owned or leased by:

1. the same legal entity (i.e., the same individual, trust or estate, partnership, corporation, hospital authority, or the State or political subdivision, agency or instrumentality of the State); or
2. the same parent corporation or holding company; or
3. a subsidiary of the same parent corporation or holding company; or
4. a joint venture in which the same parent, holding company, or a subsidiary of the same parent or holding company is a participant and has the authority to propose changes in the location or number of ORs in the health service facility.

A health system consists of one or more health service facilities. If the relocation or transfer of ORs to a different health system generates a need, the need determination will not appear until the relocated or transferred ORs are licensed in their new location.

Changes from the Previous Plan

This chapter contains no substantive changes from the previous State Medical Facilities Plan (SMFP). However, as indicated in Step 6 of the methodology, the standard requirement that the Service Area Need be at least two ORs to show an OR Need Determination has returned.

Data Sources

The number of cases and procedures come from the Hospital License Renewal Applications (LRA) and the Ambulatory Surgical Facility LRAs for the reporting year, as submitted to the Acute and Home Care Licensure and Certification Section of the Division of Health Service Regulation.

The inventory of ORs comes from LRAs submitted to the Acute and Home Care Licensure and Certification Section and certificates issued by Certificate of Need.

Population data by county for the reporting year and the projection year come from the North Carolina Office of State Budget and Management.

Assumptions of the Methodology

1. In the current SMFP, for the methodology to determine an OR need for a service area, the minimum deficit must be two, after rounding.
2. The planning inventory and need determination calculations exclude one OR for each Level I and Level II trauma center, and one OR for each designated burn intensive care unit.
3. Beginning with the 2011 SMFP, the Agency updates service areas every three years. The updates use inpatient and ambulatory surgical procedures by county of residence and county of service to delineate service areas as reported on the LRAs (see below).
4. For purposes of these need projections, the number of surgical hours is anticipated to change in direct proportion to the change in the general population of the OR service area.

Delineation of Service Areas

The SMFP contains two types of OR service areas: single county and multicounty. Counties with at least one facility having a licensed OR that are not grouped with another county are single county service areas. A multicounty service area is created under two conditions: 1) counties without a facility with a licensed OR are grouped with the single county where the largest proportion of its patients received surgery; 2) if two counties with at least one facility having a licensed OR each provided surgical services to at least 35 percent of the residents of a county without at least one facility with a licensed OR, then the county without at least one facility with a licensed OR is grouped with both of the counties with facilities that have at least one OR.

If an entity has a certificate of need (CON) to develop a facility with a licensed OR in a county without a facility with a licensed OR, the planning inventory in Table 6B will include these ORs upon licensure. Before licensure, the ORs remain under development in the multicounty service area.

In response to an adjusted need determination petition, the State Health Coordinating Council created the Avery-Watauga multicounty OR service area. There are ORs in both Avery and Watauga counties.

Application of the Methodology

Step 1: Inventory of Operating Rooms (*Table 6A, Columns D through J*)

- a. In each OR service area, list the number of ORs by type, and sum them for each health system by summing the following for all licensed hospitals and ambulatory surgical facilities:
 - (1) Number of Inpatient ORs (*Column D*)
 - (2) Number of Ambulatory ORs (*Column E*)

(3) Number of Shared ORs (*Column F*)

b. For each facility:

(1) Exclude the number of dedicated Cesarean Section (C-Section) ORs from the Hospital LRA (*Column G*).

(2) Exclude one OR for each Level I and Level II Trauma Center and one additional OR for each designated Burn Intensive Care Unit (*Column H*).

(3) List the number of ORs (*Column I*) and C-Section ORs (*Column J*) for which certificates of need have been issued or settlement agreements signed but ORs were not licensed/delicensed as of the end of the reporting year (*Columns I and J*).

c. Enter placeholders for need determinations from previous plans that are pending Certificate of Need review (*Columns I and Column J*).

Step 2: Determine Each Facility's Adjusted Case Times

a. For each facility, compare the Average Case Time in Minutes for inpatient and ambulatory cases reported on the annual LRA to its Final Case Time used in the methodology in the previous year's SMFP.

(1) If either the inpatient or ambulatory reported average case time is more than 10 percent longer than the previous year's Final Case Time, then the Adjusted Case Time is the previous year's Final Case Time plus 10 percent.

(2) If either the inpatient or ambulatory reported average case time is more than 20 percent shorter than the previous year's Final Case Time, then the Adjusted Case Time is the previous year's Final Case Time minus 20 percent.

(3) If neither of the above situations occurs, then the Adjusted Case Time is the average case time(s) reported on the LRA.

Step 3: Group Facilities (*Table 6A, Columns K through M*)

a. For each hospital, multiply the total inpatient surgical cases (excluding C-sections performed in dedicated C-Section ORs) reported in the Surgical Cases by Specialty Area table on the annual Hospital LRA by the inpatient average case time from Step 2. Then divide by 60 to obtain the total inpatient surgical hours.

b. For each facility, multiply the total ambulatory cases reported in the Surgical Cases by Specialty Area table on the annual LRA by the ambulatory average case time from Step 2. Then divide by 60 to obtain the total ambulatory surgical hours.

c. Add the total inpatient and ambulatory surgical hours together to obtain each facility's Total Surgical Hours for Grouping (*Column K*).

- d. Assign each facility to a group based on the following criteria (*Column L*):

Group	Facility Type
1	Academic Medical Center Teaching Hospitals
2	Hospitals reporting more than 40,000 surgical hours
3	Hospitals reporting 15,000 to 40,000 surgical hours
4	Hospitals reporting less than 15,000 surgical hours
5	Separately licensed ambulatory surgical facilities that perform at least 50 percent of their procedures in either ophthalmology or otolaryngology, or a combination of the two specialties.
6	All separately licensed ambulatory surgical facilities not in Group 5.

- e. For purposes of the SMFP, the average OR is anticipated to be staffed based on its group membership and utilized at least 75 percent of the available time. Assumptions regarding hours per day and days per year of availability are shown in the table below. Multiply the Hours per Day by the Days Per Year. Then multiply by 75 percent to obtain the Standard Hours per OR per Year (*Column M*).

Group	Hours per Day	Days per Year	Standard Hours per Operating Room per Year
1	10	260	1,950
2	10	260	1,950
3	9	260	1,755
4	8	250	1,500
5	7	250	1,312
6	7	250	1,312

Step 4: Project Future Operating Room Requirements Based on Growth of Operating Room Hours (*Table 6B, Columns D through K*)

- a. For Groups 2 through 6, use the Adjusted Case Time from Step 2 to calculate the average (mean) inpatient and ambulatory case times for each group. If the Adjusted Case Time exceeds one standard deviation above the mean case time for its group, substitute the value equivalent to the mean plus one standard deviation of the Adjusted Case Time to obtain the Final Inpatient Case Time (*Column E*) and Final Ambulatory Case Time (*Column G*), as applicable. Otherwise use the Adjusted Case Time from Step 2 as the final case times. Facilities that perform no surgical procedures in the category being calculated are excluded from the calculations. The Average Final Inpatient and Ambulatory Case Times for each group are as follows for the current plan:

Group	Average Final Inpatient Case Time		Average Final Ambulatory Case Time	
	in Minutes	in Hours	in Minutes	in Hours
1	228.4	3.81	140.0	2.33
2	192.5	3.21	121.3	2.02
3	177.1	2.95	118.2	1.97
4	112.5	1.88	72.2	1.20
5	--	--	38.8	0.65
6	--	--	66.1	1.10

- b. For each facility, multiply the inpatient surgical cases reported on the LRA (*Column D*) by the Final Inpatient Case Time in minutes (*Column E*), and multiply the ambulatory surgical cases reported on the LRA (*Column F*) by the Final Ambulatory Case Time in minutes (*Column G*). Sum these amounts for each facility and divide by 60 to obtain the Total Adjusted Estimated Surgical Hours (*Column H*).
- c. For each service area with a projected population increase, calculate the Growth Factor based on each service area's projected population change between the reporting year and the projection year (*Column I: Growth Factor = [projection year service area population - reporting year service area population] ÷ reporting year service area population*). If the calculated population growth is negative, the Growth Factor is considered to be zero.
- d. Multiply each facility's Total Adjusted Estimated Surgical Hours (*Column H*) for the most recent reporting year by each service area's Growth Factor (*Column I*). Then add the product to the Total Adjusted Estimated Surgical Hours to determine the Projected Surgical Hours for the projection year (*[Column H x Column I]/100 + Column H = Column J*).
- e. Divide each facility's Projected Surgical Hours for the projection year by the Standard Hours per OR per Year (based on group assignment) to determine the Projected Surgical ORs Required in the projection year (*Table 6B, Column J ÷ Table 6A, Column M = Table 6B, Column K*).

Step 5: Determination of Health System Deficit/Surplus (*Table 6B, Columns L - M*)

- a. Sum the ORs, adjustments, and exclusions (*Table 6A, Columns D through J*) for each facility to obtain the Adjusted Planning Inventory (*Table 6B, Column L*).
- b. Subtract the Adjusted Planning Inventory from the Projected Surgical ORs Required to obtain the surpluses and deficits for each facility (*Column M*). (*Note: In Column M, projected deficits appear as positive numbers indicating that the methodology projects that more ORs will be needed in the projection year than are in the current inventory.*) Then for each health system, sum the deficits and surpluses of each facility to arrive at the Projected OR Deficit/Surplus for the health system (*Column K – Column L = Column M*).

Step 6: Determination of Service Area Operating Room Need (*Table 6B, Column N*)

- a. Round the health system deficits according to the rounding rules, below:

If a health system located in an OR service area with more than 10 ORs in the Adjusted Planning Inventory has a projected fractional deficit of 0.50 or greater, round the deficit to the next highest whole number. For each health system in an OR service area with more than 10 ORs and a projected deficit less than 0.50 or in which there is a projected surplus, there is no need.

If a health system located in an OR service area with six to 10 ORs in the Adjusted Planning Inventory has a projected fractional deficit of 0.30 or greater, round the deficit to the next highest whole number. For each health system in an OR service area with six to 10 ORs and a projected deficit less than 0.30 or in which there is a projected surplus, there is no need.

If a health system located in an OR service area with five or fewer ORs in the Adjusted Planning Inventory has a projected fractional deficit of 0.20 or greater, round the deficit to the next highest whole number. For each health system in an OR service area with five or fewer ORs and a projected deficit less than 0.20 or in which there is a projected surplus, there is no need.

- b. Add all rounded health systems deficits. Then adjust for any placeholders for need determinations in previous SMFPs to calculate the Service Area Need (*Column N*).
- c. For the current plan, the Service Area Need must be at least two to show an OR Need Determination in Table 6C.

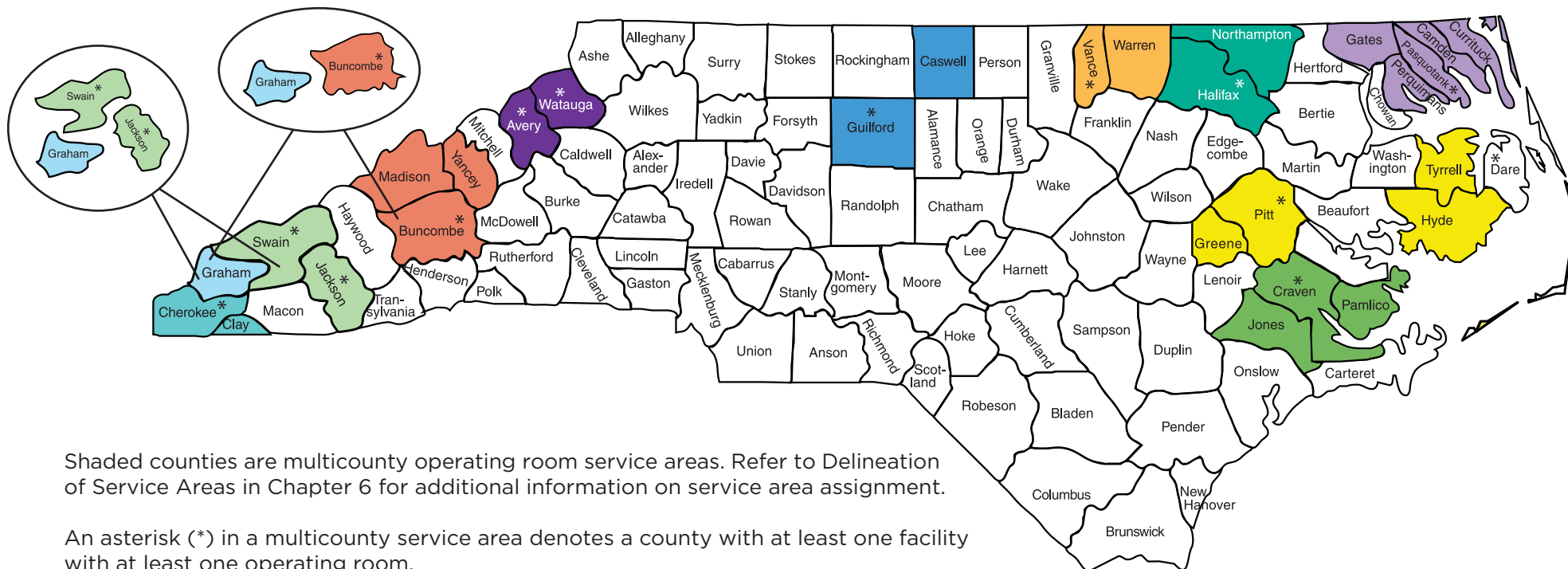
Unless otherwise specified by the methodology, calculations do not use rounded values. However, fractional values are rounded automatically when displayed.

NOTE: The need methodology excludes Dedicated C-Section ORs and associated cases from the calculation of need determinations.

A dedicated C-section OR shall only be used to perform C-sections and other procedures performed on the patient in the same visit to the C-section operating room, such that a patient receiving another procedure at the same time as the C-section would not need to be moved to a different OR for the second procedure.

Hospitals proposing to add a new OR for use as a dedicated C-section OR must obtain a CON but may apply for a CON without regard to the need determinations in this chapter.

Figure 6.1
Operating Room Service Areas



Shaded counties are multicounty operating room service areas. Refer to Delineation of Service Areas in Chapter 6 for additional information on service area assignment.

An asterisk (*) in a multicounty service area denotes a county with at least one facility with at least one operating room.

Hospitals	Multicounty Service Area	Color Code
CarolinaEast Medical Center	Craven, Jones, Pamlico	
Cone Health, High Point Regional Health, and Kindred Hospital - Greensboro	Guilford, Caswell	
Erlanger Murphy Medical Center	Cherokee, Clay	
Halifax Regional Medical Center	Halifax, Northampton	
Harris Regional Hospital and Swain Community Hospital	Jackson, Graham, Swain	
Maria Parham Health	Vance, Warren	
Mission Hospital	Buncombe, Graham, Madison, Yancey	
Sentara Albemarle Medical Center	Pasquotank, Camden, Currituck, Gates, Perquimans	
Vidant Medical Center	Pitt, Greene, Hyde, Tyrrell	
Watauga Medical Center and Charles A. Cannon Jr. Memorial Hospital	Watauga, Avery	

Proposed 2023 SMFP

Table 6A: Operating Room Inventory and Grouping (Combined Data for Hospitals and Ambulatory Surgical Facilities)

Case data for 10/1/2020 through 9/30/2021 as reported on the 2022 Hospital and Ambulatory Surgical Facility License Renewal Applications

<i>A</i>	<i>B</i>	<i>C</i>	<i>D</i>	<i>E</i>	<i>F</i>	<i>G</i>	<i>H</i>	<i>I</i>	<i>J</i>	<i>K</i>	<i>L</i>	<i>M</i>
Service Area	License	Facility	Inpatient ORs	Ambulatory ORs	Shared ORs	Excluded C-Section ORs	Excluded Trauma/ Burn ORs	CON Adjustments	CONs for Excluded C-Section ORs	Total Surgical Hours for Grouping	Group	Standard Hours per OR per Year
Alamance	H0272	Alamance Regional Medical Center	2	3	9	-2	0	0	0	16,562.3	3	1,755
Alamance Total			2	3	9	-2	0	0	0			
Alexander	H0274	Alexander Hospital (closed)	0	0	2	0	0	0	0	0.0		
Alexander Total			0	0	2	0	0	0	0			
Alleghany	H0108	Alleghany Memorial Hospital	0	0	2	0	0	0	0	114.4	4	1,500
Alleghany Total			0	0	2	0	0	0	0			
Anson	H0082	Atrium Health Anson	0	0	1	0	0	0	0	58.7	4	1,500
Anson Total			0	0	1	0	0	0	0			
Ashe	H0099	Ashe Memorial Hospital	0	0	2	0	0	0	0	1,347.0	4	1,500
Ashe Total			0	0	2	0	0	0	0			
Avery	H0037	Charles A. Cannon, Jr. Memorial Hospital	0	0	2	0	0	0	0	446.3	4	1,500
Watauga	H0077	Watauga Medical Center	1	0	6	-1	0	0	0	6,571.3	4	1,500
Appalachian Regional Healthcare System Total			1	0	8	-1	0	0	0			
Avery/Watauga Total			1	0	8	-1	0	0	0			
Beaufort	H0188	Vidant Beaufort Hospital, A campus of Vidant Medical Center	1	0	5	-1	0	0	0	4,258.7	4	1,500
Beaufort Total			1	0	5	-1	0	0	0			
Bertie	H0268	Vidant Bertie Hospital	0	0	2	0	0	0	0	297.6	4	1,500
Bertie Total			0	0	2	0	0	0	0			
Bladen	H0154	Cape Fear Valley-Bladen County Hospital	0	0	2	0	0	0	0	368.9	4	1,500
Bladen Total			0	0	2	0	0	0	0			
Brunswick	AS0170	Brunswick Surgery Center	0	1	0	0	0	0	0	339.3	6	1,312
Brunswick	H0150	Dosher Memorial Hospital	0	0	2	0	0	0	0	3,475.4	4	1,500
Brunswick	H0250	Novant Health Brunswick Medical Center	1	0	4	-1	0	0	0	8,308.9	4	1,500
Brunswick		2021 SMFP Need Determination	0	0	0	0	0	2	0	0.0		
Brunswick Total			1	1	6	-1	0	2	0			
Buncombe	AS0038	Outpatient Surgery Center of Asheville	0	5	0	0	0	0	0	5,820.0	6	1,312
Buncombe	AS0065	Asheville Eye Surgery Center	0	1	0	0	0	0	0	1,308.8	5	1,312
Buncombe	H0036	Mission Hospital	8	9	30	-2	-1	0	0	66,346.0	2	1,950

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Table 6A: Operating Room Inventory and Grouping (Combined Data for Hospitals and Ambulatory Surgical Facilities)

Case data for 10/1/2020 through 9/30/2021 as reported on the 2022 Hospital and Ambulatory Surgical Facility License Renewal Applications

<i>A</i>	<i>B</i>	<i>C</i>	<i>D</i>	<i>E</i>	<i>F</i>	<i>G</i>	<i>H</i>	<i>I</i>	<i>J</i>	<i>K</i>	<i>L</i>	<i>M</i>
Service Area	License	Facility	Inpatient ORs	Ambulatory ORs	Shared ORs	Excluded C-Section ORs	Excluded Trauma/ Burn ORs	CON Adjustments	CONs for Excluded C-Section ORs	Total Surgical Hours for Grouping	Group	Standard Hours per OR per Year
Buncombe/Graham/Madison/Yancey			8	15	30	-2	-1	0	0			
Burke		Blue Ridge Surgery Center	0	0	0	0	0	4	0	0.0		
Burke	AS0040	Surgery Center of Morganton Eye Physicians	0	2	0	0	0	0	0	1,654.5	5	1,312
Burke	H0062	UNC Health Blue Ridge	6	4	0	-1	0	-4	0	6,239.3	4	1,500
Burke Total			6	6	0	-1	0	0	0			
Cabarrus	AS0070	Gateway Surgery Center	0	4	0	0	0	2	0	4,267.4	6	1,312
Cabarrus	H0031	Atrium Health Cabarrus	4	0	17	-2	0	-2	0	28,766.5	3	1,755
Atrium Health Total			4	4	17	-2	0	0	0			
Cabarrus	AS0019	Eye Surgery and Laser Clinic, Inc	0	2	0	0	0	0	0	2,680.5	5	1,312
Cabarrus Total			4	6	17	-2	0	0	0			
Caldwell	AS0168	Prime Surgical Suites	0	3	0	0	0	0	0	1,372.0	6	1,312
Caldwell	H0061	Caldwell UNC Health Care	1	0	4	-1	0	0	0	3,991.1	4	1,500
UNC Health Total			1	3	4	-1	0	0	0			
Caldwell Total			1	3	4	-1	0	0	0			
Carteret	AS0061	The Surgical Center of Morehead City	0	2	0	0	0	0	0	1,327.1	6	1,312
Carteret	H0222	Carteret General Hospital	1	0	5	-1	0	0	0	5,656.9	4	1,500
Carteret Total			1	2	5	-1	0	0	0			
Catawba	AS0036	Graystone Eye Surgery Center	0	3	0	0	0	0	0	4,835.4	5	1,312
Catawba	AS0101	Viewmont Surgery Center	0	3	0	0	0	0	0	2,900.3	6	1,312
Catawba	H0053	Frye Regional Medical Center	2	4	15	0	0	0	0	9,491.2	4	1,500
Catawba	H0223	Catawba Valley Medical Center	1	0	12	-1	0	0	0	14,193.5	4	1,500
Catawba Total			3	10	27	-1	0	0	0			
Chatham	H0007	Chatham Hospital	0	0	2	0	0	0	0	1,392.0	4	1,500
Chatham Total			0	0	2	0	0	0	0			
Cherokee	H0239	Erlanger Murphy Medical Center	0	0	4	0	0	0	0	3,556.7	4	1,500
Cherokee/Clay Total			0	0	4	0	0	0	0			
Chowan	H0063	Vidant Chowan Hospital	0	0	3	0	0	0	0	965.7	4	1,500
Chowan Total			0	0	3	0	0	0	0			

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<i>A</i>	<i>B</i>	<i>C</i>	<i>D</i>	<i>E</i>	<i>F</i>	<i>G</i>	<i>H</i>	<i>I</i>	<i>J</i>	<i>K</i>	<i>L</i>	<i>M</i>
Service Area	License	Facility	Inpatient ORs	Ambulatory ORs	Shared ORs	Excluded C-Section ORs	Excluded Trauma/ Burn ORs	CON Adjustments	CONs for Excluded C-Section ORs	Total Surgical Hours for Grouping	Group	Standard Hours per OR per Year
Cleveland	AS0062	Atrium Health Surgery Center Shelby	0	4	0	0	0	0	0	822.6	5	1,312
Cleveland	H0024	Atrium Health Cleveland	1	0	8	-1	0	0	0	9,034.3	4	1,500
Atrium Health Total			1	4	8	-1	0	0	0			
Cleveland	AS0049	Eye Surgery Center of Shelby	0	2	0	0	0	0	0	1,592.7	5	1,312
Cleveland Total			1	6	8	-1	0	0	0			
Columbus	H0045	Columbus Regional Healthcare System	1	0	5	-1	0	0	0	3,218.8	4	1,500
Columbus Total			1	0	5	-1	0	0	0			
Craven	H0201	CarolinaEast Medical Center	3	6	9	-1	0	0	0	12,482.8	4	1,500
Craven/Jones/Pamlico Total			3	6	9	-1	0	0	0			
Cumberland	H0213	Cape Fear Valley Medical Center	5	0	14	-3	0	2	0	26,169.9	3	1,755
Cumberland	H0275	Highsmith-Rainey Specialty Hospital	0	0	3	0	0	-2	0	3,078.5	4	1,500
Cape Fear Valley Health System Total			5	0	17	-3	0	0	0			
Cumberland	AS0006	Fayetteville Ambulatory Surgery Center	0	11	0	0	0	0	0	8,160.7	6	1,312
Cumberland	AS0159	Valleygate Dental Surgery Center**	0	2	0	0	0	0	0	1,910.8	6	1,312
Cumberland Total			5	13	17	-3	0	0	0			
Dare	H0273	The Outer Banks Hospital	1	0	3	-1	0	0	0	1,003.5	4	1,500
Dare Total			1	0	3	-1	0	0	0			
Davidson	H0027	Lexington Medical Center	0	0	4	0	0	0	0	4,259.7	4	1,500
Davidson	H0112	Novant Health Thomasville Medical Center	1	0	5	-1	0	0	0	5,188.3	4	1,500
Davidson Total			1	0	9	-1	0	0	0			
Davie	H0171	Davie Medical Center	0	0	3	0	0	0	0	3,248.7	4	1,500
Davie Total			0	0	3	0	0	0	0			
Duplin	H0166	Vidant Duplin Hospital	0	0	3	0	0	0	0	1,885.3	4	1,500
Duplin Total			0	0	3	0	0	0	0			
Durham	AS0041	James E. Davis Ambulatory Surgical Center	0	4	0	0	0	0	0	5,305.7	5	1,312
Durham	AS0172	Duke Ambulatory Surgery Center Arrington	0	4	0	0	0	2	0	189.3	6	1,312
Durham	H0015	Duke University Hospital*	10	9	46	0	-1	2	0	130,437.0	1	1,950
Durham	H0233	Duke Regional Hospital	2	0	13	-2	0	0	0	22,403.8	3	1,755

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Case data for 10/1/2020 through 9/30/2021 as reported on the 2022 Hospital and Ambulatory Surgical Facility License Renewal Applications

<i>A</i>	<i>B</i>	<i>C</i>	<i>D</i>	<i>E</i>	<i>F</i>	<i>G</i>	<i>H</i>	<i>I</i>	<i>J</i>	<i>K</i>	<i>L</i>	<i>M</i>
Service Area	License	Facility	Inpatient ORs	Ambulatory ORs	Shared ORs	Excluded C-Section ORs	Excluded Trauma/ Burn ORs	CON Adjustments	CONs for Excluded C-Section ORs	Total Surgical Hours for Grouping	Group	Standard Hours per OR per Year
Duke University Health System Total			12	17	59	-2	-1	4	0			
Durham		Southpoint Surgery Center	0	0	0	0	0	2	0	0.0		
Durham	H0075	North Carolina Specialty Hospital	0	0	4	0	0	0	0	7,765.9	4	1,500
NC Specialty Hospital Total			0	0	4	0	0	2	0			
Durham		2021 SMFP Need Determination	0	0	0	0	0	2	0	0.0		
Durham Total			12	17	63	-2	-1	8	0			
Edgecombe	H0258	Vidant Edgecombe Hospital	1	0	5	-1	0	0	0	2,042.5	4	1,500
Edgecombe Total			1	0	5	-1	0	0	0			
Forsyth	AS0021	Wake Forest Baptist Health Outpatient Surgery Center - Clemmons	0	3	0	0	0	0	0	4,300.0	6	1,312
Forsyth	H0011	Atrium Health Wake Forest Baptist*	4	0	36	0	-2	11	0	92,592.2	1	1,950
Atrium Health Total			4	3	36	0	-2	11	0			
Forsyth	AS0149	Novant Health Kernersville Outpatient Surgery	0	2	0	0	0	0	0	2,176.0	6	1,312
Forsyth	AS0167	Novant Health Clemmons Outpatient Surgery	0	2	0	0	0	0	0	3,844.0	6	1,312
Forsyth	H0209	Novant Health Forsyth Medical Center	5	4	24	-2	0	2	0	44,041.2	2	1,950
Forsyth	H0229	Novant Health Medical Park Hospital	0	0	10	0	0	0	0	19,455.6	3	1,755
Novant Health Total			5	8	34	-2	0	2	0			
Forsyth	AS0173	Kimel Park Surgery Center	0	2	0	0	0	0	0	980.8	6	1,312
Forsyth	AS0134	Piedmont Outpatient Surgery Center	0	2	0	0	0	0	0	1,589.5	5	1,312
Forsyth		Triad Surgery Center	0	0	0	0	0	2	0	0.0		
Forsyth Total			9	15	70	-2	-2	15	0			
Franklin	H0267-B	Maria Parham-Franklin	0	0	3	0	0	-1	0	0.0		
Franklin		Same Day Surgery Center	0	0	0	0	0	2	0	0.0		
Franklin Total			0	0	3	0	0	1	0			
Gaston		CaroMont ASC-Belmont	0	0	0	0	0	2	0	0.0		
Gaston		CaroMont Regional Medical Center - Belmont	0	0	0	0	0	2	1	0.0		
Gaston	AS0037	CaroMont Specialty Surgery	0	6	0	0	0	-3	0	1,614.4	5	1,312

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<i>A</i>	<i>B</i>	<i>C</i>	<i>D</i>	<i>E</i>	<i>F</i>	<i>G</i>	<i>H</i>	<i>I</i>	<i>J</i>	<i>K</i>	<i>L</i>	<i>M</i>
Service Area	License	Facility	Inpatient ORs	Ambulatory ORs	Shared ORs	Excluded C-Section ORs	Excluded Trauma/ Burn ORs	CON Adjustments	CONs for Excluded C-Section ORs	Total Surgical Hours for Grouping	Group	Standard Hours per OR per Year
Gaston	H0105	CaroMont Regional Medical Center	5	7	10	-4	0	-1	-1	20,511.9	3	1,755
CaroMont Health Total			5	13	10	-4	0	0	0			
Gaston Total			5	13	10	-4	0	0	0			
Granville	H0098	Granville Health System	0	0	3	0	0	0	0	1,334.0	4	1,500
Granville Total			0	0	3	0	0	0	0			
Guilford	AS0047	High Point Surgery Center	0	6	0	0	0	0	0	3,671.0	6	1,312
Guilford	AS0152	Premier Surgery Center	0	2	0	0	0	0	0	1,174.0	6	1,312
Guilford	H0052	High Point Regional Health	3	0	8	-1	0	0	0	11,223.8	4	1,500
Atrium Health Total			3	8	8	-1	0	0	0			
Guilford		North Elam Ambulatory Surgery Center	0	0	0	0	0	5	0	0.0		
Guilford	H0159	Cone Health	4	13	29	0	-1	-5	0	64,512.7	2	1,950
Moses H. Cone Memorial Hospital System Total			4	13	29	0	-1	0	0			
Guilford	AS0009	Greensboro Specialty Surgical Center	0	3	0	0	0	0	0	1,070.3	6	1,312
Guilford	AS0018	Surgical Center of Greensboro	0	13	0	0	0	0	0	0.0	6	1,312
Surgical Care Affiliates Total			0	16	0	0	0	0	0			
Guilford	AS0161	Valleygate Dental Surgery Center of the Triad**	0	2	0	0	0	0	0	1,661.6	6	1,312
Guilford	AS0033	Surgical Eye Center	0	4	0	0	0	0	0	1,116.1	5	1,312
Guilford	AS0063	Piedmont Surgical Center	0	2	0	0	0	0	0	0.0		
Guilford	H0073	Kindred Hospital - Greensboro	0	0	1	0	0	0	0	172.7	4	1,500
Guilford/Caswell Total			7	45	38	-1	-1	0	0			
Halifax	H0230	Vidant North Hospital	0	0	6	0	0	0	0	3,001.4	4	1,500
Halifax/Northampton Total			0	0	6	0	0	0	0			
Harnett	H0224	Cape Fear Valley Betsy Johnson Hospital	0	0	7	0	0	0	0	4,203.3	4	1,500
Harnett Total			0	0	7	0	0	0	0			
Haywood	H0025	Haywood Regional Medical Center	0	0	7	0	0	0	0	6,110.9	4	1,500
Haywood Total			0	0	7	0	0	0	0			
Henderson		Western Carolina Surgery Center	0	0	0	0	0	1	0	0.0		
Henderson	H0019	AdventHealth Hendersonville	1	0	6	-1	0	-1	0	6,699.7	4	1,500

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Service Area	License	Facility	Inpatient ORs	Ambulatory ORs	Shared ORs	Excluded C-Section ORs	Excluded Trauma/ Burn ORs	CON Adjustments	CONs for Excluded C-Section ORs	Total Surgical Hours for Grouping	Group	Standard Hours per OR per Year
<i>Adventist Health Total</i>			<i>1</i>	<i>0</i>	<i>6</i>	<i>-1</i>	<i>0</i>	<i>0</i>	<i>0</i>			
Henderson		Pardee Partners ASC	0	0	0	0	0	2	0	0.0		
Henderson	H0161	Margaret R. Pardee Memorial Hospital	0	0	10	0	0	-2	1	12,234.3	4	1,500
<i>UNC Health Total</i>			<i>0</i>	<i>0</i>	<i>10</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>1</i>			
Henderson Total			1	0	16	-1	0	0	1			
Hertford	H0001	Vidant Roanoke-Chowan Hospital	1	0	5	-1	0	0	0	1,404.6	4	1,500
Hertford Total			1	0	5	-1	0	0	0			
Hoke	H0287	FirstHealth Moore Regional Hospital - Hoke Campus	0	0	1	0	0	1	0	398.5	4	1,500
Hoke	H0288	Cape Fear Valley Hoke Hospital	1	0	2	-1	0	0	0	1,959.1	4	1,500
Hoke Total			1	0	3	-1	0	1	0			
Iredell		Statesville Orthopedic Surgery Center	0	0	0	0	0	1	0	0.0		
Iredell	H0248	Davis Regional Medical Center	1	0	5	-1	0	-1	0	2,677.4	4	1,500
Iredell	H0259	Lake Norman Regional Medical Center	1	2	7	-1	0	0	0	5,187.8	4	1,500
<i>Community Health Systems Total</i>			<i>2</i>	<i>2</i>	<i>12</i>	<i>-2</i>	<i>0</i>	<i>0</i>	<i>0</i>			
Iredell	AS0042	Iredell Ambulatory Surgery Center	0	1	0	0	0	0	0	347.0	5	1,312
Iredell	AS0050	Iredell Surgical Center	0	4	0	0	0	0	0	609.7	5	1,312
Iredell	AS0175	Iredell Surgery at Mooresville	0	1	0	0	0	0	0	0.0		
Iredell	H0164	Iredell Memorial Hospital	1	0	9	-1	0	0	0	11,279.4	4	1,500
<i>Iredell Health System Total</i>			<i>1</i>	<i>6</i>	<i>9</i>	<i>-1</i>	<i>0</i>	<i>0</i>	<i>0</i>			
Iredell Total			3	8	21	-3	0	0	0			
Swain	H0069	Swain Community Hospital	0	0	1	0	0	0	0	0.0		
Jackson	H0087	Harris Regional Hospital	1	0	6	-1	0	0	0	6,207.0	4	1,500
<i>Duke LifePoint Total</i>			<i>1</i>	<i>0</i>	<i>7</i>	<i>-1</i>	<i>0</i>	<i>0</i>	<i>0</i>			
Jackson/Graham/Swain Total			1	0	7	-1	0	0	0			
Johnston	H0151	Johnston Health	2	0	8	-2	0	0	0	8,651.6	4	1,500
Johnston Total			2	0	8	-2	0	0	0			
Lee	H0243	Central Carolina Hospital	1	0	6	-1	0	0	0	1,992.3	4	1,500
Lee Total			1	0	6	-1	0	0	0			

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Service Area	License	Facility	Inpatient ORs	Ambulatory ORs	Shared ORs	Excluded C-Section ORs	Excluded Trauma/ Burn ORs	CON Adjustments	CONs for Excluded C-Section ORs	Total Surgical Hours for Grouping	Group	Standard Hours per OR per Year
Lenoir	H0043	UNC Lenoir Health Care	1	0	9	-1	0	0	0	4,871.6	4	1,500
Lenoir Total			1	0	9	-1	0	0	0			
Lincoln	H0225	Atrium Health Lincoln	1	1	3	-1	0	0	0	4,042.9	4	1,500
Lincoln Total			1	1	3	-1	0	0	0			
Macon	H0034	Angel Medical Center	1	0	4	-1	0	-1	0	866.4	4	1,500
Macon	H0193	Highlands-Cashiers Hospital	0	0	2	0	0	0	0	0.0		
Mission Health Total			1	0	6	-1	0	-1	0			
Macon Total			1	0	6	-1	0	-1	0			
Martin	H0078	Martin General Hospital	0	0	2	0	0	0	0	1,360.9	4	1,500
Martin Total			0	0	2	0	0	0	0			
McDowell	H0097	Mission Hospital McDowell	1	0	3	-1	0	0	0	2,053.1	4	1,500
McDowell Total			1	0	3	-1	0	0	0			
Mecklenburg		Atrium Health Huntersville Surgery Center	0	0	0	0	0	1	0	0.0		
Mecklenburg		Atrium Health Lake Norman	0	0	0	0	0	2	1	0.0		
Mecklenburg	AS0058	Carolina Center for Specialty Surgery	0	3	0	0	0	0	0	2,678.0	6	1,312
Mecklenburg	H0042	Atrium Health Pineville	3	0	10	-2	0	2	1	20,291.2	3	1,755
Mecklenburg	H0071	Carolinas Medical Center/Center for Mental Health	9	11	42	-4	-1	11	0	117,038.9	1	1,950
Mecklenburg	H0255	Atrium Health University City	1	1	7	-1	0	-2	0	7,187.2	4	1,500
Atrium Health Total			13	15	59	-7	-1	14	2			
Mecklenburg		Novant Health Ballantyne Medical Center	0	0	0	0	0	2	1	0.0		
Mecklenburg		Novant Health Steele Creek Medical Center	0	0	0	0	0	2	1	0.0		
Mecklenburg	AS0068	SouthPark Surgery Center	0	6	0	0	0	0	0	7,477.5	5	1,312
Mecklenburg	AS0098	Novant Health Ballantyne Outpatient Surgery	0	2	0	0	0	0	0	2,158.3	6	1,312
Mecklenburg	AS0124	Novant Health Huntersville Outpatient Surgery	0	2	0	0	0	0	0	1,832.4	6	1,312
Mecklenburg	AS0136	Matthews Surgery Center	0	2	0	0	0	0	0	2,428.8	6	1,312
Mecklenburg	H0010	Novant Health Presbyterian Medical Center	6	6	28	-3	0	-2	0	64,734.9	2	1,950

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Table 6A: Operating Room Inventory and Grouping (Combined Data for Hospitals and Ambulatory Surgical Facilities)

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<i>A</i>	<i>B</i>	<i>C</i>	<i>D</i>	<i>E</i>	<i>F</i>	<i>G</i>	<i>H</i>	<i>I</i>	<i>J</i>	<i>K</i>	<i>L</i>	<i>M</i>
Service Area	License	Facility	Inpatient ORs	Ambulatory ORs	Shared ORs	Excluded C-Section ORs	Excluded Trauma/ Burn ORs	CON Adjustments	CONs for Excluded C-Section ORs	Total Surgical Hours for Grouping	Group	Standard Hours per OR per Year
Mecklenburg	H0270	Novant Health Matthews Medical Center	2	0	6	-2	0	1	0	11,396.6	4	1,500
Mecklenburg	H0282	Novant Health Huntersville Medical Center	2	0	6	-2	0	1	0	9,571.0	4	1,500
Mecklenburg	H0290	Novant Health Mint Hill Medical Center	1	0	3	-1	0	0	0	2,469.6	4	1,500
Novant Health Total			11	18	43	-8	0	4	2			
Mecklenburg	AS0026	Charlotte Surgery Center-Museum Campus	0	6	0	0	0	0	0	4,435.7	6	1,312
Mecklenburg	AS0166	Charlotte Surgery Center-Wendover Campus	0	6	0	0	0	0	0	7,983.2	6	1,312
Surgical Care Affiliates Total			0	12	0	0	0	0	0			
Mecklenburg	AS0148	Mallard Creek Surgery Center	0	2	0	0	0	0	0	2,023.0	6	1,312
Mecklenburg		Metrolina Vascular Access Care	0	0	0	0	0	1	0	0.0		
Mecklenburg	AS0164	Valleygate Dental Surgery Center Charlotte, LLC**	0	2	0	0	0	0	0	1,683.6	6	1,312
Mecklenburg Total			24	49	102	-15	-1	19	4			
Mitchell	H0169	Blue Ridge Regional Hospital	0	0	3	0	0	0	0	811.3	4	1,500
Mitchell Total			0	0	3	0	0	0	0			
Montgomery	H0003	FirstHealth Montgomery Memorial Hospital	0	0	2	0	0	0	0	147.6	4	1,500
Montgomery Total			0	0	2	0	0	0	0			
Moore	AS0022	The Eye Surgery Center of the Carolinas	0	3	0	0	0	0	0	2,197.0	5	1,312
Moore	AS0069	Surgery Center of Pinehurst	0	6	0	0	0	0	0	4,995.0	6	1,312
Moore	H0100	FirstHealth Moore Regional Hospital and Pinehurst Treatment Cntr.	2	0	15	0	0	0	1	22,703.6	3	1,755
Moore Total			2	9	15	0	0	0	1			
Nash	H0228	Nash General Hospital	1	0	13	-1	0	0	0	11,972.8	4	1,500
Nash Total			1	0	13	-1	0	0	0			
New Hanover	H0221	New Hanover Regional Medical Center	5	4	29	-3	-1	4	0	49,022.6	2	1,950
New Hanover		Wilmington ASC	0	0	0	0	0	1	0	0.0		
New Hanover	AS0176	Wilmington Eye Surgery Center	0	2	0	0	0	0	0	0.0	5	1,312
New Hanover	AS0055	Wilmington SurgCare	0	7	0	0	0	3	0	6,547.1	5	1,312
New Hanover Total			5	13	29	-3	-1	8	0			

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Table 6A: Operating Room Inventory and Grouping (Combined Data for Hospitals and Ambulatory Surgical Facilities)

Case data for 10/1/2020 through 9/30/2021 as reported on the 2022 Hospital and Ambulatory Surgical Facility License Renewal Applications

<i>A</i>	<i>B</i>	<i>C</i>	<i>D</i>	<i>E</i>	<i>F</i>	<i>G</i>	<i>H</i>	<i>I</i>	<i>J</i>	<i>K</i>	<i>L</i>	<i>M</i>
Service Area	License	Facility	Inpatient ORs	Ambulatory ORs	Shared ORs	Excluded C-Section ORs	Excluded Trauma/ Burn ORs	CON Adjustments	CONs for Excluded C-Section ORs	Total Surgical Hours for Grouping	Group	Standard Hours per OR per Year
Onslow	H0048	Onslow Memorial Hospital	3	3	4	-1	0	0	0	6,970.0	4	1,500
Onslow Total			3	3	4	-1	0	0	0			
Orange		Duke Health Orange Ambulatory Surgical Center	0	0	0	0	0	2	0	0.0		
Orange		North Chapel Hill Surgery Center	0	0	0	0	0	2	0	0.0		
Orange	H0157	University of North Carolina Hospitals	3	6	37	-3	-2	11	0	92,723.1	1	1,950
UNC Health Total			3	6	37	-3	-2	13	0			
Orange Total			3	6	37	-3	-2	15	0			
Pasquotank	H0054	Sentara Albemarle Medical Center	2	0	8	-2	0	0	0	5,350.5	4	1,500
Pasq-Cam-Cur-Gates-Perq Total			2	0	8	-2	0	0	0			
Pender	H0115	Pender Memorial Hospital	0	0	2	0	0	0	0	2,737.2	4	1,500
Pender Total			0	0	2	0	0	0	0			
Person	H0066	Person Memorial Hospital	1	0	4	-1	0	0	0	416.8	4	1,500
Person Total			1	0	4	-1	0	0	0			
Pitt	AS0012	Vidant SurgiCenter	0	10	0	0	0	0	0	15,448.0	6	1,312
Pitt	H0104	Vidant Medical Center	7	0	26	-4	-1	0	0	53,102.8	1	1,950
Vidant Health Total			7	10	26	-4	-1	0	0			
Pitt		2022 SMFP Need Determination	0	0	0	0	0	1	0	0.0		
Pitt/Greene/Hyde/Tyrrell Total			7	10	26	-4	-1	1	0			
Polk	H0079	St. Luke's Hospital	0	0	3	0	0	0	0	1,091.2	4	1,500
Polk Total			0	0	3	0	0	0	0			
Randolph	H0013	Randolph Hospital	1	2	5	-1	0	0	0	4,467.5	4	1,500
Randolph Total			1	2	5	-1	0	0	0			
Richmond	H0158	FirstHealth Moore Regional Hospital - Richmond	1	0	3	-1	0	0	0	2,054.4	4	1,500
Richmond Total			1	0	3	-1	0	0	0			
Robeson	AS0150	The Surgery Center at Southeastern Health Park	0	4	0	0	0	0	0	692.5	5	1,312
Robeson	H0064	Southeastern Regional Medical Center	2	0	5	-1	0	0	0	6,800.9	4	1,500

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Table 6A: Operating Room Inventory and Grouping (Combined Data for Hospitals and Ambulatory Surgical Facilities)

Case data for 10/1/2020 through 9/30/2021 as reported on the 2022 Hospital and Ambulatory Surgical Facility License Renewal Applications

<i>A</i>	<i>B</i>	<i>C</i>	<i>D</i>	<i>E</i>	<i>F</i>	<i>G</i>	<i>H</i>	<i>I</i>	<i>J</i>	<i>K</i>	<i>L</i>	<i>M</i>
Service Area	License	Facility	Inpatient ORs	Ambulatory ORs	Shared ORs	Excluded C-Section ORs	Excluded Trauma/ Burn ORs	CON Adjustments	CONs for Excluded C-Section ORs	Total Surgical Hours for Grouping	Group	Standard Hours per OR per Year
UNC Health Total			2	4	5	-1	0	0	0			
Robeson Total			2	4	5	-1	0	0	0			
Rockingham	H0023	Annie Penn Hospital	0	0	4	0	0	0	0	2,171.8	4	1,500
Rockingham	H0072	UNC Rockingham Hospital	1	0	5	-1	0	0	0	1,340.0	4	1,500
Rockingham Total			1	0	9	-1	0	0	0			
Rowan	H0040	Novant Health Rowan Medical Center	2	3	8	-2	0	0	0	13,552.0	4	1,500
Rowan Total			2	3	8	-2	0	0	0			
Rutherford	H0039	Rutherford Regional Medical Center	0	0	5	0	0	0	0	2,364.7	4	1,500
Rutherford Total			0	0	5	0	0	0	0			
Sampson	H0067	Sampson Regional Medical Center	0	0	8	0	0	0	0	2,075.6	4	1,500
Sampson Total			0	0	8	0	0	0	0			
Scotland	H0107	Scotland Memorial Hospital	1	0	5	-1	0	0	0	6,046.5	4	1,500
Scotland Total			1	0	5	-1	0	0	0			
Stanly	H0008	Atrium Health Stanly	1	0	5	-1	0	0	0	2,333.4	4	1,500
Stanly Total			1	0	5	-1	0	0	0			
Stokes	H0165	LifeBrite Community Hospital of Stokes	0	2	2	0	0	0	0	215.1	4	1,500
Stokes Total			0	2	2	0	0	0	0			
Surry	H0049	Hugh Chatham Memorial Hospital	1	0	5	-1	0	0	0	4,367.7	4	1,500
Surry	H0184	Northern Regional Hospital	1	0	4	-1	0	0	0	3,204.5	4	1,500
Surry Total			2	0	9	-2	0	0	0			
Transylvania	H0111	Transylvania Regional Hospital	0	0	4	0	0	0	0	1,102.6	4	1,500
Transylvania Total			0	0	4	0	0	0	0			
Union	AS0132	Atrium Health Surgery Center Indian Trail	0	2	0	0	0	1	0	1,151.7	6	1,312
Union	H0050	Atrium Health Union	2	0	6	-2	0	0	0	8,141.8	4	1,500
Atrium Health Total			2	2	6	-2	0	1	0			
Union	AS0120	Presbyterian SameDay Surgery Center-Monroe	0	1	0	0	0	0	0	0.0		
Union Total			2	3	6	-2	0	1	0			
Vance	H0267-A	Maria Parham Health	0	0	5	0	0	0	0	4,004.1	4	1,500

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Table 6A: Operating Room Inventory and Grouping (Combined Data for Hospitals and Ambulatory Surgical Facilities)

Case data for 10/1/2020 through 9/30/2021 as reported on the 2022 Hospital and Ambulatory Surgical Facility License Renewal Applications

A	B	C	D	E	F	G	H	I	J	K	L	M
Service Area	License	Facility	Inpatient ORs	Ambulatory ORs	Shared ORs	Excluded C-Section ORs	Excluded Trauma/ Burn ORs	CON Adjustments	CONs for Excluded C-Section ORs	Total Surgical Hours for Grouping	Group	Standard Hours per OR per Year
Vance/Warren Total			0	0	5	0	0	0	0			
Wake		Duke Green Level Hospital	0	0	0	0	0	2	0	0.0		
Wake		Duke Health Garner Ambulatory Surgical Center	0	0	0	0	0	1	0	0.0		
Wake		Duke Health Green Level Ambulatory Surgery Center	0	0	0	0	0	1	0	0.0		
Wake	H0238	Duke Raleigh Hospital	0	0	15	0	0	-2	0	28,754.9	3	1,755
Duke University Health System Total			0	0	15	0	0	2	0			
Wake		Orthopaedic Surgery Center of Garner	0	0	0	0	0	1	0	0.0		
Wake	AS0129	Rex Surgery Center of Cary	0	4	0	0	0	0	0	3,932.9	6	1,312
Wake	AS0143	Raleigh Orthopaedic Surgery Center	0	3	0	0	0	1	0	3,501.3	6	1,312
Wake	AS0160	Rex Surgery Center of Wakefield	0	2	0	0	0	0	0	2,488.8	5	1,312
Wake	AS0171	Raleigh Orthopaedic Surgery Center-West Cary	0	1	0	0	0	0	0	41.8	6	1,312
Wake	H0065	Rex Hospital	4	0	27	-4	0	1	1	55,993.6	2	1,950
UNC Health Total			4	10	27	-4	0	3	1			
Wake		WakeMed Surgery Center-Cary	0	0	0	0	0	1	0	0.0		
Wake		WakeMed Surgery Center-North Raleigh	0	0	0	0	0	1	0	0.0		
Wake	AS0137	Capital City Surgery Center	0	8	0	0	0	-1	0	7,296.6	6	1,312
Wake	H0199	WakeMed	8	0	20	-4	-1	0	0	55,717.5	2	1,950
Wake	H0276	WakeMed Cary Hospital	2	0	9	-2	0	1	0	11,228.4	4	1,500
WakeMed Health & Hospitals Total			10	8	29	-6	-1	2	0			
Wake		OrthoNC ASC	0	0	0	0	0	1	0	0.0		
Wake	AS0174	RAC Surgery Center LLC	0	1	0	0	0	0	0	67.0	6	1,312
Wake	AS0162	Surgical Center for Dental Professionals of NC LLC**	0	2	0	0	0	0	0	1,644.3	6	1,312
Wake	AS0029	Blue Ridge Surgery Center	0	6	0	0	0	0	0	5,569.2	5	1,312
Wake	AS0034	Raleigh Plastic Surgery Center	0	1	0	0	0	0	0	1,512.0	6	1,312
Wake		Valleygate Surgery Center	0	0	0	0	0	1	0	0.0		
Wake	AS0142	Triangle Surgery Center	0	2	0	0	0	1	0	4,253.1	6	1,312

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Table 6A: Operating Room Inventory and Grouping (Combined Data for Hospitals and Ambulatory Surgical Facilities)

Case data for 10/1/2020 through 9/30/2021 as reported on the 2022 Hospital and Ambulatory Surgical Facility License Renewal Applications

<i>A</i>	<i>B</i>	<i>C</i>	<i>D</i>	<i>E</i>	<i>F</i>	<i>G</i>	<i>H</i>	<i>I</i>	<i>J</i>	<i>K</i>	<i>L</i>	<i>M</i>
Service Area	License	Facility	Inpatient ORs	Ambulatory ORs	Shared ORs	Excluded C-Section ORs	Excluded Trauma/ Burn ORs	CON Adjustments	CONs for Excluded C-Section ORs	Total Surgical Hours for Grouping	Group	Standard Hours per OR per Year
Wake		Wake Spine and Specialty Surgery Center	0	0	0	0	0	1	0	0.0		
Wake	AS0155	Holly Springs Surgery Center	0	3	0	0	0	0	0	2,758.2	6	1,312
Wake		2022 SMFP Need Determination	0	0	0	0	0	2	0	0.0		
Wake Total			14	33	71	-10	-1	13	1			
Washington	H0006	Washington Regional Medical Center	0	0	2	0	0	0	0	0.0		
Washington Total			0	0	2	0	0	0	0			
Wayne	H0257	Wayne UNC Health Care	1	0	13	-1	0	0	0	9,809.2	4	1,500
Wayne Total			1	0	13	-1	0	0	0			
Wilkes	H0153	Wilkes Medical Center	1	1	4	-1	0	0	0	3,052.2	4	1,500
Wilkes Total			1	1	4	-1	0	0	0			
Wilson		Wilson Surgery Center	0	0	0	0	0	4	0	0.0		
Wilson	AS0005	Wilson Medical Center	0	4	0	0	0	-4	0	0.0		
Wilson	H0210	Wilson Medical Center	1	0	9	-1	0	0	0	3,685.0	4	1,500
Duke LifePoint Total			1	4	9	-1	0	0	0			
Wilson	AS0007	Wilson OB-GYN	0	1	0	0	0	0	0	46.0	6	1,312
Wilson Total			1	5	9	-1	0	0	0			
Yadkin	H0155	Yadkin Valley Community Hospital (closed)***	0	0	2	0	0	0	0	0.0		
Yadkin Total			0	0	2	0	0	0	0			
Grand Total			166	313	917	-100	-11	83	7			

* Duke University Hospital has 16 licensed operating rooms (ORs) approved under Policy AC-3 (J-008030-07). North Carolina Baptist Hospital has certificates of need (G-008460-10 & G-011519-18) for 11 ORs approved under Policy AC-3. These 27 ORs are counted when determining OR need.

** This is a dental single-specialty ambulatory surgery demonstration project that is in the inventory but is not included in the need determination calculations.

*** Yadkin Valley Community Hospital has received a CON exemption to reopen no later than January 18, 2025.

Table 6B: Projected Operating Room Need for 2025

<i>A</i>	<i>B</i>	<i>C</i>	<i>D</i>	<i>E</i>	<i>F</i>	<i>G</i>	<i>H</i>	<i>I</i>	<i>J</i>	<i>K</i>	<i>L</i>	<i>M</i>	<i>N</i>
Service Area	License	Facility	Inpatient Cases	Final Inpatient Case Time	Ambulatory Cases	Final Ambulatory Case Time	Total Adjusted Estimated Surgical Hours	Growth Factor	Projected Surgical Hours for 2025	Projected Surgical ORs Required in 2025	Adjusted Planning Inventory	Projected OR Deficit/ Surplus (Surplus shows as a "-")	Service Area Need
Alamance	H0272	Alamance Regional Medical Center†	1,859	154.4	6,929	102.0	16,562	4.39	17,289	9.85	12	-2.15	
Alamance Total													0
Alexander	H0274	Alexander Hospital (closed)	0	0.0	0	0.0	0		0	0.00	2	-2.00	
Alexander Total													0
Alleghany	H0108	Alleghany Memorial Hospital†††/^	0	0.0	71	93.1	110	-0.18	110	0.07	2	-1.93	
Alleghany Total													0
Anson	H0082	Atrium Health Anson†††/^	0	0.0	34	93.1	53	-1.15	53	0.04	1	-0.96	
Anson Total													0
Ashe	H0099	Ashe Memorial Hospital^	135	138.4	673	90.0	1,321	-1.05	1,321	0.88	2	-1.12	
Ashe Total													0
Avery	H0037	Charles A. Cannon, Jr. Memorial Hospital†	30	77.1	373	65.6	446	5.06	469	0.31	2	-1.69	
Watauga	H0077	Watauga Medical Center†††	917	102.0	4,482	67.1	6,571	5.06	6,904	4.60	6	-1.40	
Appalachian Regional Healthcare System Total										4.91	8	-3.09	
Avery/Watauga Total													0
Beaufort	H0188	Vidant Beaufort Hospital, A campus of Vidant Medical Center†	441	116.6	2,346	87.0	4,259	-3.09	4,259	2.84	5	-2.16	
Beaufort Total													0
Bertie	H0268	Vidant Bertie Hospital	1	0.0	576	31.0	298	-3.43	298	0.20	2	-1.80	
Bertie Total													0
Bladen	H0154	Cape Fear Valley-Bladen County Hospital††††	27	116.7	370	51.3	369	-7.21	369	0.25	2	-1.75	
Bladen Total													0
Brunswick	AS0170	Brunswick Surgery Center	0	0.0	522	39.0	339	9.29	371	0.28	1	-0.72	
Brunswick	H0150	Dosher Memorial Hospital	198	108.0	3,119	60.0	3,475	9.29	3,798	2.53	2	0.53	
Brunswick	H0250	Novant Health Brunswick Medical	898	134.0	3,782	93.1	7,877	9.29	8,609	5.74	4	1.74	
Brunswick		2021 SMFP Need Determination	0	0.0	0	0.0	0		0	0.00	2	-2.00	
Brunswick Total													0
Buncombe	AS0038	Outpatient Surgery Center of Asheville^^	0	0.0	3,880	85.5	5,529	4.10	5,756	4.39	5	-0.61	
Buncombe	AS0065	Asheville Eye Surgery Center	0	0.0	3,141	25.0	1,309	4.10	1,362	1.04	1	0.04	

Table 6B: Projected Operating Room Need for 2025

<i>A</i>	<i>B</i>	<i>C</i>	<i>D</i>	<i>E</i>	<i>F</i>	<i>G</i>	<i>H</i>	<i>I</i>	<i>J</i>	<i>K</i>	<i>L</i>	<i>M</i>	<i>N</i>
Service Area	License	Facility	Inpatient Cases	Final Inpatient Case Time	Ambulatory Cases	Final Ambulatory Case Time	Total Adjusted Estimated Surgical Hours	Growth Factor	Projected Surgical Hours for 2025	Projected Surgical ORs Required in 2025	Adjusted Planning Inventory	Projected OR Deficit/ Surplus (Surplus shows as a "-")	Service Area Need
Buncombe	H0036	Mission Hospital	12,203	168.0	21,216	91.0	66,346	4.10	69,068	35.42	44	-8.58	
Buncombe/Graham/Madison/Yancey													0
Burke		Blue Ridge Surgery Center	0	0.0	0	0.0	0		0	0.00	4	-4.00	
Burke	AS0040	Surgery Center of Morganton Eye Physicians	0	0.0	3,309	30.0	1,655	-0.27	1,655	1.26	2	-0.74	
Burke	H0062	UNC Health Blue Ridge	1,326	90.5	4,729	53.8	6,239	-0.27	6,239	4.16	5	-0.84	
Burke Total													0
Cabarrus	AS0070	Gateway Surgery Center	0	0.0	6,738	38.0	4,267	7.73	4,597	3.50	6	-2.50	
Cabarrus	H0031	Atrium Health Cabarrus	4,781	199.0	5,837	132.7	28,766	7.73	30,990	17.66	17	0.66	
Atrium Health Total													0
Cabarrus	AS0019	Eye Surgery and Laser Clinic, Inc	0	0.0	3,574	45.0	2,681	7.73	2,888	2.20	2	0.20	
Cabarrus Total													0
Caldwell	AS0168	Prime Surgical Suites	0	0.0	980	84.0	1,372	-0.59	1,372	1.05	3	-1.95	
Caldwell	H0061	Caldwell UNC Health Care††††	1,036	93.4	2,351	60.7	3,991	-0.59	3,991	2.66	4	-1.34	
UNC Health Total													0
Caldwell Total													0
Carteret	AS0061	The Surgical Center of Morehead City	0	0.0	1,625	49.0	1,327	0.45	1,333	1.02	2	-0.98	
Carteret	H0222	Carteret General Hospital	1,288	112.0	2,296	85.0	5,657	0.45	5,682	3.79	5	-1.21	
Carteret Total													0
Catawba	AS0036	Graystone Eye Surgery Center	0	0.0	8,533	34.0	4,835	3.09	4,985	3.80	3	0.80	
Catawba	AS0101	Viewmont Surgery Center†††	0	0.0	2,669	49.5	2,202	3.09	2,270	1.73	3	-1.27	
Catawba	H0053	Frye Regional Medical Center†/†††	1,574	138.4	3,151	93.1	8,522	3.09	8,785	5.86	21	-15.14	
Catawba	H0223	Catawba Valley Medical Center†/†††	1,727	138.4	5,646	93.1	12,748	3.09	13,142	8.76	12	-3.24	
Catawba Total													0
Chatham	H0007	Chatham Hospital†/†††	62	118.8	735	93.1	1,264	6.54	1,347	0.90	2	-1.10	
Chatham Total													0
Cherokee	H0239	Erlanger Murphy Medical Center†	154	138.4	1,935	93.1	3,359	3.36	3,472	2.31	4	-1.69	
Cherokee/Clay Total													0

Table 6B: Projected Operating Room Need for 2025

<i>A</i>	<i>B</i>	<i>C</i>	<i>D</i>	<i>E</i>	<i>F</i>	<i>G</i>	<i>H</i>	<i>I</i>	<i>J</i>	<i>K</i>	<i>L</i>	<i>M</i>	<i>N</i>
Service Area	License	Facility	Inpatient Cases	Final Inpatient Case Time	Ambulatory Cases	Final Ambulatory Case Time	Total Adjusted Estimated Surgical Hours	Growth Factor	Projected Surgical Hours for 2025	Projected Surgical ORs Required in 2025	Adjusted Planning Inventory	Projected OR Deficit/ Surplus (Surplus shows as a "-")	Service Area Need
Chowan	H0063	Vidant Chowan Hospital††††	332	72.0	775	43.9	966	-0.18	966	0.64	3	-2.36	
Chowan Total													0
Cleveland	AS0062	Atrium Health Surgery Center Shelby	0	0.0	1,334	37.0	823	2.43	843	0.64	4	-3.36	
Cleveland	H0024	Atrium Health Cleveland†††	1,339	131.2	3,536	93.1	8,417	2.43	8,622	5.75	8	-2.25	
Atrium Health Total										6.39	12	-5.61	
Cleveland	AS0049	Eye Surgery Center of Shelby	0	0.0	2,389	40.0	1,593	2.43	1,631	1.24	2	-0.76	
Cleveland Total													0
Columbus	H0045	Columbus Regional Healthcare System	781	92.0	2,205	55.0	3,219	-7.30	3,219	2.15	5	-2.85	
Columbus Total													0
Craven	H0201	CarolinaEast Medical Center†/†††	2,575	105.4	11,200	42.6	12,483	-1.21	12,483	8.32	17	-8.68	
Craven/Jones/Pamlico Total													0
Cumberland	H0213	Cape Fear Valley Medical Center†	5,868	154.0	5,601	119.0	26,170	0.04	26,180	14.92	18	-3.08	
Cumberland	H0275	Highsmith-Rainey Specialty Hospital	36	100.0	2,383	76.0	3,078	0.04	3,080	2.05	1	1.05	
Cape Fear Valley Health System Total										16.97	19	-2.03	
Cumberland	AS0006	Fayetteville Ambulatory Surgery Center†††	0	0.0	8,299	46.2	6,390	0.04	6,393	4.87	11	-6.13	
Cumberland	AS0159	Valleygate Dental Surgery Center**	0	0.0	1,686	0.0	0		0	0.00	0	0.00	
Cumberland Total													0
Dare	H0273	The Outer Banks Hospital††††	171	99.0	1,166	37.1	1,004	4.30	1,047	0.70	3	-2.30	
Dare Total													0
Davidson	H0027	Lexington Medical Center†††	679	110.1	2,217	81.6	4,260	2.68	4,374	2.92	4	-1.08	
Davidson	H0112	Novant Health Thomasville Medical Center	564	109.0	3,376	74.0	5,188	2.68	5,327	3.55	5	-1.45	
Davidson Total													0
Davie	H0171	Davie Medical Center†††/^	313	138.4	2,683	56.4	3,245	4.35	3,387	2.26	3	-0.74	
Davie Total													0
Duplin	H0166	Vidant Duplin Hospital†/†††	398	80.4	1,355	59.9	1,885	-8.83	1,885	1.26	3	-1.74	
Duplin Total													0
Durham	AS0041	James E. Davis Ambulatory Surgical Center†††/^	0	0.0	5,137	50.3	4,309	5.76	4,557	3.47	4	-0.53	

Table 6B: Projected Operating Room Need for 2025

<i>A</i>	<i>B</i>	<i>C</i>	<i>D</i>	<i>E</i>	<i>F</i>	<i>G</i>	<i>H</i>	<i>I</i>	<i>J</i>	<i>K</i>	<i>L</i>	<i>M</i>	<i>N</i>
Service Area	License	Facility	Inpatient Cases	Final Inpatient Case Time	Ambulatory Cases	Final Ambulatory Case Time	Total Adjusted Estimated Surgical Hours	Growth Factor	Projected Surgical Hours for 2025	Projected Surgical ORs Required in 2025	Adjusted Planning Inventory	Projected OR Deficit/ Surplus (Surplus shows as a "-")	Service Area Need
Durham	AS0172	Duke Ambulatory Surgery Center Arrington^^	0	0.0	131	85.5	187	5.76	197	0.15	6	-5.85	
Durham	H0015	Duke University Hospital*	16,940	267.8	23,153	142.1	130,437	5.76	137,950	70.74	66	4.74	
Durham	H0233	Duke Regional Hospital†††/^^	3,321	209.0	4,169	142.9	21,501	5.76	22,739	12.96	13	-0.04	
Duke University Health System Total										87.32	89	-1.68	
Durham		Southpoint Surgery Center	0	0.0	0	0.0	0		0	0.00	2	-2.00	
Durham	H0075	North Carolina Specialty Hospital††††/^^	739	138.4	3,396	93.1	6,977	5.76	7,378	4.92	4	0.92	
NC Specialty Hospital Total										4.92	6	-1.08	
Durham		2021 SMFP Need Determination	0	0.0	0	0.0	0		0	0.00	2	-2.00	
Durham Total													0
Edgecombe	H0258	Vidant Edgecombe Hospital	488	106.0	1,161	61.0	2,042	-4.39	2,042	1.36	5	-3.64	
Edgecombe Total													0
Forsyth	AS0021	Wake Forest Baptist Health Outpatient Surgery Center - Clemmons†††/^^	0	0.0	2,150	85.5	3,064	3.32	3,165	2.41	3	-0.59	
Forsyth	H0011	Atrium Health Wake Forest Baptist*	13,599	238.5	17,064	135.5	92,592	3.32	95,670	49.06	49	0.06	
Atrium Health Total										51.47	52	-0.53	
Forsyth	AS0149	Novant Health Kernersville Outpatient Surgery†††	0	0.0	2,176	56.1	2,034	3.32	2,102	1.60	2	-0.40	
Forsyth	AS0167	Novant Health Clemmons Outpatient Surgery†††	0	0.0	1,922	76.1	2,437	3.32	2,518	1.92	2	-0.08	
Forsyth	H0209	Novant Health Forsyth Medical Center††††	8,583	145.5	18,120	76.9	44,041	3.32	45,505	23.34	33	-9.66	
Forsyth	H0229	Novant Health Medical Park Hospital	898	207.0	9,437	104.0	19,456	3.32	20,102	11.45	10	1.45	
Novant Health Total										38.31	47	-8.69	
Forsyth	AS0173	Kimel Park Surgery Center	0	0.0	709	83.0	981	3.32	1,013	0.77	2	-1.23	
Forsyth	AS0134	Piedmont Outpatient Surgery Center†††/^^	0	0.0	1,870	50.3	1,568	3.32	1,621	1.24	2	-0.76	
Forsyth		Triad Surgery Center	0	0.0	0	0.0	0		0	0.00	2	-2.00	
Forsyth Total													0
Franklin	H0267-B	Maria Parham-Franklin	0	0.0	0	0.0	0		0	0.00	2	-2.00	
Franklin		Same Day Surgery Center	0	0.0	0	0.0	0		0	0.00	2	-2.00	

Table 6B: Projected Operating Room Need for 2025

<i>A</i>	<i>B</i>	<i>C</i>	<i>D</i>	<i>E</i>	<i>F</i>	<i>G</i>	<i>H</i>	<i>I</i>	<i>J</i>	<i>K</i>	<i>L</i>	<i>M</i>	<i>N</i>
Service Area	License	Facility	Inpatient Cases	Final Inpatient Case Time	Ambulatory Cases	Final Ambulatory Case Time	Total Adjusted Estimated Surgical Hours	Growth Factor	Projected Surgical Hours for 2025	Projected Surgical ORs Required in 2025	Adjusted Planning Inventory	Projected OR Deficit/ Surplus (Surplus shows as a "-")	Service Area Need
Franklin Total													0
Gaston		CaroMont ASC-Belmont	0	0.0	0	0.0	0		0	0.00	2	-2.00	
Gaston		CaroMont Regional Medical Center - Belmont	0	0.0	0	0.0	0		0	0.00	2	-2.00	
Gaston	AS0037	CaroMont Specialty Surgery	0	0.0	3,200	30.3	1,614	2.45	1,654	1.26	3	-1.74	
Gaston	H0105	CaroMont Regional Medical Center	4,647	106.7	9,072	81.0	20,512	2.45	21,015	11.97	17	-5.03	
CaroMont Health Total										13.23	24	-10.77	
Gaston Total													0
Granville	H0098	Granville Health System†/†††	473	54.5	2,077	26.1	1,334	4.45	1,393	0.93	3	-2.07	
Granville Total													0
Guilford	AS0047	High Point Surgery Center	0	0.0	3,671	60.0	3,671	3.75	3,809	2.90	6	-3.10	
Guilford	AS0152	Premier Surgery Center	0	0.0	1,174	60.0	1,174	3.75	1,218	0.93	2	-1.07	
Guilford	H0052	High Point Regional Health†††	2,328	129.0	3,601	93.1	10,596	3.75	10,993	7.33	10	-2.67	
Atrium Health Total										11.16	18	-6.84	
Guilford		North Elam Ambulatory Surgery Center	0	0.0	0	0.0	0		0	0.00	5	-5.00	
Guilford	H0159	Cone Health	10,404	165.0	16,570	130.0	64,513	3.75	66,934	34.33	40	-5.67	
Moses H. Cone Memorial Hospital System Total										34.33	45	-10.67	
Guilford	AS0009	Greensboro Specialty Surgical Center	0	0.0	1,305	49.2	1,070	3.75	1,110	0.85	3	-2.15	
Guilford	AS0018	Surgical Center of Greensboro††††	0	0.0	10,831	50.9	9,188	3.75	9,533	7.27	13	-5.73	
Surgical Care Affiliates Total										8.11	16	-7.89	
Guilford	AS0161	Valleygate Dental Surgery Center of the Triad**	0	0.0	1,608	0.0	0		0	0.00	0	0.00	
Guilford	AS0033	Surgical Eye Center	0	0.0	3,044	22.0	1,116	3.75	1,158	0.88	4	-3.12	
Guilford	AS0063	Piedmont Surgical Center††††	0	0.0	0	0.0	0		0	0.00	2	-2.00	
Guilford	H0073	Kindred Hospital - Greensboro††/††††	174	55.4	14	51.3	173	3.75	179	0.12	1	-0.88	
Guilford/Caswell Total													0
Halifax	H0230	Vidant North Hospital	825	80.0	1,967	58.0	3,001	-4.11	3,001	2.00	6	-4.00	
Halifax/Northampton Total													0
Harnett	H0224	Cape Fear Valley Betsy Johnson Hospital	836	98.0	2,269	75.0	4,203	5.31	4,426	2.95	7	-4.05	

Table 6B: Projected Operating Room Need for 2025

<i>A</i>	<i>B</i>	<i>C</i>	<i>D</i>	<i>E</i>	<i>F</i>	<i>G</i>	<i>H</i>	<i>I</i>	<i>J</i>	<i>K</i>	<i>L</i>	<i>M</i>	<i>N</i>
Service Area	License	Facility	Inpatient Cases	Final Inpatient Case Time	Ambulatory Cases	Final Ambulatory Case Time	Total Adjusted Estimated Surgical Hours	Growth Factor	Projected Surgical Hours for 2025	Projected Surgical ORs Required in 2025	Adjusted Planning Inventory	Projected OR Deficit/ Surplus (Surplus shows as a "-")	Service Area Need
Harnett Total													0
Haywood	H0025	Haywood Regional Medical Center	877	120.1	3,712	70.4	6,111	2.50	6,264	4.18	7	-2.82	
Haywood Total													0
Henderson		Western Carolina Surgery Center	0	0.0	0	0.0	0		0	0.00	1	-1.00	
Henderson	H0019	AdventHealth Hendersonville†††	839	107.0	4,962	62.9	6,700	4.33	6,990	4.66	5	-0.34	
Adventist Health Total										4.66	6	-1.34	
Henderson		Pardee Partners ASC	0	0.0	0	0.0	0		0	0.00	2	-2.00	
Henderson	H0161	Margaret R. Pardee Memorial Hospital	2,073	116.0	6,248	79.0	12,234	4.33	12,765	8.51	8	0.51	
UNC Health Total										8.51	10	-1.49	
Henderson Total													0
Hertford	H0001	Vidant Roanoke-Chowan Hospital	416	72.0	1,181	46.0	1,405	-7.58	1,405	0.94	5	-4.06	
Hertford Total													0
Hoke	H0287	FirstHealth Moore Regional Hospital - Hoke Campus	1	0.0	556	43.0	398	4.18	415	0.28	2	-1.72	
Hoke	H0288	Cape Fear Valley Hoke Hospital	104	103.0	1,228	87.0	1,959	4.18	2,041	1.36	2	-0.64	
Hoke Total													0
Iredell		Statesville Orthopedic Surgery Center	0	0.0	0	0.0	0		0	0.00	1	-1.00	
Iredell	H0248	Davis Regional Medical Center†/†††	427	103.6	1,391	83.7	2,677	7.93	2,890	1.93	4	-2.07	
Iredell	H0259	Lake Norman Regional Medical Center††/††††	1,260	76.0	5,345	40.3	5,188	7.93	5,599	3.73	9	-5.27	
Community Health Systems Total										5.66	14	-8.34	
Iredell	AS0042	Iredell Ambulatory Surgery Center†††/^	0	0.0	347	50.3	291	7.93	314	0.24	1	-0.76	
Iredell	AS0050	Iredell Surgical Center	0	0.0	1,180	31.0	610	7.93	658	0.50	4	-3.50	
Iredell	AS0175	Iredell Surgery at Mooresville	0	0.0	0	0.0	0		0	0.00	1	-1.00	
Iredell	H0164	Iredell Memorial Hospital†/^	1,492	138.4	4,367	93.1	10,221	7.93	11,032	7.35	9	-1.65	
Iredell Health System Total										8.10	15	-6.90	
Iredell Total													0
Swain	H0069	Swain Community Hospital	0	0.0	0	0.0	0		0	0.00	1	-1.00	
Jackson	H0087	Harris Regional Hospital	992	95.6	3,994	69.5	6,207	0.71	6,251	4.17	6	-1.83	

Table 6B: Projected Operating Room Need for 2025

<i>A</i>	<i>B</i>	<i>C</i>	<i>D</i>	<i>E</i>	<i>F</i>	<i>G</i>	<i>H</i>	<i>I</i>	<i>J</i>	<i>K</i>	<i>L</i>	<i>M</i>	<i>N</i>
Service Area	License	Facility	Inpatient Cases	Final Inpatient Case Time	Ambulatory Cases	Final Ambulatory Case Time	Total Adjusted Estimated Surgical Hours	Growth Factor	Projected Surgical Hours for 2025	Projected Surgical ORs Required in 2025	Adjusted Planning Inventory	Projected OR Deficit/ Surplus (Surplus shows as a "-")	Service Area Need
Duke LifePoint Total										4.17	7	-2.83	
Jackson/Graham/Swain Total													0
Johnston	H0151	Johnston Health	1,249	102.1	6,296	62.2	8,652	10.14	9,529	6.35	8	-1.65	
Johnston Total													0
Lee	H0243	Central Carolina Hospital	328	86.0	1,427	64.0	1,992	5.13	2,095	1.40	6	-4.60	
Lee Total													0
Lenoir	H0043	UNC Lenoir Health Care	963	122.1	2,757	63.4	4,872	-1.24	4,872	3.25	9	-5.75	
Lenoir Total													0
Lincoln	H0225	Atrium Health Lincoln	476	136.8	1,764	93.1	3,824	3.70	3,965	2.64	4	-1.36	
Lincoln Total													0
Macon	H0034	Angel Medical Center†/^	95	138.4	619	62.2	861	4.11	896	0.60	3	-2.40	
Macon	H0193	Highlands-Cashiers Hospital	0	0.0	0	0.0	0		0	0.00	2	-2.00	
Mission Health Total										0.60	5	-4.40	
Macon Total													0
Martin	H0078	Martin General Hospital†	112	138.4	638	93.1	1,249	-3.39	1,249	0.83	2	-1.17	
Martin Total													0
McDowell	H0097	Mission Hospital McDowell††††	197	130.9	940	93.1	1,889	-0.32	1,889	1.26	3	-1.74	
McDowell Total													0
Mecklenburg		Atrium Health Huntersville Surgery Center	0	0.0	0	0.0	0		0	0.00	1	-1.00	
Mecklenburg		Atrium Health Lake Norman	0	0.0	0	0.0	0		0	0.00	2	-2.00	
Mecklenburg	AS0058	Carolina Center for Specialty Surgery†††	0	0.0	2,060	72.6	2,493	7.80	2,687	2.05	3	-0.95	
Mecklenburg	H0042	Atrium Health Pineville	2,986	196.7	4,713	133.7	20,291	7.80	21,874	12.46	13	-0.54	
Mecklenburg	H0071	Carolinas Medical Center/Center for Mental Health	16,931	233.4	21,003	146.2	117,039	7.80	126,167	64.70	68	-3.30	
Mecklenburg	H0255	Atrium Health University City†/^	1,008	138.4	3,293	83.7	6,919	7.80	7,458	4.97	6	-1.03	
Atrium Health Total										84.18	93	-8.82	
Mecklenburg		Novant Health Ballantyne Medical Center	0	0.0	0	0.0	0		0	0.00	2	-2.00	
Mecklenburg		Novant Health Steele Creek Medical Center	0	0.0	0	0.0	0		0	0.00	2	-2.00	

Table 6B: Projected Operating Room Need for 2025

<i>A</i>	<i>B</i>	<i>C</i>	<i>D</i>	<i>E</i>	<i>F</i>	<i>G</i>	<i>H</i>	<i>I</i>	<i>J</i>	<i>K</i>	<i>L</i>	<i>M</i>	<i>N</i>
Service Area	License	Facility	Inpatient Cases	Final Inpatient Case Time	Ambulatory Cases	Final Ambulatory Case Time	Total Adjusted Estimated Surgical Hours	Growth Factor	Projected Surgical Hours for 2025	Projected Surgical ORs Required in 2025	Adjusted Planning Inventory	Projected OR Deficit/ Surplus (Surplus shows as a "-")	Service Area Need
Mecklenburg	AS0068	SouthPark Surgery Center	0	0.0	8,973	50.0	7,478	7.80	8,061	6.14	6	0.14	
Mecklenburg	AS0098	Novant Health Ballantyne Outpatient Surgery^^	0	0.0	1,455	85.5	2,073	7.80	2,235	1.70	2	-0.30	
Mecklenburg	AS0124	Novant Health Huntersville Outpatient Surgery^^	0	0.0	2,036	54.0	1,832	7.80	1,975	1.51	2	-0.49	
Mecklenburg	AS0136	Matthews Surgery Center	0	0.0	1,943	75.0	2,429	7.80	2,618	2.00	2	0.00	
Mecklenburg	H0010	Novant Health Presbyterian Medical Center	7,704	181.5	23,697	104.9	64,735	7.80	69,784	35.79	35	0.79	
Mecklenburg	H0270	Novant Health Matthews Medical Center†††	1,599	137.6	4,476	93.1	10,616	7.80	11,444	7.63	7	0.63	
Mecklenburg	H0282	Novant Health Huntersville Medical Center†††/^^	1,199	138.4	3,891	93.1	8,806	7.80	9,493	6.33	7	-0.67	
Mecklenburg	H0290	Novant Health Mint Hill Medical Center†††/^^	141	121.3	1,265	93.1	2,249	7.80	2,424	1.62	3	-1.38	
Novant Health Total										62.71	68	-5.29	
Mecklenburg	AS0026	Charlotte Surgery Center-Museum Campus††††	0	0.0	5,188	61.6	5,326	7.80	5,742	4.38	6	-1.62	
Mecklenburg	AS0166	Charlotte Surgery Center-Wendover Campus†††	0	0.0	5,042	84.7	7,118	7.80	7,673	5.85	6	-0.15	
Surgical Care Affiliates Total										10.22	12	-1.78	
Mecklenburg	AS0148	Mallard Creek Surgery Center^^/††††	0	0.0	2,023	73.8	2,487	7.80	2,681	2.04	2	0.04	
Mecklenburg		Metrolina Vascular Access Care	0	0.0	0	0.0	0		0	0.00	1	-1.00	
Mecklenburg	AS0164	Valleygate Dental Surgery Center Charlotte, LLC**	0	0.0	1,906	0.0	0		0	0.00	0	0.00	
Mecklenburg Total													0
Mitchell	H0169	Blue Ridge Regional Hospital†/†††	15	122.7	513	91.3	811	-1.13	811	0.54	3	-2.46	
Mitchell Total													0
Montgomery	H0003	FirstHealth Montgomery Memorial Hospita	0	0.0	170	52.1	148	0.03	148	0.10	2	-1.90	
Montgomery Total													0
Moore	AS0022	The Eye Surgery Center of the Carolinas	0	0.0	6,591	20.0	2,197	6.76	2,345	1.79	3	-1.21	
Moore	AS0069	Surgery Center of Pinehurst	0	0.0	4,995	60.0	4,995	6.76	5,333	4.06	6	-1.94	
Moore	H0100	FirstHealth Moore Regional Hospital and Pinehurst Treatment Cntr.	4,795	132.5	7,741	93.9	22,704	6.76	24,238	13.81	17	-3.19	

Table 6B: Projected Operating Room Need for 2025

<i>A</i>	<i>B</i>	<i>C</i>	<i>D</i>	<i>E</i>	<i>F</i>	<i>G</i>	<i>H</i>	<i>I</i>	<i>J</i>	<i>K</i>	<i>L</i>	<i>M</i>	<i>N</i>
Service Area	License	Facility	Inpatient Cases	Final Inpatient Case Time	Ambulatory Cases	Final Ambulatory Case Time	Total Adjusted Estimated Surgical Hours	Growth Factor	Projected Surgical Hours for 2025	Projected Surgical ORs Required in 2025	Adjusted Planning Inventory	Projected OR Deficit/ Surplus (Surplus shows as a "-")	Service Area Need
Moore Total													0
Nash	H0228	Nash General Hospital†	1,336	138.4	6,651	77.0	11,617	0.65	11,692	7.79	13	-5.21	
Nash Total													0
New Hanover	H0221	New Hanover Regional Medical Center†/†††	10,137	127.6	21,401	77.0	49,023	5.22	51,580	26.45	38	-11.55	
New Hanover		Wilmington ASC	0	0.0	0	0.0	0		0	0.00	1	-1.00	
New Hanover	AS0176	Wilmington Eye Surgery Center	0	0.0	0	0.0	0		0	0.00	2	-2.00	
New Hanover	AS0055	Wilmington SurgCare	0	0.0	9,828	40.0	6,547	5.22	6,889	5.25	10	-4.75	
New Hanover Total													0
Onslow	H0048	Onslow Memorial Hospital†††	693	87.0	5,441	65.8	6,970	4.38	7,275	4.85	9	-4.15	
Onslow Total													0
Orange		Duke Health Orange Ambulatory Surgical Center	0	0.0	0	0.0	0		0	0.00	2	-2.00	
Orange		North Chapel Hill Surgery Center	0	0.0	0	0.0	0		0	0.00	2	-2.00	
Orange	H0157	University of North Carolina Hospitals	13,111	237.0	17,419	141.0	92,723	3.94	96,378	49.42	52	-2.58	
UNC Health Total										49.42	54	-4.58	
Orange Total													0
Pasquotank	H0054	Sentara Albemarle Medical Center†††	799	132.0	3,432	62.8	5,351	3.97	5,563	3.71	8	-4.29	
Pasq-Cam-Cur-Gates-Perq Total													0
Pender	H0115	Pender Memorial Hospital††††	0	0.0	4,455	36.9	2,737	6.29	2,909	1.94	2	-0.06	
Pender Total													0
Person	H0066	Person Memorial Hospital†	55	109.1	559	34.0	417	0.18	418	0.28	4	-3.72	
Person Total													0
Pitt	AS0012	Vidant SurgiCenter	0	0.0	10,995	84.3	15,448	0.94	15,593	11.89	10	1.89	
Pitt	H0104	Vidant Medical Center†	10,947	165.0	10,218	135.0	53,103	0.94	53,602	27.49	28	-0.51	
Vidant Health Total										39.37	38	1.37	
Pitt		2022 SMFP Need Determination	0	0.0	0	0.0	0		0	0.00	1	-1.00	
Pitt/Greene/Hyde/Tyrrell Total													0
Polk	H0079	St. Luke's Hospital†††	86	73.2	986	60.0	1,091	-2.26	1,091	0.73	3	-2.27	

Table 6B: Projected Operating Room Need for 2025

<i>A</i>	<i>B</i>	<i>C</i>	<i>D</i>	<i>E</i>	<i>F</i>	<i>G</i>	<i>H</i>	<i>I</i>	<i>J</i>	<i>K</i>	<i>L</i>	<i>M</i>	<i>N</i>
Service Area	License	Facility	Inpatient Cases	Final Inpatient Case Time	Ambulatory Cases	Final Ambulatory Case Time	Total Adjusted Estimated Surgical Hours	Growth Factor	Projected Surgical Hours for 2025	Projected Surgical ORs Required in 2025	Adjusted Planning Inventory	Projected OR Deficit/ Surplus (Surplus shows as a "-")	Service Area Need
Polk Total													0
Randolph	H0013	Randolph Hospital	507	123.9	2,743	74.8	4,468	1.78	4,547	3.03	7	-3.97	
Randolph Total													0
Richmond	H0158	FirstHealth Moore Regional Hospital - Richmond	155	75.0	1,772	63.0	2,054	-1.82	2,054	1.37	3	-1.63	
Richmond Total													0
Robeson	AS0150	The Surgery Center at Southeastern Health Park	0	0.0	1,294	32.1	693	-5.77	693	0.53	4	-3.47	
Robeson	H0064	Southeastern Regional Medical Center†††	1,512	131.0	2,121	93.1	6,594	-5.77	6,594	4.40	6	-1.60	
UNC Health Total										4.92	10	-5.08	
Robeson Total													0
Rockingham	H0023	Annie Penn Hospital	283	132.0	1,291	72.0	2,172	0.00	2,172	1.45	4	-2.55	
Rockingham	H0072	UNC Rockingham Hospital††	250	94.4	800	71.0	1,340	0.00	1,340	0.89	5	-4.11	
Rockingham Total													0
Rowan	H0040	Novant Health Rowan Medical Center^	1,642	138.4	6,610	86.0	13,261	1.59	13,472	8.98	11	-2.02	
Rowan Total													0
Rutherford	H0039	Rutherford Regional Medical Center	681	104.8	1,007	70.0	2,365	0.75	2,382	1.59	5	-3.41	
Rutherford Total													0
Sampson	H0067	Sampson Regional Medical Center	381	94.0	1,109	80.0	2,076	-2.23	2,076	1.38	8	-6.62	
Sampson Total													0
Scotland	H0107	Scotland Memorial Hospital†††††	1,317	103.2	3,159	71.8	6,047	-4.56	6,047	4.03	5	-0.97	
Scotland Total													0
Stanly	H0008	Atrium Health Stanly†/††††	392	112.3	1,366	70.3	2,333	0.74	2,351	1.57	5	-3.43	
Stanly Total													0
Stokes	H0165	LifeBrite Community Hospital of Stokes†††††	0	0.0	235	54.9	215	-0.32	215	0.14	4	-3.86	
Stokes Total													0
Surry	H0049	Hugh Chatham Memorial Hospital††††	844	110.0	2,564	66.0	4,368	-0.17	4,368	2.91	5	-2.09	
Surry	H0184	Northern Regional Hospital†/††††	699	95.6	1,920	65.3	3,205	-0.17	3,205	2.14	4	-1.86	

Table 6B: Projected Operating Room Need for 2025

<i>A</i>	<i>B</i>	<i>C</i>	<i>D</i>	<i>E</i>	<i>F</i>	<i>G</i>	<i>H</i>	<i>I</i>	<i>J</i>	<i>K</i>	<i>L</i>	<i>M</i>	<i>N</i>
Service Area	License	Facility	Inpatient Cases	Final Inpatient Case Time	Ambulatory Cases	Final Ambulatory Case Time	Total Adjusted Estimated Surgical Hours	Growth Factor	Projected Surgical Hours for 2025	Projected Surgical ORs Required in 2025	Adjusted Planning Inventory	Projected OR Deficit/ Surplus (Surplus shows as a "-")	Service Area Need
Surry Total													0
Transylvania	H0111	Transylvania Regional Hospital†	122	85.2	1,245	44.8	1,103	1.50	1,119	0.75	4	-3.25	
Transylvania Total													0
Union	AS0132	Atrium Health Surgery Center Indian Trail†††	0	0.0	863	33.0	475	8.41	515	0.39	3	-2.61	
Union	H0050	Atrium Health Union†/^	1,199	138.4	3,259	93.1	7,822	8.41	8,480	5.65	6	-0.35	
Atrium Health Total										6.05	9	-2.95	
Union	AS0120	Presbyterian SameDay Surgery Center-Monroe	0	0.0	0	0.0	0		0	0.00	1	-1.00	
Union Total													0
Vance	H0267-A	Maria Parham Health	677	109.0	2,107	79.0	4,004	-2.39	4,004	2.67	5	-2.33	
Vance/Warren Total													0
Wake		Duke Green Level Hospital	0	0.0	0	0.0	0		0	0.00	2	-2.00	
Wake		Duke Health Garner Ambulatory Surgical Center	0	0.0	0	0.0	0		0	0.00	1	-1.00	
Wake		Duke Health Green Level Ambulatory Surgery Center	0	0.0	0	0.0	0		0	0.00	1	-1.00	
Wake	H0238	Duke Raleigh Hospital^	3,127	219.2	6,975	142.0	27,929	8.67	30,351	17.29	13	4.29	
Duke University Health System Total										17.29	17	0.29	
Wake		Orthopaedic Surgery Center of Garner	0	0.0	0	0.0	0		0	0.00	1	-1.00	
Wake	AS0129	Rex Surgery Center of Cary	0	0.0	3,522	67.0	3,933	8.67	4,274	3.26	4	-0.74	
Wake	AS0143	Raleigh Orthopaedic Surgery Center	0	0.0	3,008	69.8	3,501	8.67	3,805	2.90	4	-1.10	
Wake	AS0160	Rex Surgery Center of Wakefield††††/^	0	0.0	2,928	50.3	2,456	8.67	2,669	2.03	2	0.03	
Wake	AS0171	Raleigh Orthopaedic Surgery Center-West Cary††††	0	0.0	33	76.0	42	8.67	45	0.03	1	-0.97	
Wake	H0065	Rex Hospital†	7,388	198.0	13,646	139.0	55,994	8.67	60,848	31.20	28	3.20	
UNC Health Total										39.43	40	-0.57	
Wake		WakeMed Surgery Center-Cary	0	0.0	0	0.0	0		0	0.00	1	-1.00	
Wake		WakeMed Surgery Center-North Raleigh	0	0.0	0	0.0	0		0	0.00	1	-1.00	
Wake	AS0137	Capital City Surgery Center	0	0.0	7,177	61.0	7,297	8.67	7,929	6.04	7	-0.96	

Table 6B: Projected Operating Room Need for 2025

<i>A</i>	<i>B</i>	<i>C</i>	<i>D</i>	<i>E</i>	<i>F</i>	<i>G</i>	<i>H</i>	<i>I</i>	<i>J</i>	<i>K</i>	<i>L</i>	<i>M</i>	<i>N</i>
Service Area	License	Facility	Inpatient Cases	Final Inpatient Case Time	Ambulatory Cases	Final Ambulatory Case Time	Total Adjusted Estimated Surgical Hours	Growth Factor	Projected Surgical Hours for 2025	Projected Surgical ORs Required in 2025	Adjusted Planning Inventory	Projected OR Deficit/ Surplus (Surplus shows as a "-")	Service Area Need
Wake	H0199	WakeMed†††	8,300	182.9	13,287	137.4	55,717	8.67	60,548	31.05	23	8.05	
Wake	H0276	WakeMed Cary Hospital†/†††	2,759	136.4	4,417	67.3	11,228	8.67	12,202	8.13	10	-1.87	
WakeMed Health & Hospitals Total										45.23	42	3.23	
Wake		OrthoNC ASC	0	0.0	0	0.0	0		0	0.00	1	-1.00	
Wake	AS0174	RAC Surgery Center LLC	0	0.0	134	30.0	67	8.67	73	0.06	1	-0.94	
Wake	AS0162	Surgical Center for Dental Professionals of NC LLC**	0	0.0	1,134	0.0	0		0	0.00	0	0.00	
Wake	AS0029	Blue Ridge Surgery Center†††	0	0.0	5,304	46.9	4,143	8.67	4,502	3.43	6	-2.57	
Wake	AS0034	Raleigh Plastic Surgery Center†††/^	0	0.0	336	85.5	479	8.67	520	0.40	1	-0.60	
Wake		Valleygate Surgery Center	0	0.0	0	0.0	0		0	0.00	1	-1.00	
Wake	AS0142	Triangle Surgery Center^^	0	0.0	2,821	85.5	4,020	8.67	4,368	3.33	3	0.33	
Wake		Wake Spine and Specialty Surgery Center	0	0.0	0	0.0	0		0	0.00	1	-1.00	
Wake	AS0155	Holly Springs Surgery Center	0	0.0	2,546	65.0	2,758	8.67	2,997	2.28	3	-0.72	
Wake		2022 SMFP Need Determination	0	0.0	0	0.0	0		0	0.00	2	-2.00	
Wake Total													0
Washington	H0006	Washington Regional Medical Center	0	0.0	0	0.0	0		0	0.00	2	-2.00	
Washington Total													0
Wayne	H0257	Wayne UNC Health Care†/†††	1,687	88.9	7,668	57.2	9,809	-1.67	9,809	6.54	13	-6.46	
Wayne Total													0
Wilkes	H0153	Wilkes Medical Center	371	104.0	2,450	59.0	3,052	-2.08	3,052	2.03	5	-2.97	
Wilkes Total													0
Wilson		Wilson Surgery Center	0	0.0	0	0.0	0		0	0.00	4	-4.00	
Wilson	AS0005	Wilson Medical Center	0	0.0	0	0.0	0		0	0.00	0	0.00	
Wilson	H0210	Wilson Medical Center	538	90.0	2,878	60.0	3,685	-0.10	3,685	2.46	9	-6.54	
Duke LifePoint Total										2.46	13	-10.54	
Wilson	AS0007	Wilson OB-GYN	0	0.0	92	30.0	46	-0.10	46	0.04	1	-0.96	
Wilson Total													0
Yadkin	H0155	Yadkin Valley Community Hospital (closed)***	0	0.0	0	0.0	0		0	0.00	2	-2.00	

Table 6B: Projected Operating Room Need for 2025

<i>A</i>	<i>B</i>	<i>C</i>	<i>D</i>	<i>E</i>	<i>F</i>	<i>G</i>	<i>H</i>	<i>I</i>	<i>J</i>	<i>K</i>	<i>L</i>	<i>M</i>	<i>N</i>
Service Area	License	Facility	Inpatient Cases	Final Inpatient Case Time	Ambulatory Cases	Final Ambulatory Case Time	Total Adjusted Estimated Surgical Hours	Growth Factor	Projected Surgical Hours for 2025	Projected Surgical ORs Required in 2025	Adjusted Planning Inventory	Projected OR Deficit/ Surplus (Surplus shows as a "-")	Service Area Need
Yadkin Total													0
Grand Total			226,242		675,957								0

- * Duke University Hospital has 16 licensed operating rooms (ORs) approved under Policy AC-3 (J-008030-07). North Carolina Baptist Hospital has certificates of need (G-008460-10 & G-011519-18) for 11 ORs approved under Policy AC-3. These 27 ORs are counted when determining OR need.
- ** This is a dental single-specialty ambulatory surgery demonstration project that is in the inventory but is not included in need determination calculations.
- *** Yadkin Valley Community Hospital has received a CON exemption to reopen no later than January 18, 2025.
- ^ Inpatient case time substitution: Current year's reported case time is greater than 1 standard deviation (SD) above group average. Substituted average inpatient case time plus 1 SD for group (see Step 4a of the Methodology).
- ^^ Ambulatory case time substitution: Current year's reported case time is greater than 1 SD above group average. Substituted average ambulatory case time plus 1 SD for group (see Step 4a of the Methodology).
- † Inpatient case time substitution: Current year's reported case time is greater than 110% of previous year. Substituted previous year's average inpatient case time plus 10% (see Step 2a.1. of the Methodology).
- †† Inpatient case time substitution: Current year's reported case time is less than 80% of previous year. Substituted previous year's average inpatient case time minus 20% (see Step 2a.2. of the Methodology).
- ††† Ambulatory case time substitution: Current year's reported case time is greater than 110% of previous year. Substituted previous year's average ambulatory case time plus 10% (see Step 2a.1. of the Methodology).
- †††† Ambulatory case time substitution: Current year's reported case time is less than 80% of previous year. Substituted previous year's average ambulatory case time minus 20% (see Step 2a.2. of the Methodology).

Table 6C: Operating Room Need Determination
(Proposed for Certificate of Need Review Commencing in 2023)

Service Area	Operating Room Need Determination	Certificate of Need Application Deadline	Certificate of Need Beginning Review Date
It is determined that there is no need anywhere in the state and no reviews are scheduled.			

**Table 6D: Dental Single Specialty Ambulatory Surgical Facility
Demonstration Project Sites**

Region: Health Service Area (HSA)	Provider	ORs
Region 1: HSA IV	Surgical Center for Dental Professionals of NC	2
Region 2: HSA III	Carolinas Center for Ambulatory Dentistry	2
Region 3: HSA V and HSA VI	Valleygate Dental Surgery Center	2
Region 4: HSA I and HSA II	Valleygate Dental Surgery Center of the Triad	2
<p>The North Carolina 2016 SMFP included need determinations for a Dental Single Specialty Ambulatory Surgical Facility Demonstration Project, consisting of four facilities with two ORs each to be located throughout the state. In Region 1, a CON was awarded to the Surgical Center for Dental Professionals of Raleigh on March 1, 2017 (J-011170-16). In Region 2, a CON was awarded to Carolinas Center for Ambulatory Dentistry in Charlotte on March 1, 2017 (F-011202-16). In Region 3, a CON was awarded to Valleygate Dental Surgery Center of Fayetteville on March 6, 2017 (M-011176-16). In Region 4, a CON was awarded to Valleygate Dental Surgery Center of the Triad on March 1, 2017 (G-011203-16).</p>		

Applicant(s) shall demonstrate in the certificate of need application that the proposal will meet each criterion set forth below.

**Table 6E: Dental Single Specialty Ambulatory Surgical Facility
Demonstration Project Criteria**

CRITERION		BASIC PRINCIPLE AND RATIONALE
1	The application shall contain a description of the percentage ownership interest in the facility by each oral surgeon and dentist.	<i>Value</i> Implementing this innovation through a demonstration project enables the State Health Coordinating Council to monitor and evaluate the innovation's impact.
2	The proposed facility shall provide open access to non-owner and non-employee oral surgeons and dentists.	<i>Access</i> Services will be accessible to a greater number of surgical patients if the facility has an open access policy for dentists and oral surgeons.
3	The facility shall provide only dental and oral surgical procedures requiring sedation and ENT surgeries as needed to complete dental cases.	<i>Value</i> Implementing this innovation through a demonstration project enables the State Health Coordinating Council to monitor and evaluate the innovation's impact.
4	The proposed facility shall obtain a license no later than one year from the effective date of the certificate of need.	<i>Access</i> Timely project completion increases access to services.
5	The proposed facility shall be certified by the Centers for Medicare and Medicaid Services (CMS), and shall commit to continued compliance with CMS conditions of participation.	<i>Access</i> Requiring service to indigent patients promotes equitable access to the services provided by the demonstration project facilities.
6	The proposed facility shall provide care to underserved dental patients. At least 3 percent of the total number of patients served each year shall be charity care patients and at least 30 percent of the total number of patients served each year shall be Medicaid recipients.	<i>Access</i> Requiring service to indigent patients promotes equitable access to the services provided by the demonstration project facilities.
7	The proposed facility shall obtain accreditation no later than one year after licensure by the Accreditation Association for Ambulatory Health Care (AAAHC), American Association for Accreditation of Ambulatory Surgery Facilities (AAAASF), or The Joint Commission (TJC), and shall commit to continued compliance with their respective standards.	<i>Safety and Quality</i> Adherence to certification processes ensures that the facility is committed to meeting the generally accepted industry standards for quality and safety for their patients.

CRITERION		BASIC PRINCIPLE AND RATIONALE
8	Health care professionals affiliated with the proposed facility, if so permitted by North Carolina law and hospital by-laws, are required to establish or maintain hospital staff privileges with at least one hospital and to begin or continue meeting Emergency Department coverage responsibilities with at least one hospital.	<i>Safety and Quality</i> Encouraging health care professionals to establish or maintain hospital staff privileges and to begin or continue meeting Emergency Department coverage responsibilities helps ensure the continued viability of community-based resources for dental emergencies.
9	The proposed facility shall meet all reporting, monitoring and evaluation requirements of the demonstration project, set forth by the Agency.*	<i>Safety and Quality, Access, Value</i> Timely monitoring enables the Agency to determine whether facilities are meeting criteria and to take corrective action if facilities fail to do so. This ensures that the demonstration project facilities meet all three Basic Principles.
10	For each of the first three full federal fiscal years of operation, the applicant(s) shall provide the projected number of patients for the following payor types, broken down by age (under 21, 21 and older): (i) charity care; (ii) Medicaid; (iii) TRICARE; (iv) private insurance; (v) self-pay; and (vi) payment from other sources.	<i>Access</i> Requiring service to a wide range of patients promotes equitable access to the services provided by the demonstration project facilities.
11	The proposed facility shall demonstrate that it will perform at least 900 surgical cases per operating room during the third full federal fiscal year of operation. The performance standards in 10A NCAC 14C.2103 would not be applicable.	<i>Value</i> Performing at least a minimum number of surgical procedures helps assure that patients receive the maximum healthcare benefit per dollar expended.

* Approved facilities will be required to submit data regarding payor mix separately for dental-only and ENT-involved cases.

Inventory of Endoscopy Rooms in Licensed Facilities

Endoscopy procedure rooms are not ORs. For information purposes only, Table 6F provides a listing of licensed endoscopy procedure rooms and their associated procedures for the current reporting year.

Table 6F: Endoscopy Room Inventory

(Case and Procedure Data for 10/01/2020 - 9/30/2021 as reported on 2022 Hospital and Ambulatory Surgical Facility License Renewal Applications)

License Number	Facility Name	County	Endoscopy Rooms	Adjustments for CONs	Endoscopy Cases	Endoscopy Procedures
H0272	Alamance Regional Medical Center	Alamance	4	0	4,226	5,190
AS0128	Pioneer Ambulatory Surgery Center	Alamance	1	0	1,423	1,675
		Alamance Total	5	0	5,649	6,865
H0274	Alexander Hospital (closed)	Alexander	1	0	0	0
		Alexander Total	1	0	0	0
H0099	Ashe Memorial Hospital	Ashe	1	0	659	938
		Ashe Total	1	0	659	938
H0037	Charles A. Cannon, Jr. Memorial Hospital	Avery	1	0	313	516
		Avery Total	1	0	313	516
H0188	Vidant Beaufort Hospital, A campus of Vidant Medical Center	Beaufort	1	0	1,776	2,055
		Beaufort Total	1	0	1,776	2,055
H0150	Dosher Memorial Hospital	Brunswick	2	0	1,021	1,176
AS0158	Novant Health Brunswick Endoscopy	Brunswick	2	0	2,103	2,415
H0250	Novant Health Brunswick Medical Center	Brunswick	1	0	1,664	1,696
		Brunswick Total	5	0	4,788	5,287
H0036	Mission Hospital	Buncombe	6	0	5,579	7,251
AS0051	The Endoscopy Center	Buncombe	5	0	15,359	17,757
		Buncombe Total	11	0	20,938	25,008
	Blue Ridge Surgery Center *	Burke	0	2	0	0
AS0145	Carolina Digestive Care	Burke	2	0	4,166	5,749
H0062	UNC Health Blue Ridge	Burke	3	-2	2,689	3,633
		Burke Total	5	0	6,855	9,382
	Northeast Digestive Health Center – Poplar Tent *	Cabarrus	0	1	0	0
H0031	Atrium Health Cabarrus	Cabarrus	6	0	2,614	3,666
AS0070	Gateway Surgery Center	Cabarrus	2	0	4,157	6,261
AS0104	Northeast Digestive Health Center	Cabarrus	3	-1	5,725	7,931
		Cabarrus Total	11	0	12,496	17,858

Table 6F: Endoscopy Room Inventory

(Case and Procedure Data for 10/01/2020 - 9/30/2021 as reported on 2022 Hospital and Ambulatory Surgical Facility License Renewal Applications)

License Number	Facility Name	County	Endoscopy Rooms	Adjustments for CONs	Endoscopy Cases	Endoscopy Procedures
H0061	Caldwell UNC Health Care	Caldwell	2	0	742	905
		Caldwell Total	2	0	742	905
H0222	Carteret General Hospital	Carteret	2	0	580	570
AS0061	The Surgical Center of Morehead City	Carteret	1	0	1,964	2,189
		Carteret Total	3	0	2,544	2,759
H0223	Catawba Valley Medical Center	Catawba	2	0	2,593	3,061
H0053	Frye Regional Medical Center	Catawba	2	0	1,143	2,185
AS0077	Gastroenterology Associates, Hickory	Catawba	3	2	7,045	8,083
		Catawba Total	7	2	10,781	13,329
H0007	Chatham Hospital	Chatham	1	0	447	485
		Chatham Total	1	0	447	485
H0239	Erlanger Murphy Medical Center	Cherokee	2	0	1,234	1,717
		Cherokee Total	2	0	1,234	1,717
H0063	Vidant Chowan Hospital	Chowan	1	0	646	827
		Chowan Total	1	0	646	827
H0024	Atrium Health Cleveland	Cleveland	5	0	1,782	2,527
AS0062	Atrium Health Surgery Center Shelby	Cleveland	4	0	1,676	2,270
		Cleveland Total	9	0	3,458	4,797
H0045	Columbus Regional Healthcare System	Columbus	3	0	1,622	2,091
		Columbus Total	3	0	1,622	2,091
AS0096	CarolinaEast Internal Medicine	Craven	3	0	2,413	2,415
H0201	CarolinaEast Medical Center	Craven	2	0	2,100	2,978
AS0078	CCHC Endoscopy Center	Craven	3	0	5,352	7,401
		Craven Total	8	0	9,865	12,794
H0213	Cape Fear Valley Medical Center	Cumberland	4	0	3,149	5,555
AS0123	Digestive Health Endoscopy Center	Cumberland	2	0	5,524	6,145
AS0006	Fayetteville Ambulatory Surgery Center	Cumberland	3	0	0	0

Table 6F: Endoscopy Room Inventory

(Case and Procedure Data for 10/01/2020 - 9/30/2021 as reported on 2022 Hospital and Ambulatory Surgical Facility License Renewal Applications)

License Number	Facility Name	County	Endoscopy Rooms	Adjustments for CONs	Endoscopy Cases	Endoscopy Procedures
AS0071	Fayetteville Gastroenterology Endoscopy Center	Cumberland	4	0	11,257	11,551
H0275	Highsmith-Rainey Specialty Hospital	Cumberland	3	0	0	0
		Cumberland Total	16	0	19,930	23,251
H0273	The Outer Banks Hospital	Dare	2	0	1,144	1,144
		Dare Total	2	0	1,144	1,144
AS0146	Digestive Health Specialists	Davidson	2	0	2,340	2,681
H0027	Lexington Medical Center	Davidson	2	0	1,407	1,694
H0112	Novant Health Thomasville Medical Center	Davidson	1	0	448	457
		Davidson Total	5	0	4,195	4,832
H0171	Davie Medical Center	Davie	1	0	1,010	1,189
AS0139	Digestive Health Specialists	Davie	1	0	1,940	2,215
		Davie Total	2	0	2,950	3,404
	Duke GI at North Durham *	Durham	0	4	0	0
H0233	Duke Regional Hospital	Durham	4	0	4,975	6,468
H0015	Duke University Hospital	Durham	11	0	11,301	15,744
AS0085	Triangle Endoscopy Center	Durham	4	0	5,907	6,073
		Durham Total	19	4	22,183	28,285
H0258	Vidant Edgecombe Hospital	Edgecombe	2	0	231	231
AS0127	Vidant Endoscopy Center	Edgecombe	1	0	1,088	1,196
		Edgecombe Total	3	0	1,319	1,427
	Triad Surgery Center *	Forsyth	0	1	0	0
	Kernersville Endoscopy Center *	Forsyth	0	2	0	0
AS0144	Digestive Health Endoscopy Center of Kernersville	Forsyth	2	0	3,140	3,450
AS0099	Digestive Health Specialists	Forsyth	2	0	6,163	7,004
AS0074	Gastroenterology Associates of the Piedmont	Forsyth	4	0	10,134	13,886
AS0044	Gastroenterology Associates of the Piedmont	Forsyth	4	-2	5,325	7,272

Table 6F: Endoscopy Room Inventory

(Case and Procedure Data for 10/01/2020 - 9/30/2021 as reported on 2022 Hospital and Ambulatory Surgical Facility License Renewal Applications)

License Number	Facility Name	County	Endoscopy Rooms	Adjustments for CONs	Endoscopy Cases	Endoscopy Procedures
H0011	Atrium Health Wake Forest Baptist	Forsyth	10	0	12,190	22,187
H0209	Novant Health Forsyth Medical Center	Forsyth	4	0	2,718	3,023
AS0125	Wake Forest Baptist Health Outpatient Endoscopy	Forsyth	2	0	2,075	2,389
		Forsyth Total	28	1	41,745	59,211
	CaroMont Regional Medical Center - Belmont *	Gaston	0	1	0	0
AS0135	CaroMont Endoscopy Center	Gaston	2	0	3,349	4,211
H0105	CaroMont Regional Medical Center	Gaston	6	1	5,371	7,477
AS0151	Greater Gaston Endoscopy Center	Gaston	2	-2	0	0
		Gaston Total	10	0	8,720	11,688
H0098	Granville Health System	Granville	1	0	1,280	1,575
		Granville Total	1	0	1,280	1,575
AS0076	Peters Endoscopy Center	Guilford	2	0	2,602	2,602
H0159	Cone Health	Guilford	6	0	4,801	12,425
AS0075	Eagle Endoscopy Center	Guilford	4	0	5,167	5,690
AS0009	Greensboro Specialty Surgical Center	Guilford	2	0	621	779
AS0113	Guilford Endoscopy Center	Guilford	2	0	2,399	2,996
AS0059	Wake Forest Baptist Health Outpatient Endoscopy-Quaker Lane	Guilford	3	0	1,451	2,000
H0052	High Point Regional Health	Guilford	2	0	2,028	3,440
AS0052	LeBauer Endoscopy Center	Guilford	5	0	9,956	11,464
		Guilford Total	26	0	29,025	41,396
AS0141	Halifax Gastroenterology	Halifax	2	0	1,667	1,670
H0230	Vidant North Hospital	Halifax	1	0	498	510
		Halifax Total	3	0	2,165	2,180
H0224	Cape Fear Valley Betsy Johnson Hospital	Harnett	2	0	0	0
		Harnett Total	2	0	0	0
H0025	Haywood Regional Medical Center	Haywood	3	0	2,465	3,022

Table 6F: Endoscopy Room Inventory

(Case and Procedure Data for 10/01/2020 - 9/30/2021 as reported on 2022 Hospital and Ambulatory Surgical Facility License Renewal Applications)

License Number	Facility Name	County	Endoscopy Rooms	Adjustments for CONs	Endoscopy Cases	Endoscopy Procedures
		Haywood Total	3	0	2,465	3,022
AS0106	Carolina Mountain Gastroenterology Endoscopy Center	Henderson	2	0	5,826	6,902
H0161	Margaret R. Pardee Memorial Hospital	Henderson	3	0	1,774	2,256
H0019	AdventHealth Hendersonville	Henderson	1	0	413	413
		Henderson Total	6	0	8,013	9,571
H0001	Vidant Roanoke-Chowan Hospital	Hertford	1	0	1,062	1,237
		Hertford Total	1	0	1,062	1,237
H0248	Davis Regional Medical Center	Iredell	2	0	650	801
H0164	Iredell Memorial Hospital	Iredell	3	0	2,975	3,676
H0259	Lake Norman Regional Medical Center	Iredell	2	0	1,974	2,751
AS0169	Langtree Endoscopy Center	Iredell	1	1	2,143	3,025
AS0126	Piedmont HealthCare Endoscopy Center	Iredell	3	0	4,141	5,943
		Iredell Total	11	1	11,883	16,196
H0087	Harris Regional Hospital	Jackson	1	0	1,418	1,493
		Jackson Total	1	0	1,418	1,493
	Johnston Endoscopy Center *	Johnston	0	2	0	0
AS0153	Clayton Endoscopy Center	Johnston	2	0	2,616	3,144
H0151	Johnston Health	Johnston	3	-1	3,223	4,064
		Johnston Total	5	1	5,839	7,208
H0243	Central Carolina Hospital	Lee	1	0	429	429
AS0094	Mid Carolina Endoscopy Center	Lee	2	0	3,346	4,813
		Lee Total	3	0	3,775	5,242
AS0156	AMG Endoscopy Center	Lenoir	2	0	0	3,018
AS0122	Vidant Endoscopy Center-Kinston	Lenoir	2	0	880	948
H0043	UNC Lenoir Health Care	Lenoir	2	0	0	0
AS0121	Park Endoscopy Center	Lenoir	2	0	1,489	1,489

Table 6F: Endoscopy Room Inventory

(Case and Procedure Data for 10/01/2020 - 9/30/2021 as reported on 2022 Hospital and Ambulatory Surgical Facility License Renewal Applications)

License Number	Facility Name	County	Endoscopy Rooms	Adjustments for CONs	Endoscopy Cases	Endoscopy Procedures
		Lenoir Total	8	0	2,369	5,455
H0225	Atrium Health Lincoln	Lincoln	2	0	2,679	3,679
		Lincoln Total	2	0	2,679	3,679
H0034	Angel Medical Center	Macon	2	-1	151	176
H0193	Highlands-Cashiers Hospital	Macon	2	0	2	2
AS0097	Western Carolina Endoscopy Center	Macon	2	0	2,828	3,508
		Macon Total	6	-1	2,981	3,686
H0078	Martin General Hospital	Martin	1	0	222	233
		Martin Total	1	0	222	233
H0097	Mission Hospital McDowell	McDowell	1	0	479	491
		McDowell Total	1	0	479	491
	Novant Health Ballantyne Medical Center *	Mecklenburg	0	1	0	0
AS0092	Carolina Digestive Endoscopy Center	Mecklenburg	2	0	9,528	9,670
AS0108	Carolina Endoscopy Center-Huntersville	Mecklenburg	2	0	4,569	4,589
AS0088	Carolina Endoscopy Center-Pineville	Mecklenburg	2	0	4,034	4,110
AS0089	Carolina Endoscopy Center-University	Mecklenburg	2	0	4,062	4,090
AS0081	Atrium Health Endoscopy Center Ballantyne	Mecklenburg	4	0	8,995	14,577
AS0080	Atrium Health Endoscopy Centr Kenilworth	Mecklenburg	2	0	4,167	5,430
H0042	Atrium Health Pineville	Mecklenburg	2	0	3,004	4,285
H0255	Atrium Health University City	Mecklenburg	1	0	1,208	1,866
H0071	Carolinas Medical Center/Center for Mental Health	Mecklenburg	12	0	10,942	16,357
AS0110	Charlotte Gastroenterology & Hepatology, PLLC-Endo Div	Mecklenburg	2	0	5,873	6,820
AS0109	Charlotte Gastroenterology & Hepatology, PLLC-Endo Div	Mecklenburg	4	0	6,178	7,338
AS0084	Endoscopy Center of Lake Norman	Mecklenburg	2	0	3,697	4,296
AS0098	Novant Health Ballantyne Outpatient Surgery	Mecklenburg	1	0	554	554
H0282	Novant Health Huntersville Medical Center	Mecklenburg	3	0	2,015	2,065

Table 6F: Endoscopy Room Inventory

(Case and Procedure Data for 10/01/2020 - 9/30/2021 as reported on 2022 Hospital and Ambulatory Surgical Facility License Renewal Applications)

License Number	Facility Name	County	Endoscopy Rooms	Adjustments for CONs	Endoscopy Cases	Endoscopy Procedures
H0270	Novant Health Matthews Medical Center	Mecklenburg	3	0	1,439	1,497
H0290	Novant Health Mint Hill Medical Center	Mecklenburg	1	0	138	143
H0010	Novant Health Presbyterian Medical Center	Mecklenburg	9	-1	2,794	2,875
AS0165	Tryon Endoscopy Center	Mecklenburg	4	0	8,478	9,906
		Mecklenburg Total	58	0	81,675	100,468
H0169	Blue Ridge Regional Hospital	Mitchell	1	0	428	434
		Mitchell Total	1	0	428	434
H0100	FirstHealth Moore Regional Hospital and Pinehurst Treatment Cntr	Moore	2	0	3,816	3,816
AS0073	Pinehurst Medical Clinic Endoscopy Center	Moore	5	0	8,843	11,969
		Moore Total	7	0	12,659	15,785
AS0105	Boice-Willis Clinic Endoscopy Center	Nash	2	0	3,536	4,674
H0228	Nash General Hospital	Nash	4	0	2,529	3,431
		Nash Total	6	0	6,065	8,105
	Wilmington ASC *	New Hanover	0	3	0	0
AS0100	Novant Health Wilmington Endoscopy Center, LLC	New Hanover	3	0	5,320	6,990
H0221	New Hanover Regional Medical Center	New Hanover	4	0	8,681	9,867
AS0091	Wilmington Gastroenterology	New Hanover	4	0	11,202	13,432
AS0045	Wilmington Health	New Hanover	3	-3	4,751	5,504
AS0055	Wilmington SurgCare	New Hanover	3	0	0	0
		New Hanover Total	17	0	29,954	35,793
AS0079	East Carolina Gastroenterology Endoscopy Center	Onslow	1	0	3,188	3,784
H0048	Onslow Memorial Hospital	Onslow	3	0	1,544	2,032
		Onslow Total	4	0	4,732	5,816
H0157	University of North Carolina Hospitals	Orange	9	0	13,062	15,233
		Orange Total	9	0	13,062	15,233
H0054	Sentara Albemarle Medical Center	Pasquotank	3	0	0	0

Table 6F: Endoscopy Room Inventory

(Case and Procedure Data for 10/01/2020 - 9/30/2021 as reported on 2022 Hospital and Ambulatory Surgical Facility License Renewal Applications)

License Number	Facility Name	County	Endoscopy Rooms	Adjustments for CONs	Endoscopy Cases	Endoscopy Procedures
Pasquotank Total			3	0	0	0
H0115	Pender Memorial Hospital	Pender	1	0	50	53
Pender Total			1	0	50	53
AS0086	Atlantic Gastroenterology Endoscopy Center	Pitt	2	0	3,795	4,007
AS0118	Carolina Digestive Diseases	Pitt	2	0	4,175	4,328
AS0117	Carolinas Endoscopy Center	Pitt	3	0	4,266	4,266
AS0119	East Carolina Endoscopy Center	Pitt	2	0	2,069	2,337
AS0060	Quadrangle Endoscopy Center	Pitt	6	0	5,063	5,077
H0104	Vidant Medical Center	Pitt	4	1	6,165	8,802
Pitt Total			19	1	25,533	28,817
AS0054	Randolph Health Endoscopy Center	Randolph	1	0	1,068	1,647
H0013	Randolph Hospital	Randolph	2	0	1,184	1,644
Randolph Total			3	0	2,252	3,291
H0158	FirstHealth Moore Regional Hospital - Richmond	Richmond	2	0	1,267	1,267
Richmond Total			2	0	1,267	1,267
AS0147	Robeson Digestive Diseases	Robeson	1	0	1,813	1,911
AS0107	Southeastern Gastroenterology Endoscopy Center	Robeson	1	0	206	206
H0064	Southeastern Regional Medical Center	Robeson	1	0	2,720	2,760
AS0150	The Surgery Center at Southeastern Health Park	Robeson	2	0	863	1,146
Robeson Total			5	0	5,602	6,023
H0023	Annie Penn Hospital	Rockingham	3	0	2,916	6,127
H0072	UNC Rockingham Hospital	Rockingham	2	0	551	405
Rockingham Total			5	0	3,467	6,532
	Rowan Endoscopy Center *	Rowan	0	2	0	0
H0040	Novant Health Rowan Medical Center	Rowan	4	0	0	0
Rowan Total			4	2	0	0

Table 6F: Endoscopy Room Inventory

(Case and Procedure Data for 10/01/2020 - 9/30/2021 as reported on 2022 Hospital and Ambulatory Surgical Facility License Renewal Applications)

License Number	Facility Name	County	Endoscopy Rooms	Adjustments for CONs	Endoscopy Cases	Endoscopy Procedures
H0039	Rutherford Regional Medical Center	Rutherford	2	0	2,083	3,261
		Rutherford Total	2	0	2,083	3,261
H0107	Scotland Memorial Hospital	Scotland	2	0	1,729	1,939
		Scotland Total	2	0	1,729	1,939
H0008	Atrium Health Stanly	Stanly	2	0	0	0
		Stanly Total	2	0	0	0
AS0163	Digestive Health Specialists	Stokes	1	0	1,940	2,252
H0165	LifeBrite Community Hospital of Stokes	Stokes	1	0	0	0
		Stokes Total	2	0	1,940	2,252
H0049	Hugh Chatham Memorial Hospital	Surry	4	0	780	2,223
H0184	Northern Regional Hospital	Surry	2	0	1,737	1,893
AS0154	Rockford Digestive Health Endoscopy Center	Surry	1	0	0	0
		Surry Total	7	0	2,517	4,116
H0069	Swain Community Hospital	Swain	1	0	0	0
		Swain Total	1	0	0	0
H0111	Transylvania Regional Hospital	Transylvania	2	0	387	405
		Transylvania Total	2	0	387	405
AS0090	Carolina Endoscopy Center-Monroe	Union	2	0	5,011	5,179
H0050	Atrium Health Union	Union	2	0	1,282	1,739
		Union Total	4	0	6,293	6,918
H0267-A	Maria Parham Health	Vance	3	0	1,595	1,933
		Vance Total	3	0	1,595	1,933
	Duke GI at Green Level *	Wake	0	4	0	0
	Duke Gastroenterology of Raleigh *	Wake	0	4	0	0
	Wake Endoscopy Center - Cary *	Wake	0	3	0	0
AS0072	Center for Digestive Diseases & Cary Endoscopy CTR, PC	Wake	3	0	2,167	6,129
AS0115	Duke GI at Brier Creek	Wake	4	0	6,067	7,504

Table 6F: Endoscopy Room Inventory

(Case and Procedure Data for 10/01/2020 - 9/30/2021 as reported on 2022 Hospital and Ambulatory Surgical Facility License Renewal Applications)

License Number	Facility Name	County	Endoscopy Rooms	Adjustments for CONs	Endoscopy Cases	Endoscopy Procedures
H0238	Duke Raleigh Hospital	Wake	3	0	3,786	5,176
AS0116	GastroIntestinal Healthcare	Wake	2	0	1,663	1,789
AS0138	Kurt Vernon, MD	Wake	1	0	2,090	2,657
AS0056	Raleigh Endoscopy Center	Wake	4	0	10,218	13,863
AS0102	Raleigh Endoscopy Center-Cary	Wake	4	0	9,332	11,594
AS0082	Raleigh Endoscopy Center-North	Wake	3	0	7,177	10,341
H0065	Rex Hospital	Wake	4	0	5,083	8,094
AS0093	Triangle Gastroenterology	Wake	2	0	3,987	3,987
AS0131	W. F. Endoscopy Center	Wake	2	1	3,960	4,861
AS0111	Wake Endoscopy Center, LLC	Wake	4	0	9,069	10,794
H0199	WakeMed	Wake	6	0	7,972	8,866
H0276	WakeMed Cary Hospital	Wake	4	0	3,327	3,616
		Wake Total	46	12	75,898	99,271
AS0095	Appalachian Gastroenterology	Watauga	2	0	1,164	1,191
H0077	Watauga Medical Center	Watauga	2	0	2,536	2,558
		Watauga Total	4	0	3,700	3,749
AS0057	Goldsboro Endoscopy Center	Wayne	4	0	2,945	3,201
H0257	Wayne UNC Health Care	Wayne	3	0	1,955	2,399
		Wayne Total	7	0	4,900	5,600
H0153	Wilkes Medical Center	Wilkes	2	0	1,475	2,176
		Wilkes Total	2	0	1,475	2,176
AS0112	CGS Endoscopy Center	Wilson	2	0	1,304	1,310
AS0130	Wilson Digestive Diseases Center	Wilson	2	0	1,686	1,999
H0210	Wilson Medical Center	Wilson	5	0	1,527	1,947
		Wilson Total	9	0	4,517	5,256
H0155	Yadkin Valley Community Hospital (closed)	Yadkin	1	0	0	0

Table 6F: Endoscopy Room Inventory

(Case and Procedure Data for 10/01/2020 - 9/30/2021 as reported on 2022 Hospital and Ambulatory Surgical Facility License Renewal Applications)

License Number	Facility Name	County	Endoscopy Rooms	Adjustments for CONs	Endoscopy Cases	Endoscopy Procedures
		Yadkin Total	1	0	0	0
		Grand Total	480	23	556,434	708,012

* Certificate of Need approved facility that was under development and not licensed as of 9/30/2021.

Chapter 7:

Other Acute Care Services

- A. Burn Intensive Care Services
- B. Open Heart Surgery Services
- C. Transplantation Services

CHAPTER 7

OTHER ACUTE CARE SERVICES

Introduction

This chapter covers three acute care services: burn intensive care, open-heart surgery, and transplantation services (bone marrow and solid organ).

Definitions

The *reporting year* is October 1 through September 30. The *current* reporting year is October 1, 2020 through September 30, 2021.

An *academic medical center teaching hospital* is one of the five hospitals listed in Appendix F of the State Medical Facilities Plan (SMFP).

Changes from the Previous Plan

This chapter contains no substantive changes from the previous SMFP. However, the chapter includes technical edits that clarify policies regarding open heart surgery services.

A. BURN INTENSIVE CARE SERVICES

Introduction

G.S. 131E-176 (2b) defines *burn intensive care services* as “services provided in a unit designed to care for patients who have been severely burned.”

North Carolina has two designated burn intensive care services: a 21-bed unit at University of North Carolina Hospitals in Chapel Hill; and an eight-bed unit at North Carolina Baptist Hospital in Winston Salem. Each hospital received a certificate of need in 2012 to develop four new burn intensive care services beds.

Definitions

The methodology projects bed need one year beyond the current reporting year. The current *projection year* is 2022.

The *planning inventory* is the number of beds used in need determination calculations. It includes licensed beds and beds for which a certificate of need has been issued.

Application of the Methodology

The SMFP shows a need for new burn intensive care services beds when each of the existing services reported an average annual occupancy rate of at least 80% during the last two reporting years.

Step 1: Determine whether to calculate a need determination.

- a. Sum the actual days of care reported across all facilities for each of the last two reporting years (*Table 7A-1, Columns H and I*).

- b. For each of the last two reporting years, multiply the total number of beds in the planning inventory across all facilities (*Table 7A-1, Column D*) by 365.25.
- c. Divide the result of Step 1.a. by the result of Step 1.b. for each year [days of care ÷ possible bed days] (*Table 7A-2, Columns H and I*).

Step 2: If Step 1.c. yields at least 80% utilization for both of the last two reporting years, calculate the overall number of beds needed as follows:

- a. Calculate the state's total four-year average annual change rate in days of care across all facilities using the five most recent reporting years (*Table 7A-1, Columns E-I*).
- b. Calculate the projected days of care for the projection year by adding 1 to the four-year average annual growth rate calculated in Step 2.a. Then multiply the result by the reporting year's total days of care across all facilities.
- c. Use the following formula to calculate the number of beds needed such that the utilization rate for the sum of the state's total licensed and approved burn intensive care beds is 80%. Round fractions of 0.5 or greater to the next highest whole number:

$$[(\text{Projected Days} \div 365.25) \div 0.8] - [\text{Total Beds}] = \text{Additional Beds Needed}$$

Unless otherwise specified by the methodology, calculations do not use rounded values. However, fractional values are rounded automatically when displayed.

Table 7A-1: Days of Care, Burn Intensive Care Services

A	B	C	D	E	F	G	H	I
Facility	Licensed Beds	Adjustments for CONs	Total Beds	Total Days of Care				
				2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
UNC Hospitals	21	4	25	7,960	7,415	8,077	6,085	5,970
North Carolina Baptist Hospital	8	4	12	1,343	1,774	1,821	1,845	1,921
TOTAL	29	8	37	9,303	9,189	9,898	7,930	7,891

Table 7A-2: Utilization, Burn Intensive Care Services

A	B	C	D	E	F	G	H	I
Facility	Licensed Beds	Adjustments for CONs	Total Beds	Utilization				
				2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
UNC Hospitals	21	4	25	87.2%	81.2%	88.5%	66.6%	65.4%
North Carolina Baptist Hospital	8	4	12	30.7%	40.5%	41.5%	42.1%	43.8%
TOTAL	29	8	37	68.9%	68.0%	73.2%	58.7%	58.4%

**Figure 7A: Percentage Utilization, Burn Intensive Care Services
Last Five Reporting Years**

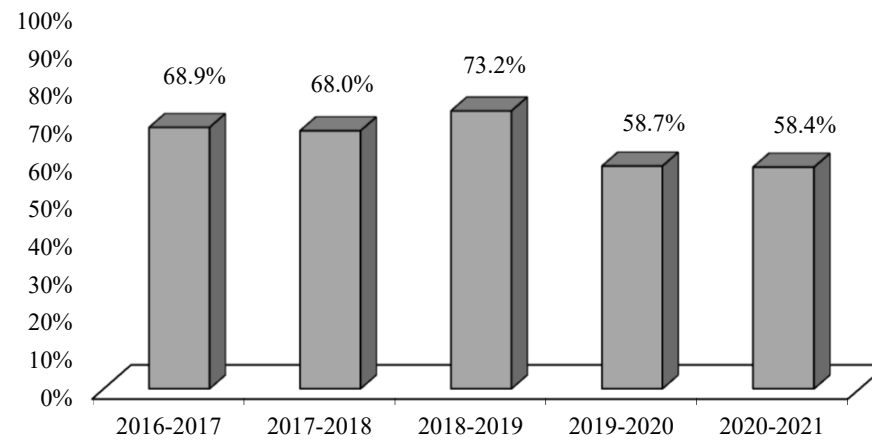


Table 7A-3: Burn Intensive Care Services Bed Need Determination
(Proposed for Certificate of Need Review Commencing in 2023)

Service Area	Burn Intensive Care Services Bed Need Determination	Certificate of Need Application Deadline	Certificate of Need Beginning Review Date
It is determined that there is no need anywhere in the state and no reviews are scheduled.			

B. OPEN-HEART SURGERY SERVICES

Introduction

G.S. 131E-176 (18b) defines *open-heart surgery services* as “the provision of surgical procedures that utilize a heart-lung bypass machine during surgery to correct cardiac and coronary artery disease or defects.”

Table 7B lists the open-heart surgery procedures performed during the reporting year that used heart-lung bypass machines. This data shows a 7.7% increase in open-heart surgeries from the previous reporting year. Table 7B and Figure 7B show reported numbers of open-heart surgery performed using heart-lung bypass machines for the last 14 reporting years.

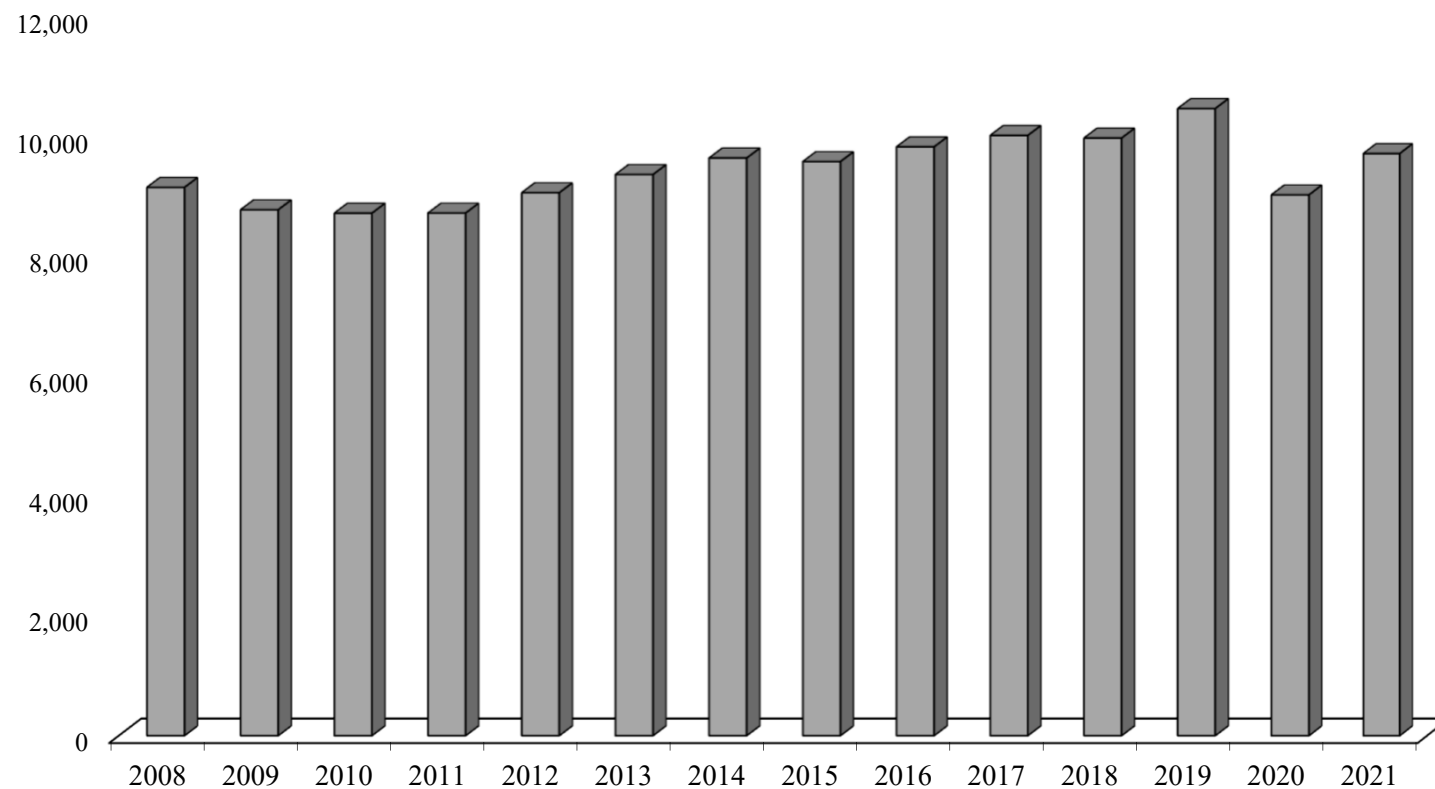
The SMFP does not have a methodology to project need for new open-heart surgery services. A summer petition is required to place a need for a new service in the upcoming SMFP. If the need determination is approved, any person may apply for a certificate of need to obtain the new service.

The SMFP also does not have a methodology to project need for additional heart-lung bypass machines. Facilities that would like to acquire machines other than a second one for emergency coverage as set forth in Policy AC-6 must submit a summer petition. If the need determination is approved, certificate of need applications submitted for these machines will be subject to the performance standards established in 10A NCAC 14C .1703.

**Table 7B: Open-Heart Surgery Procedures
(Procedures Utilizing Heart-Lung Bypass Machines)**

Lic #	Facility	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
H0031	Atrium Health Cabarrus	227	227	211	214	233	237	245	218	253	235	273	194	239	183
H0042	Atrium Health Pineville	62	59	30	0	132	201	245	186	207	252	225	234	158	159
H0213	Cape Fear Valley Medical Center	299	270	234	233	202	220	218	277	262	292	238	195	162	152
H0201	CarolinaEast Medical Center	209	244	210	227	236	202	169	208	221	248	256	331	219	224
H0071	Carolinas Medical Center	457	471	512	675	704	820	715	788	818	869	682	751	580	729
H0105	CaroMont Regional Medical Center	190	175	171	128	207	230	265	249	260	230	278	240	275	308
H0159	Cone Health	596	510	492	472	471	544	541	485	440	547	627	673	574	405
H0233	Duke Regional Hospital	87	80	55	66	60	75	82	92	124	98	148	151	107	119
H0015	Duke University Hospital	829	955	957	1,013	1,062	1,047	1,066	1,161	1,180	1,095	1,130	1,175	1,090	1,203
H0100	FirstHealth Moore Regional Hospital	406	413	333	293	261	271	329	395	341	351	288	276	235	246
H0053	Frye Regional Medical Center	206	232	181	196	253	246	194	205	239	232	222	172	126	117
H0052	High Point Regional Health System	208	178	178	184	191	150	137	111	111	129	112	123	176	53
H0036	Mission Hospital	992	774	866	798	813	848	988	874	950	962	939	1,198	1,051	1,421
H0221	New Hanover Regional Medical Center	522	508	509	464	473	538	487	486	494	482	480	466	395	378
H0011	North Carolina Baptist Hospital	496	468	520	621	612	609	692	696	678	689	758	942	789	866
H0209	Novant Health Forsyth Medical Center	634	566	611	568	514	587	691	626	652	580	635	506	380	442
H0010	Novant Health Presbyterian Medical Center	321	377	433	378	381	355	360	391	391	397	406	413	339	434
H0065	Rex Hospital	313	299	257	203	346	347	369	460	536	612	602	558	553	567
H0064	Southeastern Regional Medical Center	71	53	52	54	52	42	34	44	42	39	44	78	81	56
H0157	University of North Carolina Hospitals	238	228	108	350	391	441	390	407	384	445	430	465	332	354
H0104	Vidant Medical Center	865	858	924	814	900	842	853	601	677	654	675	767	626	787
H0199	WakeMed	908	817	861	756	553	499	557	607	554	567	512	546	524	498
Total Procedures		9,136	8,762	8,705	8,707	9,047	9,351	9,627	9,567	9,814	10,005	9,960	10,454	9,011	9,701

**Figure 7B: Open-Heart Surgery Procedures
(Procedures Utilizing Heart-Lung Bypass Machines)**



C. TRANSPLANTATION SERVICES

Bone Marrow Transplantation Services

Introduction

G.S. 131E-176 (2a) defines *bone marrow transplantation services* as “the process of infusing bone marrow into people with diseases to stimulate the production of blood cells.”

Bone marrow transplants may be autologous (using a patient’s own marrow, drawn early in the course of the disease), syngeneic (using marrow from an identical twin), or allogeneic (using marrow from an unrelated individual or from a relative other than an identical twin). For allogeneic bone marrow transplants, the transplant service must have the ability to ascertain that a donor’s human leucocyte antigens (HLA) correspond to those of the transplant patient. It is also more difficult to manage allogeneic transplant patients postoperatively than patients receiving other types of bone marrow transplants.

Table 7C-1 shows the number of bone marrow transplants performed for the last four reporting years.

Application of the Methodology

North Carolina needs a new bone marrow transplantation service when each of the existing services has performed at least 20 allogeneic transplants during the current reporting year. Allogeneic bone marrow transplants shall be provided only in facilities having the capability of doing HLA matching and of management of patients having solid organ transplants. Allogeneic bone marrow transplantation services shall be limited to academic medical center teaching hospitals.

Table 7C-1: Bone Marrow Transplantation Services

Allogeneic Bone Marrow Transplants

License	Facility	2017-2018	2018-2019	2019-2020	2020-2021
H0071	Carolinas Medical Center	56	55	62	92
H0015	Duke University Hospital	114	92	93	112
H0011	North Carolina Baptist Hospital	34	31	31	22
H0157	University of North Carolina Hospitals	59	58	43	64
H0104	Vidant Medical Center	0	0	0	0
Total		263	236	229	290

Autologous Bone Marrow Transplants

License	Facility	2017-2018	2018-2019	2019-2020	2020-2021
H0071	Carolinas Medical Center	104	109	96	118
H0015	Duke University Hospital	242	182	186	165
H0011	North Carolina Baptist Hospital	69	66	72	55
H0157	University of North Carolina Hospitals	117	100	112	102
H0104	Vidant Medical Center	0	0	0	0
Total		532	457	466	440

Total Bone Marrow Transplants

License	Facility	2017-2018	2018-2019	2019-2020	2020-2021
H0071	Carolinas Medical Center	160	164	158	210
H0015	Duke University Hospital	356	274	279	277
H0011	North Carolina Baptist Hospital	103	97	103	77
H0157	University of North Carolina Hospitals	176	158	155	166
H0104	Vidant Medical Center	0	0	0	0
Total		795	693	695	730

**Figure 7C-1: Total Bone Marrow Transplants,
Last Four Reporting Years**

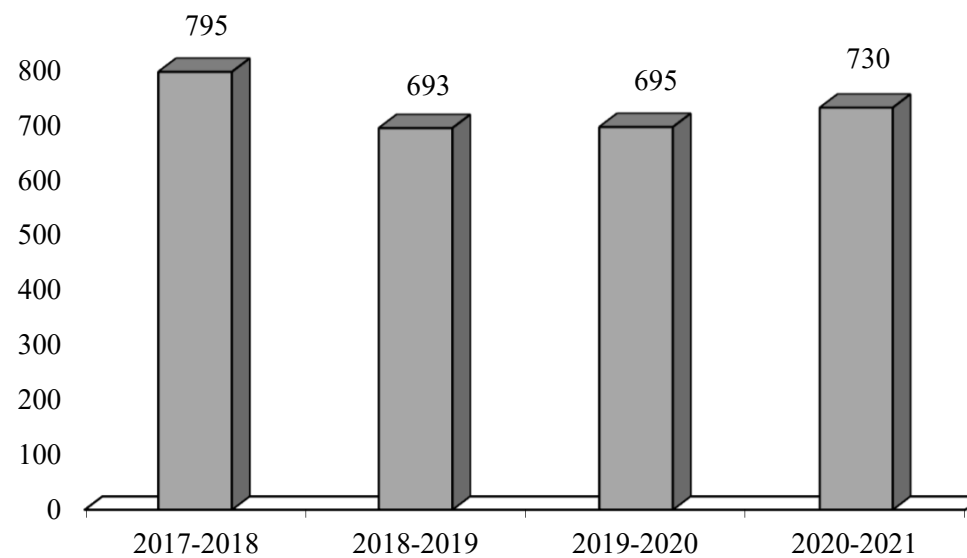


Table 7C-2: Bone Marrow Transplantation Services Need Determination
(Proposed for Certificate of Need Review Commencing in 2023)

Service Area	Bone Marrow Transplantation Services Need Determination	Certificate of Need Application Deadline	Certificate of Need Beginning Review Date
It is determined that there is no need anywhere in the state and no reviews are scheduled.			

Solid Organ Transplantation Services

Introduction

G.S. 131R-176 (24d) defines *solid organ transplantation services* as “the provision of surgical procedures and the interrelated medical services that accompany the surgery to remove an organ from a patient and surgically implant an organ from a donor.”

Table 7C-3 shows the number of solid organ transplants performed during the reporting year.

Basic Principles and Application of the Methodology

The offering of a solid organ transplant service is an organized, interrelated medical, diagnostic, therapeutic and/or rehabilitative activity that is integral to the prevention of disease or to the clinical management of a sick, injured, or disabled person.

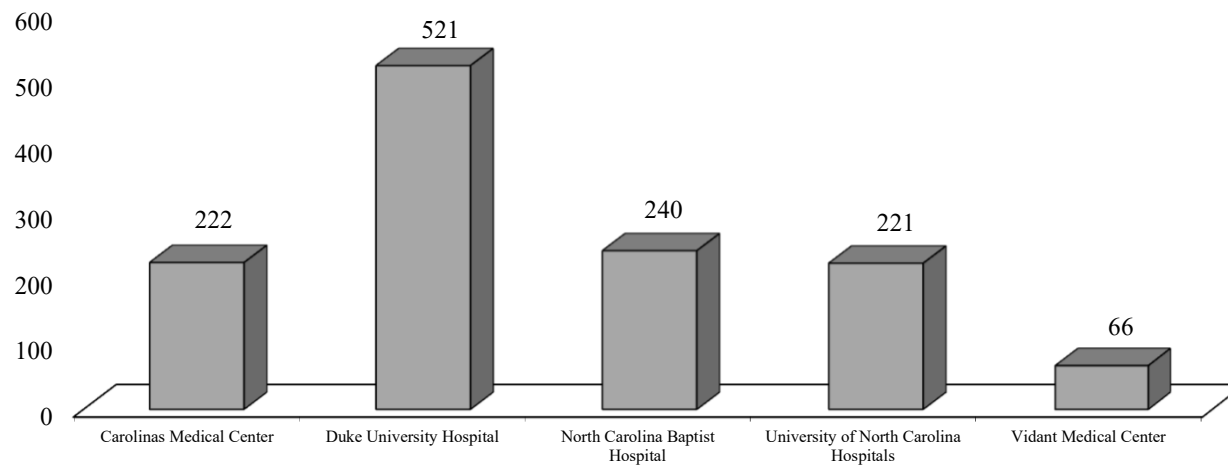
Solid organ transplant services shall be limited to academic medical center teaching hospitals. The introduction of a new solid organ transplantation program in a facility that already is performing other types of solid organ transplantation is not considered a new institutional health service.

The SMFP does not have a methodology to project need for additional solid organ transplantation services. A summer petition is required to place a need in the upcoming SMFP. If the need determination is approved, any person may apply for a certificate of need to obtain the new service.

Table 7C-3: Solid Organ Transplantation Services

	Carolinas Medical Center	Duke University Hospital	North Carolina Baptist Hospital	University of North Carolina Hospitals	Vidant Medical Center	Total
Heart Transplants	45	94	9	11	0	159
Heart/Lung Transplants	0	1	0	0	0	1
Kidney/Liver Transplants	0	8	0	5	0	13
Liver Transplants	71	95	0	25	0	191
Heart/Liver Transplants	0	0	0	0	0	0
Kidney Transplants	101	193	209	161	49	713
Heart/Kidney Transplants	0	7	0	2	0	9
Lung Transplants	0	113	0	16	0	129
Pancreas Transplants	0	0	2	0	0	2
Pancreas/Kidney Transplants	5	7	20	1	17	50
Pancreas/Liver Transplants	0	0	0	0	0	0
Other	0	3	0	0	0	3
Total	222	521	240	221	66	1,270

Figure 7C-2: Solid Organ Transplants by Facility, Current Reporting Year



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Chapter 8:

Inpatient Rehabilitation Services

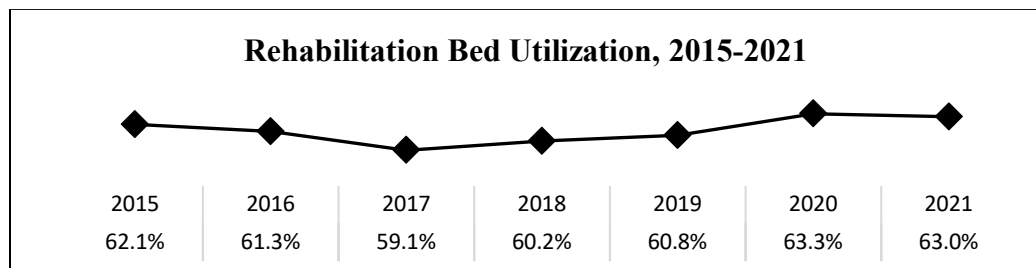
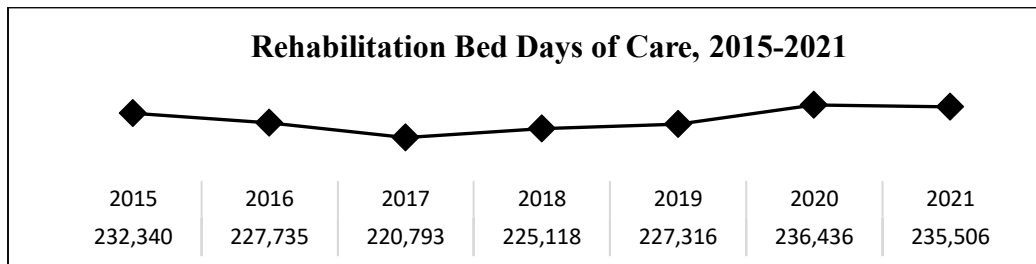
CHAPTER 8

INPATIENT REHABILITATION SERVICES

Introduction

G.S. 113E-176(22) defines a *rehabilitation facility* as a “public or private inpatient facility which is operated for the primary purpose of assisting in the rehabilitation of disabled persons through an integrated program of medical and other services which are provided under competent, professional supervision.”

The charts below summarize the rehabilitation bed days of care and utilization for the past seven years.



Definitions

A rehabilitation bed's service area is the Health Service Area (HSA) in which the beds are located. Appendix A contains a map showing the six HSAs in the state.

The *reporting year* is October 1 through September 30. The *current* reporting year is October 1, 2020 through September 30, 2021.

The methodology projects bed need for the State Medical Facilities Plan (SMFP) publication one year beyond the current reporting year. The *projection year* is 2022.

The *planning inventory* is the number of beds used in need determination calculations. It is the number of licensed beds as of the last day of the reporting year, plus any new beds approved by CON that are under development as of the last day of the reporting year, plus placeholders for any beds from previous SMFPs for which certificates have not yet been issued, minus any beds delicensed after the end of the reporting year.

Changes from Previous Plans

This chapter contains no substantive changes from the previous SMFP.

Basic Principles

1. The scope of services covered is limited to rehabilitation services provided to people who are physically disabled. Physical rehabilitation services exclude mental health and substance use disorder services but include those mental health services needed by individuals primarily suffering from physical injury or disease, and rehabilitation services provided to people who are cognitively disabled as a result of physical injury or disease.
2. The combination of component services required to meet the needs of the individual is provided using an interdisciplinary approach and continues as long as, within a reasonable period of time, significant and observable improvement toward established goals is taking place. Where necessary, these services are provided through a spectrum of care using a system of case management.
3. Inpatient rehabilitation facility beds are located in general acute care or rehabilitation hospitals to ensure that there is available medical back-up for medical emergencies.

Basic Assumptions of the Methodology

1. The HSA is the planning area for inpatient rehabilitation beds even though many patients enter rehabilitation facilities outside the region in which they reside.
2. The bed need determination methodology is based on rehabilitation bed utilization for the last two reporting years.

Data Sources

The numbers of inpatient rehabilitation bed days of care for the last two reporting years come from the Hospital License Renewal Applications as submitted to the Division of Health Service Regulation of the North Carolina Department of Health and Human Services.

Application of the Methodology

The SMFP shows a need for additional inpatient rehabilitation beds when the total number of existing and certificate of need-approved inpatient rehabilitation beds in an HSA report an overall average annual occupancy rate of 80% or higher for the last two reporting years.

Step 1: Determine whether to calculate a need determination.

- a. Sum the actual days of care reported by all facilities in each HSA for each of the last two reporting years (*Table 8A, Columns J and K*).
- b. For each of the last two reporting years, multiply the total number of beds in the planning inventory across all facilities in each HSA by 365.25 to obtain the possible days of care. Table 8A (*Column G*) contains the planning inventory for the current reporting year. Adjust the calculation if the planning inventory for the previous reporting year is different.
- c. Divide the result of Step 1.a. by the result of Step 1.b. for each year and each HSA [actual days of care ÷ possible days of care] (*Table 8A, Columns L and M*).

Step 2: If Step 1.b. yields at least 0.8 (80% utilization) for both reporting years, calculate each HSA's three-year average annual change rate in days of care using the four most recent reporting years as follows:

- a. Calculate the projected days of care for the HSA by adding 1 to the three-year average annual change rate calculated in Step 2.a. Then multiply the result by the reporting year's days of care for the HSA.
- b. Use the following formula to calculate the number of beds needed in the HSA such that the utilization rate for the sum of the HSA's total licensed and approved beds is 0.8 (80%). Round resulting fractions greater than or equal to 0.5 to the next highest whole number:

$$[(\text{Projected Days of Care} \div 365.25) \div 0.8] - [\text{Total Beds}] = \text{Additional Beds Needed}$$

Unless otherwise specified by the methodology, calculations do not use rounded values. However, fractional values are rounded automatically when displayed.

Table 8A: Inventory and Utilization of Inpatient Rehabilitation Beds

A	B	C	D	E	F	G	H	I	J	K	L	M
Lic #	HSA	Facility	Inventory				Days of Care				Average Annual Utilization Rate	
			Current	CON Issued / Pending Development	Pending Review or Appeal	Total Planning Inventory	2018	2019	2020	2021	2020	2021
H0081	I	CarePartners Rehabilitation Hospital	80	0	0	80	19,612	20,834	22,637	22,426	77.5%	76.7%
H0223	I	Catawba Valley Medical Center	20	0	0	20	1,318	1,104	1,423	1,309	19.5%	17.9%
H0053	I	Frye Regional Medical Center	29	0	0	29	2,328	2,657	2,143	2,115	20.2%	20.0%
	I Total		129	0	0	129	23,258	24,595	26,203	25,850	55.6%	54.9%
H0159	II	Cone Health	49	0	0	49	10,592	10,919	12,152	13,476	67.9%	75.3%
H0052	II	High Point Regional Health	16	0	0	16	3,920	3,903	4,170	4,264	71.4%	73.0%
H0049	II	Hugh Chatham Memorial Hospital	12	0	0	12	-	-	-	-	0.0%	0.0%
H0011	II	North Carolina Baptist Hospital	39	0	0	39	9,582	7,534	7,776	7,819	54.6%	54.9%
H0209	II	Novant Health Forsyth Medical Center (Novant Health Rehabilitation Center)*	0	0	0	0	12,229	-	-	-	0.0%	0.0%
H0291	II	Novant Health Rehabilitation Hospital*	68	0	0	68	-	13,164	17,628	15,353	71.0%	61.8%
	II Total		184	0	0	184	36,323	35,520	41,726	40,912	62.1%	60.9%
H0042	III	Atrium Health Pineville	29	0	0	29	9,290	9,270	9,309	9,331	87.9%	88.1%
H0071	III	Carolinas Medical Center (Levine Children's Hospital)	13	0	0	13	3,973	4,361	3,802	4,069	80.1%	85.7%
H0071-C	III	Carolinas Rehabilitation	70	0	0	70	21,576	21,802	20,421	19,236	79.9%	75.2%
H0283	III	Carolinas Rehabilitation - Mount Holly	40	0	0	40	10,517	11,230	10,941	10,896	74.9%	74.6%
H0286	III	Carolinas Rehabilitation - NorthEast	40	0	0	40	10,499	9,183	10,428	10,901	71.4%	74.6%
H0010	III	Novant Health Presbyterian Medical Center	0	10	0	10	-	-	-	-	0.0%	0.0%
H0040	III	Novant Health Rowan Medical Center	10	-2	0	8	2,246	2,617	2,945	3,024	100.8%	103.5%
	III Total		202	8	0	210	58,101	58,463	57,846	57,457	75.4%	74.9%
H0238	IV	Duke Raleigh Hospital**	0	0	0	0	-	-	-	-	0.0%	0.0%
H0233	IV	Duke Regional Hospital	30	-7	0	23	7,515	7,704	8,935	8,815	106.4%	104.9%
H0267	IV	Maria Parham Health	11	0	0	11	1,617	1,901	2,133	3,039	53.1%	75.6%
H0157	IV	University of North Carolina Hospitals***	30	0	0	30	8,411	9,373	10,041	9,502	91.6%	86.7%
H0199	IV	WakeMed ****	98	-25	0	73	27,102	27,065	27,977	28,530	104.9%	107.0%
	IV	Wake County Rehabilitation Hospital	0	52	0	52	-	-	-	-	0.0%	0.0%
	IV Total		169	20	0	189	44,645	46,043	49,086	49,886	71.1%	72.3%
H0100	V	FirstHealth Moore Regional Hospital and Pinehurst Treatment	15	0	0	15	3,400	3,631	3,717	4,273	67.8%	78.0%
H0221	V	New Hanover Regional Medical Center	60	0	0	60	12,638	12,500	12,357	12,711	56.4%	58.0%
H0107	V	Scotland Memorial Hospital	7	0	0	7	1,142	1,209	1,081		42.3%	0.0%
H0213	V	Southeastern Regional Rehabilitation Center	78	0	0	78	17,252	16,450	15,193	13,957	53.3%	49.0%
	V Total		160	0	0	160	34,432	33,790	32,348	30,941	55.4%	52.9%
H0201	VI	CarolinaEast Medical Center	20	0	0	20	2,754	2,968	3,315	3,477	45.4%	47.6%
H0043	VI	UNC Lenoir Health Care	17	0	0	17	1,212	1,030	786	2,023	12.7%	32.6%
H0228	VI	Nash General Hospital	23	0	0	23	6,473	6,840	6,339	6,335	75.5%	75.4%
H0104	VI	Rehabilitation Center at Vidant Medical Center	75	0	0	75	16,284	17,489	18,787	18,625	68.6%	68.0%
H0258	VI	Vidant Edgecombe Hospital	16	0	0	16	1,636	578	-		0.0%	0.0%
	VI Total		151	0	0	151	28,359	28,905	29,227	30,460	53.0%	55.2%
Grand Total			995	28	0	1,023	225,118	227,316	236,436	235,506	63.3%	63.0%

* Utilization rates are based on 68 beds in service during the 2018 reporting period. These beds were relocated to Novant Health Rehabilitation Hospital on October 4, 2018.

** Twelve beds that were originally to be developed at Duke Raleigh Hospital will be developed at Wake County Rehabilitation Hospital instead.

*** University of North Carolina Hospitals has CON approval to develop 10 inpatient rehabilitation beds under Policy AC-3. The 10 beds are not counted when determining inpatient rehabilitation bed need.

**** Eight beds that were originally to be developed at WakeMed will be developed at Wake County Rehabilitation Hospital instead.

Table 8B: Inpatient Rehabilitation Bed Need Determination

(Proposed for Certificate of Need Review Commencing in 2023)

Service Area	Inpatient Rehabilitation Bed Need Determination	Certificate of Need Application Deadline	Certificate of Need Beginning Review Date
It is determined that there is no need anywhere in the state and no reviews are scheduled.			

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Chapter 9:

End-Stage Renal Disease Dialysis Facilities

CHAPTER 9

END-STAGE RENAL DISEASE DIALYSIS FACILITIES

Introduction

End-stage renal disease (ESRD) dialysis facilities (also known as kidney disease treatment centers) provide dialysis services, which is defined in 10A NCAC 14C .2201(5) as “the artificially aided process of transferring body wastes from a person’s blood to a dialysis fluid to permit discharge of the wastes from the body.” There are two types of dialysis: hemodialysis and peritoneal dialysis. Hemodialysis is the form of dialysis in which the blood is circulated outside the body through an apparatus which permits the transfer of waste through synthetic membranes. Peritoneal dialysis is the form of dialysis in which a dialysis fluid is introduced into the person’s peritoneal cavity and is subsequently withdrawn. Peritoneal dialysis is performed in the patient’s home. Hemodialysis can be performed in the patient’s home (home hemodialysis) or in an ESRD facility (in-center hemodialysis).

Definitions

The **service area** is the county in which the dialysis station is located. Each county comprises a service area except for two multicounty service areas: Cherokee, Clay and Graham counties and Avery, Mitchell, and Yancey counties.

An **in-center** patient receives dialysis services at the ESRD facility only.

A **home** patient receives hemodialysis or peritoneal dialysis in the patient’s home, except for training that is provided in an ESRD facility.

A **home training** facility is a facility dedicated exclusively to train hemodialysis or peritoneal dialysis patients to dialyze at home or at a location other than a kidney disease treatment center, as defined in G.S. 131E-176(14e). A home training facility must be physically separate (i.e., may not have the same FID number) from a kidney disease treatment center.

The **reporting date** for ESRD utilization data is December 31 of each year. The **current** reporting date for this State Medical Facilities Plan (SMFP) is December 31, 2021.

Utilization is the number of in-center patients served by the facility during the last week of December.

The **projection date** is one year beyond the current reporting date. The projection date for this SMFP is December 31, 2022.

The **past five years reporting dates** are December 31 in 2017, 2018, 2019, 2020, and 2021.

The **data cut-off date** is the last date on which the Agency updates data before publication of the SMFP. Data received after this date, regardless of the effective date of the data itself, will not be included in the SMFP. This date is listed on the Title Page of the SMFP.

New facilities are those facilities certified and in operation at least nine but fewer than 21 months as of the data cut-off date for the current SMFP. The number of days in a month is calculated as 365.25/12.

Small facilities are those facilities with fewer than a total of 13 certified stations, which includes CON-approved stations and stations applied for, as of the data cut-off date for the current SMFP.

Changes from the Previous Plan

This chapter contains no substantive changes from the previous SMFP.

Basic Principles

1. New facilities must have a projected need for at least 10 stations to be cost effective and to assure quality of care.
2. As a means of making ESRD services more accessible to patients, one goal of the N.C. Department of Health and Human Services is to minimize patient travel time to and from the facility. Therefore, end-stage renal disease treatment should be available within 30 miles from the patients' homes. In areas where it is apparent that patients currently travel more than 30 miles for in-center dialysis, proposed new facilities that would serve patients who are farthest away from operational or approved facilities should receive favorable consideration.
3. The State Health Coordinating Council encourages applicants for dialysis stations to provide or arrange for: home training and backup for facility-based patients suitable for home dialysis or in a facility that is a reasonable distance from the patient's residence; ESRD dialysis service availability at times that do not interfere with ESRD patients' work schedules; and services in rural areas.

Assumptions of the Methodology

1. Home patients will not be included in the determination of need for new stations. Home patients include those that receive hemodialysis or peritoneal dialysis in their home.
2. In-center facilities may have been approved to use at least one dialysis station dedicated to training of home dialysis patients. If so, these stations are included in the planning inventory.
3. Under the facility need methodology, any facility at 75% utilization or greater as of the current reporting date may apply to add dialysis stations.
4. Facilities that are eligible to add stations based on the facility need methodology may add the number of stations calculated by the methodology, up to a maximum of 20 stations in a single calendar year.
5. Facilities certified and in operation at least nine but fewer than 21 months do not have a need determination in the SMFP. Rather, they may apply to add stations based on Condition 1 in the Facility Need Methodology.
6. Facilities that meet both the definition of "small" under Condition 1.a. in the Facility Need Determination Methodology and have been in operation for at least 21 months may apply for additional stations either under Condition 1.b. or 2. "Small" facilities may not apply under both Condition 1.b. and Condition 2 in the same year.
7. Once a CON application has been received to relocate stations to a home training facility, the stations to be relocated are excluded from both the county and facility need determination calculations.

Data Sources

Data on the current number of dialysis facilities and stations comes from the Healthcare Planning and Certificate of Need Section and from the Acute and Home Care Licensure and Certification Section, Division of Health Service Regulation, N. C. Department of Health and Human Services. ESRD providers that operate certified dialysis facilities report data on the number of patients served to the Division of Health Service Regulation, Healthcare Planning and Certificate of Need Section.

Application of the Methodologies

ESRD services have two methodologies: the county need methodology projects need for the county; the facility need methodology projects need for a specific facility. When a county need determination exists, any current provider may apply to add stations in an existing facility, and anyone may apply to develop a new facility. When a facility need determination exists, only the facility that generated the need may apply to add stations.

County Need Determination Methodology (Table 9B)

- Step 1: Multiply the average annual change in the total number of dialysis patients residing in each county for the past five reporting dates (*Columns B through F*) by the county's total number of patients for the current reporting date (*Column F*).
- Step 2: Add the result of Step 1 to the county's total number of patients for the current reporting date (*Column F*). The sum is the county's projected total number of patients (*Column H*).
- Step 3: Multiply the percentage of each county's total patients who were home dialysis patients (*Column I*) on the current reporting date (*Column J*) by the county's projected total patients as of the projection date (*Column H*). Subtract the product (*Column K*) from the county's projected total patients. The remainder is the county's projected in-center dialysis patients (*Column L*).
- Step 4: Divide the result of Step 3 by 3.2. The quotient is the projected number of in-center dialysis stations needed in the county (*Column M*).
- Step 5: Subtract from the result of Step 4 (*Column M*) the county's number of stations certified for Medicare, stations that are certificate of need-approved and awaiting certification, stations awaiting resolution of certificate of need appeals, and the number represented by need determinations in previous State Medical Facilities Plans for which certificate of need decisions have not been made (*Column N*). The remainder is the county's projected station surplus or deficit (*Column O*).
- Step 6: If the result of Step 5 is 10 or greater and the SMFP shows that utilization of each dialysis facility in the county is 80% or greater, the county station need determination is the same as the projected station deficit rounded to the nearest whole number (round fractions of 0.5 or greater to the next highest whole number) (*Column P*). If a county's projected station deficit is less than 10 or if the utilization of any dialysis facility in the county is less than 80%, the county has no need for additional stations. When a county has a need determination, applicants may apply for any number of stations up to and including the number of stations in the need determination.

Unless otherwise specified by the methodology, calculations do not use rounded values. However, fractional values are rounded automatically when displayed.

Facility Need Determination Methodology

A dialysis facility located in a county that has no county need determination in the current SMFP may apply for additional stations under one of the two following conditions.

Condition 1: Pertains to new facilities and small facilities.

- a. New facilities will be identified as such in Table 9A.
The facility's current reported utilization must be at least 3.0 patients per station in a given week. For purposes of Condition 1 only, "current" means in-center utilization as of a reporting date no more than 90 days before the date the certificate of need application is submitted.
- b. If the facility is new or both new and small under Condition 1.a., it must use the following definitions and calculations to determine the number of stations needed. If the facility is small under Condition 1.a., it may use either the following definitions and calculations or Condition 2 to determine the number of additional stations needed:
 - i. Use the current and previous reporting dates to calculate the facility's growth in utilization. For purposes of Condition 1 only, previous means in-center utilization as of a reporting date six months before the current reporting date.
 - ii. Subtract the facility's number of in-center dialysis patients on the previous reporting date from the facility's number of in-center dialysis patients on the current reporting date. The difference is the net in-center change for six months.
 - iii. Divide the result of Condition 1.b.ii by the number of in-center patients from the previous reporting date. Then multiply that result by 2 to determine the projected annual growth rate.
 - iv. Multiply the result from Condition 1.b.iii by the facility's number of in-center patients as of the current reporting date.
 - v. Add the result from Condition 1.b.iv to the number of in-center patients as of the current reporting date.
 - vi. Divide the result of Condition 1.b.v by 2.8.
 - vii. Subtract the sum of (a) the facility's number of stations as of the current reporting date and (b) the number of pending new stations for which a certificate of need application has been approved or is under review from the result of Condition 1.b.vi. The remainder is the number of stations needed. Round fractions of 0.5 or greater to the next highest whole number.
- c. The facility may apply for any number of stations up to the number calculated in Condition 1.b.vii, up to a maximum of 10 stations.
- d. New facilities and small facilities may be eligible to apply to add stations in one Category D.1 certificate of need review cycle. That is, a new facility may apply to add stations in any Category D.1 review cycle, but it can apply only once during the period that it is defined as a new facility (see Chapter 3). A small facility may apply to add stations in any Category D.1 review cycle, but it can apply only once during a calendar year.

Condition 2: Pertains to facilities certified and in operation at least 21 months as of the data cut-off date for the current SMFP (*Table 9A*).

- a. A facility may add stations if its utilization reported in the current SMFP is at least 75%, or 3.0 patients per station per week or greater [$((\text{Column L}/\text{Column K})/4) = \text{Column M}$].
- b. If the facility's utilization reported in the current SMFP meets Condition 2.a, use the following calculations to determine the number of stations needed:
 - i. Subtract the facility's number of in-center dialysis patients reported in the previous SMFP from the number of in-center dialysis patients reported in the current SMFP (*Column L*). The difference is the net in-center change for one year.
 - ii. Divide the result of Condition 2.b.i by the number of in-center patients from the previous SMFP to determine the projected annual growth rate.
 - iii. Multiply the result from Condition 2.b.ii by the facility's number of in-center patients reported in the current SMFP (*Column L*).
 - iv. Add the result of Condition 2.b.iii to the number of in-center patients reported in the current SMFP.
 - v. Divide the result of Condition 2.b.iv by 2.8.
 - vi. Subtract the sum of (a) the facility's number of stations as of the current reporting date (*Column J*) and (b) the number of pending new stations for which a certificate of need application has been approved or is under review from the result of Condition 2.b.v. The remainder is the number of stations needed (*Column N*). Round fractions of 0.5 or greater to the next highest whole number.
- c. The facility may apply to add stations to meet the need calculated in Condition 2.b.vi, up to a maximum of 20 stations. When a facility has a need determination, applicants may apply to add any number of stations up to and including the number of stations in the need determination. However, applicants must demonstrate the need for the number of stations applied for in the CON application. When a facility has a need determination, the applicant may apply to add stations up to three times per calendar year, but the total stations applied for in a single calendar year cannot exceed the total number of stations in the facility's need determination, as calculated in Condition 2.b.vi.

Unless otherwise specified by the methodology, calculations do not use rounded values. However, fractional values are rounded automatically when displayed.

The former Table 9A, Dialysis Data by County of Patient Origin – 2021 Data, is available on the Healthcare Planning website at:

<https://info.ncdhhs.gov/dhsr/ncsmfp/index.html>

or

<https://info.ncdhhs.gov/dhsr/mfp/publications.html#por>

Table 9A: Inventory of Dialysis Stations and Calculation of Utilization Rates**

A	B	C	D	E	F	G	H	I	J	K	L	M	N
County	Facility Identification Number	Provider Number	Facility	City	Certified	CON Issued/ Not Certified	Decision Rendered (Conditional Approval)	Decision Pending	Total	Certified Stations 12/31/2021	Number* In-Center Patients 12/31/2021	Utilization by Percent 12/31/2021	Facility Station Need Determination
Alamance	140092	34-2709	Alamance County Dialysis	Graham	16	0	0	0	16	16	41	64.06%	0
Alamance	955786	34-2533	BMA of Burlington	Burlington	43	0	-12	0	31	43	82	47.67%	0
Alamance	956036	34-2567	Burlington Dialysis	Burlington	20	3	-3	0	20	20	62	77.50%	0
Alamance	100545	34-2691	Carolina Dialysis of Mebane	Mebane	27	-2	0	0	25	27	73	67.59%	0
Alamance	160341	34-2726	Glen Raven Dialysis	Burlington	14	0	0	0	14	14	28	50.00%	0
Alamance	170018	34-2739	Mebane Dialysis	Mebane	16	0	2	0	18	16	37	57.81%	0
Alamance	100785	34-2686	North Burlington Dialysis	Burlington	18	0	0	0	18	18	47	65.28%	0
Alexander	090725	34-2687	Fresenius Medical Care of Alexander County	Taylorsville	13	0	0	0	13	13	45	86.54%	2
Alleghany													
Anson	955840	34-2560	Dialysis Care of Anson County	Wadesboro	15	0	0	0	15	15	27	45.00%	0
Anson	061094	34-2673	Fresenius Medical Care Anson	Wadesboro	18	0	0	0	18	18	43	59.72%	0
Ashe													
Avery			(Mitchell-Avery-Yancey Planning Area)										
Beaufort	955789	34-2561	FMC Pamlico	Washington	31	0	0	0	31	31	87	70.16%	0
Bertie	956109	34-2547	Windsor Dialysis Unit	Windsor	20	0	0	0	20	20	59	73.75%	0
Bladen	160065	34-2759	Bladenboro Dialysis	Bladenboro	14	0	0	0	14	14	19	33.93%	0
Bladen	955448	34-2578	Southeastern Dialysis Center - Elizabethtown	Elizabethtown	24	0	0	0	24	19	58	76.32%	0
Brunswick	070678	34-2689	FMC Brunswick County^^	Supply	10	0	0	0	10	10	22	55.00%	0
Brunswick	140237	34-2716	Leland Dialysis	Leland	16	0	0	0	16	16	53	82.81%	7
Brunswick	960145	34-2582	Southeastern Dialysis Center - Shallotte	Shallotte	15	0	0	0	15	15	35	58.33%	0
Brunswick	070474	34-2669	Southport Dialysis Center^^	Southport	11	0	0	0	11	11	28	63.64%	0
Buncombe	150248	34-2756	Arden Dialysis	Arden	14	0	0	0	14	14	29	51.79%	0
Buncombe	955773	34-2506	Asheville Kidney Center	Asheville	52	0	0	0	52	52	138	66.35%	0
Buncombe	000318	34-2604	Weaverville Dialysis	Weaverville	20	0	0	0	20	20	46	57.50%	0
Burke	150154	34-2563	BMA of Burke County	Morganton	36	5	0	0	41	36	106	73.61%	0
Cabarrus	180049	34-2760	Cannon Dialysis^^	Kannapolis	11	0	0	0	11	11	20	45.45%	0
Cabarrus	010799	34-2631	Copperfield Dialysis	Concord	27	0	0	0	27	27	81	75.00%	0

Table 9A: Inventory of Dialysis Stations and Calculation of Utilization Rates**

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County	Facility Identification Number	Provider Number	Facility	City	Certified	CON Issued/ Not Certified	Decision Rendered (Conditional Approval)	Decision Pending	Total	Certified Stations 12/31/2021	Number* In-Center Patients 12/31/2021	Utilization by Percent 12/31/2021	Facility Station Need Determination
Cabarrus	070392	34-2670	Harrisburg Dialysis Center	Concord	28	0	0	0	28	28	74	66.07%	0
Cabarrus	160494	34-2747	Hickory Ridge Dialysis	Charlotte	10	0	5	0	15	10	29	72.50%	0
Caldwell	170328	34-2509	BMA Lenoir	Lenoir	45	0	0	5	50	45	142	78.89%	5
Camden													
Carteret	970506	34-2588	Crystal Coast Dialysis Unit	Morehead City	21	0	0	0	21	21	58	69.05%	0
Carteret	120486	34-2702	FMC Sea Spray^^	Cedar Point	11	0	0	0	11	11	18	40.91%	0
Caswell	960925	34-2597	Renal Care Group - Caswell	Yanceyville	17	0	0	0	17	17	38	55.88%	0
Catawba	160450	34-2729	Catawba County Dialysis	Hickory	21	0	0	0	21	21	39	46.43%	0
Catawba	955790	34-2516	FMC Dialysis Services of Hickory	Hickory	33	0	-8	0	25	33	95	71.97%	0
Catawba	010648	34-2635	FMC of Catawba Valley	Conover	25	0	-4	0	21	25	89	89.00%	10
Catawba	160340	34-2743	Fresenius Kidney Care Newton	Newton	15	0	0	0	15	15	48	80.00%	14
Catawba	220064	Proposed new site consisting of existing stations	Fresenius Kidney Care North Catawba	Hickory	0	0	12	0	12	0	0	0.00%	0
Chatham	981038	34-2617	Carolina Dialysis Pittsboro	Pittsboro	13	0	0	0	13	12	37	77.08%	1
Chatham	955802	34-2621	Carolina Dialysis Siler City	Siler City	26	0	0	0	26	26	61	58.65%	0
Cherokee (Cherokee-Clay-Graham Multicounty Planning Area)	050254	34-2649	Smoky Mountain Dialysis Center	Murphy	13	0	0	0	13	13	36	69.23%	0
Chowan	955811	34-2541	Edenton Dialysis	Edenton	20	0	0	0	20	20	51	63.75%	0
Clay			(Cherokee-Clay-Graham Planning Area)										
Cleveland	070223	34-2676	DCI South	Shelby	14	0	0	0	14	14	49	87.50%	3
Cleveland	001291	34-2611	Dialysis Clinic - Kings Mountain	Kings Mountain	15	0	0	0	15	15	48	80.00%	5
Cleveland	955845	34-2529	Dialysis Clinic - Shelby	Shelby	33	0	0	0	33	33	104	78.79%	10
Cleveland	080370	34-2661	Dialysis Clinic, Inc	Shelby	15	0	0	0	15	15	21	35.00%	0
Columbus	020281	34-2628	Chadbourn Dialysis Center	Chadbourn	17	0	0	0	17	17	28	41.18%	0

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Columbus	956057	34-2521	Southeastern Dialysis Center - Whiteville	Whiteville	24	0	0	0	24	24	61	63.54%	0
Craven	960995	34-2585	FMC Craven County	New Bern	28	0	0	0	28	28	77	68.75%	0
Craven	955965	34-2534	New Bern Dialysis	New Bern	37	0	0	0	37	37	112	75.68%	0
Cumberland	140236	34-2510	Fayetteville Kidney Center	Fayetteville	57	0	0	0	57	57	147	64.47%	0
Cumberland	960411	34-2593	FMC Dialysis Services North	Fayetteville	40	14	0	0	54	40	119	74.38%	0
Cumberland	970530	34-2601	FMC Dialysis Services South Ramsey	Fayetteville	56	0	0	0	56	56	154	68.75%	0
Cumberland	011019	34-2643	FMC Services of West Fayetteville	Fayetteville	40	4	0	0	44	40	159	99.38%	8
Cumberland	170235	Proposed new site consisting of existing stations	Fresenius Kidney Care Hope Mills	Hope Mills	0	20	0	0	20	0	0	0.00%	0
Cumberland	170017	34-2751	Fresenius Kidney Care Rockfish	Fayetteville	25	0	0	0	25	25	61	61.00%	0
Currituck													
Dare	970980	34-2598	Dare County Dialysis Center^^	Manteo	9	0	0	0	9	9	24	66.67%	0
Davidson	944660	34-2553	Lexington Dialysis Center of Wake Forest University	Lexington	49	0	0	0	49	49	136	69.39%	0
Davidson	200036	Proposed new site consisting of existing stations	North Davidson Dialysis Center of Wake Forest University	Winston-Salem	0	19	0	0	19	0	0	0.00%	0
Davidson	020758	34-2639	Thomasville Dialysis Center of Wake Forest University	Thomasville	35	1	0	0	36	35	115	82.14%	7
Davie	080689	34-2677	Davie Kidney Center of Wake Forest University	Mocksville	24	0	0	0	24	18	58	80.56%	0
Duplin	945251	34-2535	Southeastern Dialysis Center - Kenansville	Kenansville	24	0	0	0	24	24	67	69.79%	0
Duplin	060249	34-2659	Wallace Dialysis	Wallace	20	0	0	0	20	20	62	77.50%	1
Durham	180047	34-2732	Bull City Dialysis	Durham	20	0	0	0	20	16	55	85.94%	0
Durham	160556	34-2741	Downtown Durham Dialysis^^	Durham	10	0	0	0	10	10	10	25.00%	0
Durham	955621	34-2550	Durham Dialysis	Durham	29	0	0	0	29	29	91	78.45%	0
Durham	160396	34-2734	Durham Regional Dialysis^^	Durham	10	0	0	0	10	10	18	45.00%	0
Durham	010285	34-2616	Durham West Dialysis	Durham	27	0	0	0	27	27	74	68.52%	0

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Durham	990969	34-2615	FMC Dialysis Services of Briggs Avenue	Durham	29	0	0	0	29	29	100	86.21%	5
Durham	956837	34-2590	FMC Dialysis Services West Pettigrew	Durham	24	0	0	0	24	24	58	60.42%	0
Durham	955622	34-2538	Freedom Lake Dialysis Center	Durham	26	0	0	0	26	26	61	58.65%	0
Durham	170324	34-2762	Fresenius Kidney Care Eno River^	Durham	14	0	0	0	14	14	36	64.29%	0
Durham	080098	34-2680	Fresenius Medical Care South Durham Dialysis	Durham	20	0	0	0	20	20	63	78.75%	1
Durham	180368	34-2758	Hope Valley Dialysis^^	Durham	10	0	0	0	10	10	19	47.50%	0
Durham	140143	34-2718	Research Triangle Park Dialysis^^	Durham	10	0	0	0	10	10	19	47.50%	0
Durham	090117	34-2683	Southpoint Dialysis	Durham	16	0	0	0	16	16	58	90.63%	1
Edgecombe	970528	34-2603	BMA East Rocky Mount	Rocky Mount	30	-6	6	0	30	30	118	98.33%	14
Edgecombe	955841	34-2577	Dialysis Care of Edgecombe County	Tarboro	35	0	0	0	35	35	45	32.14%	0
Edgecombe	170325	34-2761	Fresenius Kidney Care Boice-Willis	Rocky Mount	10	6	0	0	16	10	20	50.00%	0
Edgecombe	150155	34-2722	Fresenius Medical Clinic Tarboro	Tarboro	14	4	0	0	18	14	56	100.00%	6
Forsyth	210744	Proposed new site consisting of existing stations	Kernersville dialysis Center of Wake Forest University	Kernersville	0	24	0	0	24	0	0	0.00%	0
Forsyth	070671	34-2667	Miller Street Dialysis Center of Wake Forest University	Winston Salem	50	0	0	0	50	50	181	90.50%	19
Forsyth	000193	34-2612	Northside Dialysis Center of Wake Forest University	Winston Salem	48	0	-11	11	48	48	159	82.81%	9
Forsyth	944661	34-2505	Piedmont Dialysis Center of Wake Forest University	Winston Salem	64	0	0	0	64	64	188	73.44%	0
Forsyth	944758	34-2569	Salem Kidney Center of Wake Forest University	Winston Salem	59	-24	30	0	65	59	178	75.42%	2
Franklin	955842	34-2571	Dialysis Care of Franklin County	Louisburg	27	0	0	0	27	27	44	40.74%	0
Franklin	130122	34-2715	Fresenius Medical Care Tar River	Louisburg	20	0	0	0	20	19	55	72.37%	0
Gaston	150476	34-2595	BMA Kings Mountain	Kings Mountain	22	4	0	0	26	22	63	71.59%	0
Gaston	160496	34-2745	Fresenius Kidney Care North Gaston	Dallas	12	0	0	4	16	12	44	91.67%	15
Gaston	050039	34-2652	Fresenius Medical Care Belmont	Belmont	19	0	0	0	19	19	74	97.37%	9
Gaston	955615	34-2513	Fresenius Medical Care Gastonia	Gastonia	39	0	0	0	39	39	123	78.85%	5

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Gaston	070531	34-2671	Fresenius Medical Care South Gaston	Gastonia	28	0	0	0	28	28	70	62.50%	0
Gates													
Granville	170422	34-2520	FMC Dialysis Services Neuse River	Oxford	25	0	0	0	25	25	74	74.00%	0
Granville	041025	34-2647	FMC Dialysis Services of Oxford	Oxford	25	0	0	0	25	25	76	76.00%	0
Greene	020974	34-2650	Greene County Dialysis Center	Snow Hill	21	0	0	0	21	21	51	60.71%	0
Guilford	955872	34-2504	BMA of Greensboro	Greensboro	54	-4	0	6	56	54	153	70.83%	0
Guilford	980838	34-2537	BMA of South Greensboro	Greensboro	44	0	10	0	54	44	169	96.02%	6
Guilford	980472	34-2600	BMA of Southwest Greensboro	Jamestown	33	0	0	0	33	33	112	84.85%	8
Guilford	190319	Proposed new site consisting of existing stations	Central Greensboro Dialysis	Greensboro	0	0	10	0	10	0	0	0.00%	0
Guilford	001324	34-2634	FMC of East Greensboro	Greensboro	51	0	0	0	51	43	124	72.09%	0
Guilford	170123	34-2742	Fresenius Kidney Care Garber-Olin	Greensboro	28	0	0	0	28	28	74	66.07%	0
Guilford	210743	Proposed new site consisting of existing stations	Fresenius Kidney Care Sandy Ridge	Greensboro	0	16	0	0	16	0	0	0.00%	0
Guilford	150332	34-2720	Fresenius Medical Care High Point	High Point	14	-4	4	0	14	14	53	94.64%	8
Guilford	945262	34-2514	High Point Kidney Center of Wake Forest University	High Point	50	0	0	0	50	50	141	70.50%	0
Guilford	990214	34-2613	Northwest Greensboro Kidney Center	Greensboro	37	0	0	0	37	37	108	72.97%	0
Guilford	980262	34-2599	Triad Dialysis Center of Wake Forest University	High Point	40	0	0	0	40	40	109	68.13%	0
Halifax	956044	34-2542	BMA of Roanoke Rapids	Roanoke Rapids	50	0	0	0	50	50	146	73.00%	0
Halifax	981041	34-2619	FMC Dialysis Services of Halifax	Scotland Neck	19	0	0	0	19	19	59	77.63%	1
Harnett	944644	34-2557	Dunn Kidney Center	Dunn	35	0	0	0	35	35	100	71.43%	0
Harnett	110803	34-2701	FMC Anderson Creek	Cameron	16	0	0	0	16	16	55	85.94%	3
Harnett	100969	34-2694	Fresenius Medical Care Angier Dialysis^^	Angier	12	0	0	0	12	12	24	50.00%	0
Harnett	050131	34-2648	Fresenius Medical Care of Lillington	Lillington	16	0	0	0	16	16	55	85.94%	7

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Haywood	010800	34-2629	Waynesville Dialysis Center	Waynesville	27	0	0	0	27	27	63	58.33%	0
Henderson	140094	34-2564	Hendersonville Dialysis Center	Hendersonville	33	0	0	0	33	33	83	62.88%	0
Hertford	945189	34-2570	Ahoskie Dialysis	Ahoskie	16	9	0	0	25	16	56	87.50%	0
Hertford	170240	34-2740	Roanoke-Chowan Dialysis	Murfreesboro	10	5	0	0	15	10	24	60.00%	0
Hoke	945165	34-2579	Dialysis Care of Hoke County	Raeford	25	1	0	0	26	25	79	79.00%	6
Hoke	160286	34-2727	Fayetteville Road Dialysis	Raeford	19	11	0	0	30	19	65	85.53%	0
Hoke	110715	34-2698	Lumbree River Dialysis	Red Springs	15	0	0	0	15	15	27	45.00%	0
Hyde													
Iredell	990439	34-2606	Lake Norman Dialysis Center of Wake Forest University	Mooresville	31	0	0	0	31	31	81	65.32%	0
Iredell	944568	34-2527	Statesville Dialysis Center of Wake Forest University	Statesville	27	0	0	0	27	27	83	76.85%	5
Iredell	020759	34-2636	West Iredell Dialysis Center of Wake Forest University	Statesville	24	0	0	0	24	24	66	68.75%	0
Jackson	944474	34-2556	Sylva Dialysis Center	Sylva	16	0	0	0	16	16	23	35.94%	0
Johnston	170420	Proposed new site consisting of existing stations	Clayton Dialysis	Clayton	0	0	10	0	10	0	0	0.00%	0
Johnston	956062	34-2545	FMC Four Oaks	Four Oaks	25	0	0	0	25	25	54	54.00%	0
Johnston	170323	34-2757	Fresenius Kidney Care East Johnston	Selma	10	7	0	0	17	10	34	85.00%	12
Johnston	170520	34-2763	Fresenius Kidney Care West Johnston^^	Garner	10	0	2	0	12	10	19	47.50%	0
Johnston	030941	34-2678	Fresenius Medical Care Stallings Station	Clayton	28	2	0	0	30	20	70	87.50%	0
Johnston	944566	34-2572	Johnston Dialysis Center	Smithfield	33	0	0	0	33	33	106	80.30%	1
Jones	001653	34-2625	FMC Dialysis Services of Jones County^^	Trenton	10	0	0	0	10	10	21	52.50%	0
Lee	110959	34-2697	Carolina Dialysis Lee County	Sanford	20	0	0	0	20	20	63	78.75%	3
Lee	955801	34-2620	Carolina Dialysis Sanford	Sanford	39	0	0	0	39	39	112	71.79%	0
Lenoir	955898	34-2518	FMC of Kinston Dialysis Unit	Kinston	42	0	0	0	42	39	110	70.51%	0
Lenoir	010207	34-2609	FMC Vernon Dialysis	Kinston	27	0	0	0	27	27	70	64.81%	0
Lincoln	944237	34-2568	FMC Lincolnton Dialysis	Lincolnton	30	0	0	0	30	30	61	50.83%	0

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Macon	120162	34-2696	Franklin Township Dialysis^^	Franklin	12	0	0	0	12	12	29	60.42%	0
Madison													
Martin	960043	34-2584	Dialysis Care of Martin County	Williamston	15	0	0	0	15	15	41	68.33%	0
Martin	170330	34-2746	Robersonville Dialysis	Robersonville	10	0	0	3	13	10	32	80.00%	1
McDowell	040266	34-2645	McDowell Dialysis Center	Marion	20	0	0	0	20	13	40	76.92%	0
Mecklenburg	960156	34-2581	BMA Beatties Ford	Charlotte	41	2	0	0	43	43	98	56.98%	0
Mecklenburg	970826	34-2594	BMA Nations Ford	Charlotte	28	0	0	0	28	28	94	83.93%	8
Mecklenburg	970301	34-2605	BMA of East Charlotte	Charlotte	29	3	0	0	32	26	78	75.00%	0
Mecklenburg	955792	34-2554	BMA West Charlotte	Charlotte	29	0	0	0	29	29	89	76.72%	4
Mecklenburg	150477	34-2731	Brookshire Dialysis^^	Charlotte	11	0	0	0	11	11	30	68.18%	0
Mecklenburg	955930	34-2548	Charlotte Dialysis	Charlotte	33	-10	0	0	23	33	94	71.21%	0
Mecklenburg	001554	34-2627	Charlotte East Dialysis	Charlotte	34	0	0	0	34	34	110	80.88%	4
Mecklenburg	944671	34-2552	DSI Charlotte Latrobe Dialysis	Charlotte	24	0	0	0	24	24	69	71.88%	0
Mecklenburg	955380	34-2591	DSI Glenwater Dialysis	Charlotte	42	0	0	0	42	42	102	60.71%	0
Mecklenburg	955947	Proposed new site consisting of existing stations	FMC Charlotte	Charlotte	0	46	0	0	46	0	0	0.00%	0
Mecklenburg	955947	34-2503	FMC Charlotte	Charlotte	48	-48	0	0	0	48	137	71.35%	0
Mecklenburg	080137	34-2681	FMC Matthews	Matthews	21	0	0	0	21	21	85	101.19%	9
Mecklenburg	955788	34-2549	FMC of North Charlotte	Charlotte	40	0	0	0	40	40	143	89.38%	13
Mecklenburg	170326	Proposed new site consisting of existing stations	Fresenius Kidney Care Mallard Creek	Charlotte	0	12	0	0	12	0	0	0.00%	0
Mecklenburg	150024	34-2719	Fresenius Kidney Care Regal Oaks	Charlotte	17	4	0	0	21	17	63	92.65%	3
Mecklenburg	160337	34-2750	Fresenius Kidney Care Southeast Mecklenburg	Pineville	10	0	0	7	17	10	30	75.00%	2
Mecklenburg	150435	34-2738	Fresenius Medical Care Aldersgate	Charlotte	16	0	0	0	16	16	47	73.44%	0
Mecklenburg	120485	34-2713	Fresenius Medical Care Southwest Charlotte	Charlotte	26	0	0	0	26	21	73	86.90%	3

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Mecklenburg	130490	34-2707	Huntersville Dialysis	Huntersville	27	0	0	0	27	21	64	76.19%	0
Mecklenburg	070499	34-2655	INS Charlotte (to be replaced with INS Victory Home)	Charlotte	0	-2	0	0	-2	2			0
Mecklenburg	070499	Proposed new site consisting of existing stations	INS Victory Home (replacement facility for INS Charlotte)	Charlotte	0	7	0	0	7	0	0	0.00%	0
Mecklenburg	070389	34-2692	Mint Hill Dialysis	Mint Hill	21	0	0	0	21	21	58	69.05%	0
Mecklenburg	180474	Proposed new site consisting of existing stations	Mountain Island Lake Dialysis	Charlotte	0	0	0	0	0	0	0	0.00%	0
Mecklenburg	060083	34-2663	North Charlotte Dialysis Center	Charlotte	33	-10	0	0	23	33	90	68.18%	0
Mecklenburg	170127	34-2523	South Charlotte Dialysis	Charlotte	27	0	0	0	27	27	74	68.52%	0
Mecklenburg	150478	34-2736	Sugar Creek Dialysis	Charlotte	21	0	0	0	21	21	39	46.43%	0
Mitchell (Mitchell-Avery-Yancey Multicounty Planning Area)	060380	34-2660	Mayland Dialysis Center^^	Spruce Pine	9	0	0	0	9	9	21	58.33%	0
Montgomery	925156	34-2583	Dialysis Care of Montgomery County	Biscoe	20	0	0	0	20	20	55	68.75%	0
Moore	080621	34-2679	Carthage Dialysis	Carthage	14	0	0	0	14	14	40	71.43%	0
Moore	944674	34-2555	Dialysis Care of Moore County	Pinehurst	25	0	0	0	25	25	59	59.00%	0
Moore	020648	34-2638	Southern Pines Dialysis Center	Southern Pines	18	0	0	0	18	18	55	76.39%	2
Nash	020870	34-2644	FMC of Spring Hope	Spring Hope	16	0	0	0	16	16	49	76.56%	6
Nash	130370	34-2710	Fresenius Medical Care South Rocky Mount	Rocky Mount	19	0	0	0	19	19	66	86.84%	4
Nash	130459	34-2728	Nash County Dialysis^^	Rocky Mount	12	0	0	0	12	12	21	43.75%	0
Nash	944658	34-2517	Rocky Mount Kidney Center	Rocky Mount	40	10	0	0	50	40	151	94.38%	5
New Hanover	080819	34-2685	Cape Fear Dialysis	Wilmington	32	0	0	0	32	32	98	76.56%	4
New Hanover	140333	34-2717	New Hanover Dialysis	Wilmington	18	0	0	0	18	18	45	62.50%	0

Table 9A: Inventory of Dialysis Stations and Calculation of Utilization Rates**

A	B	C	D	E	F	G	H	I	J	K	L	M	N
County	Facility Identification Number	Provider Number	Facility	City	Certified	CON Issued/ Not Certified	Decision Rendered (Conditional Approval)	Decision Pending	Total	Certified Stations 12/31/2021	Number* In-Center Patients 12/31/2021	Utilization by Percent 12/31/2021	Facility Station Need Determination
New Hanover	220065	Proposed new site consisting of existing stations	Ogden Park Home Training	Wilmington	0	0	2	0	2	0	0	0.00%	0
New Hanover	956055	34-2511	Southeastern Dialysis Center - Wilmington	Wilmington	32	0	-2	0	30	32	88	68.75%	0
Northampton	970120	34-2586	FMC East Northampton County	Conway	21	0	0	0	21	21	55	65.48%	0
Onslow	130178	34-2700	New River Dialysis	Jacksonville	25	2	0	0	27	25	80	80.00%	0
Onslow	190217	Proposed new site consisting of existing stations	Richlands Dialysis	Richlands	0	10	0	0	10	0	0	0.00%	0
Onslow	956056	34-2532	Southeastern Dialysis Center - Jacksonville	Jacksonville	38	-2	0	0	36	38	99	65.13%	0
Orange	956088	34-2622	Carolina Dialysis Carrboro	Carrboro	41	0	0	0	41	41	114	69.51%	0
Pamlico													
Pasquotank	130368	34-2708	Albemarle Dialysis	Elizabeth City	14	0	0	1	15	14	43	76.79%	0
Pasquotank	955812	34-2515	Elizabeth City Dialysis	Elizabeth City	29	0	0	0	29	29	75	64.66%	0
Pender	945252	34-2558	Southeastern Dialysis Center - Burgaw	Burgaw	17	0	0	0	17	17	50	73.53%	0
Pender	130180	34-2703	Surf City Dialysis	Hampstead	14	0	0	0	14	14	22	39.29%	0
Perquimans	140091	34-2749	Perquimans Dialysis^^	Hertford	10	0	0	0	10	10	20	50.00%	0
Person	120225	34-2562	Roxboro Dialysis	Roxboro	38	0	0	0	38	38	105	69.08%	0
Pitt	011155	34-2632	FMC Care of Ayden	Ayden	16	0	0	0	16	16	41	64.06%	0
Pitt	960406	34-2596	FMC Dialysis Services East Carolina	Greenville	41	0	0	0	41	41	140	85.37%	11
Pitt	140329	34-2706	FMC Farmville	Farmville	14	0	0	0	14	14	48	85.71%	4
Pitt	170125	34-2748	Fresenius Kidney Care Captains Cove^^	Winterville	12	0	0	0	12	12	24	50.00%	0
Pitt	944657	34-2502	Greenville Dialysis Center	Greenville	51	0	0	0	51	51	149	73.04%	0
Polk													
Randolph	955777	34-2524	BMA of Asheboro	Asheboro	45	0	0	0	45	45	121	67.22%	0
Randolph	140089	34-2714	North Randolph Dialysis Center of Wake Forest University^^	Archdale	10	0	0	0	10	10	34	85.00%	7

Table 9A: Inventory of Dialysis Stations and Calculation of Utilization Rates**

A	B	C	D	E	F	G	H	I	J	K	L	M	N
County	Facility Identification Number	Provider Number	Facility	City	Certified	CON Issued/ Not Certified	Decision Rendered (Conditional Approval)	Decision Pending	Total	Certified Stations 12/31/2021	Number* In-Center Patients 12/31/2021	Utilization by Percent 12/31/2021	Facility Station Need Determination
Richmond	955843	34-2539	Dialysis Care of Richmond County	Hamlet	30	3	0	0	33	30	84	70.00%	0
Richmond	090624	34-2690	Sandhills Dialysis	Rockingham	16	9	0	0	25	16	64	100.00%	1
Robeson	955445	34-2528	BMA Lumberton	Lumberton	24	0	0	0	24	24	79	82.29%	0
Robeson	980754	34-2607	BMA of Red Springs	Red Springs	19	0	0	0	19	19	64	84.21%	3
Robeson	991061	34-2623	FMC Dialysis Services of Robeson County	Fairmont	23	0	0	0	23	23	76	82.61%	5
Robeson	180042	34-2764	Fresenius Kidney Care East Lumberton^	Lumberton	20	0	0	0	20	20	41	51.25%	0
Robeson	971335	34-2682	Fresenius Medical Care Pembroke	Pembroke	19	0	0	0	19	19	57	75.00%	0
Robeson	140334	34-2651	Maxton Dialysis Center	Maxton	14	0	0	0	14	14	43	76.79%	3
Robeson	180470	Proposed new site consisting of existing stations	Robeson County Dialysis	Lumberton	0	0	0	0	0	0	0	0.00%	0
Rockingham	955844	34-2536	Dialysis Care of Rockingham County	Eden	25	0	0	0	25	25	73	73.00%	0
Rockingham	030453	34-2640	Reidsville Dialysis	Reidsville	27	0	-7	0	20	27	67	62.04%	0
Rockingham	001548	34-2641	Rockingham Kidney Center	Reidsville	19	6	0	0	25	19	70	92.11%	1
Rowan	980409	34-2592	Dialysis Care of Kannapolis	Kannapolis	31	0	0	0	31	31	87	70.16%	0
Rowan	944673	34-2546	Dialysis Care of Rowan County	Salisbury	34	0	0	0	34	34	104	76.47%	3
Rowan	160495	34-2730	Spencer Dialysis	Spencer	19	0	0	0	19	14	42	75.00%	0
Rutherford	955824	34-2566	Dialysis Care of Rutherford County	Forest City	30	0	0	0	30	30	91	75.83%	5
Sampson	955787	34-2559	BMA of Clinton	Clinton	36	0	0	0	36	36	90	62.50%	0
Sampson	080822	34-2688	Fresenius Medical Care of Roseboro	Roseboro	13	0	0	0	13	13	51	98.08%	7
Scotland	924648	34-2540	BMA of Laurinburg	Laurinburg	30	0	0	0	30	30	90	75.00%	2
Stanly	955784	34-2565	BMA Albemarle	Albemarle	29	0	0	0	29	29	85	73.28%	0
Stokes	020980	34-2633	King Dialysis Center of Wake Forest University	King	24	0	0	0	24	24	66	68.75%	0
Surry	001558	34-2614	Elkin Dialysis Center of Wake Forest University	Elkin	19	0	0	0	19	19	45	59.21%	0
Surry	944348	34-2551	Mt Airy Dialysis Center of Wake Forest University	Mt Airy	32	0	0	0	32	27	87	80.56%	0
Swain	000047	34-2602	Cherokee Dialysis Center	Cherokee	20	0	0	0	20	20	49	61.25%	0

Table 9A: Inventory of Dialysis Stations and Calculation of Utilization Rates**

A	B	C	D	E	F	G	H	I	J	K	L	M	N
County	Facility Identification Number	Provider Number	Facility	City	Certified	CON Issued/ Not Certified	Decision Rendered (Conditional Approval)	Decision Pending	Total	Certified Stations 12/31/2021	Number* In-Center Patients 12/31/2021	Utilization by Percent 12/31/2021	Facility Station Need Determination
Transylvania	080169	34-2693	Brevard Dialysis Center	Brevard	14	0	0	0	14	14	32	57.14%	0
Tyrrell													
Union	800002	Proposed new site consisting of existing stations	Crooked Creek Dialysis	Indian Trail	0	16	0	0	16	0	0	0.00%	0
Union	160339	34-2737	Fresenius Kidney Care Indian Trail	Indian Trail	16	0	0	0	16	12	41	85.42%	6
Union	060374	34-2666	Marshville Dialysis Center	Marshville	12	-12	0	0	0	12	11	22.92%	0
Union	955949	34-2525	Metrolina Kidney Center	Monroe	28	0	0	0	28	28	76	67.86%	0
Union	955953	34-2526	Union County Dialysis	Monroe	37	0	0	0	37	37	98	66.22%	0
Vance	130179	34-2704	Kerr Lake Dialysis	Henderson	17	0	0	0	17	17	49	72.06%	0
Vance	944655	34-2543	Vance County Dialysis	Henderson	42	0	0	5	47	42	118	70.24%	0
Wake	980755	34-2608	BMA of Fuquay Varina Kidney Center	Fuquay Varina	29	0	0	0	29	29	99	85.34%	7
Wake	956008	34-2512	BMA of Raleigh Dialysis	Raleigh	50	0	0	0	50	50	154	77.00%	0
Wake	180166	34-2544	Cary Kidney Center	Cary	27	2	0	0	29	27	78	72.22%	0
Wake	190643	Proposed new site consisting of existing stations	Downtown Raleigh Dialysis	Raleigh	0	10	0	0	10	0	0	0.00%	0
Wake	061335	34-2672	FMC Eastern Wake	Rolesville	15	0	0	0	15	15	43	71.67%	0
Wake	160069	34-2733	FMC Morrisville	Cary	13	0	0	0	13	13	44	84.62%	6
Wake	020868	34-2646	FMC New Hope Dialysis	Raleigh	36	-6	0	0	30	36	109	75.69%	8
Wake	130278	34-2705	FMC Northern Wake	Wake Forest	18	0	0	0	18	18	57	79.17%	1
Wake	956094	34-2522	FMC Wake Dialysis Clinic	Raleigh	50	0	0	0	50	50	180	90.00%	5
Wake	180261	34-2755	Fresenius Kidney Care Holly Springs^^	Holly Springs	10	0	0	0	10	10	4	10.00%	0
Wake	210745	Proposed new site consisting of existing stations	Fresenius Kidney Care Knightdale	Knightdale	0	16	0	0	16	0	0	0.00%	0
Wake	041023	34-2658	Fresenius Medical Care Apex	Apex	20	0	0	0	20	20	56	70.00%	0

Table 9A: Inventory of Dialysis Stations and Calculation of Utilization Rates**

A	B	C	D	E	F	G	H	I	J	K	L	M	N
County	Facility Identification Number	Provider Number	Facility	City	Certified	CON Issued/ Not Certified	Decision Rendered (Conditional Approval)	Decision Pending	Total	Certified Stations 12/31/2021	Number* In-Center Patients 12/31/2021	Utilization by Percent 12/31/2021	Facility Station Need Determination
Wake	080823	34-2684	Fresenius Medical Care Central Raleigh	Raleigh	19	0	0	0	19	19	48	63.16%	0
Wake	041024	34-2653	Fresenius Medical Care Millbrook	Raleigh	17	0	0	0	17	17	57	83.82%	3
Wake	160555	Proposed new site consisting of existing stations	Fresenius Medical Care Rock Quarry	Raleigh	0	10	0	0	10	0	0	0.00%	0
Wake	160405	34-2735	Fresenius Medical Care White Oak	Garner	20	0	0	0	20	20	60	75.00%	1
Wake	160068	34-2744	Oak City Dialysis	Raleigh	20	0	0	0	20	10	40	100.00%	0
Wake	990968	34-2642	Southwest Wake County Dialysis	Raleigh	30	0	0	0	30	30	103	85.83%	4
Wake	041181	34-2675	Wake Forest Dialysis Center	Raleigh	21	2	0	0	23	21	70	83.33%	0
Wake	970505	34-2589	Zebulon Kidney Center	Zebulon	30	0	0	0	30	30	72	60.00%	0
Warren	991065	34-2610	FMC Dialysis Services of Warren Hills	Warrenton	25	0	0	0	25	25	57	57.00%	0
Washington	001549	34-2618	FMC Dialysis Services Plymouth	Plymouth	16	0	0	0	16	16	46	71.88%	0
Watauga	150300	34-2674	Fresenius Medical Care Watauga County	Boone	20	0	0	0	20	20	42	52.50%	0
Wayne	140466	34-2723	Coastal Plains Dialysis	Goldsboro	16	0	0	0	16	16	33	51.56%	0
Wayne	944654	34-2531	Goldsboro Dialysis	Goldsboro	25	0	0	0	25	25	88	88.00%	7
Wayne	970275	34-2587	Goldsboro South Dialysis	Goldsboro	25	0	0	0	25	25	53	53.00%	0
Wayne	000304	34-2573	Mt Olive Dialysis	Mt Olive	20	0	0	0	20	20	52	65.00%	0
Wayne	170236	34-2576	RAI Care Centers - Goldsboro	Goldsboro	21	0	0	0	21	21	52	61.90%	0
Wayne	180046	34-2752	Rosewood Dialysis^^	Goldsboro	10	0	0	0	10	10	15	37.50%	0
Wilkes	956103	34-2724	Wilkes Dialysis Center of Wake Forest University	North Wilkesboro	24	0	0	0	24	24	76	79.17%	11
Wilson	020166	34-2637	Forest Hills Dialysis	Wilson	35	5	-5	0	35	35	86	61.43%	0
Wilson	170521	34-2753	Kenly Dialysis^^	Kenly	10	0	0	0	10	10	20	50.00%	0
Wilson	160066	34-2725	Sharpsburg Dialysis^^	Sharpsburg	10	0	0	0	10	10	9	22.50%	0
Wilson	971340	34-2507	Wilson Dialysis	Wilson	44	0	-5	0	39	44	119	67.61%	0
Yadkin	060383	34-2665	Yadkin Dialysis Center of Wake Forest University	Yadkinville	13	0	0	0	13	13	40	76.92%	2
Yancey			(Mitchell-Avery-Yancey Planning Area)										

Table 9A: Inventory of Dialysis Stations and Calculation of Utilization Rates**

A	B	C	D	E	F	G	H	I	J	K	L	M	N
County	Facility Identification Number	Provider Number	Facility	City	Certified	CON Issued/ Not Certified	Decision Rendered (Conditional Approval)	Decision Pending	Total	Certified Stations 12/31/2021	Number* In-Center Patients 12/31/2021	Utilization by Percent 12/31/2021	Facility Station Need Determination
Totals					5,954	200	36	42	6,232	5,877	16,685		400

* Number In-Center Patients 12/31/2021 includes both in-state and out-of-state patients.

** Policy ESRD-3 (Development or Expansion of a Kidney Disease Treatment Center on a Hospital Campus) was added as a new policy in the 2021 SMFP. Certified outpatient dialysis stations that existed in hospitals as of the date of implementation of this policy were removed from the inventory and methodologies; these facilities are treated as though the stations were developed pursuant to this policy. The following facilities were removed from the inventory: North Carolina Baptist Hospital (34-2304) in Forsyth County and Carolinas Medical Center (34-2306) in Mecklenburg County.

^ Designated as a new facility.

^^ Designated as a small facility.

Table 9B: ESRD Dialysis Station Need Determinations by Planning Area

A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P
County/ Multi- County Planning Area	12.31.17 Total Patients	12.31.18 Total Patients	12.31.19 Total Patients	12.31.20 Total Patients	12.31.21 Total Patients	Average Annual Change Rate for Past Five Years	Projected 12.31.22 Total Patients	12.31.21 Home Patients	12.31.21 Percent Home Patients	Projected 12.31.22 Home Patients	Projected 12.31.22 In-Center Patients	Projected 12.31.22 In-Center Station Utilization	Projected Total Available Stations	Projected Station Deficit or Surplus	County Station Need Determi- nation
Alamance	342	346	358	354	344	0.002	344.6	51	14.8%	51.1	293.5	92	142	Surplus of 50	0
Alexander	53	47	51	53	65	0.059	68.9	9	13.8%	9.5	59.3	19	13	6	0
Alleghany	6	10	7	10	9	0.174	10.6	2	22.2%	2.3	8.2	3	0	3	0
Anson	101	101	98	95	84	-0.044	80.3	10	11.9%	9.6	70.7	22	33	Surplus of 11	0
Ashe	21	26	23	18	25	0.074	26.8	7	28.0%	7.5	19.3	6	0	6	0
Beaufort	131	136	126	126	119	-0.023	116.3	29	24.4%	28.3	88.0	27	31	Surplus of 4	0
Bertie	70	72	79	85	81	0.039	84.1	9	11.1%	9.3	74.8	23	20	3	0
Bladen	114	116	113	104	95	-0.044	90.9	12	12.6%	11.5	79.4	25	38	Surplus of 13	0
Brunswick	148	156	158	154	166	0.030	171.0	33	19.9%	34.0	137.0	43	52	Surplus of 9	0
Buncombe	266	272	284	284	268	0.003	268.7	64	23.9%	64.2	204.5	64	86	Surplus of 22	0
Burke	128	127	144	150	147	0.037	152.4	30	20.4%	31.1	121.3	38	41	Surplus of 3	0
Cabarrus	248	238	252	269	278	0.030	286.3	54	19.4%	55.6	230.7	72	81	Surplus of 9	0
Caldwell	144	156	151	163	172	0.046	180.0	21	12.2%	22.0	158.0	49	50	Surplus of 1	0
Camden	10	11	11	7	5	-0.137	4.3	2	40.0%	1.7	2.6	1	0	1	0
Carteret	81	83	89	74	82	0.009	82.7	18	22.0%	18.2	64.6	20	32	Surplus of 12	0
Caswell	63	63	75	69	67	0.020	68.4	2	3.0%	2.0	66.3	21	17	4	0
Catawba	279	292	310	311	297	0.017	301.9	59	19.9%	60.0	242.0	76	94	Surplus of 18	0
Chatham	130	119	128	133	117	-0.023	114.4	8	6.8%	7.8	106.5	33	39	Surplus of 6	0
Cherokee	23	26	24	27	34	0.109	37.7	12	35.3%	13.3	24.4	8	13	Surplus of 5	
Clay	5	8	7	7	6	0.083	6.5	3	50.0%	3.2	3.2	1	0	1	
Graham	17	17	17	13	10	-0.117	8.8	5	50.0%	4.4	4.4	1	0	1	
Cherokee-Clay-Graham Planning Area Total														Surplus of 3	0
Chowan	46	50	48	55	51	0.030	52.5	13	25.5%	13.4	39.1	12	20	Surplus of 8	0
Cleveland	248	242	261	262	273	0.025	279.8	25	9.2%	25.6	254.2	79	77	2	0
Columbus	108	112	124	121	104	-0.005	103.5	10	9.6%	9.9	93.5	29	41	Surplus of 12	0
Craven	198	193	212	238	223	0.033	230.4	49	22.0%	50.6	179.8	56	65	Surplus of 9	0
Cumberland	707	734	794	832	772	0.024	790.5	105	13.6%	107.5	683.0	213	256	Surplus of 43	0
Currituck	10	13	15	15	13	0.080	14.0	1	7.7%	1.1	13.0	4	0	4	0

Table 9B: ESRD Dialysis Station Need Determinations by Planning Area

A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P
County/ Multi- County Planning Area	12.31.17 Total Patients	12.31.18 Total Patients	12.31.19 Total Patients	12.31.20 Total Patients	12.31.21 Total Patients	Average Annual Change Rate for Past Five Years	Projected 12.31.22 Total Patients	12.31.21 Home Patients	12.31.21 Percent Home Patients	Projected 12.31.22 Home Patients	Projected 12.31.22 In-Center Patients	Projected 12.31.22 In-Center Station Utilization	Projected Total Available Stations	Projected Station Deficit or Surplus	County Station Need Determi- nation
Dare	28	24	24	22	30	0.034	31.0	6	20.0%	6.2	24.8	8	9	Surplus of 1	0
Davidson	264	291	308	303	316	0.047	330.8	50	15.8%	52.3	278.5	87	104	Surplus of 17	0
Davie	55	62	70	73	65	0.047	68.1	10	15.4%	10.5	57.6	18	24	Surplus of 6	0
Duplin	143	153	155	143	152	0.017	154.6	15	9.9%	15.3	139.3	44	44	0	0
Durham	635	670	668	687	640	0.003	641.9	55	8.6%	55.2	586.8	183	245	Surplus of 62	0
Edgecombe	224	247	247	264	279	0.057	294.9	35	12.5%	37.0	257.9	81	99	Surplus of 18	0
Forsyth	672	720	747	776	802	0.045	838.3	102	12.7%	106.6	731.7	229	251	Surplus of 22	0
Franklin	136	142	136	155	153	0.032	157.9	18	11.8%	18.6	139.3	44	47	Surplus of 3	0
Gaston	358	383	392	383	395	0.025	405.0	57	14.4%	58.4	346.6	108	128	Surplus of 20	0
Gates	8	10	17	15	12	0.158	13.9	1	8.3%	1.2	12.7	4	0	4	0
Granville	155	151	156	166	149	-0.008	147.8	10	6.7%	9.9	137.9	43	50	Surplus of 7	0
Greene	43	50	50	64	59	0.091	64.4	10	16.9%	10.9	53.5	17	21	Surplus of 4	0
Guilford	1016	1094	1116	1130	1154	0.033	1,191.7	120	10.4%	123.9	1,067.8	334	389	Surplus of 55	0
Halifax	242	237	253	259	242	0.001	242.3	34	14.0%	34.0	208.3	65	69	Surplus of 4	0
Harnett	238	266	259	271	247	0.012	250.0	30	12.1%	30.4	219.7	69	79	Surplus of 10	0
Haywood	65	76	68	71	70	0.024	71.6	21	30.0%	21.5	50.2	16	27	Surplus of 11	0
Henderson	130	112	118	128	117	-0.022	114.5	29	24.8%	28.4	86.1	27	33	Surplus of 6	0
Hertford	88	93	88	89	74	-0.039	71.1	8	10.8%	7.7	63.5	20	40	Surplus of 20	0
Hoke	134	163	164	176	165	0.058	174.6	23	13.9%	24.3	150.3	47	71	Surplus of 24	0
Hyde	7	7	9	8	7	0.012	7.1	5	71.4%	5.1	2.0	1	0	1	0
Iredell	232	238	253	250	248	0.017	252.3	51	20.6%	51.9	200.4	63	82	Surplus of 19	0
Jackson	36	32	45	49	36	0.030	37.1	9	25.0%	9.3	27.8	9	16	Surplus of 7	0
Johnston	315	348	379	420	412	0.071	441.1	82	19.9%	87.8	353.3	110	127	Surplus of 17	0
Jones	39	42	36	38	38	-0.003	37.9	8	21.1%	8.0	29.9	9	10	Surplus of 1	0
Lee	160	151	157	152	156	-0.006	155.1	21	13.5%	20.9	134.3	42	59	Surplus of 17	0
Lenoir	210	230	241	224	219	0.013	221.7	34	15.5%	34.4	187.3	59	69	Surplus of 10	0
Lincoln	78	94	104	97	99	0.066	105.6	16	16.2%	17.1	88.5	28	30	Surplus of 2	0
Macon	35	36	35	36	35	0.000	35.0	7	20.0%	7.0	28.0	9	12	Surplus of 3	0

Table 9B: ESRD Dialysis Station Need Determinations by Planning Area

A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P
County/ Multi- County Planning Area	12.31.17 Total Patients	12.31.18 Total Patients	12.31.19 Total Patients	12.31.20 Total Patients	12.31.21 Total Patients	Average Annual Change Rate for Past Five Years	Projected 12.31.22 Total Patients	12.31.21 Home Patients	12.31.21 Percent Home Patients	Projected 12.31.22 Home Patients	Projected 12.31.22 In-Center Patients	Projected 12.31.22 In-Center Station Utilization	Projected Total Available Stations	Projected Station Deficit or Surplus	County Station Need Determi- nation
Madison	17	18	12	8	6	-0.214	4.7	2	33.3%	1.6	3.1	1	0	1	0
Martin	86	89	92	77	83	-0.004	82.7	7	8.4%	7.0	75.7	24	28	Surplus of 4	0
McDowell	63	70	71	60	55	-0.028	53.4	14	25.5%	13.6	39.8	12	20	Surplus of 8	0
Mecklenburg	1710	1792	1819	1878	1871	0.023	1,913.9	249	13.3%	254.7	1,659.2	518	589	Surplus of 71	0
Avery	6	7	4	9	8	0.219	9.8	3	37.5%	3.7	6.1	2	0	2	
Mitchell	15	15	19	19	18	0.054	19.0	3	16.7%	3.2	15.8	5	9	Surplus of 4	
Yancey	16	19	17	17	17	0.021	17.3	12	70.6%	12.2	5.1	2	0	2	
Mitchell-Avery-Yancey Planning Area Total														0	0
Montgomery	67	55	60	66	69	0.014	70.0	10	14.5%	10.1	59.8	19	20	Surplus of 1	0
Moore	170	172	155	162	161	-0.012	159.1	24	14.9%	23.7	135.4	42	57	Surplus of 15	0
Nash	288	273	293	303	303	0.014	307.2	35	11.6%	35.5	271.7	85	97	Surplus of 12	0
New Hanover	263	281	267	262	256	-0.006	254.5	41	16.0%	40.8	213.8	67	82	Surplus of 15	0
Northampton	93	103	98	94	98	0.015	99.5	13	13.3%	13.2	86.3	27	21	6	0
Onslow	211	245	234	229	224	0.018	228.1	33	14.7%	33.6	194.5	61	73	Surplus of 12	0
Orange	166	156	169	179	174	0.014	176.4	23	13.2%	23.3	153.1	48	41	7	0
Pamlico	24	25	21	23	23	-0.006	22.9	11	47.8%	10.9	11.9	4	0	4	0
Pasquotank	107	108	108	115	115	0.019	117.1	25	21.7%	25.5	91.7	29	44	Surplus of 15	0
Pender	105	91	99	102	100	-0.009	99.1	21	21.0%	20.8	78.3	24	31	Surplus of 7	0
Perquimans	34	25	37	36	34	0.033	35.1	9	26.5%	9.3	25.8	8	10	Surplus of 2	0
Person	92	98	93	93	98	0.017	99.7	4	4.1%	4.1	95.6	30	38	Surplus of 8	0
Pitt	427	432	443	459	457	0.017	464.9	85	18.6%	86.5	378.4	118	134	Surplus of 16	0
Polk	11	7	18	16	16	0.274	20.4	8	50.0%	10.2	10.2	3	0	3	0
Randolph	184	179	185	179	193	0.013	195.5	19	9.8%	19.2	176.3	55	55	0	0
Richmond	163	177	181	162	165	0.006	165.9	18	10.9%	18.1	147.8	46	58	Surplus of 12	0
Robeson	465	429	442	438	449	-0.008	445.5	63	14.0%	62.5	383.0	120	119	1	0
Rockingham	202	203	218	213	217	0.019	221.1	24	11.1%	24.4	196.6	61	70	Surplus of 9	0
Rowan	237	237	258	256	262	0.026	268.8	51	19.5%	52.3	216.5	68	84	Surplus of 16	0
Rutherford	107	115	114	106	113	0.015	114.7	23	20.4%	23.4	91.4	29	30	Surplus of 1	0

Table 9B: ESRD Dialysis Station Need Determinations by Planning Area

A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P
County/ Multi- County Planning Area	12.31.17 Total Patients	12.31.18 Total Patients	12.31.19 Total Patients	12.31.20 Total Patients	12.31.21 Total Patients	Average Annual Change Rate for Past Five Years	Projected 12.31.22 Total Patients	12.31.21 Home Patients	12.31.21 Percent Home Patients	Projected 12.31.22 Home Patients	Projected 12.31.22 In-Center Patients	Projected 12.31.22 In-Center Station Utilization	Projected Total Available Stations	Projected Station Deficit or Surplus	County Station Need Determi- nation
Sampson	174	168	192	190	198	0.035	204.9	19	9.6%	19.7	185.3	58	49	9	0
Scotland	93	106	116	100	114	0.059	120.7	14	12.3%	14.8	105.9	33	30	3	0
Stanly	81	84	87	92	93	0.035	96.3	15	16.1%	15.5	80.8	25	29	Surplus of 4	0
Stokes	64	77	67	68	70	0.029	72.1	6	8.6%	6.2	65.9	21	24	Surplus of 3	0
Surry	98	113	105	112	111	0.035	114.9	12	10.8%	12.4	102.5	32	51	Surplus of 19	0
Swain	61	66	52	51	59	0.002	59.1	16	27.1%	16.0	43.1	13	20	Surplus of 7	0
Transylvania	32	40	34	30	31	0.004	31.1	5	16.1%	5.0	26.1	8	14	Surplus of 6	0
Tyrrell	8	10	6	8	6	-0.017	5.9	1	16.7%	1.0	4.9	2	0	2	0
Union	277	274	282	284	280	0.003	280.8	42	15.0%	42.1	238.7	75	97	Surplus of 22	0
Vance	173	184	186	202	191	0.027	196.1	14	7.3%	14.4	181.7	57	64	Surplus of 7	0
Wake	1322	1388	1439	1434	1414	0.017	1,438.5	201	14.2%	204.5	1,234.0	386	459	Surplus of 73	0
Warren	60	73	76	83	72	0.054	75.9	5	6.9%	5.3	70.6	22	25	Surplus of 3	0
Washington	58	57	68	56	59	0.013	59.8	5	8.5%	5.1	54.7	17	16	1	0
Watauga	34	34	32	32	28	-0.046	26.7	4	14.3%	3.8	22.9	7	20	Surplus of 13	0
Wayne	309	326	315	313	304	-0.003	302.9	35	11.5%	34.9	268.1	84	117	Surplus of 33	0
Wilkes	78	100	92	81	93	0.058	98.4	11	11.8%	11.6	86.7	27	24	3	0
Wilson	298	285	316	314	261	-0.027	253.8	57	21.8%	55.4	198.4	62	94	Surplus of 32	0
Yadkin	46	38	42	58	55	0.065	58.6	8	14.5%	8.5	50.1	16	13	3	0
State Totals	18,038	18,732	19,288	19,547	19,302			2,810				5,259	6,232		0

Table 9C: Dialysis Station Need Determination
County Need Determination Methodology
(Proposed for Certificate of Need Review Commencing in 2023)

County Service Area	Dialysis Station Need Determination	Certificate of Need Application Deadline	Certificate of Need Beginning Review Date
It is determined that there is no need anywhere in the state and no reviews are scheduled.			

Table 9D: Dialysis Station Need Determination by Facility *

A	B	C	D	E
County	Facility Identification Number	Provider Number	Facility	Facility Station Need Determination
Alexander	090725	34-2687	Fresenius Medical Care of Alexander County	2
Brunswick	140237	34-2716	Leland Dialysis	7
Caldwell	170328	34-2509	BMA Lenoir	5
Catawba	010648	34-2635	FMC of Catawba Valley	10
Catawba	160340	34-2743	Fresenius Kidney Care Newton	14
Chatham	981038	34-2617	Carolina Dialysis Pittsboro	1
Cleveland	070223	34-2676	DCI South	3
Cleveland	001291	34-2611	Dialysis Clinic - Kings Mountain	5
Cleveland	955845	34-2529	Dialysis Clinic - Shelby	10
Cumberland	011019	34-2643	FMC Services of West Fayetteville	8
Davidson	020758	34-2639	Thomasville Dialysis Center of Wake Forest University	7
Duplin	060249	34-2659	Wallace Dialysis	1
Durham	990969	34-2615	FMC Dialysis Services of Briggs Avenue	5
Durham	080098	34-2680	Fresenius Medical Care South Durham Dialysis	1
Durham	090117	34-2683	Southpoint Dialysis	1
Edgecombe	970528	34-2603	BMA East Rocky Mount	14
Edgecombe	150155	34-2722	Fresenius Medical Clinic Tarboro	6
Forsyth	070671	34-2667	Miller Street Dialysis Center of Wake Forest University	19
Forsyth	000193	34-2612	Northside Dialysis Center of Wake Forest University	9
Forsyth	944758	34-2569	Salem Kidney Center of Wake Forest University	2
Gaston	160496	34-2745	Fresenius Kidney Care North Gaston	15
Gaston	050039	34-2652	Fresenius Medical Care Belmont	9
Gaston	955615	34-2513	Fresenius Medical Care Gastonia	5
Guilford	980838	34-2537	BMA of South Greensboro	6
Guilford	980472	34-2600	BMA of Southwest Greensboro	8
Guilford	150332	34-2720	Fresenius Medical Care High Point	8
Halifax	981041	34-2619	FMC Dialysis Services of Halifax	1
Harnett	110803	34-2701	FMC Anderson Creek	3
Harnett	050131	34-2648	Fresenius Medical Care of Lillington	7
Hoke	945165	34-2579	Dialysis Care of Hoke County	6
Iredell	944568	34-2527	Statesville Dialysis Center of Wake Forest University	5
Johnston	170323	34-2757	Fresenius Kidney Care East Johnston	12
Johnston	944566	34-2572	Johnston Dialysis Center	1
Lee	110959	34-2697	Carolina Dialysis Lee County	3
Martin	170330	34-2746	Robersonville Dialysis	1
Mecklenburg	970826	34-2594	BMA Nations Ford	8
Mecklenburg	955792	34-2554	BMA West Charlotte	4
Mecklenburg	001554	34-2627	Charlotte East Dialysis	4
Mecklenburg	080137	34-2681	FMC Matthews	9
Mecklenburg	955788	34-2549	FMC of North Charlotte	13
Mecklenburg	150024	34-2719	Fresenius Kidney Care Regal Oaks	3
Mecklenburg	160337	34-2750	Fresenius Kidney Care Southeast Mecklenburg	2
Mecklenburg	120485	34-2713	Fresenius Medical Care Southwest Charlotte	3

Table 9D: Dialysis Station Need Determination by Facility *

A	B	C	D	E
County	Facility Identification Number	Provider Number	Facility	Facility Station Need Determination
Moore	020648	34-2638	Southern Pines Dialysis Center	2
Nash	020870	34-2644	FMC of Spring Hope	6
Nash	130370	34-2710	Fresenius Medical Care South Rocky Mount	4
Nash	944658	34-2517	Rocky Mount Kidney Center	5
New Hanover	080819	34-2685	Cape Fear Dialysis	4
Pitt	960406	34-2596	FMC Dialysis Services East Carolina	11
Pitt	140329	34-2706	FMC Farmville	4
Randolph	140089	34-2714	North Randolph Dialysis Center of Wake Forest University	7
Richmond	090624	34-2690	Sandhills Dialysis	1
Robeson	980754	34-2607	BMA of Red Springs	3
Robeson	991061	34-2623	FMC Dialysis Services of Robeson County	5
Robeson	140334	34-2651	Maxton Dialysis Center	3
Rockingham	001548	34-2641	Rockingham Kidney Center	1
Rowan	944673	34-2546	Dialysis Care of Rowan County	3
Rutherford	955824	34-2566	Dialysis Care of Rutherford County	5
Sampson	080822	34-2688	Fresenius Medical Care of Roseboro	7
Scotland	924648	34-2540	BMA of Laurinburg	2
Union	160339	34-2737	Fresenius Kidney Care Indian Trail	6
Wake	980755	34-2608	BMA of Fuquay Varina Kidney Center	7
Wake	160069	34-2733	FMC Morrisville	6
Wake	020868	34-2646	FMC New Hope Dialysis	8
Wake	130278	34-2705	FMC Northern Wake	1
Wake	956094	34-2522	FMC Wake Dialysis Clinic	5
Wake	041024	34-2653	Fresenius Medical Care Millbrook	3
Wake	160405	34-2735	Fresenius Medical Care White Oak	1
Wake	990968	34-2642	Southwest Wake County Dialysis	4
Wayne	944654	34-2531	Goldsboro Dialysis	7
Wilkes	956103	34-2724	Wilkes Dialysis Center of Wake Forest University	11
Yadkin	060383	34-2665	Yadkin Dialysis Center of Wake Forest University	2
Totals			72 Facilities	400

* CON applications for additional stations are Category D.1. Refer to Table 3A for the D.1 review cycles. CON application deadlines are absolute, pursuant to 10A NCAC 14C.0203(b). The filing deadline is 5:00 p.m. on the CON application deadline date.

Table 9E: Inventory of Dialysis Home Training Facilities

A	B	C	D	E	F	G	H	I
County	Facility Identification Number	Provider Number	Facility	City	CON* Total	Certified Home Training Stations	Home Hemodialysis Patients 12/31/2021	Peritoneal Patients 12/31/2021
Buncombe	120484	34-2695	Biltmore Home Training**	Asheville	0	0	0	90
Catawba	110873	34-2699	FMC Hickory Home Program	Hickory	0	5	10	32
Chowan	200027	Proposed New Site	Chowan Home Dialysis**	Edenton	0	0	0	0
Edgecombe	150397	34-2721	Edgecombe Home Dialysis	Tarboro	0	1	2	30
Forsyth	200885	Proposed New Site	Highland Oaks Dialysis Center of Wake Forest University**	Winston-Salem	0	0	0	0
Iredell	070519	34-2657	INS Statesville**	Statesville	0	0	0	18
Mecklenburg	070257	34-2654	INS Freedom Dialysis	Charlotte	0	5	13	36
Mecklenburg	070499	Proposed New Site	INS Victory Home (replacement facility for INS Charlotte)	Charlotte	7	0	0	0
Mecklenburg	070499	34-2655	INS Charlotte (to be replaced with INS Victory Home)	Charlotte	-2	2	32	58
Moore	180570	34-2754	Pinehurst Home Training**	Pinehurst	0	0	0	47
New Hanover	220065	Proposed New Site	Ogden Park Home Training	Wilmington	2	0	0	0
Orange	200890	Proposed New Site	Carolina Dialysis Orange County Home Dialysis	Hillsborough	2	0	0	0
Sampson	130060	34-2712	Sampson County Home Training**	Clinton	0	0	0	6
Wayne	200899	Proposed New Site	Wayne County Home Training**	Goldsboro	0	0	0	0
Wilson	200032	Proposed New Site	Wilson Home Dialysis**	Wilson	0	0	0	0
Totals			14 Facilities		9	13	57	317

* Includes CON issued/not certified, CON decision rendered (conditional approval), and CON decision pending.

** This facility shows no stations because it currently serves or will serve peritoneal patients only.

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Chapter 10:

Nursing Home Facilities

CHAPTER 10

NURSING HOME FACILITIES

Introduction

G.S. 131E-176(17b) defines a *nursing home facility* as “a health service facility whose bed complement of health service facility beds is composed principally of nursing home facility beds.”

Definitions

A nursing home facility’s service area is the county in which the bed is located. Each of the 100 counties in the state is a separate service area.

The *reporting year* is October 1 through September 30. The current reporting year is October 1, 2020 through September 30, 2021.

The methodology projects bed needs determination five years beyond the current reporting year. The *current projection year* is 2026.

The *planning inventory* is the number of beds used in need determination calculations. It is the number of licensed beds plus any new beds approved by certificate of need that are under development, minus any exclusions (see below) and beds to be relocated out of the county.

Changes from the Previous Plan

This chapter contains no substantive changes from the previous State Medical Facilities Plan (SMFP).

Basic Principles

1. The methodology should project need determination five years beyond the current reporting year because that is the least amount of time required to bring a new or expanded facility into service.
2. Any advantages to patients that may arise from competition will be fostered by policies which lead to the establishment of new provider institutions. Consequently, whenever feasible, need determinations should be for at least 90 beds. However, such allocations do not always result in new entities.
3. Counties whose deficits represent at least 10% of their total needs (deficit index) and who report an occupancy rate of licensed beds in the county of at least 90%, excluding continuing care retirement communities, should receive need determinations even though such increments may be too small to encourage establishment of new facilities.
4. A goal of the planning process is a reasonable level of parity among people in their geographic access to nursing home facilities.

Data Sources

The North Carolina Office of State Budget and Management provides estimates of North Carolina residents for the current reporting year and projection year by county.

Estimates of active duty military personnel come from the category of “Employment Status – Armed Forces” from the most recent American Community Survey 5-Year Estimates.

Utilization data comes from the current and four immediately previous reporting years' License Renewal Applications to Operate a Nursing Home and the Nursing Care Facility/Unit Beds: Annual Data Supplement to Hospital License Applications, as submitted to the North Carolina Department of Health and Human Services, Division of Health Service Regulation.

Assumptions of the Methodology

1. Planning inventory and need determination calculations exclude all beds and days of care for:
 - a. nursing home beds converted to care for head injury or ventilator-dependent patients;
 - b. nursing home beds developed pursuant to Policy NH-2; and
 - c. nursing home beds transferred from state psychiatric hospitals to the community pursuant to Policy NH-5.
2. The inventory excludes beds; and the occupancy rate calculation excludes days of care for patients from the contiguous counties served by facilities operated by religious or fraternal organizations.
3. The methodology excludes the estimated active duty military population from the county's population for any county with more than 500 active duty military personnel.
4. The methodology uses the county bed use rate as the utilization measure in determining needs. Bed use rates are calculated per 1,000 population per county. Each county bed rate is calculated using a 5-year average annual change to project forward five years beyond the current reporting year. For any county with an average annual change rate that is at least one-half of one standard deviation above or below the statewide average annual change rate, the bed use rate calculations substitute the statewide rate.
5. The projected utilization is multiplied by three to account for future increases in utilization.
6. The methodology uses the higher of two different occupancy rate calculations to obtain the need determination with the greatest advantage. The adjusted occupancy rate for each county is calculated using the higher of: (1) the median of all facilities' occupancy rates in a county; or (2) a countywide occupancy. The calculations remove the equivalent days of care for the initial occupancy from calculations for beds that have been excluded from the inventory.

Application of the Methodology

Table 10A shows the inventory data and Table 10B shows the patient, population and bed use data that form the basis for the calculations discussed in the following steps. Table 10C shows projected bed utilization, bed surpluses/deficits and occupancy rates that are used to determine bed needs.

Step 1: Calculate the planning inventory for each facility and county (*Table 10A*).

- a. Add the number of licensed beds in each nursing home (*Column C*) and hospital (*Column D*).
- b. Adjust this result by adding or subtracting, as appropriate, CON-approved beds and beds to be relocated (*Columns F-H*). Then adjust this result by the number of beds available from need determinations in the SMFP but for which CONs have not yet been issued (*Column I*).
- c. Subtract: (1) beds that have been converted to care for head injury or ventilator-dependent patients; (2) beds that have been developed pursuant to Policy NH-2; beds that have been relocated from

state psychiatric hospitals to the community pursuant to Policy NH-5; and the calculated number of beds operated by religious or fraternal organizations that have been used to serve patients from non-contiguous counties for that facility (*Column K*).

- d. Sum each of these calculations across all facilities in a county to obtain county totals (*Column K*).

Step 2: Calculate the projected county bed use rates (*Table 10B*).

- a. For each of the five most recent reporting years and for each county, divide the number of patients (*Column B*) by the population (*Column C*).
- b. Multiply the result by 1,000 to calculate the bed use rate per 1,000 population (*Column D*).
- c. Calculate the average annual change rate (AACR) in bed use for the five most recent reporting years for each county (*Column E*).
- d. If the result of Step 2.c is at least 0.5 standard deviations above or below the statewide AACR, then enter the statewide AACR; otherwise, enter the result of Step 2.c into Column F, the Selected Change Rate.
- e. Multiply the result of Step 2.d by the bed use rate for the reporting year (*Column D*, last sub-column) and then multiply by 3; add the product to the bed use rate for the reporting year to get the Bed Rate per 1,000 (*Column G*).

Step 3: Multiply the Bed Rate per 1,000 (*Table 10B, Column G and Table 10C, Column B*) by each county's corresponding projected civilian population in thousands for the projection year (*Table 10C, Column C*) to calculate the projected bed utilization (*Table 10C, Column D*).

Step 4: Divide the projected bed utilization for each county (*Table 10C, Column D*) by a 95% vacancy factor and enter the result in Column E of Table 10C.

Step 5: Calculate the county's bed surplus or deficit (*Table 10C*).

- a. Obtain the planning inventory for each county (*Column H*). Transfer the county totals from Columns J-L in Table 10A into Columns F-H of Table 10C, respectively.
- b. Subtract the projected bed utilization with vacancy factor (*Column E*) from the total inventory (*Column H*) to obtain the county's projected surplus or deficit of beds (*Column I*). Positive numbers are surpluses and negative numbers are deficits.

Step 6: Calculate the deficit index and occupancy rate (*Table 10C*).

- a. For all counties with a deficit, divide Column I by Column E to calculate the deficit index (*Column J*). The resulting deficit index is rounded for display purposes; internal calculations are not rounded.
- b. For all counties, calculate the occupancy rate by dividing the total days of care for all facilities in the county by the possible days of care (the number of beds in the planning inventory times 365.25). In the same manner, calculate the occupancy rate for each facility in the county. Then calculate the median facility occupancy rate for the county. Select the higher of the two occupancy rates and enter it into Column K.

Step 7: Calculate need determination for each county (*Table 10C*).

- a. For a county with a deficit of 71 to 90 beds, if the adjusted occupancy of licensed beds in the county is 90% or greater based on utilization data reported for the current reporting year (*Column K*), the need determination is 90 beds (*Column L*).
- b. For a county with a deficit of 91 or more beds, if the adjusted occupancy of licensed beds in the county is 90% or greater based on utilization data reported for the current reporting year (*Column K*), the need determination is the amount of the deficit rounded to 10. The maximum need determination for each county is 150 beds (*Column L*).
- c. If any other county's deficit index (*Column J*) is 10% or more of its projected utilization and the adjusted occupancy of licensed beds in the county is 90% or greater for the current reporting year (*Column K*), the need determination is the amount of the deficit rounded to 10. The maximum need determination for each county is 150 beds.
- d. For purposes of rounding need determinations, numbers greater than 10 and ending in one to four round to the next lower number divisible by 10. Numbers ending in five to nine round to the next higher number divisible by 10.

Unless otherwise specified by the methodology, calculations do not use rounded values. However, fractional values are rounded automatically when displayed.

Table 10A: Inventory of Nursing Home and Hospital Nursing Care Beds

A	B	C	D	E	F	G	H	I	J	K	L
County	Facility Name	Licensed Beds in Nursing Homes	Licensed Beds in Hospitals	Total Licensed Beds	CON Approved/License Pending			Available in SMFP	Total Available Beds	Sum of Exclusions	Total Planning Inventory
					Nursing Home	Hospital	CON Bed Transfer				
Alamance	Alamance Health Care Center	180	0	180	0	0	0	0	180	0	180
Alamance	Compass Healthcare and Rehab Hawfields, Inc.	117	0	117	0	0	0	0	117	4	113
Alamance	Edgewood Place at the Village at Brookwood	51	0	51	0	0	0	0	51	24	27
Alamance	Liberty Commons Nursing & Rehabilitation Center of Alamance County (Transfer 8 beds to Liberty Commons in Durham County. Transfer 11 beds to Pisgah Manor in Buncombe County.)	122	0	122	0	0	-19	0	103	0	103
Alamance	Peak Resources - Alamance	142	0	142	0	0	0	0	142	0	142
Alamance	Twin Lakes Community	104	0	104	0	0	0	0	104	35	69
Alamance	Twin Lakes Community Memory Care**	8	0	8	0	0	0	0	8	0	8
Alamance	White Oak Manor-Burlington	160	0	160	0	0	0	0	160	0	160
Alamance Totals		884	0	884	0	0	-19	0	865	63	802
Alexander	Valley Nursing Center	183	0	183	0	0	0	0	183	49	134
Alexander Totals		183	0	183	0	0	0	0	183	49	134
Alleghany	Alleghany Center	90	0	90	0	0	0	0	90	0	90
Alleghany Totals		90	0	90	0	0	0	0	90	0	90
Anson	Anson Health and Rehabilitation	95	0	95	0	0	0	0	95	0	95
Anson	Wadesboro Health & Rehab Center	66	0	66	0	0	0	0	66	0	66
Anson Totals		161	0	161	0	0	0	0	161	0	161
Ashe	Margate Health and Rehab Center	210	0	210	0	0	0	0	210	0	210
Ashe Totals		210	0	210	0	0	0	0	210	0	210
Avery	Charles A. Cannon, Jr. Memorial Hospital, Inc.**	0	10	10	0	0	0	0	10	0	10
Avery	Life Care Center of Banner Elk	118	0	118	0	0	0	0	118	0	118
Avery Totals		118	10	128	0	0	0	0	128	0	128
Beaufort	Ridgewood Living & Rehabilitation Center	128	0	128	0	0	0	0	128	0	128
Beaufort	River Trace Nursing and Rehabilitation Center	140	0	140	0	0	0	0	140	0	140
Beaufort Totals		268	0	268	0	0	0	0	268	0	268
Bertie	Brian Center Health & Rehabilitation/Windsor	82	0	82	0	0	0	0	82	0	82
Bertie	Three Rivers Health and Rehabilitation Center	60	0	60	0	0	0	0	60	0	60
Bertie Totals		142	0	142	0	0	0	0	142	0	142
Bladen	Bladen East Health and Rehab	90	0	90	0	0	0	0	90	0	90
Bladen	Cape Fear Valley-Bladen County Hospital**	0	10	10	0	0	0	0	10	0	10
Bladen	Elizabethtown Healthcare & Rehabilitation Center	94	0	94	0	0	0	0	94	0	94
Bladen Totals		184	10	194	0	0	0	0	194	0	194
Brunswick	Autumn Care of Shallotte	100	0	100	0	0	0	0	100	0	100
Brunswick	Brunswick Cove Nursing Center	175	0	175	0	0	0	0	175	0	175

Table 10A: Inventory of Nursing Home and Hospital Nursing Care Beds

A	B	C	D	E	F	G	H	I	J	K	L
County	Facility Name	Licensed Beds in Nursing Homes	Licensed Beds in Hospitals	Total Licensed Beds	CON Approved/License Pending			Available in SMFP	Total Available Beds	Sum of Exclusions	Total Planning Inventory
					Nursing Home	Hospital	CON Bed Transfer				
Brunswick	Brunswick Health & Rehab Center	100	0	100	0	0	0	0	100	0	100
Brunswick	Liberty Commons Nursing & Rehab Center of Southport LLC	99	0	99	0	0	0	0	99	0	99
Brunswick	Liberty Commons of Brunswick County (Transfer 64 from Southport Nursing Center)	0	0	0	0	0	64	0	64	0	64
Brunswick	Southport Nursing Center (Transfer 64 beds to Liberty Commons of Brunswick County)**	0	64	64	0	0	-64	0	0	0	0
Brunswick	Universal Health Care/Brunswick	90	0	90	0	0	0	0	90	0	90
Brunswick Totals		564	64	628	0	0	0	0	628	0	628
Buncombe	Accordius Health at Asheville	77	0	77	0	0	0	0	77	0	77
Buncombe	Aston Park Health Care Center Inc	120	0	120	0	0	0	0	120	0	120
Buncombe	Black Mountain Neuro-Medical Treatment Center*	156	0	156	0	0	0	0	156	156	0
Buncombe	Brian Center Health & Rehabilitation/Weaverville	122	0	122	0	0	0	0	122	0	122
Buncombe	Brooks-Howell Home	58	0	58	0	0	0	0	58	1	57
Buncombe	Carolina Pines at Asheville	120	0	120	0	0	0	0	120	0	120
Buncombe	Deerfield Episcopal Retirement Community	62	0	62	0	0	0	0	62	31	31
Buncombe	Emerald Ridge Rehabilitation and Care Center	100	0	100	0	0	0	0	100	0	100
Buncombe	Flesher's Fairview Health Care Center Inc	106	0	106	0	0	0	0	106	0	106
Buncombe	Givens Health Center	70	0	70	0	0	0	0	70	12	58
Buncombe	Givens Highland Farms	60	0	60	0	0	0	0	60	0	60
Buncombe	Mountain Ridge Health and Rehab	97	0	97	0	0	0	0	97	0	97
Buncombe	NC State Veterans Home-Black Mountain*	100	0	100	0	0	0	0	100	100	0
Buncombe	Pelican Health at Asheville	106	0	106	0	0	0	0	106	0	106
Buncombe	Pisgah Manor Health Care Center (Transfer 11 beds from Liberty Commons in Alamance County, 14 beds from Cross Creek in Hyde County, and 25 beds from Mary Gran Nursing in Sampson County.)	118	0	118	0	0	50	0	168	0	168
Buncombe	StoneCreek Health and Rehabilitation	120	0	120	0	0	0	0	120	0	120
Buncombe	The Laurels of GreenTree Ridge	98	0	98	0	0	0	0	98	0	98
Buncombe	The Laurels of Summit Ridge	71	0	71	0	0	0	0	71	0	71
Buncombe	The Oaks at Sweeten Creek	100	0	100	0	0	0	0	100	0	100
Buncombe	Western North Carolina Baptist Home	100	0	100	0	0	0	0	100	8	92
Buncombe Totals		1,961	0	1,961	0	0	50	0	2,011	308	1,703
Burke	Autumn Care of Drexel	100	0	100	0	0	0	0	100	0	100
Burke	Carolina Rehab Center of Burke	90	0	90	0	0	0	0	90	0	90
Burke	College Pines Health and Rehabilitation	100	0	100	0	0	0	0	100	0	100
Burke	Grace Heights Health and Rehabilitation	120	0	120	0	0	0	0	120	0	120
Burke	Grace Ridge	25	0	25	0	0	0	0	25	25	0

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County	Facility Name	Licensed Beds in Nursing Homes	Licensed Beds in Hospitals	Total Licensed Beds	CON Approved/License Pending			Available in SMFP	Total Available Beds	Sum of Exclusions	Total Planning Inventory
					Nursing Home	Hospital	CON Bed Transfer				
Burke	Magnolia Lane Nursing and Rehabilitation Center (Transfer 30 beds to Western Mecklenburg Health & Rehabilitation Center in Mecklenburg County)	121	0	121	0	0	-30	0	91	0	91
Burke Totals		556	0	556	0	0	-30	0	526	25	501
Cabarrus	2022 Need Determination	0	0	0	0	0	0	36	36	0	36
Cabarrus	Accordius Health at Concord	120	0	120	0	0	0	0	120	0	120
Cabarrus	Brian Center Health & Retirement/Cabarrus	90	0	90	0	0	0	0	90	0	90
Cabarrus	Five Oaks Rehabilitation and Care Center	160	0	160	0	0	0	0	160	0	160
Cabarrus	PruittHealth-Town Center	70	0	70	0	0	0	0	70	0	70
Cabarrus	The Gardens of Taylor Glen Retirement Community	24	0	24	0	0	0	0	24	24	0
Cabarrus	Transitional Health Services of Kannapolis	107	0	107	0	0	0	0	107	0	107
Cabarrus	Universal Health Care and Rehabilitation Center	120	0	120	0	0	0	0	120	0	120
Cabarrus Totals		691	0	691	0	0	0	36	727	24	703
Caldwell	Gateway Rehabilitation and Healthcare	100	0	100	0	0	0	0	100	0	100
Caldwell	Hickory Falls Health and Rehabilitation	120	0	120	0	0	0	0	120	0	120
Caldwell	Lenoir Healthcare Center	120	0	120	0	0	0	0	120	0	120
Caldwell	Shaire Nursing Center	60	0	60	0	0	0	0	60	0	60
Caldwell Totals		400	0	400	0	0	0	0	400	0	400
Carteret	Croatian Ridge Nursing and Rehabilitation Center	64	0	64	0	0	0	0	64	0	64
Carteret	Crystal Bluffs Rehabilitation and Health Care Center	92	0	92	0	0	0	0	92	0	92
Carteret	Harborview Health Care Center**	122	0	122	0	0	0	0	122	0	122
Carteret	PruittHealth - Sea Level (Replacement facility)	0	0	0	0	0	104	0	104	0	104
Carteret	PruittHealth-SeaLevel (Former facility)	104	0	104	0	0	-104	0	0	0	0
Carteret	Snug Harbor on Nelson Bay (former facility)**	42	0	42	0	0	-42	0	0	0	0
Carteret	The Embassy at Morehead City (Replacement facility)	0	0	0	0	0	42	0	42	0	42
Carteret Totals		424	0	424	0	0	0	0	424	0	424
Caswell	Brian Center Health & Rehabilitation/Yanceyville	157	0	157	0	0	0	0	157	0	157
Caswell Totals		157	0	157	0	0	0	0	157	0	157
Catawba	Abernethy Laurels	174	0	174	0	0	0	0	174	51	123
Catawba	Brian Center Health & Rehabilitation/Hickory East	150	0	150	0	0	0	0	150	0	150
Catawba	Brian Center Health and Rehabilitation Hickory/Viewmont	104	0	104	0	0	0	0	104	0	104
Catawba	Conover Nursing and Rehabilitation Center	90	0	90	0	0	0	0	90	0	90
Catawba	Frye Regional Medical Center**	0	17	17	0	0	0	0	17	0	17
Catawba	Trinity Ridge	120	0	120	0	0	0	0	120	3	117
Catawba	Trinity Village	104	0	104	0	0	0	0	104	0	104
Catawba Totals		742	17	759	0	0	0	0	759	54	705

Table 10A: Inventory of Nursing Home and Hospital Nursing Care Beds

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County	Facility Name	Licensed Beds in Nursing Homes	Licensed Beds in Hospitals	Total Licensed Beds	CON Approved/License Pending			Available in SMFP	Total Available Beds	Sum of Exclusions	Total Planning Inventory
					Nursing Home	Hospital	CON Bed Transfer				
Chatham	Carolina Meadows Health Center	90	0	90	0	0	0	0	90	90	0
Chatham	Chatham County Rehabilitation Center	0	0	0	105	0	0	0	105	0	105
Chatham	Siler City Center	150	0	150	0	0	0	0	150	0	150
Chatham	The Arbor	40	0	40	0	0	0	0	40	40	0
Chatham	The Laurels of Chatham	140	0	140	0	0	0	0	140	0	140
Chatham Totals		420	0	420	105	0	0	0	525	130	395
Cherokee	Murphy Rehabilitation & Nursing (Replacement facility)	0	0	0	0	0	134	0	134	0	134
Cherokee	Murphy Rehabilitation & Nursing (Transfer 134 to replacement facility)	134	0	134	0	0	-134	0	0	0	0
Cherokee	Valley View Care and Rehabilitation Center	76	0	76	0	0	0	0	76	0	76
Cherokee Totals		210	0	210	0	0	0	0	210	0	210
Chowan	Chowan River Nursing and Rehabilitation Center (Transfer 20 beds to Rowan County Health & Rehabilitation Center in Rowan County)	130	0	130	0	0	-20	0	110	0	110
Chowan Totals		130	0	130	0	0	-20	0	110	0	110
Clay	Clay County Care Center	90	0	90	0	0	0	0	90	0	90
Clay Totals		90	0	90	0	0	0	0	90	0	90
Cleveland	Cleveland Pines	120	0	120	0	0	0	0	120	0	120
Cleveland	Peak Resources-Shelby	100	0	100	0	0	0	0	100	0	100
Cleveland	White Oak Manor-Kings Mountain	154	0	154	0	0	0	0	154	0	154
Cleveland	White Oak Manor-Shelby	160	0	160	0	0	0	0	160	0	160
Cleveland Totals		534	0	534	0	0	0	0	534	0	534
Columbus	Liberty Commons Nursing and Rehab Ctr of Columbus Cty (Transfer 7 beds to Liberty Commons Nursing and Rehabilitation Center of Mint Hill in Mecklenburg County)	107	0	107	0	0	-7	0	100	0	100
Columbus	Premier Living and Rehab Center	127	0	127	0	0	0	0	127	0	127
Columbus	Shoreland Health Care and Retirement Center Inc (Transfer 9 beds to Liberty Commons Nursing and Rehabilitation Center of Mint Hill in Mecklenburg County)	99	0	99	0	0	-9	0	90	0	90
Columbus Totals		333	0	333	0	0	-16	0	317	0	317
Craven	Bayview Nursing & Rehabilitation Center	60	0	60	0	0	0	0	60	0	60
Craven	Cherry Point Bay Nursing and Rehabilitation Center**	70	0	70	0	0	0	0	70	0	70
Craven	PruittHealth-Neuse	110	0	110	0	0	0	0	110	0	110
Craven	PruittHealth-Trent	116	0	116	0	0	0	0	116	0	116
Craven	Riverpoint Crest Nursing and Rehabilitation Center	105	0	105	0	0	0	0	105	0	105
Craven Totals		461	0	461	0	0	0	0	461	0	461

Table 10A: Inventory of Nursing Home and Hospital Nursing Care Beds

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County	Facility Name	Licensed Beds in Nursing Homes	Licensed Beds in Hospitals	Total Licensed Beds	CON Approved/License Pending			Available in SMFP	Total Available Beds	Sum of Exclusions	Total Planning Inventory
					Nursing Home	Hospital	CON Bed Transfer				
Cumberland	Autumn Care of Fayetteville	90	0	90	0	0	0	0	90	0	90
Cumberland	Bethesda Health Care Facility	85	0	85	0	0	0	0	85	0	85
Cumberland	Carolina Rehab Center of Cumberland	136	0	136	0	0	0	0	136	0	136
Cumberland	Cumberland County Rehabilitation Center (Replacement facility)	0	0	0	0	0	58	0	58	0	58
Cumberland	Golden Years Nursing Home (Transfer 58 beds to Cumberland County Rehabilitation Center)	58	0	58	0	0	-58	0	0	0	0
Cumberland	Haymount Rehabilitation & Nursing Center Inc	98	0	98	0	0	0	0	98	0	98
Cumberland	Highland House Rehabilitation and Healthcare	106	0	106	0	0	0	0	106	0	106
Cumberland	NC State Veterans Home-Fayetteville*	150	0	150	0	0	0	0	150	150	0
Cumberland	The Carrolton of Fayetteville**	120	0	120	0	0	0	0	120	0	120
Cumberland	Village Green Health and Rehabilitation	170	0	170	0	0	0	0	170	0	170
Cumberland	Whispering Pines Nursing & Rehabilitation Center	86	0	86	0	0	0	0	86	0	86
Cumberland	Woodlands Nursing and Rehabilitation Center	80	0	80	0	0	0	0	80	0	80
Cumberland Totals		1,179	0	1,179	0	0	0	0	1,179	150	1,029
Currituck	Currituck Health & Rehab Center	100	0	100	0	0	0	0	100	0	100
Currituck Totals		100	0	100	0	0	0	0	100	0	100
Dare	Peak Resources-Outer Banks	126	0	126	0	0	0	0	126	0	126
Dare Totals		126	0	126	0	0	0	0	126	0	126
Davidson	Abbotts Creek Center	64	0	64	0	0	0	0	64	0	64
Davidson	Accordius Health at Lexington	106	0	106	0	0	0	0	106	0	106
Davidson	Alston Brook	100	0	100	0	0	0	0	100	0	100
Davidson	Lexington Health Care Center	90	0	90	0	0	0	0	90	0	90
Davidson	Mountain Vista Health Park	60	0	60	0	0	0	0	60	0	60
Davidson	Pelican Health Thomasville	120	0	120	0	0	0	0	120	0	120
Davidson	Piedmont Crossing	114	0	114	0	0	0	0	114	47	67
Davidson	Pine Ridge Health and Rehabilitation Center	140	0	140	0	0	0	0	140	0	140
Davidson Totals		794	0	794	0	0	0	0	794	47	747
Davie	Bermuda Commons Nursing and Rehabilitation Center (Transfer 2 beds to Liberty Commons of Mecklenburg Health and Rehabilitation Center in Mecklenburg County, and 20 beds to Liberty Commons Nursing and Rehabilitation Center of Mint Hill in Mecklenburg County)	117	0	117	0	0	-22	0	95	0	95
Davie	Bermuda Village Retirement Center	36	0	36	0	0	0	0	36	0	36
Davie	Davie Nursing and Rehabilitation Center	108	0	108	0	0	0	0	108	0	108
Davie Totals		261	0	261	0	0	-22	0	239	0	239
Duplin	Brian Center Health & Rehabilitation/Wallace	80	0	80	0	0	0	0	80	0	80

Table 10A: Inventory of Nursing Home and Hospital Nursing Care Beds

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					Nursing Home	Hospital	CON Bed Transfer				
Duplin	Kenansville Health & Rehabilitation	92	0	92	0	0	0	0	92	0	92
Duplin	Warsaw Nursing and Rehab Center	100	0	100	0	0	0	0	100	0	100
Duplin Totals		272	0	272	0	0	0	0	272	0	272
Durham	Accordius Health at Rose Manor LLC**	111	0	111	0	0	0	0	111	0	111
Durham	Brian Center Southpoint	140	0	140	0	0	0	0	140	0	140
Durham	Carver Living Center	232	0	232	0	0	0	0	232	0	232
Durham	Croasdaile Village	110	0	110	0	0	0	0	110	74	36
Durham	Durham Nursing & Rehabilitation Center	126	0	126	0	0	0	0	126	0	126
Durham	Hillcrest Convalescent Center Inc	120	0	120	0	0	0	0	120	0	120
Durham	Liberty Commons of Durham County (Transfer 49 beds from Liberty Commons Silas Creek in Forsyth County. Transfer 8 beds from Liberty Commons Alamance County in Alamance County.)	0	0	0	0	0	57	0	57	0	57
Durham	Pettigrew Rehabilitation Center	96	0	96	0	0	0	0	96	0	96
Durham	PruittHealth-Carolina Point (Portions of facility in Durham and Orange Counties)**	18	0	18	0	0	0	0	18	0	18
Durham	PruittHealth-Durham	125	0	125	0	0	0	0	125	0	125
Durham	The Cedars of Chapel Hill	74	0	74	0	0	0	0	74	74	0
Durham	The Forest at Duke	58	0	58	0	0	0	0	58	58	0
Durham	Treyburn Rehabilitation Center	132	0	132	0	0	0	0	132	0	132
Durham Totals		1,342	0	1,342	0	0	57	0	1,399	206	1,193
Edgecombe	Edgecombe Health Center by Harborview	159	0	159	0	0	0	0	159	0	159
Edgecombe	Prodigy Transitional Rehab	118	0	118	0	0	0	0	118	0	118
Edgecombe	The Fountains at The Albemarle	30	0	30	0	0	0	0	30	0	30
Edgecombe Totals		307	0	307	0	0	0	0	307	0	307
Forsyth	Accordius Health at Clemmons	94	0	94	0	0	0	0	94	0	94
Forsyth	Accordius Health at Winston Salem	66	0	66	0	0	0	0	66	0	66
Forsyth	Arbor Acres United Methodist Retirement Community	83	0	83	0	0	0	0	83	83	0
Forsyth	Brookridge Retirement Community	77	0	77	0	0	0	0	77	8	69
Forsyth	Homestead Hills	40	0	40	0	0	0	0	40	1	39
Forsyth	Liberty Commons Nsg and Rehab Center of Silas Creek (Replacement facility. Transfer 100 beds from Liberty Commons Nursing and Rehab of Springwood. Relocate 49 beds to Liberty Commons of Durham County in Durham County, 18 beds to Summerstone Health & Rehab Center, 33 beds to The Oaks.)	0	0	0	0	0	0	0	0	0	0
Forsyth	Liberty Commons Nursing and Rehab of Springwood (Transfer 100 beds to Liberty Commons Nursing and Rehab Center of Silas Creek in Forsyth County.)**	100	0	100	0	0	-100	0	0	0	0

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					Nursing Home	Hospital	CON Bed Transfer				
Forsyth	Oak Forest Health and Rehabilitation	170	0	170	0	0	0	0	170	18	152
Forsyth	Piney Grove Nursing and Rehabilitation Center	92	0	92	0	0	0	0	92	0	92
Forsyth	PruittHealth-High Point**	100	0	100	0	0	0	0	100	0	100
Forsyth	Salemtowne	100	0	100	0	0	0	0	100	100	0
Forsyth	Silas Creek Rehabilitation Center	90	0	90	0	0	0	0	90	0	90
Forsyth	Summerstone Health and Rehab Center (Transfer 18 beds from Liberty Commons of Silas Creek)	120	0	120	0	0	18	0	138	0	138
Forsyth	The Citadel at Winston Salem	230	0	230	0	0	0	0	230	0	230
Forsyth	The Oaks (Transfer 13 beds to Liberty Commons of Mecklenburg Health and Rehabilitation Center in Mecklenburg County. Transfer 33 beds from Liberty Commons of Silas Creek.)	131	0	131	0	0	20	0	151	0	151
Forsyth	Trinity Elms	100	0	100	0	0	0	0	100	4	96
Forsyth	Trinity Glen	117	0	117	0	0	0	0	117	2	115
Forsyth Totals		1,710	0	1,710	0	0	-62	0	1,648	216	1,432
Franklin	Franklin Oaks Nursing and Rehabilitation Center	166	0	166	0	0	0	0	166	0	166
Franklin	Louisburg Healthcare & Rehabilitation Center	92	0	92	0	0	0	0	92	0	92
Franklin Totals		258	0	258	0	0	0	0	258	0	258
Gaston	Accordius Health at Gastonia	118	0	118	0	0	0	0	118	0	118
Gaston	Alexandria Place	60	0	60	0	0	0	0	60	0	60
Gaston	Belaire Health Care Center	80	0	80	0	0	0	0	80	0	80
Gaston	Brian Center Health and Rehabilitation/Gastonia	162	0	162	0	0	0	0	162	0	162
Gaston	Carolina Care Health and Rehabilitation	107	0	107	0	0	0	0	107	0	107
Gaston	Courtland Terrace	77	0	77	0	0	0	0	77	0	77
Gaston	Covenant Village	38	0	38	0	0	0	0	38	38	0
Gaston	Peak Resources-Cherryville	70	0	70	0	0	0	0	70	0	70
Gaston	Peak Resources-Gastonia	104	0	104	0	0	0	0	104	0	104
Gaston	Stanley Total Living Center	106	0	106	12	0	0	0	118	12	106
Gaston	The Ivy at Gastonia LLC	50	0	50	0	0	0	0	50	0	50
Gaston Totals		972	0	972	12	0	0	0	984	50	934
Gates	Accordius Health and Rehabilitation	70	0	70	0	0	0	0	70	0	70
Gates Totals		70	0	70	0	0	0	0	70	0	70
Graham	Graham Healthcare and Rehabilitation Center	80	0	80	0	0	0	0	80	0	80
Graham Totals		80	0	80	0	0	0	0	80	0	80
Granville	Granville Health System	0	80	80	0	0	0	0	80	0	80
Granville	Universal Health Care/Oxford (Transfer 20 beds to Universal Health Care-Wake Forest in Wake County)	160	0	160	0	0	-20	0	140	0	140

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					Nursing Home	Hospital	CON Bed Transfer				
Granville Totals		160	80	240	0	0	-20	0	220	0	220
Greene	Greendale Forest Nursing and Rehabilitation Center	115	0	115	0	0	0	0	115	0	115
Greene Totals		115	0	115	0	0	0	0	115	0	115
Guilford	Accordius Health at Greensboro	105	0	105	0	0	0	0	105	0	105
Guilford	Adams Farm Living & Rehabilitation	120	0	120	0	0	0	0	120	0	120
Guilford	Ashton Health and Rehabilitation	134	0	134	0	0	0	0	134	0	134
Guilford	Blumenthal Nursing & Rehabilitation Center	134	0	134	0	0	0	0	134	48	86
Guilford	Camden Health and Rehabilitation	135	0	135	0	0	0	0	135	0	135
Guilford	Carolina Pines at Greensboro	126	0	126	0	0	0	0	126	0	126
Guilford	Clapps Nursing Center Inc	118	0	118	0	0	0	0	118	0	118
Guilford	Countryside	60	0	60	0	0	0	0	60	0	60
Guilford	Friends Homes at Guilford	69	0	69	0	0	0	0	69	10	59
Guilford	Friends Homes West	40	0	40	0	0	0	0	40	30	10
Guilford	Greenhaven Health and Rehabilitation Center	120	0	120	0	0	0	0	120	0	120
Guilford	Guilford Health Care Center	110	0	110	0	0	0	0	110	0	110
Guilford	Heartland Living & Rehab @ The Moses H Cone Mem Hosp	107	0	107	0	0	0	0	107	0	107
Guilford	Kindred Hospital - Greensboro	0	23	23	0	0	0	0	23	23	0
Guilford	Maple Grove Health and Rehabilitation Center	210	0	210	0	0	0	0	210	0	210
Guilford	Maryfield Nursing Home	125	0	125	0	0	0	0	125	26	99
Guilford	Meridian Center	199	0	199	0	0	0	0	199	0	199
Guilford	River Landing at Sandy Ridge	60	0	60	0	0	0	0	60	32	28
Guilford	The Shannon Gray Rehabilitation & Recovery Center	150	0	150	0	0	0	0	150	0	150
Guilford	Well-Spring	70	0	70	0	0	0	0	70	70	0
Guilford	Westchester Manor at Providence Place	129	0	129	0	0	0	0	129	0	129
Guilford	WhiteStone: A Masonic and Eastern Star Community	88	0	88	0	0	0	0	88	8	80
Guilford Totals		2,409	23	2,432	0	0	0	0	2,432	247	2,185
Halifax	Accordius Health at Scotland Manor	62	0	62	0	0	0	0	62	0	62
Halifax	Bryan Health and Rehab	60	0	60	0	0	0	0	60	0	60
Halifax	Enfield Oaks Nursing and Rehabilitation Center (Transfer 3 beds to Wilson Pines Nursing & Rehabilitation Center in Wilson County)**	63	0	63	0	0	-3	0	60	0	60
Halifax	Liberty Commons Nsg and Rehab Ctr of Halifax County	50	0	50	0	0	0	0	50	0	50
Halifax	Signature Healthcare of Roanoke Rapids	108	0	108	0	0	0	0	108	0	108
Halifax Totals		343	0	343	0	0	-3	0	340	0	340
Harnett	Emerald Health & Rehab Center	96	0	96	0	0	0	0	96	0	96
Harnett	Harnett Woods Nursing and Rehabilitation Center	100	0	100	0	0	0	0	100	0	100

Table 10A: Inventory of Nursing Home and Hospital Nursing Care Beds

A	B	C	D	E	F	G	H	I	J	K	L
County	Facility Name	Licensed Beds in Nursing Homes	Licensed Beds in Hospitals	Total Licensed Beds	CON Approved/License Pending			Available in SMFP	Total Available Beds	Sum of Exclusions	Total Planning Inventory
					Nursing Home	Hospital	CON Bed Transfer				
Harnett	The Carrolton of Dunn	100	0	100	0	0	0	0	100	0	100
Harnett	Universal Health Care/Lillington	129	0	129	0	0	0	0	129	0	129
Harnett Totals		425	0	425	0	0	0	0	425	0	425
Haywood	Autumn Care of Waynesville	90	0	90	0	0	0	0	90	0	90
Haywood	Haywood Nursing and Rehabilitation Center	90	0	90	0	0	0	0	90	0	90
Haywood	Maggie Valley Nursing and Rehab	114	0	114	0	0	0	0	114	0	114
Haywood	Silver Bluff LLC	131	0	131	0	0	0	0	131	0	131
Haywood	Smoky Mountain Health and Rehabilitation Center	50	0	50	0	0	0	0	50	0	50
Haywood Totals		475	0	475	0	0	0	0	475	0	475
Henderson	Accordius Health at Hendersonville LLC	134	0	134	0	0	0	0	134	0	134
Henderson	Blue Ridge Health and Rehabilitation Center	150	0	150	0	0	0	0	150	0	150
Henderson	Brian Center Health & Rehabilitation/Hendersonville	120	0	120	0	0	0	0	120	0	120
Henderson	Carolina Village Inc	58	0	58	0	0	0	0	58	0	58
Henderson	Hendersonville Health and Rehabilitation	130	0	130	0	0	0	0	130	0	130
Henderson	Life Care Center of Hendersonville	80	0	80	0	0	0	0	80	0	80
Henderson	The Laurels of Hendersonville	100	0	100	0	0	0	0	100	0	100
Henderson	The Lodge at Mills River	50	0	50	0	0	0	0	50	0	50
Henderson	Universal Health Care/Fletcher	90	0	90	0	0	0	0	90	0	90
Henderson Totals		912	0	912	0	0	0	0	912	0	912
Hertford	Accordius Health at Creekside Care	151	0	151	0	0	0	0	151	0	151
Hertford Totals		151	0	151	0	0	0	0	151	0	151
Hoke	Autumn Care of Raeford	132	0	132	0	0	0	0	132	0	132
Hoke Totals		132	0	132	0	0	0	0	132	0	132
Hyde	Cross Creek Health Care (Transfer 14 beds to Pisgah Manor in Buncombe County.)	50	0	50	0	0	-14	0	36	0	36
Hyde Totals		50	0	50	0	0	-14	0	36	0	36
Iredell	Accordius Health at Mooresville	131	0	131	0	0	0	0	131	0	131
Iredell	Accordius Health at Statesville**	147	0	147	0	0	0	0	147	0	147
Iredell	Autumn Care of Statesville	103	0	103	0	0	0	0	103	0	103
Iredell	Iredell Memorial Hospital, Incorporated	0	48	48	0	0	0	0	48	0	48
Iredell	Maple Leaf Health Care	94	0	94	0	0	0	0	94	0	94
Iredell	The Citadel Mooresville	130	0	130	0	0	0	0	130	0	130
Iredell Totals		605	48	653	0	0	0	0	653	0	653
Jackson	Skyland Care Center	94	0	94	0	0	0	0	94	0	94
Jackson	Vero Health & Rehab of Sylva	106	0	106	0	0	0	0	106	0	106
Jackson Totals		200	0	200	0	0	0	0	200	0	200

Table 10A: Inventory of Nursing Home and Hospital Nursing Care Beds

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County	Facility Name	Licensed Beds in Nursing Homes	Licensed Beds in Hospitals	Total Licensed Beds	CON Approved/License Pending			Available in SMFP	Total Available Beds	Sum of Exclusions	Total Planning Inventory
					Nursing Home	Hospital	CON Bed Transfer				
Johnston	Barbour Court Nursing and Rehabilitation Center	165	0	165	0	0	0	0	165	0	165
Johnston	Brian Center Health & Retirement/Clayton	90	0	90	0	0	0	0	90	0	90
Johnston	Liberty Commons Nsg and Rehab Ctr of Johnston Cty	100	0	100	0	0	0	0	100	0	100
Johnston	Smithfield Manor Nursing and Rehab	160	0	160	0	0	0	0	160	0	160
Johnston	Springbrook Nursing and Rehabilitation Center	100	0	100	0	0	0	0	100	0	100
Johnston Totals		615	0	615	0	0	0	0	615	0	615
Jones	Brook Stone Living Center	80	0	80	0	0	0	0	80	0	80
Jones Totals		80	0	80	0	0	0	0	80	0	80
Lee	Liberty Commons Nsg and Rehab Ctr of Lee County LLC	80	0	80	0	0	0	0	80	0	80
Lee	Sanford Health & Rehabilitation Co	131	0	131	0	0	0	0	131	0	131
Lee	Westfield Rehabilitation and Health Center	83	0	83	0	0	0	0	83	0	83
Lee Totals		294	0	294	0	0	0	0	294	0	294
Lenoir	Harmony Hall Nursing and Rehabilitation Center	175	0	175	0	0	0	0	175	0	175
Lenoir	NC State Veterans Home-Kinston*	100	0	100	0	0	0	0	100	100	0
Lenoir	Signature Healthcare of Kinston	106	0	106	0	0	0	0	106	0	106
Lenoir Totals		381	0	381	0	0	0	0	381	100	281
Lincoln	Brian Center Health & Retirement/Lincolnton	117	0	117	0	0	0	0	117	0	117
Lincoln	Cardinal Healthcare and Rehabilitation Center	63	0	63	0	0	0	0	63	0	63
Lincoln	Lincolnton Rehabilitation Center	120	0	120	0	0	0	0	120	0	120
Lincoln Totals		300	0	300	0	0	0	0	300	0	300
Macon	Eckerd Living Center	80	0	80	0	0	0	0	80	0	80
Macon	Macon Valley Nursing and Rehabilitation Center (Transfer 80 beds to Western Mecklenburg Health & Rehabilitation Center in Mecklenburg County)	200	0	200	0	0	-80	0	120	0	120
Macon Totals		280	0	280	0	0	-80	0	200	0	200
Madison	Elderberry Health Care	80	0	80	0	0	0	0	80	0	80
Madison	Madison Health and Rehabilitation	100	0	100	0	0	0	0	100	0	100
Madison Totals		180	0	180	0	0	0	0	180	0	180
Martin	The Carrolton of Williamston	154	0	154	0	0	0	0	154	0	154
Martin Totals		154	0	154	0	0	0	0	154	0	154
McDowell	Autumn Care of Marion	110	0	110	0	0	0	0	110	0	110
McDowell	Deer Park Health and Rehabilitation	140	0	140	0	0	0	0	140	0	140
McDowell Totals		250	0	250	0	0	0	0	250	0	250
Mecklenburg	Accordius Health at Charlotte	120	0	120	0	0	0	0	120	0	120
Mecklenburg	Accordius Health at Midwood	100	0	100	0	0	0	0	100	0	100
Mecklenburg	Asbury Health and Rehabilitation Center	120	0	120	0	0	0	0	120	32	88

Table 10A: Inventory of Nursing Home and Hospital Nursing Care Beds

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County	Facility Name	Licensed Beds in Nursing Homes	Licensed Beds in Hospitals	Total Licensed Beds	CON Approved/License Pending			Available in SMFP	Total Available Beds	Sum of Exclusions	Total Planning Inventory
					Nursing Home	Hospital	CON Bed Transfer				
Mecklenburg	Autumn Care of Cornelius	102	0	102	0	0	0	0	102	0	102
Mecklenburg	Briar Creek Health Center	22	0	22	0	0	0	0	22	0	22
Mecklenburg	Brookdale Carriage Club Providence	42	0	42	0	0	0	0	42	42	0
Mecklenburg	Carrington Place	166	0	166	0	0	0	0	166	0	166
Mecklenburg	Charlotte Health & Rehabilitation Center	90	0	90	0	0	0	0	90	0	90
Mecklenburg	Clear Creek Nursing & Rehabilitation Center	120	0	120	0	0	0	0	120	0	120
Mecklenburg	Hunter Woods Nursing and Rehabilitation Center	120	0	120	0	0	0	0	120	0	120
Mecklenburg	Huntersville Health & Rehabilitation Center	90	0	90	0	0	0	0	90	0	90
Mecklenburg	Huntersville Oaks	168	0	168	0	0	0	0	168	0	168
Mecklenburg	Liberty Commons Nursing and Rehabilitation Center of Mint Hill (Transfer 5 beds from Warren Hills in Warren County, 20 beds from Bermuda Commons in Davie County, 22 beds from Mary Gran in Sampson County, 7 beds from Liberty Commons of Columbus in Columbus County, 9 beds from Shoreland in Columbus County, and 10 beds from Parkview Health & Rehabilitation Center in Orange County. Transfer 9 beds from Royal Park and 8 beds from Pavilion Health at Brightmore.)**	10	0	10	0	0	90	0	100	0	100
Mecklenburg	Liberty Commons of Mecklenburg Health and Rehabilitation Center (Transfer 13 beds from The Oaks in Forsyth County, 20 beds from Warren Hills in Warren County, 2 beds from Bermuda Commons in Davie County, and 45 beds from Mary Gran in Sampson County**)***	20	0	20	0	0	80	0	100	0	100
Mecklenburg	Mecklenburg Health & Rehabilitation	100	0	100	0	0	0	0	100	0	100
Mecklenburg	Novant Health Presbyterian Medical Center**	0	16	16	0	0	0	0	16	0	16
Mecklenburg	Olde Knox Commons at The Villages of Mecklenburg	114	0	114	0	0	0	0	114	0	114
Mecklenburg	Pavilion Health Center at Brightmore (Transfer 12 beds to CCRC The Barclay of South Park. Relocate 8 beds to Liberty Commons of Mint Hill.)	120	0	120	0	0	-20	0	100	0	100
Mecklenburg	Peak Resources-Charlotte	142	0	142	0	0	0	0	142	0	142
Mecklenburg	Pelican Health at Charlotte	120	0	120	0	0	0	0	120	0	120
Mecklenburg	Pelican Health Randolph LLC	100	0	100	0	0	0	0	100	0	100
Mecklenburg	Pineville Rehabilitation and Living Center	106	0	106	0	0	0	0	106	0	106
Mecklenburg	Royal Park Rehabilitation & Health Center (Transfer 10 beds to CCRC The Barclay of South Park. Relocate 9 beds to Liberty Commons Mint Hill.)	169	0	169	0	0	-19	0	150	0	150
Mecklenburg	Sardis Oaks	124	0	124	0	0	0	0	124	0	124
Mecklenburg	Saturn Nursing and Rehabilitation Center	120	0	120	0	0	0	0	120	0	120
Mecklenburg	Sharon Towers	96	0	96	0	0	0	0	96	34	62

Table 10A: Inventory of Nursing Home and Hospital Nursing Care Beds

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County	Facility Name	Licensed Beds in Nursing Homes	Licensed Beds in Hospitals	Total Licensed Beds	CON Approved/License Pending			Available in SMFP	Total Available Beds	Sum of Exclusions	Total Planning Inventory
					Nursing Home	Hospital	CON Bed Transfer				
Mecklenburg	Southminster	60	0	60	0	0	0	0	60	60	0
Mecklenburg	The Barclay at SouthPark (Transfer 12 beds from Pavilion Health Center and 10 beds from Royal Park Rehabilitation & Health Center)	0	0	0	0	0	22	0	22	0	22
Mecklenburg	The Citadel at Myers Park, LLC	133	0	133	0	0	0	0	133	0	133
Mecklenburg	The Pines at Davidson	51	0	51	0	0	0	0	51	51	0
Mecklenburg	The Stewart Health Center	56	0	56	0	0	0	0	56	56	0
Mecklenburg	University Place Nursing and Rehabilitation Center	207	0	207	0	0	0	0	207	0	207
Mecklenburg	Western Mecklenburg Health & Rehabilitation Center (Transfer 80 beds from Macon Valley Nursing & Rehabilitation in Macon County, and 30 beds from Magnolia Lane Nursing & Rehabilitation Center in Burke County)	0	0	0	0	0	110	0	110	0	110
Mecklenburg	White Oak Manor-Charlotte	180	0	180	0	0	0	0	180	0	180
Mecklenburg	WillowBrooke Court SC Ctr at Matthews Glen	90	0	90	0	0	0	0	90	90	0
Mecklenburg	Wilora Lake Healthcare Center	70	0	70	0	0	0	0	70	0	70
Mecklenburg	Windsor Run, LLC	36	0	36	0	0	0	0	36	0	36
Mecklenburg Totals		3,484	16	3,500	0	0	263	0	3,763	365	3,398
Mitchell	Brian Center Health & Rehabilitation/Spruce Pine	127	0	127	0	0	0	0	127	0	127
Mitchell Totals		127	0	127	0	0	0	0	127	0	127
Montgomery	Autumn Care of Biscoe	141	0	141	0	0	0	0	141	0	141
Montgomery Totals		141	0	141	0	0	0	0	141	0	141
Moore	Accordius Health at Aberdeen	90	0	90	0	0	0	0	90	0	90
Moore	Inn at Quail Haven Village	60	0	60	0	0	0	0	60	25	35
Moore	Peak Resources-Pinelake	90	0	90	0	0	0	0	90	0	90
Moore	Penick Village	50	0	50	0	0	0	0	50	2	48
Moore	Pinehurst Healthcare & Rehabilitation Center	144	0	144	0	0	0	0	144	0	144
Moore	St Joseph of The Pines Health Center	176	0	176	0	0	0	0	176	0	176
Moore	The Greens at Pinehurst Rehabilitation & Living Center	120	0	120	0	0	0	0	120	0	120
Moore Totals		730	0	730	0	0	0	0	730	27	703
Nash	Autumn Care of Nash	60	0	60	0	0	0	0	60	0	60
Nash	Rocky Mount Rehabilitation Center	117	0	117	0	0	0	0	117	0	117
Nash	South Village (Relocate to replacement facility)	0	0	0	0	0	100	0	100	0	100
Nash	The Carrolton of Nash	141	0	141	0	0	0	0	141	0	141
Nash	The Lodge at Rocky Mount (Transfer 100 beds to replacement facility)	100	0	100	0	0	-100	0	0	0	0

Table 10A: Inventory of Nursing Home and Hospital Nursing Care Beds

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County	Facility Name	Licensed Beds in Nursing Homes	Licensed Beds in Hospitals	Total Licensed Beds	CON Approved/License Pending			Available in SMFP	Total Available Beds	Sum of Exclusions	Total Planning Inventory
					Nursing Home	Hospital	CON Bed Transfer				
Nash	Universal Health Care/Nashville (Transfer 9 beds to Universal Health Care-Wake Forest in Wake County)** ****	9	0	9	0	0	-9	0	0	0	0
Nash Totals		427	0	427	0	0	-9	0	418	0	418
New Hanover	Accordius Health at Wilmington	120	0	120	0	0	0	0	120	0	120
New Hanover	Autumn Care of Myrtle Grove	90	0	90	0	0	0	0	90	0	90
New Hanover	Azalea Health & Rehab Center	80	0	80	0	0	0	0	80	0	80
New Hanover	Bradley Creek Health Center	30	0	30	0	0	0	0	30	12	18
New Hanover	Cypress Pointe Rehabilitation Center	90	0	90	0	0	0	0	90	0	90
New Hanover	Davis Health and Wellness Center at Cambridge Village	20	0	20	0	0	0	0	20	0	20
New Hanover	Davis Health Care Center	179	0	179	0	0	0	0	179	0	179
New Hanover	Liberty Commons Rehabilitation Center	82	0	82	0	0	0	0	82	0	82
New Hanover	NorthChase Nursing and Rehabilitation Center	140	0	140	0	0	0	0	140	0	140
New Hanover	Peak Resources-Wilmington, Inc.	110	0	110	0	0	0	0	110	0	110
New Hanover	Trinity Grove	100	0	100	0	0	0	0	100	6	94
New Hanover Totals		1,041	0	1,041	0	0	0	0	1,041	18	1,023
Northampton	Northampton Nursing and Rehabilitation Center	80	0	80	0	0	0	0	80	0	80
Northampton	Rich Square Nursing & Rehabilitation Center	69	0	69	0	0	0	0	69	0	69
Northampton Totals		149	0	149	0	0	0	0	149	0	149
Onslow	Carolina Rivers Nursing and Rehabilitation Center	120	0	120	0	0	0	0	120	0	120
Onslow	Premier Nursing and Rehabilitation Center (Transfer 49 beds to Rowan County Health & Rehabilitation Center in Rowan County)	239	0	239	0	0	-49	0	190	0	190
Onslow Totals		359	0	359	0	0	-49	0	310	0	310
Orange	Carol Woods	30	0	30	0	0	0	0	30	30	0
Orange	Parkview Health and Rehabilitation Center	108	0	108	0	0	0	0	108	0	108
Orange	Peak Resources - Brookshire, Inc.	80	0	80	0	0	0	0	80	0	80
Orange	Pruitt Health-Carolina Point (Portions of facility in Durham and Orange County)	138	0	138	0	0	0	0	138	0	138
Orange	Signature HealthCARE of Chapel Hill	108	0	108	0	0	0	0	108	0	108
Orange Totals		464	0	464	0	0	0	0	464	30	434
Pamlico	Grantsbrook Nursing and Rehabilitation Center	96	0	96	0	0	0	0	96	0	96
Pamlico Totals		96	0	96	0	0	0	0	96	0	96
Pasquotank	Citadel Elizabeth City LLC	108	0	108	0	0	0	0	108	0	108
Pasquotank	Elizabeth City Health and Rehabilitation	170	0	170	0	0	0	0	170	19	151
Pasquotank Totals		278	0	278	0	0	0	0	278	19	259
Pender	Pender Memorial Hospital, Inc.	0	43	43	0	0	0	0	43	0	43

Table 10A: Inventory of Nursing Home and Hospital Nursing Care Beds

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County	Facility Name	Licensed Beds in Nursing Homes	Licensed Beds in Hospitals	Total Licensed Beds	CON Approved/License Pending			Available in SMFP	Total Available Beds	Sum of Exclusions	Total Planning Inventory
					Nursing Home	Hospital	CON Bed Transfer				
Pender	The Laurels of Pender	98	0	98	0	0	0	0	98	0	98
Pender	Woodbury Wellness Center Inc	112	0	112	0	0	0	0	112	0	112
Pender Totals		210	43	253	0	0	0	0	253	0	253
Perquimans	Brian Center Health and Rehabilitation/Hertford	78	0	78	0	0	0	0	78	0	78
Perquimans Totals		78	0	78	0	0	0	0	78	0	78
Person	Person Memorial Hospital	0	60	60	0	0	0	0	60	0	60
Person	Roxboro Healthcare & Rehabilitation Center	140	0	140	0	0	0	0	140	0	140
Person Totals		140	60	200	0	0	0	0	200	0	200
Pitt	Ayden Court Nursing and Rehabilitation Center	82	0	82	0	0	0	0	82	0	82
Pitt	Cypress Glen Retirement Community	30	0	30	0	0	0	0	30	30	0
Pitt	East Carolina Rehab and Wellness	130	0	130	0	0	0	0	130	0	130
Pitt	Macgregor Downs Health Center by Harborview	152	0	152	0	0	0	0	152	0	152
Pitt	PruittHealth-Farmville	56	0	56	0	0	0	0	56	0	56
Pitt	Universal Health Care/Greenville	120	0	120	0	0	0	0	120	0	120
Pitt Totals		570	0	570	0	0	0	0	570	30	540
Polk	Autumn Care of Saluda	99	0	99	0	0	0	0	99	0	99
Polk	White Oak Manor-Tryon	70	0	70	0	0	0	0	70	0	70
Polk	WillowBrooke Court SC Center at Tryon Estates**	52	0	52	0	0	0	0	52	52	0
Polk Totals		221	0	221	0	0	0	0	221	52	169
Randolph	Alpine Health and Rehabilitation of Asheboro	238	0	238	0	0	0	0	238	0	238
Randolph	Clapp's Convalescent Nursing Home Inc	96	0	96	0	0	0	0	96	0	96
Randolph	The Graybrier Nursing And Retirement Center	128	0	128	0	0	0	0	128	0	128
Randolph	Universal Health Care/Ramseur	90	0	90	0	0	0	0	90	0	90
Randolph	Westwood Health and Rehabilitation Center	68	0	68	0	0	0	0	68	0	68
Randolph	Woodland Hill Center**	100	0	100	0	0	0	0	100	0	100
Randolph Totals		720	0	720	0	0	0	0	720	0	720
Richmond	PruittHealth-Rockingham	120	0	120	0	0	0	0	120	0	120
Richmond	Richmond Pines Healthcare and Rehabilitation Center (Transfer 5 beds to Wilson Pines Nursing & Rehabilitation in Wilson County)	105	0	105	0	0	-5	0	100	0	100
Richmond Totals		225	0	225	0	0	-5	0	220	0	220
Robeson	GlenFlora	52	0	52	0	0	0	0	52	0	52
Robeson	Harborview Lumberton	122	0	122	0	0	0	0	122	0	122
Robeson	Pembroke Center	84	0	84	0	0	0	0	84	0	84
Robeson	Southeastern Regional Medical Center	0	115	115	0	0	0	0	115	0	115
Robeson	The Carrolton of Lumberton**	90	0	90	0	0	0	0	90	0	90

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					Nursing Home	Hospital	CON Bed Transfer				
Robeson	Wesley Pines Retirement Community	62	0	62	0	0	0	0	62	4	58
Robeson Totals		410	115	525	0	0	0	0	525	4	521
Rockingham	Brian Center Health and Rehabilitation/Eden	112	0	112	0	0	0	0	112	0	112
Rockingham	Jacob's Creek Nursing and Rehabilitation Center (Transfer 20 beds to Rowan County Health & Rehabilitation Center in Rowan County)	170	0	170	0	0	-20	0	150	0	150
Rockingham	Pelican Health Reidsville	110	0	110	0	0	0	0	110	0	110
Rockingham	Penn Nursing Center	82	0	82	0	0	0	0	82	0	82
Rockingham	UNC Rockingham Hospital	0	121	121	0	0	0	0	121	0	121
Rockingham Totals		474	121	595	0	0	-20	0	575	0	575
Rowan	Accordius Health at Salisbury	185	0	185	0	0	0	0	185	0	185
Rowan	Autumn Care of Salisbury	97	0	97	0	0	0	0	97	0	97
Rowan	Big Elm Retirement and Nursing Centers	50	0	50	0	0	0	0	50	0	50
Rowan	Brightmoor Nursing Center	58	0	58	0	0	0	0	58	0	58
Rowan	Compass Healthcare and Rehab Rowan, LLC	70	0	70	0	0	0	0	70	0	70
Rowan	Liberty Commons Nsg and Rehab Ctr of Rowan Cty	90	0	90	0	0	0	0	90	0	90
Rowan	NC State Veterans Home - Salisbury*	99	0	99	0	0	0	0	99	99	0
Rowan	Rowan County Health & Rehabilitation Center	0	0	0	0	0	0	0	0	0	0
Rowan	The Citadel Salisbury**	160	0	160	0	0	0	0	160	0	160
Rowan	The Laurels of Salisbury	60	0	60	0	0	0	0	60	0	60
Rowan	Trinity Oaks	115	0	115	0	0	0	0	115	62	53
Rowan Totals		984	0	984	0	0	0	0	984	161	823
Rutherford	Accordius Health at Rutherford LLC	80	0	80	0	0	0	0	80	0	80
Rutherford	Fair Haven Home	30	0	30	0	0	0	0	30	0	30
Rutherford	Fair Haven of Forest City	100	0	100	0	0	0	0	100	0	100
Rutherford	Oak Grove Healthcare Center	60	0	60	0	0	0	0	60	0	60
Rutherford	Willow Ridge Rehabilitation and Living Center	136	0	136	0	0	0	0	136	0	136
Rutherford Totals		406	0	406	0	0	0	0	406	0	406
Sampson	Mary Gran Nursing Center (Transfer 45 beds to Liberty Commons of Mecklenburg Health and Rehabilitation Center in Mecklenburg County and 22 beds to Liberty Commons Nursing and Rehabilitation Center of Mint Hill in Mecklenburg County. Transfer 25 beds to Pisgah Manor in Buncombe County.)	212	0	212	0	0	-92	0	120	0	120
Sampson	Sampson Regional Medical Center**	0	30	30	0	0	0	0	30	0	30
Sampson	Southwood Nursing and Retirement Center	100	0	100	0	0	0	0	100	0	100
Sampson Totals		312	30	342	0	0	-92	0	250	0	250
Scotland	Scotia Village	58	0	58	0	0	0	0	58	39	19

Table 10A: Inventory of Nursing Home and Hospital Nursing Care Beds

A	B	C	D	E	F	G	H	I	J	K	L
County	Facility Name	Licensed Beds in Nursing Homes	Licensed Beds in Hospitals	Total Licensed Beds	CON Approved/License Pending			Available in SMFP	Total Available Beds	Sum of Exclusions	Total Planning Inventory
					Nursing Home	Hospital	CON Bed Transfer				
Scotland	Scottish Pines Rehabilitation and Nursing Center	149	0	149	0	0	0	0	149	0	149
Scotland Totals		207	0	207	0	0	0	0	207	39	168
Stanly	Bethany Woods Nursing and Rehabilitation Center	180	0	180	0	0	0	0	180	0	180
Stanly	Forrest Oakes Healthcare Center	60	0	60	0	0	0	0	60	0	60
Stanly	Stanly Manor	90	0	90	0	0	0	0	90	0	90
Stanly	Trinity Place	76	0	76	0	0	0	0	76	2	74
Stanly Totals		406	0	406	0	0	0	0	406	2	404
Stokes	LifeBrite Community Hospital of Stokes	0	40	40	0	0	0	0	40	0	40
Stokes	Universal Health Care/King	96	0	96	0	0	0	0	96	0	96
Stokes	Village Care of King	96	0	96	0	0	0	0	96	0	96
Stokes	Walnut Cove Health and Rehabilitation Center	90	0	90	0	0	0	0	90	0	90
Stokes Totals		282	40	322	0	0	0	0	322	0	322
Surry	Central Continuing Care	120	0	120	0	0	0	0	120	0	120
Surry	Chatham Nursing & Rehabilitation	99	0	99	0	0	0	0	99	0	99
Surry	Northern Regional Hospital	0	33	33	0	0	0	0	33	0	33
Surry	PruittHealth-Elkin	100	0	100	0	0	0	0	100	0	100
Surry	Surry Community Health Center by Harborview	120	0	120	0	0	0	0	120	0	120
Surry Totals		439	33	472	0	0	0	0	472	0	472
Swain	Mountain View Manor Nursing Center	120	0	120	0	0	0	0	120	0	120
Swain Totals		120	0	120	0	0	0	0	120	0	120
Transylvania	Accordius Health at Brevard	147	0	147	0	0	0	0	147	0	147
Transylvania	The Oaks-Brevard	110	0	110	0	0	0	0	110	0	110
Transylvania	Transylvania Regional Hospital	0	10	10	0	0	0	0	10	0	10
Transylvania Totals		257	10	267	0	0	0	0	267	0	267
Union	Accordius Health at Monroe	60	0	60	0	0	0	0	60	0	60
Union	Autumn Care of Marshville	110	0	110	0	0	0	0	110	0	110
Union	Jesse Helms Nursing Center	0	70	70	0	0	0	0	70	0	70
Union	Lake Park Nursing and Rehabilitation Center	120	0	120	0	0	0	0	120	0	120
Union	Monroe Rehabilitation Center	147	0	147	0	0	0	0	147	0	147
Union	PruittHealth-Union Pointe	90	0	90	0	0	0	0	90	0	90
Union	White Oak of Waxhaw	100	0	100	0	0	0	0	100	0	100
Union Totals		627	70	697	0	0	0	0	697	0	697
Vance	Kerr Lake Nursing and Rehabilitation Center	92	0	92	0	0	0	0	92	0	92
Vance	Pelican Health Henderson LLC**	78	0	78	0	0	0	0	78	0	78
Vance	Senior Citizen's Home Inc.	60	0	60	0	0	0	0	60	0	60
Vance Totals		230	0	230	0	0	0	0	230	0	230

Table 10A: Inventory of Nursing Home and Hospital Nursing Care Beds

A	B	C	D	E	F	G	H	I	J	K	L
County	Facility Name	Licensed Beds in Nursing Homes	Licensed Beds in Hospitals	Total Licensed Beds	CON Approved/License Pending			Available in SMFP	Total Available Beds	Sum of Exclusions	Total Planning Inventory
					Nursing Home	Hospital	CON Bed Transfer				
Wake	BellaRose Nursing and Rehab	100	0	100	0	0	0	0	100	0	100
Wake	Brightmore Healthcare Center of Cary	0	0	0	28	0	0	0	28	3	25
Wake	Brittany Place	25	0	25	0	0	0	0	25	49	-24
Wake	Britthaven of Holly Springs (Transfer 90 beds from Tower Nursing and Rehabilitation Center)	0	0	0	0	0	90	0	90	0	90
Wake	Capital Nursing and Rehabilitation Center	125	0	125	0	0	0	0	125	0	125
Wake	Cary Health and Rehabilitation Center	120	0	120	0	0	0	0	120	0	120
Wake	Dan E & Mary Louise Stewart Health Center of Springmoor	173	0	173	0	0	0	0	173	173	0
Wake	Glenaire	71	0	71	0	0	0	0	71	51	20
Wake	Hillcrest Raleigh at Crabtree Valley	134	0	134	0	0	0	0	134	0	134
Wake	Hillside Nursing Center of Wake Forest	130	0	130	0	0	0	0	130	0	130
Wake	Litchford Falls Healthcare and Rehabilitation Center (Transfer 90 to Universal Health Care-Wake Forest.)	90	0	90	0	0	-90	0	0	0	0
Wake	PruittHealth-Raleigh***	150	0	150	0	0	18	0	168	0	168
Wake	Raleigh Rehabilitation Center	157	0	157	0	0	0	0	157	0	157
Wake	Rex Hospital	0	120	120	0	0	0	0	120	0	120
Wake	Sunnybrook Rehabilitation Center	95	0	95	0	0	0	0	95	0	95
Wake	Swift Creek Health Center	28	0	28	0	0	0	0	28	0	28
Wake	The Cardinal at North Hills	15	0	15	0	0	0	0	15	15	0
Wake	The Laurels of Forest Glenn	120	0	120	0	0	0	0	120	0	120
Wake	The Oaks at Whitaker Glen-Mayview**	139	0	139	0	0	0	0	139	0	139
Wake	The Rosewood Health Center	57	0	57	0	0	0	0	57	57	0
Wake	Tower Nursing and Rehabilitation Center (Transfer 90 to Britthaven of Holly Springs)	180	0	180	0	0	-90	0	90	0	90
Wake	UNC Rex Rehabilitation and Nursing Care Center of Apex	107	0	107	0	0	0	0	107	0	107
Wake	Universal Health Care/Fuquay-Varina	100	0	100	0	0	0	0	100	0	100
Wake	Universal Health Care/North Raleigh	132	0	132	0	0	0	0	132	0	132
Wake	Universal Health Care/Wake Forest (Transfer 90 beds from Litchford Falls, 9 beds from Universal Health Care/Nashville in Nash County, 20 beds from Universal Healthcare/Oxford in Granville County)	0	0	0	0	0	119	0	119	0	119
Wake	Wake County Health and Rehabilitation Center	0	0	0	95	0	0	0	95	0	95
Wake	WakeMed** ***	0	13	13	0	0	0	0	13	0	13
Wake	WakeMed Cary Hospital** ***	0	24	24	0	0	0	0	24	0	24
Wake	Wellington Rehabilitation and Healthcare	80	0	80	0	0	0	0	80	0	80
Wake	Windsor Point Continuing Care Retirement Community	45	0	45	0	0	0	0	45	45	0
Wake	Zebulon Rehabilitation Center	60	0	60	0	0	0	0	60	0	60

Table 10A: Inventory of Nursing Home and Hospital Nursing Care Beds

A	B	C	D	E	F	G	H	I	J	K	L
County	Facility Name	Licensed Beds in Nursing Homes	Licensed Beds in Hospitals	Total Licensed Beds	CON Approved/License Pending			Available in SMFP	Total Available Beds	Sum of Exclusions	Total Planning Inventory
					Nursing Home	Hospital	CON Bed Transfer				
Wake Totals		2,433	157	2,590	123	0	47	0	2,760	393	2,367
Warren	Warren Hills Nursing Center (Transfer 20 beds to Liberty Commons of Mecklenburg Health and Rehabilitation Center in Mecklenburg County and 5 beds to Liberty Commons Nursing and Rehabilitation Center of Mint Hill in Mecklenburg County)	140	0	140	0	0	-25	0	115	0	115
Warren Totals		140	0	140	0	0	-25	0	115	0	115
Washington	The Carrolton of Plymouth	114	0	114	0	0	0	0	114	0	114
Washington Totals		114	0	114	0	0	0	0	114	0	114
Watauga	Glenbridge Health and Rehabilitation Center	134	0	134	0	0	0	0	134	0	134
Watauga	The Foley Center at Chestnut Ridge	92	0	92	0	0	0	0	92	0	92
Watauga Totals		226	0	226	0	0	0	0	226	0	226
Wayne	Brian Center Health and Rehabilitation/Goldsboro	130	0	130	0	0	0	0	130	0	130
Wayne	Mount Olive Center	150	0	150	0	0	0	0	150	0	150
Wayne	O'Berry Center**	96	0	96	0	0	0	0	96	96	0
Wayne	Willow Creek Nursing and Rehabilitation Center	200	0	200	0	0	0	0	200	0	200
Wayne Totals		576	0	576	0	0	0	0	576	96	480
Wilkes	Accordius Health at Wilkesboro	120	0	120	0	0	0	0	120	0	120
Wilkes	Westwood Hills Nursing and Rehabilitation Center (Transfer 5 beds to Wilson Pines Nursing & Rehabilitation Center in Wilson County)	176	0	176	0	0	-5	0	171	0	171
Wilkes	Wilkes Medical Center	0	10	10	0	0	0	0	10	0	10
Wilkes	Wilkesboro Health and Rehabilitation, LLC	111	0	111	0	0	0	0	111	0	111
Wilkes Totals		407	10	417	0	0	-5	0	412	0	412
Wilson	Accordius Health at Wilson	110	0	110	0	0	0	0	110	0	110
Wilson	Brian Center Health & Rehabilitation/Wilson	99	0	99	0	0	0	0	99	0	99
Wilson	Longleaf Neuro-Medical Treatment Center**	231	0	231	0	0	0	0	231	231	0
Wilson	Wilson Pines Nursing and Rehabilitation Center (Transfer 5 beds from Richmond Pines Nursing & Rehabilitation Center in Richmond County, 5 beds from Westwood Hills Nursing & Rehabilitation Center in Wilkes County, and 3 beds from Enfield Oaks Nursing & Rehabilitation Center in Halifax County)	95	0	95	0	0	13	0	108	0	108
Wilson	Wilson Rehabilitation and Nursing Center**	90	0	90	0	0	0	0	90	0	90
Wilson Totals		625	0	625	0	0	13	0	638	231	407
Yadkin	Willowbrook Rehabilitation and Care Center	76	0	76	0	0	0	0	76	0	76
Yadkin	Yadkin Nursing Care Center	147	0	147	0	0	0	0	147	0	147
Yadkin Totals		223	0	223	0	0	0	0	223	0	223

Table 10A: Inventory of Nursing Home and Hospital Nursing Care Beds

A	B	C	D	E	F	G	H	I	J	K	L
County	Facility Name	Licensed Beds in Nursing Homes	Licensed Beds in Hospitals	Total Licensed Beds	CON Approved/License Pending			Available in SMFP	Total Available Beds	Sum of Exclusions	Total Planning Inventory
					Nursing Home	Hospital	CON Bed Transfer				
Yancey	Smoky Ridge Health and Rehabilitation	140	0	140	0	0	0	0	140	0	140
Yancey Totals		140	0	140	0	0	0	0	140	0	140
Grand Totals		45,393	957	46,350	240	0	-61	36	46,565	3,136	43,429

Note: Methodology Inventory Identifiers

* State or federal facility

** Facilities whose beds are licensed, but whose occupancy is reported as 0 due to renovation, replacement, and/or a decision not to delicense beds. These beds are counted in the planning inventory.

Note: Methodology Planning Inventory Exclusion Reminders

* State and federal facilities excluded from planning inventory

-- Head injury beds, ventilator beds, bed transfers from state psychiatric hospitals, and out-of-area placements in non-profit religious/fraternal facilities are excluded from the planning inventory.

- Continuing Care Retirement Communities (CCRCs) developed under policy NH-2 have 100% of their nursing home beds excluded from the planning inventory and occupancy calculation.

Note: Methodology Occupancy Reminders

* State and federal facilities are not counted in occupancy calculations.

** Facilities whose beds are licensed, but whose occupancy is reported as 0 due to renovation, replacement and/or a decision not to decertify beds, are counted in occupancy calculations.

*** Pursuant to policy AC-4, a total of 37 beds from two WakeMed nursing home facilities were approved for re-conversion to acute care beds at WakeMed Raleigh - 24 beds from WakeMed Cary Hospital's Fuquay-Varina Outpatient and Skilled Nursing Facility and 13 beds from WakeMed Zebulon/Wendell Outpatient and Skilled Nursing Facility. In addition, PruittHealth-Raleigh (formerly UniHealth Post-Acute Care) received approval to relocate 18 beds to its facility from these two WakeMed nursing care facilities - 12 beds from WakeMed Cary/Fuquay-Varina and 6 beds from WakeMed Zebulon/Wendell. After these re-conversions and transfers are complete, no beds will remain at WakeMed Cary/Fuquay-Varina (36) and WakeMed Zebulon/Wendell (19) nursing care facilities.

**** 51 of 60 beds have been transferred. 31 were transferred to Universal Healthcare/Fuquay-Varina and 20 beds were transferred to Universal Healthcare/North Raleigh.

Table 10B: County Rate Calculations for Nursing Home Bed Need Determination

A County	B					C					D					E	F	G
	Patients					Populations					Rates					Actual Average Change Rates	Selected Change Rate (County or State)	Bed Rates per 1,000
	2017	2018	2019	2020	2021	2017	2018	2019	2020	2021	2017	2018	2019	2020	2021			
Alamance	762	761	742	600	597	161,076	165,749	170,483	170,698	173,384	4.7307	4.5913	4.3523	3.5150	3.4432	-0.0736	-0.0287	3.1463
Alexander	109	104	99	84	63	38,452	38,390	38,530	38,524	36,145	2.8347	2.7090	2.5694	2.1805	1.7430	-0.1120	-0.0287	1.5927
Alleghany	75	67	62	73	76	11,233	11,466	11,466	11,558	10,829	6.6768	5.8434	5.4073	6.3160	7.0182	0.0199	-0.0287	6.4131
Anson	152	149	151	131	130	25,626	25,460	25,290	23,889	21,904	5.9315	5.8523	5.9707	5.4837	5.9350	0.0019	0.0019	5.9689
Ashe	112	117	125	94	111	27,218	27,551	27,861	28,020	26,444	4.1149	4.2467	4.4866	3.3547	4.1975	0.0219	-0.0287	3.8356
Avery	84	79	74	73	69	18,072	17,913	18,022	18,182	17,775	4.6481	4.4102	4.1061	4.0150	3.8819	-0.0439	-0.0439	3.3710
Beaufort	244	245	252	157	213	47,547	47,438	47,480	47,400	44,120	5.1318	5.1646	5.3075	3.3122	4.8277	0.0289	-0.0287	4.4115
Bertie	114	105	100	104	96	19,881	19,732	19,636	19,496	17,598	5.7341	5.3213	5.0927	5.3344	5.4552	-0.0112	-0.0112	5.2717
Bladen	134	146	143	123	133	34,393	34,298	34,497	34,421	28,771	3.8961	4.2568	4.1453	3.5734	4.6227	0.0555	-0.0287	4.2241
Brunswick	435	386	446	378	412	131,726	136,126	142,088	147,644	140,411	3.3023	2.8356	3.1389	2.5602	2.9342	-0.0182	-0.0182	2.7744
Buncombe	1,521	1,443	1,527	1,407	1,401	261,532	262,483	264,056	264,408	272,880	5.8157	5.4975	5.7829	5.3213	5.1341	-0.0295	-0.0295	4.6805
Burke	422	406	413	378	430	90,246	91,555	91,810	91,708	86,783	4.6761	4.4345	4.4984	4.1218	4.9549	0.0203	-0.0287	4.5277
Cabarrus	572	591	636	510	489	205,473	209,303	212,917	216,841	232,083	2.7838	2.8237	2.9871	2.3520	2.1070	-0.0611	-0.0287	1.9253
Caldwell	327	341	337	341	327	83,303	83,597	83,417	84,230	80,171	3.9254	4.0791	4.0399	4.0484	4.0788	0.0098	-0.0287	3.7271
Camden *	0	0	0	0	0	10,359	10,414	10,611	10,575	10,469	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000
Carteret	330	259	244	192	177	70,190	70,619	71,163	71,352	67,311	4.7015	3.6676	3.4287	2.6909	2.6296	-0.1308	-0.0287	2.4029
Caswell	113	113	114	122	110	23,699	23,309	23,664	23,462	22,582	4.7681	4.8479	4.8174	5.1999	4.8711	0.0067	-0.0287	4.4511
Catawba	647	647	650	601	613	156,949	157,978	159,494	160,732	161,909	4.1224	4.0955	4.0754	3.7391	3.7861	-0.0203	-0.0203	3.5550
Chatham	338	339	347	318	326	74,835	74,491	75,994	77,061	77,747	4.5166	4.5509	4.5661	4.1266	4.1931	-0.0173	-0.0173	3.9754
Cherokee	170	158	150	111	138	29,216	29,288	29,630	29,610	28,873	5.8187	5.3947	5.0624	3.7487	4.7796	-0.0297	-0.0297	4.3530
Chowan	84	91	89	86	81	14,292	14,123	14,114	14,114	13,640	5.8774	6.4434	6.3058	6.0932	5.9384	0.0040	-0.0287	5.4264
Clay	77	86	77	76	72	11,488	11,646	11,860	11,759	11,066	6.7026	7.3845	6.4924	6.4631	6.5064	-0.0042	-0.0042	6.4240
Cleveland	453	457	443	324	359	98,580	98,717	99,776	100,814	100,541	4.5953	4.6294	4.4399	3.2138	3.5707	-0.0497	-0.0287	3.2628
Columbus	255	256	179	177	188	56,941	56,505	56,290	56,002	49,307	4.4783	4.5306	3.1800	3.1606	3.8128	-0.0215	-0.0215	3.5665
Craven	392	401	390	337	356	103,735	103,569	103,779	103,016	100,128	3.7789	3.8718	3.7580	3.2713	3.5554	-0.0119	-0.0119	3.4289
Cumberland	973	984	921	791	800	329,604	329,079	332,455	333,531	334,660	2.9520	2.9902	2.7703	2.3716	2.3905	-0.0491	-0.0287	2.1844
Currituck	73	59	51	55	55	26,604	27,321	27,526	28,048	29,305	2.7439	2.1595	1.8528	1.9609	1.8768	-0.0849	-0.0287	1.7150
Dare	68	91	86	68	78	36,792	37,197	37,290	38,027	37,342	1.8482	2.4464	2.3062	1.7882	2.0888	0.0525	-0.0287	1.9087
Davidson	667	689	667	606	601	167,105	167,762	169,468	170,370	170,044	3.9915	4.1070	3.9358	3.5570	3.5344	-0.0288	-0.0288	3.2286
Davie	166	158	195	203	210	42,727	43,193	43,430	43,746	43,283	3.8851	3.6580	4.4900	4.6404	4.8518	0.0620	-0.0287	4.4335
Duplin	225	232	192	201	194	59,513	59,629	59,736	60,177	47,043	3.7807	3.8907	3.2141	3.3401	4.1239	0.0323	-0.0287	3.7683
Durham	1,100	1,107	1,104	918	905	306,184	311,649	315,741	321,261	329,973	3.5926	3.5521	3.4965	2.8575	2.7426	-0.0625	-0.0287	2.5062
Edgecombe	277	277	262	192	220	52,856	53,001	52,586	52,024	48,104	5.2407	5.2263	4.9823	3.6906	4.5734	-0.0174	-0.0174	4.3351
Forsyth	1,255	1,329	1,344	1,134	1,176	372,651	377,523	379,693	380,964	385,489	3.3678	3.5203	3.5397	2.9767	3.0507	-0.0208	-0.0208	2.8599
Franklin	165	187	205	167	194	66,514	67,723	69,112	71,196	70,436	2.4807	2.7612	2.9662	2.3456	2.7543	0.0381	-0.0287	2.5168

Table 10B: County Rate Calculations for Nursing Home Bed Need Determination

A	B					C					D					E	F	G
County	Patients					Populations					Rates					Actual Average Change Rates	Selected Change Rate (County or State)	Bed Rates per 1,000
	2017	2018	2019	2020	2021	2017	2018	2019	2020	2021	2017	2018	2019	2020	2021			
Gaston	843	826	810	751	737	218,527	221,607	222,744	224,168	230,378	3.8576	3.7273	3.6365	3.3502	3.1991	-0.0455	-0.0287	2.9233
Gates	51	51	58	52	47	11,960	12,079	12,132	11,908	10,166	4.2642	4.2222	4.7807	4.3668	4.6233	0.0236	-0.0287	4.2246
Graham	68	66	70	43	51	8,837	8,775	8,687	8,642	7,967	7.6949	7.5214	8.0580	4.9757	6.4014	-0.0118	-0.0118	6.1749
Granville	197	194	197	152	175	59,975	61,241	61,406	61,628	61,410	3.2847	3.1678	3.2082	2.4664	2.8497	-0.0247	-0.0247	2.6388
Greene	104	83	97	97	102	21,522	21,301	21,050	20,951	20,372	4.8323	3.8965	4.6081	4.6299	5.0069	0.0188	-0.0287	4.5752
Guilford	1,937	1,985	2,007	1,867	1,799	523,962	533,213	539,666	538,431	547,379	3.6968	3.7227	3.7190	3.4675	3.2866	-0.0285	-0.0285	3.0061
Halifax	214	257	181	212	214	51,815	51,704	51,194	50,898	47,873	4.1301	4.9706	3.5356	4.1652	4.4702	0.0415	-0.0287	4.0847
Harnett	364	388	391	351	335	130,847	133,869	135,239	136,705	134,847	2.7819	2.8984	2.8912	2.5676	2.4843	-0.0262	-0.0262	2.2887
Haywood	385	392	416	341	367	62,277	62,959	63,328	63,481	62,403	6.1821	6.2263	6.5690	5.3717	5.8811	-0.0063	-0.0063	5.7698
Henderson	765	714	669	599	613	116,173	117,312	118,312	118,563	117,408	6.5850	6.0863	5.6545	5.0522	5.2211	-0.0549	-0.0287	4.7709
Hertford	142	131	133	83	106	23,947	24,031	24,037	23,720	19,871	5.9298	5.4513	5.5331	3.4992	5.3344	0.0228	-0.0287	4.8745
Hoke	119	108	112	92	101	53,343	54,923	54,842	54,682	52,331	2.2308	1.9664	2.0422	1.6825	1.9300	-0.0272	-0.0272	1.7722
Hyde	41	40	37	32	0	5,644	5,449	5,181	5,119	4,482	7.2644	7.3408	7.1415	6.2512	0.0000	-0.2853	-0.0287	0.0000
Iredell	518	481	486	413	441	176,563	179,330	181,380	183,309	191,180	2.9338	2.6822	2.6795	2.2530	2.3067	-0.0555	-0.0287	2.1078
Jackson	141	163	168	178	173	43,116	44,272	44,335	44,354	43,147	3.2702	3.6818	3.7893	4.0132	4.0095	0.0533	-0.0287	3.6638
Johnston	522	527	525	506	503	194,705	199,768	205,951	211,626	223,975	2.6810	2.6381	2.5492	2.3910	2.2458	-0.0431	-0.0431	1.9553
Jones	55	52	56	39	33	10,356	10,100	10,196	10,067	8,947	5.3109	5.1485	5.4923	3.8740	3.6884	-0.0766	-0.0287	3.3704
Lee	241	244	251	227	208	59,337	60,097	61,690	61,663	64,278	4.0615	4.0601	4.0687	3.6813	3.2359	-0.0536	-0.0287	2.9569
Lenoir	292	305	318	286	268	57,477	57,232	56,372	56,876	54,783	5.0803	5.3292	5.6411	5.0285	4.8920	-0.0071	-0.0071	4.7885
Lincoln	261	268	249	236	244	83,251	84,608	86,453	88,699	88,298	3.1351	3.1675	2.8802	2.6607	2.7634	-0.0295	-0.0295	2.5188
Macon	144	147	137	126	129	35,413	36,117	36,498	37,014	37,430	4.0663	4.0701	3.7536	3.4041	3.4464	-0.0394	-0.0394	3.0393
Madison	171	163	173	171	167	22,240	22,523	22,602	22,500	21,205	7.6888	7.2370	7.6542	7.6000	7.8755	0.0070	-0.0287	7.1965
Martin	99	102	105	100	86	23,510	23,290	23,150	22,904	21,713	4.2110	4.3796	4.5356	4.3660	3.9608	-0.0136	-0.0136	3.7987
McDowell	196	193	213	173	183	45,716	46,358	46,684	46,530	44,350	4.2873	4.1633	4.5626	3.7180	4.1263	-0.0021	-0.0021	4.1005
Mecklenburg	2,743	2,765	2,816	2,278	2,409	1,077,301	1,093,708	1,108,107	1,118,775	1,133,504	2.5462	2.5281	2.5413	2.0362	2.1253	-0.0392	-0.0392	1.8752
Mitchell	90	88	97	86	73	15,237	15,234	15,239	15,112	14,836	5.9067	5.7766	6.3652	5.6908	4.9205	-0.0404	-0.0404	4.3247
Montgomery	95	96	99	80	77	27,865	27,926	27,666	27,753	25,705	3.4093	3.4377	3.5784	2.8826	2.9955	-0.0265	-0.0265	2.7574
Moore	569	559	550	512	451	97,597	99,310	101,180	102,814	101,649	5.8301	5.6288	5.4359	4.9799	4.4368	-0.0654	-0.0287	4.0543
Nash	388	381	388	335	332	94,365	95,072	95,647	96,669	95,116	4.1117	4.0075	4.0566	3.4654	3.4905	-0.0379	-0.0379	3.0936
New Hanover	900	937	901	825	846	227,261	233,595	235,560	235,231	227,782	3.9602	4.0112	3.8249	3.5072	3.7141	-0.0144	-0.0144	3.5535
Northampton	120	104	136	130	140	20,709	20,711	20,527	20,054	16,796	5.7946	5.0215	6.6254	6.4825	8.3353	0.1126	-0.0287	7.6166
Onslow	239	227	235	204	215	195,621	198,783	201,548	210,056	206,718	1.2218	1.1419	1.1660	0.9712	1.0401	-0.0351	-0.0351	0.9305
Orange	293	299	348	319	358	142,365	144,372	147,093	147,907	150,258	2.0581	2.0710	2.3659	2.1568	2.3826	0.0412	-0.0287	2.1771
Pamlico	69	74	79	68	70	13,268	13,273	13,266	13,277	12,140	5.2005	5.5752	5.9551	5.1216	5.7661	0.0315	-0.0287	5.2689
Pasquotank	214	227	202	203	177	40,598	39,826	39,731	39,952	40,743	5.2712	5.6998	5.0842	5.0811	4.3443	-0.0431	-0.0431	3.7829

Table 10B: County Rate Calculations for Nursing Home Bed Need Determination

A County	B Patients					C Populations					D Rates					E Actual Average Change Rates	F Selected Change Rate (County or State)	G Bed Rates per 1,000
	2017	2018	2019	2020	2021	2017	2018	2019	2020	2021	2017	2018	2019	2020	2021			
Pender	225	217	234	218	213	60,999	62,359	63,406	63,949	61,105	3.6886	3.4799	3.6905	3.4090	3.4858	-0.0125	-0.0125	3.3556
Perquimans	51	49	52	54	56	13,546	13,729	13,639	13,807	12,847	3.7649	3.5691	3.8126	3.9111	4.3590	0.0391	-0.0287	3.9832
Person	171	163	162	147	133	39,868	40,014	40,370	40,450	39,044	4.2892	4.0736	4.0129	3.6341	3.4064	-0.0556	-0.0287	3.1127
Pitt	503	473	471	417	433	176,424	179,388	179,731	183,285	170,276	2.8511	2.6367	2.6206	2.2751	2.5429	-0.0239	-0.0239	2.3609
Polk	180	173	168	147	147	21,154	21,468	21,696	21,923	18,957	8.5090	8.0585	7.7434	6.7053	7.7544	-0.0174	-0.0174	7.3493
Randolph	612	570	534	475	507	144,672	143,907	144,914	145,246	144,818	4.2303	3.9609	3.6849	3.2703	3.5009	-0.0438	-0.0438	3.0406
Richmond	161	159	170	168	139	44,892	45,032	45,079	45,014	42,475	3.5864	3.5308	3.7712	3.7322	3.2725	-0.0202	-0.0202	3.0739
Robeson	459	446	388	345	318	132,020	131,303	131,056	131,238	113,699	3.4767	3.3967	2.9606	2.6288	2.7969	-0.0499	-0.0287	2.5557
Rockingham	517	524	534	409	452	91,790	91,273	91,788	91,915	91,113	5.6324	5.7410	5.8178	4.4498	4.9609	-0.0219	-0.0219	4.6348
Rowan	794	807	810	690	695	141,917	142,342	142,643	143,274	147,817	5.5948	5.6694	5.6785	4.8159	4.7018	-0.0402	-0.0402	4.1352
Rutherford	362	347	369	321	314	67,796	68,772	68,908	69,049	64,178	5.3395	5.0457	5.3550	4.6489	4.8926	-0.0183	-0.0183	4.6242
Sampson	218	198	205	156	140	63,143	64,019	64,284	64,053	58,309	3.4525	3.0928	3.1890	2.4355	2.4010	-0.0809	-0.0287	2.1940
Scotland	177	172	182	147	157	35,686	35,802	35,732	35,724	33,682	4.9599	4.8042	5.0935	4.1149	4.6612	-0.0076	-0.0076	4.5545
Stanly	350	334	341	229	273	62,443	63,465	63,727	64,691	62,220	5.6051	5.2627	5.3510	3.5399	4.3877	-0.0358	-0.0358	3.9161
Stokes	292	290	292	294	278	46,728	46,604	46,420	46,684	44,344	6.2489	6.2226	6.2904	6.2977	6.2692	0.0008	0.0008	6.2847
Surry	404	424	416	351	360	72,843	73,117	73,232	73,548	71,195	5.5462	5.7989	5.6806	4.7724	5.0565	-0.0188	-0.0188	4.7714
Swain	95	96	90	72	62	14,999	14,862	14,275	14,489	14,059	6.3338	6.4594	6.3047	4.9693	4.4100	-0.0821	-0.0287	4.0297
Transylvania	183	166	148	123	136	34,464	35,034	35,484	35,511	32,785	5.3099	4.7383	4.1709	3.4637	4.1482	-0.0498	-0.0287	3.7906
Tyrrell *	0	0	0	0	0	4,138	4,309	4,259	3,767	3,101	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000	0.0000
Union	583	559	501	545	533	228,171	232,814	237,287	238,740	242,651	2.5551	2.4011	2.1114	2.2828	2.1966	-0.0344	-0.0344	1.9700
Vance	214	218	211	161	174	44,862	45,157	45,969	45,435	42,096	4.7702	4.8276	4.5900	3.5435	4.1334	-0.0247	-0.0247	3.8274
Wake	2,009	2,002	2,017	1,741	2,643	1,048,771	1,073,993	1,089,579	1,102,782	1,156,274	1.9156	1.8641	1.8512	1.5787	2.2858	0.0667	-0.0287	2.0887
Warren	114	105	96	75	83	20,133	20,174	20,022	19,767	18,319	5.6623	5.2047	4.7947	3.7942	4.5308	-0.0435	-0.0435	3.9391
Washington	92	103	104	89	76	12,349	12,239	12,071	12,039	10,818	7.4500	8.4157	8.6157	7.3926	7.0253	-0.0096	-0.0096	6.8238
Watauga	175	171	161	129	140	56,170	57,646	57,899	57,011	53,639	3.1155	2.9664	2.7807	2.2627	2.6100	-0.0358	-0.0358	2.3296
Wayne	411	382	399	310	366	124,945	124,658	125,825	126,339	116,094	3.2894	3.0644	3.1711	2.4537	3.1526	0.0063	-0.0287	2.8808
Wilkes	311	339	315	294	305	70,536	69,907	70,200	70,263	65,378	4.4091	4.8493	4.4872	4.1843	4.6652	0.0181	-0.0287	4.2629
Wilson	343	333	315	264	221	82,035	81,968	82,282	83,495	78,284	4.1811	4.0626	3.8283	3.1619	2.8231	-0.0918	-0.0287	2.5796
Yadkin	172	175	176	165	166	37,687	38,477	38,196	38,145	37,081	4.5639	4.5482	4.6078	4.3256	4.4767	-0.0042	-0.0042	4.4208
Yancey	81	81	92	81	77	18,199	18,363	18,623	18,909	18,557	4.4508	4.4110	4.9401	4.2837	4.1494	-0.0133	-0.0133	3.9838
State Total	36,740	36,573	36,480	31,916	33,227	10,272,692	10,401,960	10,508,254	10,587,440	10,535,205	3.5765	3.5160	3.4716	3.0145	3.1539	-0.0287		

* Camden and Tyrrell counties have no Nursing Home Beds.

Table 10C: Nursing Care Bed Need Projections for 2026

A	B	C	D	E	F	G	H	I	J	K	L
County	Bed Rate per 1,000	Projected 2026 Population (Civilian)	Projected Bed Utilization	Projected Bed Utilization with Vacancy Factor*	Licensed Plus Previous Allocations	Exclusions**	Total Inventory	Surplus/ - Deficit	Deficit Index	Occupancy Rate***	Bed Need
Alamance	3.1463	183,030	576	606	865	63	802	196		62.3	0
Alexander	1.5927	35,866	57	60	183	49	134	74		36.3	0
Alleghany	6.4131	10,809	69	73	90	0	90	17		78.9	0
Anson	5.9689	21,611	129	136	161	0	161	25		82.2	0
Ashe	3.8356	26,103	100	105	210	0	210	105		53.8	0
Avery	3.3710	17,755	60	63	128	0	128	65		51.6	0
Beaufort	4.4115	42,426	187	197	268	0	268	71		70.4	0
Bertie	5.2717	16,857	89	94	142	0	142	48		62.8	0
Bladen	4.2241	26,225	111	117	194	0	194	77		61.3	0
Brunswick	2.7744	156,792	435	458	628	0	628	170		76.5	0
Buncombe	4.6805	288,417	1,350	1,421	2,011	308	1,703	282		72.9	0
Burke	4.5277	86,625	392	413	526	25	501	88		81.0	0
Cabarrus	1.9253	254,733	490	516	727	24	703	187		68.0	0
Caldwell	3.7271	79,653	297	312	400	0	400	88		80.0	0
Carteret	2.4029	67,173	161	170	424	0	424	254		59.3	0
Caswell	4.4511	22,209	99	104	157	0	157	53		74.4	0
Catawba	3.5550	168,195	598	629	759	54	705	76		74.8	0
Chatham	3.9754	84,126	334	352	525	130	395	43		82.2	0
Cherokee	4.3530	29,941	130	137	210	0	210	73		61.6	0
Chowan	5.4264	13,618	74	78	110	0	110	32		60.1	0
Clay	6.4240	11,664	75	79	90	0	90	11		76.5	0
Cleveland	3.2628	103,389	337	355	534	0	534	179		68.6	0
Columbus	3.5665	44,821	160	168	317	0	317	149		54.6	0
Craven	3.4289	93,086	319	336	461	0	461	125		75.4	0
Cumberland	2.1844	304,739	666	701	1,179	150	1,029	328		77.3	0
Currituck	1.7150	34,349	59	62	100	0	100	38		56.1	0
Dare	1.9087	39,355	75	79	126	0	126	47		59.6	0
Davidson	3.2286	175,787	568	597	794	47	747	150		82.2	0

Table 10C: Nursing Care Bed Need Projections for 2026

A	B	C	D	E	F	G	H	I	J	K	L
County	Bed Rate per 1,000	Projected 2026 Population (Civilian)	Projected Bed Utilization	Projected Bed Utilization with Vacancy Factor*	Licensed Plus Previous Allocations	Exclusions**	Total Inventory	Surplus/ - Deficit	Deficit Index	Occupancy Rate***	Bed Need
Davie	4.4335	45,637	202	213	239	0	239	26		82.2	0
Duplin	3.7683	41,978	158	167	272	0	272	105		66.3	0
Durham	2.5062	353,813	887	933	1,399	206	1,193	260		66.6	0
Edgecombe	4.3351	45,471	197	207	307	0	307	100		71.0	0
Forsyth	2.8599	401,089	1,147	1,207	1,648	216	1,432	225		65.0	0
Franklin	2.5168	78,625	198	208	258	0	258	50		68.4	0
Gaston	2.9233	237,461	694	731	984	50	934	203		76.2	0
Gates	4.2246	9,593	41	43	70	0	70	27		63.4	0
Graham	6.1749	7,885	49	51	80	0	80	29		59.5	0
Granville	2.6388	64,843	171	180	220	0	220	40		68.8	0
Greene	4.5752	20,351	93	98	115	0	115	17		69.3	0
Guilford	3.0061	573,916	1,725	1,816	2,432	247	2,185	369		72.2	0
Halifax	4.0847	45,644	186	196	340	0	340	144		69.1	0
Harnett	2.2887	140,119	321	338	425	0	425	87		75.3	0
Haywood	5.7698	64,366	371	391	475	0	475	84		75.0	0
Henderson	4.7709	123,853	591	622	912	0	912	290		72.7	0
Hertford	4.8745	18,077	88	93	151	0	151	58		63.5	0
Hoke	1.7722	52,644	93	98	132	0	132	34		77.1	0
Hyde	0.0000	4,194	0	0	36	0	36	36		35.2	0
Iredell	2.1078	210,187	443	466	653	0	653	187		62.9	0
Jackson	3.6638	43,693	160	169	200	0	200	31		80.1	0
Johnston	1.9553	251,779	492	518	615	0	615	97		80.2	0
Jones	3.3704	8,419	28	30	80	0	80	50		46.7	0
Lee	2.9569	68,364	202	213	294	0	294	81		72.0	0
Lenoir	4.7885	53,943	258	272	381	100	281	9		71.3	0
Lincoln	2.5188	92,655	233	246	300	0	300	54		74.8	0
Macon	3.0393	39,360	120	126	200	0	200	74		49.6	0
Madison	7.1965	21,539	155	163	180	0	180	17		87.6	0

Table 10C: Nursing Care Bed Need Projections for 2026

A	B	C	D	E	F	G	H	I	J	K	L
County	Bed Rate per 1,000	Projected 2026 Population (Civilian)	Projected Bed Utilization	Projected Bed Utilization with Vacancy Factor*	Licensed Plus Previous Allocations	Exclusions**	Total Inventory	Surplus/ - Deficit	Deficit Index	Occupancy Rate***	Bed Need
Martin	3.7987	20,799	79	83	154	0	154	71		57.3	0
McDowell	4.1005	44,207	181	191	250	0	250	59		69.4	0
Mecklenburg	1.8752	1,239,979	2,325	2,448	3,763	365	3,398	950		65.1	0
Mitchell	4.3247	14,629	63	67	127	0	127	60		55.6	0
Montgomery	2.7574	25,714	71	75	141	0	141	66		53.9	0
Moore	4.0543	107,314	435	458	730	27	703	245		65.0	0
Nash	3.0936	95,843	297	312	418	0	418	106		72.1	0
New Hanover	3.5535	242,139	860	906	1,041	18	1,023	117		78.7	0
Northampton	7.6166	15,736	120	126	149	0	149	23		79.6	0
Onslow	0.9305	179,722	167	176	310	0	310	134		53.1	0
Orange	2.1771	157,691	343	361	464	30	434	73		64.6	0
Pamlico	5.2689	11,688	62	65	96	0	96	31		71.7	0
Pasquotank	3.7829	40,654	154	162	278	19	259	97		65.6	0
Pender	3.3556	65,897	221	233	253	0	253	20		84.1	0
Perquimans	3.9832	12,558	50	53	78	0	78	25		66.5	0
Person	3.1127	39,134	122	128	200	0	200	72		69.5	0
Pitt	2.3609	173,116	409	430	570	30	540	110		84.0	0
Polk	7.3493	18,489	136	143	221	52	169	26		68.5	0
Randolph	3.0406	148,077	450	474	720	0	720	246		65.0	0
Richmond	3.0739	41,520	128	134	220	0	220	86		39.4	0
Robeson	2.5557	105,576	270	284	525	4	521	237		74.3	0
Rockingham	4.6348	91,115	422	445	575	0	575	130		71.8	0
Rowan	4.1352	151,166	625	658	984	161	823	165		80.5	0
Rutherford	4.6242	64,830	300	316	406	0	406	90		77.5	0
Sampson	2.1940	56,784	125	131	250	0	250	119		39.6	0
Scotland	4.5545	31,773	145	152	207	39	168	16		67.0	0
Stanly	3.9161	62,862	246	259	406	2	404	145		67.3	0
Stokes	6.2847	44,188	278	292	322	0	322	30		83.4	0

Table 10C: Nursing Care Bed Need Projections for 2026

A	B	C	D	E	F	G	H	I	J	K	L
County	Bed Rate per 1,000	Projected 2026 Population (Civilian)	Projected Bed Utilization	Projected Bed Utilization with Vacancy Factor*	Licensed Plus Previous Allocations	Exclusions**	Total Inventory	Surplus/ - Deficit	Deficit Index	Occupancy Rate***	Bed Need
Surry	4.7714	71,060	339	357	472	0	472	115		74.2	0
Swain	4.0297	14,121	57	60	120	0	120	60		53.1	0
Transylvania	3.7906	33,426	127	133	267	0	267	134		48.7	0
Union	1.9700	268,824	530	557	697	0	697	140		75.8	0
Vance	3.8274	41,361	158	167	230	0	230	63		73.6	0
Wake	2.0887	1,281,625	2,677	2,818	2,760	393	2,367	-451	-16.00%	71.9	0
Warren	3.9391	17,369	68	72	115	0	115	43		58.8	0
Washington	6.8238	10,123	69	73	114	0	114	41		72.3	0
Watauga	2.3296	57,332	134	141	226	0	226	85		60.9	0
Wayne	2.8808	110,827	319	336	576	96	480	144		64.3	0
Wilkes	4.2629	63,708	272	286	412	0	412	126		68.4	0
Wilson	2.5796	78,348	202	213	638	231	407	194		61.7	0
Yadkin	4.4208	36,961	163	172	223	0	223	51		73.3	0
Yancey	3.9838	19,043	76	80	140	0	140	60		51.6	0
State Total		10,966,180	31,577	33,239	46,565	3,136	43,429				0

* Projected Bed Utilization with Vacancy Factor is calculated by dividing Projected Bed Utilization by 95%.

** NH-2 beds are 100% excluded.

*** Calculated using higher of the median or weighted mean.

Table 10D: Nursing Home Bed Need Determination
(Proposed for Certificate of Need Review Commencing in 2023)

Service Area	HSA	Nursing Home Bed Need Determination	Certificate of Need Application Deadline	Certificate of Need Beginning Review Date
It is determined that there is no need anywhere in the state and no reviews are scheduled.				

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Chapter 11:

Adult Care Homes

CHAPTER 11

ADULT CARE HOMES

Introduction

G.S. 131E-176(1) defines an *adult care home* as “a facility with seven or more beds licensed under G.S. 131D-2 or Chapter 131E of the General Statutes that provides residential care for aged or disabled persons whose principal need is a home which provides the supervision and personal care appropriate to their age and disability and for whom medical care is only occasional or incidental.”

Before enactment of Senate Bill 937 in 2001 to regulate the development of adult care homes under the Certificate of Need law, legislation ratified in 1997 (S. L. 1997-443) placed a statewide moratorium on the development of new adult care home beds. However, the 1997 legislation allowed for the development of additional adult care home beds under defined circumstances. Some of these beds remain eligible to be developed pursuant to settlements of contested cases. These *settlement* beds are also subject to conditions set out in the terms of the controlling settlement agreements. The planning inventory of adult care home beds included in the current North Carolina State Medical Facilities Plan (SMFP) is subject to change based on whether conditions have been met to allow for development of the settlement beds. In addition, litigation may result in changes to the inventory.

Definitions

An adult care home bed’s service area is the county in which the adult care home bed is located. Each of the 100 counties is a separate service area.

The *reporting year* is August 1 through July 31. The *current* reporting year is August 1, 2020 through July 31, 2021.

The methodology projects bed need determination five years beyond the current reporting year. The current *projection year* is 2026.

The *planning inventory* is the number of beds used in need determination calculations. It is the number of licensed beds, plus any new beds approved by certificate of need that are under development, minus any exclusions (see below) and beds to be relocated out of the county.

Changes from the Previous Plan

This chapter contains no substantive changes from the previous State Medical Facilities Plan (SMFP).

Basic Principles

1. The methodology should project need determination five years beyond the current reporting year because at least that amount of time is required to bring a new or expanded facility into service.
2. A goal of the planning process is a reasonable level of parity among individuals in their geographic access to adult care home facilities.

Data Sources

The North Carolina Office of State Budget and Management provides estimates of North Carolina residents for the current reporting year and projection year, by county.

Estimates of the active duty military population come from the category of “Employment Status - Armed Forces” from the most recent American Community Survey 5-Year Estimates.

The methodology combines utilization data for the current and four immediately previous reporting years, as submitted to the North Carolina Department of Health and Human Services, Division of Health Service Regulation from: License Renewal Applications to Operate a Nursing Home; Nursing Care Facility/Unit Beds Annual Data Supplement to Hospital License Applications; and License Renewal Applications for Adult Care Homes.

Assumptions of the Methodology

1. The inventory excludes 100% of the beds developed as part of a qualified continuing care retirement community (*Table 11E*), including those developed before enactment of Policy LTC-1; the occupancy rate calculation excludes their associated days of care.
2. The methodology excludes the estimated active duty military population under the age of 35 from the county’s population for any county with more than 500 active duty military personnel.
3. The methodology uses the county bed use rate as the utilization measure in determining needs. Bed use rates are calculated per 1,000 population per county. Each county’s bed use rate is calculated using a five-year average annual change rate to project forward five years beyond the reporting year. Any county with an average annual change rate that is at least one-half of one standard deviation above the statewide rate will receive a rate equal to the average plus one half of one standard deviation above the statewide rate.
4. The projected utilization is multiplied by three to account for future increases in utilization.
5. The methodology uses the highest of four occupancy rate calculations such that the need determination in each service area reflects the highest of the average or the median of all facilities’ occupancy rates based on a 1-day census in a county, or the average or median of all the facilities’ occupancy rates based on annual days of care in a county.

Application of the Methodology

Table 11A shows the inventory data and Table 11B shows the patient, population and bed use data that form the basis for the calculations discussed in the following steps. Table 11C shows projected bed utilization, bed surpluses/deficits and occupancy rates that are used to determine bed needs.

Step 1: Calculate the planning inventory for each facility and county (*Table 11A*).

- a. Add the number of licensed beds in each nursing home facility (*Column D*), hospital (*Column E*) and adult care home (*Column F*) to calculate the total number of licensed beds (*Column G*).
- b. Adjust this result by adding or subtracting, as appropriate, CON-approved beds and beds to be transferred (*Columns H and I*). Then adjust this result by the number of beds available from need determinations in the SMFP but for which CONs have not yet been issued (*Column J*) to calculate the total planning inventory (*Column K*).
- c. Sum each of these calculations across all facilities in a county to obtain county totals (*Column K*).

Step 2: Calculate the projected county bed use rates (*Table 11B*).

- a. For each of the five most recent reporting years and for each county, divide the number of patients (*Column B*) by the population (*Column C*).
- b. Multiply the result by 1,000 to calculate the bed use rate per 1,000 population (*Column D*).
- c. Calculate the average annual change rate (AACR) in bed use for the five most recent reporting years for each county (*Column E*).
- d. If the result of Step 2.c is at least 0.5 standard deviations above the statewide AACR, then enter 0.5 standard deviations above the statewide AACR; otherwise, enter the result of Step 2.c into Column F, the Selected Change Rate.
- e. Multiply the result of Step 2.d by the bed use rate for the reporting year (*Column D*, last sub-column) and then multiply by three; add the product to the bed use rate for the reporting year to get the Bed Rate per 1,000 (*Column G*).

Step 3: Multiply the county bed use rates (*Table 11B, Column G* and *Table 11C, Column B*) by each county's corresponding projected civilian population in thousands for the projection year (*Table 11C, Column C*) to calculate the projected bed utilization (*Column D*).

Step 4: For each county, divide the projected bed utilization by a 95% vacancy factor (*Table 11C, Column E*).

Step 5: For each county, calculate the planning inventory (*Table 11A, Column K*) by adjusting the number of licensed beds (*Table 11A, Column G*) for: license pending beds (total of *Table 11A, Columns H and I*); and beds available in prior SMFPs that have not been CON approved (*Table 11A, Column J*).

Step 6: For each county, subtract the projected bed utilization derived in Step 2 (*Column E*) from the planning inventory derived in Step 5 (*Table 11A, Column K* and *Table 11C, Column F*). The result is the service area's surplus or deficit (*Table 11C, Column G*).

Step 7: Calculate each county's bed occupancy rate (*Column I*) by calculating occupancy according to the following four methods and then select the highest of the four rates:

- a. compute the average occupancy rate using the one-day census for all facilities in the service area;
- b. compute the median occupancy rate using the one-day census for all facilities in the service area;
- c. compute the average occupancy rate using the annual days of care for all facilities in the service area; and
- d. compute the median occupancy rate using the annual days of care for all facilities in the service area.

Step 8: Calculate need determination for each county (*Table 11C*).

- a. For any county with a deficit, calculate the county's deficit index by dividing the deficit (*Column G*) by the result of Step 4 (*Column E*).

- b. If any county's deficit index (*Column H*) is from 10% up to, but not including, 50%, and the adjusted occupancy of licensed beds in the county (*Column I*) is 80% or greater, the need determination is the amount of the deficit rounded to the nearest 10 (*Column J*).
- c. If any county's deficit index is 50% or more, the need determination is the amount of the deficit rounded to the nearest 10 (*Column J*).
- d. For purposes of rounding need determinations, numbers greater than 10 and ending in one to four, round to the next lower number divisible by 10, and numbers ending in five to nine, round to the next higher number divisible by 10.

For reference, Table 11E lists adult care beds developed as part of a qualified continuing care retirement community. Also, for reference, Table 11F lists the nursing homes with six or fewer adult care home beds.

Unless otherwise specified by the methodology, calculations do not use rounded values. However, fractional values are rounded automatically when displayed.

Table 11A: Inventory of Adult Care Home (Assisted Living) Beds

A	B	C	D	E	F	G	H	I	J	K
Service Area	Facility Name	License Number	Licensed Beds in Nursing Homes	Licensed Beds in Hospitals	Licensed Beds in Adult Care Facilities	Total Licensed Beds	CON Approved/ License Pending		Available in SMFP	Total Planning Inventory
							CON	CON Bed Transfer		
Alamance	A Vision Come True	HAL-001-103	0	0	12	12	0	0	0	12
Alamance	Alamance House	HAL-001-148	0	0	94	94	0	0	0	94
Alamance	Blakey Hall Assisted Living	HAL-001-023	0	0	72	72	0	0	0	72
Alamance	Brookdale Burlington	HAL-001-028	0	0	52	52	0	0	0	52
Alamance	Brookdale Burlington AL (NC)	HAL-001-024	0	0	84	84	0	0	0	84
Alamance	Burlington Care Center	HAL-001-002	0	0	12	12	0	0	0	12
Alamance	Elon Village Home	HAL-001-128	0	0	12	12	0	0	0	12
Alamance	Golden Years Assisted Living	HAL-001-026	0	0	12	12	0	0	0	12
Alamance	Golden Years Assisted Living II	HAL-001-099	0	0	12	12	0	0	0	12
Alamance	Homeplace of Burlington	HAL-001-141	0	0	67	67	0	0	0	67
Alamance	Liberty Commons Nursing & Rehabilitation Center of Alamance County	NH0588	48	0	0	48	0	0	0	48
Alamance	Mebane Ridge Assisted Living	HAL-001-166	0	0	100	100	0	0	0	100
Alamance	Pleasant Grove Retirement Home	HAL-001-008	0	0	12	12	0	0	0	12
Alamance	Springview - Brock Building	HAL-001-161	0	0	12	12	0	0	0	12
Alamance	Springview - Crouse Building	HAL-001-162	0	0	12	12	0	0	0	12
Alamance	Springview - Ross Building	HAL-001-164	0	0	12	12	0	0	0	12
Alamance	Springview - Stewart Building	HAL-001-163	0	0	12	12	0	0	0	12
Alamance	The Oaks of Alamance	HAL-001-134	0	0	69	69	0	0	0	69
Alamance	Twin Lakes Memory Care	HAL-001-165	0	0	32	32	0	0	0	32
Alamance Totals			48	0	690	738	0	0	0	738
Alexander	A New Outlook of Taylorsville	HAL-002-007	0	0	34	34	0	0	0	34
Alexander	Faith Assisted Living Facility	HAL-002-008	0	0	32	32	0	0	0	32
Alexander	Taylorsville House	HAL-002-003	0	0	60	60	0	0	0	60
Alexander Totals			0	0	126	126	0	0	0	126
Alleghany	Alleghany House		0	0	0	0	40	0	0	40
Alleghany Totals			0	0	0	0	40	0	0	40
Anson	Meadowview Terrace of Wadesboro	HAL-004-003	0	0	60	60	0	0	0	60
Anson Totals			0	0	60	60	0	0	0	60
Ashe	Forest Ridge	HAL-005-016	0	0	60	60	0	0	0	60
Ashe	Generations Assisted Living and Memory Care	HAL-005-013	0	0	55	55	0	0	0	55
Ashe Totals			0	0	115	115	0	0	0	115
Avery	Cranberry House	HAL-006-007	0	0	60	60	0	0	0	60
Avery	The Heritage of Sugar Mountain	HAL-006-005	0	0	40	40	0	0	0	40
Avery Totals			0	0	100	100	0	0	0	100
Beaufort	AG Dunston Manor		0	0	0	0	50	0	0	50
Beaufort	Autumnfield of Belhaven	HAL-007-001	0	0	64	64	0	0	0	64

Table 11A: Inventory of Adult Care Home (Assisted Living) Beds

A	B	C	D	E	F	G	H	I	J	K
Service Area	Facility Name	License Number	Licensed Beds in Nursing Homes	Licensed Beds in Hospitals	Licensed Beds in Adult Care Facilities	Total Licensed Beds	CON Approved/ License Pending		Available in SMFP	Total Planning Inventory
							CON	CON Bed Transfer		
Beaufort	Clara Manor	HAL-007-014	0	0	20	20	0	0	0	20
Beaufort	Pantego Rest Home	HAL-007-015	0	0	30	30	0	0	0	30
Beaufort	River Trace Nursing and Rehabilitation Center	NH0345	10	0	0	10	0	0	0	10
Beaufort	Washington Manor	HAL-007-019	0	0	9	9	0	0	0	9
Beaufort	Willow Manor	HAL-007-023	0	0	34	34	0	0	0	34
Beaufort Totals			10	0	157	167	50	0	0	217
Bertie	Three Rivers Health and Rehabilitation Center	NH0522	20	0	0	20	0	0	0	20
Bertie	Windsor House	HAL-008-034	0	0	60	60	0	0	0	60
Bertie	Winston Gardens	HAL-008-041	0	0	25	25	0	0	0	25
Bertie Totals			20	0	85	105	0	0	0	105
Bladen	Bladen East Health and Rehab	NH0420	30	0	0	30	0	0	0	30
Bladen	Bladen Manor Assisted Living	HAL-009-029	0	0	60	60	0	0	0	60
Bladen	West Bladen Assisted Living	HAL-009-025	0	0	60	60	0	0	0	60
Bladen Totals			30	0	120	150	0	0	0	150
Brunswick	Autumn Care of Shallotte	NH0456	10	0	0	10	0	0	0	10
Brunswick	Brunswick Cove Nursing Center	NH0478	40	0	0	40	0	0	0	40
Brunswick	Calabash Manor		0	0	0	0	80	0	0	80
Brunswick	Coastal Pointe	HAL-010-012	0	0	110	110	110	0	0	220
Brunswick	Leland House	HAL-010-007	0	0	78	78	0	0	0	78
Brunswick	Liberty Commons Assisted Living of Brunswick County		0	0	0	0	110	0	0	110
Brunswick	Liberty Commons Nursing & Rehab Center of Southport LLC	NH0322	17	0	0	17	0	0	0	17
Brunswick	Liberty Commons of Brunswick County (Transfer 32 from The Commons at Brightmore in New Hanover County)		0	0	0	0	0	32	0	32
Brunswick	Ocean Isle Operations	HAL-010-011	0	0	40	40	0	0	0	40
Brunswick	Shallotte Assisted Living	HAL-010-008	0	0	0	0	0	0	0	0
Brunswick	TerraBella Southport	HAL-010-010	0	0	96	96	0	0	0	96
Brunswick	The Landings of Oak Island	HAL-010-013	0	0	80	80	0	0	0	80
Brunswick Totals			67	0	404	471	300	32	0	803
Buncombe	Arbor Ridge at Asheville (Transfer 14 ACH from The Oaks at Sweeten Creek and 14 ACH from Emerald Ridge Rehabilitation and Care Center)		0	0	0	0	0	28	0	28
Buncombe	Arbor Terrace of Asheville	HAL-011-338	0	0	70	70	0	0	0	70
Buncombe	Aston Park Health Care Center Inc	NH0262	19	0	0	19	0	0	0	19
Buncombe	Becky's Rest Home #1	HAL-011-002	0	0	15	15	0	0	0	15
Buncombe	Becky's Rest Home #2	HAL-011-003	0	0	15	15	0	0	0	15
Buncombe	Brian Center Health & Rehabilitation/Weaverville	NH0532	10	0	0	10	0	0	0	10
Buncombe	Brookdale Asheville Overlook	HAL-011-036	0	0	79	79	0	0	0	79
Buncombe	Brookdale Asheville Walden Ridge	HAL-011-035	0	0	38	38	0	0	0	38

Table 11A: Inventory of Adult Care Home (Assisted Living) Beds

A	B	C	D	E	F	G	H	I	J	K
Service Area	Facility Name	License Number	Licensed Beds in Nursing Homes	Licensed Beds in Hospitals	Licensed Beds in Adult Care Facilities	Total Licensed Beds	CON Approved/ License Pending		Available in SMFP	Total Planning Inventory
							CON	CON Bed Transfer		
Buncombe	Buncombe Senior Living (Replacement facility. Transfer 24 from Nana's Assisted Living and 36 from The Laurels of Summit Ridge.)		0	0	0	0	0	60	0	60
Buncombe	Candler Living Center	HAL-011-369	0	0	29	29	0	0	0	29
Buncombe	Chase Samaritan Assisted Living	HAL-011-133	0	0	54	54	0	0	0	54
Buncombe	Chunn's Cove Assisted Living	HAL-011-262	0	0	67	67	0	0	0	67
Buncombe	Emerald Ridge Rehabilitation and Care Center (Transfer 14 beds to Arbor Ridge at Asheville)	NH0551	14	0	0	14	0	-14	0	0
Buncombe	Flesher's Fairview Health Care Center Inc	NH0517	14	0	0	14	0	0	0	14
Buncombe	Flesher's Fairview Rest Home	HAL-011-005	0	0	64	64	0	0	0	64
Buncombe	Harmony at Reynolds Mountain	HAL-011-361	0	0	99	99	0	0	0	99
Buncombe	Hominy Valley Retirement Center	HAL-011-370	0	0	30	30	0	0	0	30
Buncombe	Marjorie McCune Memorial Center	HAL-011-011	0	0	64	64	0	0	0	64
Buncombe	Nana's Assisted Living Facility (Closed 12/01/2018. Transfer 24 to Buncombe Senior Living)	HAL-011-331	0	0	24	24	0	-24	0	0
Buncombe	Richard A. Wood, Jr. Assisted Living Center	HAL-011-130	0	0	56	56	0	0	0	56
Buncombe	Richmond Hill Rest Home #1	HAL-011-376	0	0	12	12	0	0	0	12
Buncombe	Richmond Hill Rest Home #2	HAL-011-375	0	0	12	12	0	0	0	12
Buncombe	Richmond Hill Rest Home #3	HAL-011-374	0	0	12	12	0	0	0	12
Buncombe	Richmond Hill Rest Home #4	HAL-011-373	0	0	12	12	0	0	0	12
Buncombe	Richmond Hill Rest Home #5	HAL-011-372	0	0	12	12	0	0	0	12
Buncombe	The Laurels of Summit Ridge (Transfer 36 to Buncombe Senior Living)	NH0540	52	0	0	52	0	-36	0	16
Buncombe	The Oaks at Sweeten Creek (Transfer 14 ACH to Arbor Ridge at Asheville)	NH0575	14	0	0	14	0	-14	0	0
Buncombe	Trinity View	HAL-011-022	0	0	24	24	0	0	0	24
Buncombe	Western North Carolina Baptist Home	NH0541	50	0	0	50	0	0	0	50
Buncombe	Windwood Assisted Living	HAL-011-296	0	0	12	12	0	0	0	12
Buncombe Totals			173	0	800	973	0	0	0	973
Burke	Autumn Care of Drexel	NH0347	20	0	0	20	0	0	0	20
Burke	Burke Long Term Care	HAL-012-042	0	0	24	24	0	0	0	24
Burke	Cambridge House	HAL-012-044	0	0	60	60	0	0	0	60
Burke	Jonas Ridge Adult Care	HAL-012-040	0	0	57	57	0	0	0	57
Burke	McAlpine Adult Care	HAL-012-041	0	0	60	60	0	0	0	60
Burke	Morganton Long Term Care, Southview Facility	HAL-012-007	0	0	64	64	0	0	0	64
Burke	The Berkeley	HAL-012-043	0	0	63	63	0	0	0	63
Burke Totals			20	0	328	348	0	0	0	348
Cabarrus	Brookdale Concord Parkway	HAL-013-019	0	0	112	112	0	0	0	112

Table 11A: Inventory of Adult Care Home (Assisted Living) Beds

A Service Area	B Facility Name	C License Number	D Licensed Beds in Nursing Homes	E Licensed Beds in Hospitals	F Licensed Beds in Adult Care Facilities	G Total Licensed Beds	H CON Approved/ License Pending		J Available in SMFP	K Total Planning Inventory
							CON	CON Bed Transfer		
Cabarrus	Cabarrus Manor (Transfer 25 from St. Andrews Center, 48 from Concord House, and 60 from Kannapolis Village.)		0	0	0	0	0	133	0	133
Cabarrus	Caremoor Retirement Center	HAL-013-007	0	0	30	30	0	0	0	30
Cabarrus	Concord House (Closed 9/04/2018. Transfer 48 beds to Cabarrus Manor)	HAL-013-038	0	0	48	48	0	-48	0	0
Cabarrus	Concord Place	HAL-013-045	0	0	60	60	0	0	0	60
Cabarrus	Five Oaks Rehabilitation and Care Center	NH0027	24	0	0	24	0	0	0	24
Cabarrus	Kannapolis Village (Transfer 60 to Cabarrus Manor. Closed.)	HAL-013-037	0	0	60	60	0	-60	0	0
Cabarrus	Morningside of Concord	HAL-013-047	0	0	105	105	0	0	0	105
Cabarrus	Mt. Pleasant House	HAL-013-041	0	0	74	74	0	0	0	74
Cabarrus	St. Andrews Center (Closed 12/31/2007. Transfer 25 to Cabarrus Manor)	HAL-013-032	0	0	25	25	0	-25	0	0
Cabarrus	St. Andrews Living Center	HAL-013-006	0	0	56	56	0	0	0	56
Cabarrus	TerraBella Harrisburg	HAL-013-048	0	0	96	96	0	0	0	96
Cabarrus	The Country Home	HAL-013-050	0	0	40	40	0	0	0	40
Cabarrus	The Drake	HAL-013-049	0	0	66	66	0	0	0	66
Cabarrus	The Landings of Cabarrus	HAL-013-046	0	0	67	67	0	0	0	67
Cabarrus	The Living Center of Concord	HAL-013-044	0	0	180	180	0	0	0	180
Cabarrus Totals			24	0	1,019	1,043	0	0	0	1,043
Caldwell	Brockford Inn	HAL-014-014	0	0	67	67	0	0	0	67
Caldwell	Brookdale Lenoir	HAL-014-010	0	0	82	82	0	0	0	82
Caldwell	Grace Village Assisted Living (Transfer 18 beds from Gateway Rehabilitation and Healthcare)	HAL-014-016	0	0	60	60	0	18	0	78
Caldwell	Grace Village Assisted Living & Memory Care	HAL-014-017	0	0	78	78	0	0	0	78
Caldwell	Grandview Villa Assisted Living	HAL-014-015	0	0	40	40	0	0	0	40
Caldwell	The Shaire Center	HAL-014-004	0	0	82	82	0	0	0	82
Caldwell Totals			0	0	409	409	0	18	0	427
Camden	Needham Adult Care Home	HAL-015-002	0	0	24	24	0	0	0	24
Camden Totals			0	0	24	24	0	0	0	24
Carteret	Brookdale Morehead City	HAL-016-006	0	0	72	72	0	0	0	72
Carteret	Carteret House	HAL-016-018	0	0	64	64	0	0	0	64
Carteret	Carteret Landing	HAL-016-022	0	0	110	110	0	0	0	110
Carteret	Snug Harbor on Nelson Bay	NH0202	50	0	0	50	0	-50	0	0
Carteret	The Embassy at Morehead City		0	0	0	0	0	50	0	50
Carteret Totals			50	0	246	296	0	0	0	296
Caswell	Caswell House	HAL-017-054	0	0	100	100	0	0	0	100
Caswell	Dan River Manor (Replacement facility. Transfer 40 from Dogwood - Blackwell Rest Home, 12 from Dogwood Forest #2, and 12 from Dogwood Ronald David Home.)		0	0	0	0	0	64	0	64

Table 11A: Inventory of Adult Care Home (Assisted Living) Beds

A	B	C	D	E	F	G	H	I	J	K
Service Area	Facility Name	License Number	Licensed Beds in Nursing Homes	Licensed Beds in Hospitals	Licensed Beds in Adult Care Facilities	Total Licensed Beds	CON Approved/ License Pending		Available in SMFP	Total Planning Inventory
							CON	CON Bed Transfer		
Caswell	Dogwood - Blackwell Rest Home (Closed 02/21/2020. Transfer 40 to Dan River Manor)		0	0	0	0	0	-40	0	-40
Caswell	Dogwood - Forest #2 (Closed. Transfer 12 to Dan River Manor)		0	0	0	0	0	-12	0	-12
Caswell	Dogwood - Ronald David Home (Closed. Transfer 12 to Dan River Manor)		0	0	0	0	0	-12	0	-12
Caswell	G. Anthony Rucker Rest Home	HAL-017-040	0	0	12	12	0	0	0	12
Caswell	Jefferson Care Home	HAL-017-058	0	0	12	12	0	0	0	12
Caswell Totals			0	0	124	124	0	0	0	124
Catawba	Austin Adult Care	HAL-018-023	0	0	29	29	0	0	0	29
Catawba	Brian Center Health & Rehabilitation/Hickory East	NH0337	20	0	0	20	0	0	0	20
Catawba	Brookdale Falling Creek	HAL-018-011	0	0	60	60	0	0	0	60
Catawba	Brookdale Hickory Northeast	HAL-018-016	0	0	88	88	0	0	0	88
Catawba	Catawba Valley Living At Rock Barn	HAL-018-024	0	0	80	80	0	0	0	80
Catawba	Heritage Care of Conover	HAL-018-018	0	0	60	60	0	0	0	60
Catawba	Heritage Place II	HAL-018-038	0	0	21	21	0	0	0	21
Catawba	Hickory Village	HAL-018-039	0	0	56	56	0	0	0	56
Catawba	Piedmont Village at Newton	HAL-018-037	0	0	40	40	0	0	0	40
Catawba	Springs of Catawba	HAL-018-032	0	0	66	66	0	0	0	66
Catawba	TerraBella Newton	HAL-018-036	0	0	96	96	0	0	0	96
Catawba	Trinity Village	NH0068	90	0	0	90	0	0	0	90
Catawba Totals			110	0	596	706	0	0	0	706
Chatham	Cambridge Hills of Pittsboro	HAL-019-019	0	0	90	90	0	0	0	90
Chatham	Carolina Meadows Fairways	HAL-019-020	0	0	95	95	0	0	0	95
Chatham	Chatham County Rehabilitation Center (Transfer 16 from Liberty Commons Nursing and Rehabilitation Center in Halifax County and 20 from Liberty Commons Nursing and Rehabilitation Center in Columbus County)		0	0	0	0	0	36	0	36
Chatham	Chatham Ridge Assisted Living	HAL-019-023	0	0	91	91	0	0	0	91
Chatham	Coventry House Of Siler City	HAL-019-022	0	0	86	86	0	0	0	86
Chatham Totals			0	0	362	362	0	36	0	398
Cherokee	Carolina Care Home #1	HAL-020-001	0	0	12	12	0	0	0	12
Cherokee	Carolina Care Home #2	HAL-020-002	0	0	12	12	0	0	0	12
Cherokee	Peachtree Manor		0	0	0	0	80	0	0	80
Cherokee Totals			0	0	24	24	80	0	0	104
Chowan	Edenton House	HAL-021-009	0	0	60	60	0	0	0	60
Chowan	Edenton Prime Time Retirement Village	HAL-021-008	0	0	60	60	0	0	0	60
Chowan Totals			0	0	120	120	0	0	0	120
Clay	Clay County Care Center	NH0542	10	0	0	10	0	0	0	10

Table 11A: Inventory of Adult Care Home (Assisted Living) Beds

A	B	C	D	E	F	G	H	I	J	K
Service Area	Facility Name	License Number	Licensed Beds in Nursing Homes	Licensed Beds in Hospitals	Licensed Beds in Adult Care Facilities	Total Licensed Beds	CON Approved/ License Pending		Available in SMFP	Total Planning Inventory
							CON	CON Bed Transfer		
Clay	Hayesville House	HAL-022-005	0	0	60	60	0	0	0	60
Clay Totals			10	0	60	70	0	0	0	70
Cleveland	Brookdale Shelby	HAL-023-011	0	0	60	60	0	0	0	60
Cleveland	Cleveland House	HAL-023-045	0	0	72	72	0	0	0	72
Cleveland	Golden Years Rest Home	HAL-023-041	0	0	12	12	0	0	0	12
Cleveland	Kings Mountain Care Center	HAL-023-031	0	0	20	20	0	0	0	20
Cleveland	Openview Retirement Center	HAL-023-047	0	0	24	24	0	0	0	24
Cleveland	Shelby Manor	HAL-023-046	0	0	74	74	0	0	0	74
Cleveland	Summit Place of Kings Mountain	HAL-023-042	0	0	65	65	0	0	0	65
Cleveland	TerraBella Shelby	HAL-023-048	0	0	96	96	0	0	0	96
Cleveland Totals			0	0	423	423	0	0	0	423
Columbus	Liberty Commons Nursing and Rehab Ctr of Columbus Cty (Transfer 20 beds to Chatham County Rehabilitation Center in Chatham County)	NH0283	40	0	0	40	0	-20	0	20
Columbus	Premier Living and Rehab Center	NH0246	15	0	0	15	0	0	0	15
Columbus	Shoreland Health Care and Retirement Center Inc	NH0510	10	0	0	10	0	0	0	10
Columbus	Tabor Commons	HAL-024-015	0	0	80	80	0	0	0	80
Columbus	Waccamaw Assisted Living	HAL-024-016	0	0	80	80	0	0	0	80
Columbus Totals			65	0	160	225	0	-20	0	205
Craven	Bayview Nursing & Rehabilitation Center	NH0567	12	0	0	12	0	0	0	12
Craven	Brookdale New Bern	HAL-025-012	0	0	60	60	0	0	0	60
Craven	Croatan Village	HAL-025-037	0	0	72	72	0	0	0	72
Craven	Golden Heights Assisted Living	HAL-025-043	0	0	54	54	0	0	0	54
Craven	Homeplace of New Bern	HAL-025-039	0	0	60	60	0	0	0	60
Craven	Riverpoint Crest Nursing and Rehabilitation Center	NH0344	18	0	0	18	0	0	0	18
Craven	Riverstone	HAL-025-026	0	0	64	64	0	0	0	64
Craven	The Gardens of Trent	HAL-025-035	0	0	60	60	0	0	0	60
Craven	The Oaks of New Bern (Closed. 12/31/2020)	HAL-025-042	0	0	0	0	0	0	0	0
Craven	Truewood by Merrill, New Bern	HAL-025-041	0	0	55	55	0	0	0	55
Craven	Truewood by Merrill, New Bern Memory Care	HAL-025-040	0	0	25	25	0	0	0	25
Craven Totals			30	0	450	480	0	0	0	480
Cumberland	Arc of Hope Mills	HAL-026-067	0	0	29	29	0	0	0	29
Cumberland	Carolina Inn at Village Green	HAL-026-017	0	0	100	100	0	0	0	100
Cumberland	Cumberland County Rehabilitation Center (Replacement facility. Transfer 36 from Mann Street Residential Care)		0	0	0	0	0	36	0	36
Cumberland	Cumberland Village Assisted Living	HAL-026-062	0	0	163	163	0	0	0	163
Cumberland	Fayetteville Manor	HAL-026-054	0	0	60	60	0	0	0	60
Cumberland	Harmony at Hope Mills	HAL-026-065	0	0	100	100	0	0	0	100

Table 11A: Inventory of Adult Care Home (Assisted Living) Beds

A	B	C	D	E	F	G	H	I	J	K
Service Area	Facility Name	License Number	Licensed Beds in Nursing Homes	Licensed Beds in Hospitals	Licensed Beds in Adult Care Facilities	Total Licensed Beds	CON Approved/ License Pending		Available in SMFP	Total Planning Inventory
							CON	CON Bed Transfer		
Cumberland	Haymount Rehabilitation & Nursing Center Inc	NH0454	14	0	0	14	0	0	0	14
Cumberland	Heritage Suites	HAL-026-064	0	0	62	62	0	0	0	62
Cumberland	Highland House Rehabilitation and Healthcare	NH0117	53	0	0	53	0	0	0	53
Cumberland	Hope Mills Retirement Center	HAL-026-008	0	0	64	64	0	0	0	64
Cumberland	Mann Street Residential Care Facility (Closed 5/1/2015. Transfer 36 to Cumberland County Rehabilitation Center.)	HAL-026-053	0	0	36	36	0	-36	0	0
Cumberland	Morning Star Special Care Unit	HAL-026-066	0	0	44	44	0	0	0	44
Cumberland	Pine Valley Adult Care Home	HAL-026-048	0	0	40	40	0	0	0	40
Cumberland	The Addison of Fayetteville (Beds awarded per settlement agreement from 2000 & 2007)	HAL-026-068	0	0	96	96	0	0	0	96
Cumberland	Valley Pines Adult Care	HAL-026-052	0	0	23	23	0	0	0	23
Cumberland	Woodlands Nursing and Rehabilitation Center	NH0577	20	0	0	20	0	0	0	20
Cumberland Totals			87	0	817	904	0	0	0	904
Currituck	Currituck House	HAL-027-003	0	0	90	90	0	0	0	90
Currituck Totals			0	0	90	90	0	0	0	90
Dare	Spring Arbor of the Outer Banks	HAL-028-001	0	0	102	102	0	0	0	102
Dare Totals			0	0	102	102	0	0	0	102
Davidson	Brookdale Lexington	HAL-029-006	0	0	76	76	0	0	0	76
Davidson	Brookstone Retirement Center	HAL-029-001	0	0	115	115	0	0	0	115
Davidson	Grayson Creek of Welcome	HAL-029-010	0	0	75	75	0	0	0	75
Davidson	Hilltop Living Center	HAL-029-002	0	0	65	65	0	0	0	65
Davidson	Lexington Health Care Center	NH0527	10	0	0	10	0	0	0	10
Davidson	Mallard Ridge Assisted Living	HAL-029-011	0	0	100	100	0	0	0	100
Davidson	Mountain Vista Health Park	NH0259	60	0	0	60	0	0	0	60
Davidson	Pine Ridge Health and Rehabilitation Center	NH0187	14	0	0	14	0	0	0	14
Davidson	Spring Arbor of Thomasville	HAL-029-004	0	0	62	62	0	0	0	62
Davidson Totals			84	0	493	577	0	0	0	577
Davie	Bermuda Commons Nursing and Rehabilitation Center	NH0560	10	0	0	10	0	0	0	10
Davie	Bermuda Village Retirement Center	NH0519	21	0	0	21	0	0	0	21
Davie	Davie Nursing and Rehabilitation Center	NH0221	12	0	0	12	0	0	0	12
Davie	Mocksville Senior Living and Memory Care	HAL-030-009	0	0	69	69	0	0	0	69
Davie	PS Senior Living of Mocksville	HAL-030-010	0	0	40	40	0	0	0	40
Davie	Somerset Court of Mocksville	HAL-030-008	0	0	60	60	0	0	0	60
Davie Totals			43	0	169	212	0	0	0	212
Duplin	Autumn Village	HAL-031-018	0	0	88	88	0	0	0	88
Duplin	DaySpring of Wallace	HAL-031-022	0	0	80	80	0	0	0	80
Duplin	Golden Care Rest Facilities	HAL-031-003	0	0	30	30	0	0	0	30
Duplin	The Gardens of Rose Hill	HAL-031-019	0	0	45	45	0	0	0	45

Table 11A: Inventory of Adult Care Home (Assisted Living) Beds

A	B	C	D	E	F	G	H	I	J	K
Service Area	Facility Name	License Number	Licensed Beds in Nursing Homes	Licensed Beds in Hospitals	Licensed Beds in Adult Care Facilities	Total Licensed Beds	CON Approved/ License Pending		Available in SMFP	Total Planning Inventory
							CON	CON Bed Transfer		
Duplin	Wallace Gardens	HAL-031-016	0	0	64	64	0	0	0	64
Duplin	Wellington Park	HAL-031-020	0	0	80	80	0	0	0	80
Duplin Totals			0	0	387	387	0	0	0	387
Durham	Atria Southpoint Walk	HAL-032-131	0	0	20	20	0	0	0	20
Durham	Brookdale Chapel Hill	HAL-032-019	0	0	38	38	0	0	0	38
Durham	Brookdale Chapel Hill AL (NC)	HAL-032-016	0	0	70	70	0	0	0	70
Durham	Brookdale Durham	HAL-032-065	0	0	119	119	0	0	0	119
Durham	Calyx Living of Durham	HAL-032-134	0	0	84	84	0	0	0	84
Durham	Camellia Gardens	HAL-032-071	0	0	81	81	0	0	0	81
Durham	Carolina Reserve of Durham	HAL-032-132	0	0	60	60	0	0	0	60
Durham	Carver Living Center (Transfer 20 to Liberty Assisted Living of Durham.)	NH0543	20	0	0	20	0	-20	0	0
Durham	Durham Ridge Assisted Living	HAL-032-091	0	0	142	142	0	0	0	142
Durham	Eden Spring Living Center	HAL-032-073	0	0	19	19	0	0	0	19
Durham	Ellison's Rest Home #1 (Closed 4/30/2019. Transfer 29 to Liberty Assisted Living of Durham.)	HAL-032-002	0	0	29	29	0	-29	0	0
Durham	Eno Pointe Assisted Living	HAL-032-001	0	0	147	147	0	0	0	147
Durham	Hillcrest Convalescent Center Inc	NH0038	34	0	0	34	0	0	0	34
Durham	Liberty Assisted Living of Durham (Transfer 29 from Ellison's Rest Home and 20 from Carver Living Center.)		0	0	0	0	0	49	0	49
Durham	Seasons @ Southpoint	HAL-032-109	0	0	51	51	0	0	0	51
Durham	The Addison of Durham (Beds awarded per settlement agreement from 2000 & 2007)	HAL-032-133	0	0	96	96	0	0	0	96
Durham Totals			54	0	956	1,010	0	0	0	1,010
Edgecombe	Heritage Care of Rocky Mount	HAL-033-005	0	0	126	126	0	0	0	126
Edgecombe	The Bridges of Hendricks Creek	HAL-033-006	0	0	130	130	0	0	0	130
Edgecombe	The Fountains at The Albemarle	NH0352	56	0	0	56	0	0	0	56
Edgecombe Totals			56	0	256	312	0	0	0	312
Forsyth	Accordius Health at Winston Salem	NH0266	14	0	0	14	0	0	0	14
Forsyth	Brighton Gardens of Winston-Salem	HAL-034-026	0	0	115	115	0	0	0	115
Forsyth	Brookdale Reynolda Road	HAL-034-035	0	0	72	72	0	0	0	72
Forsyth	Brookdale Winston-Salem	HAL-034-027	0	0	38	38	0	0	0	38
Forsyth	Brookstone of Clemmons	HAL-034-102	0	0	40	40	0	0	0	40
Forsyth	C.R.T. - Golden Lamb Rest Home	HAL-034-019	0	0	40	40	0	0	0	40
Forsyth	Cadence at Clemmons (Beds awarded per settlement agreement from 2000 & 2007)	HAL-034-106	0	0	96	96	0	0	0	96
Forsyth	Clemmons Village I	HAL-034-090	0	0	60	60	0	0	0	60
Forsyth	Clemmons Village II	HAL-034-062	0	0	66	66	0	0	0	66
Forsyth	Creekside Manor	HAL-034-060	0	0	60	60	0	0	0	60

Table 11A: Inventory of Adult Care Home (Assisted Living) Beds

A	B	C	D	E	F	G	H	I	J	K
Service Area	Facility Name	License Number	Licensed Beds in Nursing Homes	Licensed Beds in Hospitals	Licensed Beds in Adult Care Facilities	Total Licensed Beds	CON Approved/ License Pending		Available in SMFP	Total Planning Inventory
							CON	CON Bed Transfer		
Forsyth	Danby House	HAL-034-093	0	0	100	100	0	0	0	100
Forsyth	Forest Heights Senior Living Community	HAL-034-087	0	0	125	125	0	0	0	125
Forsyth	Harmony at Brookberry Farm	HAL-034-112	0	0	121	121	0	0	0	121
Forsyth	Homestead Hills Assisted Living	HAL-034-023	0	0	66	66	0	0	0	66
Forsyth	Kerner Ridge Assisted Living	HAL-034-115	0	0	66	66	0	0	0	66
Forsyth	Magnolia Creek Assisted Living	HAL-034-097	0	0	117	117	0	0	0	117
Forsyth	Memory Care of the Triad	HAL-034-068	0	0	42	42	0	0	0	42
Forsyth	Salem Terrace	HAL-034-098	0	0	142	142	0	0	0	142
Forsyth	Shuler Health Care/Crane Villa	HAL-034-111	0	0	12	12	0	0	0	12
Forsyth	Shuler Health Care/Phillips Villa	HAL-034-110	0	0	12	12	0	0	0	12
Forsyth	Shuler Health Care/Pierce Villa	HAL-034-109	0	0	12	12	0	0	0	12
Forsyth	Shuler Health Care/Record Villa	HAL-034-108	0	0	12	12	0	0	0	12
Forsyth	Shuler Health Care/Storey Villa	HAL-034-107	0	0	12	12	0	0	0	12
Forsyth	Somerset Court at University Place	HAL-034-100	0	0	60	60	0	0	0	60
Forsyth	Southfork	HAL-034-114	0	0	78	78	0	0	0	78
Forsyth	Summerstone Health and Rehab Center	NH0423	20	0	0	20	0	0	0	20
Forsyth	The Bradford Village of Kernersville - West	HAL-034-069	0	0	62	62	0	0	0	62
Forsyth	The Ivy at Clemmons	HAL-034-105	0	0	90	90	0	0	0	90
Forsyth	Tranquility Care	HAL-034-104	0	0	60	60	0	0	0	60
Forsyth	Trinity Elms	HAL-034-085	0	0	104	104	0	0	0	104
Forsyth	Verra Spring at Heritage Woods	HAL-034-003	0	0	29	29	0	0	0	29
Forsyth	Vienna Village	HAL-034-016	0	0	90	90	0	0	0	90
Forsyth Totals			34	0	1,999	2,033	0	0	0	2,033
Franklin	Franklin Manor Assisted Living Center	HAL-035-024	0	0	54	54	0	0	0	54
Franklin	Franklin Oaks Nursing and Rehabilitation Center	NH0486	10	0	0	10	0	0	0	10
Franklin	Liberty Commons Assisted Living of Franklin County	HAL-035-032	0	0	60	60	0	0	0	60
Franklin	Louisburg Healthcare & Rehabilitation Center	NH0264	60	0	0	60	0	0	0	60
Franklin	Southern Living for Seniors of Louisburg, NC	HAL-035-031	0	0	60	60	0	0	0	60
Franklin Totals			70	0	174	244	0	0	0	244
Gaston	Alexandria Place	NH0547	40	0	0	40	0	0	0	40
Gaston	Belaire Health Care Center (Closed. Transfer 20 to Country Time Inn.)		0	0	0	0	0	-20	0	-20
Gaston	Brookdale New Hope	HAL-036-013	0	0	86	86	0	0	0	86
Gaston	Brookdale Robinwood	HAL-036-015	0	0	89	89	0	0	0	89
Gaston	Brookdale Union	HAL-036-012	0	0	78	78	0	0	0	78
Gaston	Carolina Care Health and Rehabilitation	NH0287	12	0	0	12	0	0	0	12
Gaston	Country Time Inn (Transfer 20 from Belaire Health Care Center)	HAL-036-018	0	0	59	59	0	20	0	79

Table 11A: Inventory of Adult Care Home (Assisted Living) Beds

A	B	C	D	E	F	G	H	I	J	K
Service Area	Facility Name	License Number	Licensed Beds in Nursing Homes	Licensed Beds in Hospitals	Licensed Beds in Adult Care Facilities	Total Licensed Beds	CON Approved/ License Pending		Available in SMFP	Total Planning Inventory
							CON	CON Bed Transfer		
Gaston	Courtland Terrace	NH0494	19	0	0	19	0	0	0	19
Gaston	Magnolia Gardens	HAL-036-036	0	0	86	86	0	0	0	86
Gaston	Morningside of Gastonia	HAL-036-037	0	0	105	105	0	0	0	105
Gaston	Peak Resources-Cherryville	NH0403	57	0	0	57	0	0	0	57
Gaston	Rosewood Assisted Living	HAL-036-004	0	0	48	48	0	0	0	48
Gaston	Somerset Court of Cherryville	HAL-036-034	0	0	60	60	0	0	0	60
Gaston	TerraBella Cramer Mountain	HAL-036-039	0	0	128	128	0	0	0	128
Gaston	Terrace Ridge Assisted Living	HAL-036-023	0	0	74	74	0	0	0	74
Gaston	Wellington House	HAL-036-031	0	0	48	48	0	0	0	48
Gaston	Woodlawn Haven	HAL-036-006	0	0	80	80	0	0	0	80
Gaston Totals			128	0	941	1,069	0	0	0	1,069
Gates	Accordius Health and Rehabilitation	NH0513	10	0	0	10	0	0	0	10
Gates	Gates House	HAL-037-001	0	0	70	70	0	0	0	70
Gates Totals			10	0	70	80	0	0	0	80
Graham	Graham Healthcare and Rehabilitation Center	NH0495	23	0	0	23	0	0	0	23
Graham Totals			23	0	0	23	0	0	0	23
Granville	Granville House	HAL-039-016	0	0	60	60	0	0	0	60
Granville	Heritage Meadows Long Term Care	HAL-039-015	0	0	80	80	0	0	0	80
Granville	Toney Rest Home	HAL-039-017	0	0	60	60	0	0	0	60
Granville	Tre' More Manor ALF	HAL-039-018	0	0	31	31	0	0	0	31
Granville	Universal Health Care/Oxford	NH0447	20	0	0	20	0	0	0	20
Granville Totals			20	0	231	251	0	0	0	251
Greene	Greendale Forest Nursing and Rehabilitation Center	NH0373	17	0	0	17	0	0	0	17
Greene	Snow Hill Assisted Living	HAL-040-009	0	0	40	40	0	0	0	40
Greene Totals			17	0	40	57	0	0	0	57
Guilford	Abbotswood at Irving Park Assisted Living	HAL-041-060	0	0	28	28	0	0	0	28
Guilford	Alpha Concord of Greensboro	HAL-041-082	0	0	64	64	0	0	0	64
Guilford	Arbor Care Assisted Living (Closed 12/31/2018. Transfer 92 to The Crossings at Greensboro)	HAL-041-075	0	0	92	92	0	-92	0	0
Guilford	Blumenthal Nursing & Rehabilitation Center	NH0135	20	0	0	20	0	0	0	20
Guilford	Brighton Gardens of Greensboro	HAL-041-087	0	0	125	125	0	0	0	125
Guilford	Brookdale High Point	HAL-041-030	0	0	82	82	0	0	0	82
Guilford	Brookdale High Point North	HAL-041-033	0	0	65	65	0	0	0	65
Guilford	Brookdale High Point North AL (NC)	HAL-041-039	0	0	102	102	0	0	0	102
Guilford	Brookdale Lawndale Park	HAL-041-062	0	0	118	118	0	0	0	118
Guilford	Brookdale Northwest Greensboro	HAL-041-031	0	0	81	81	0	0	0	81
Guilford	Brookdale Skeet Club	HAL-041-029	0	0	79	79	0	0	0	79
Guilford	Carriage House Senior Living Community	HAL-041-065	0	0	108	108	0	0	0	108

Table 11A: Inventory of Adult Care Home (Assisted Living) Beds

A	B	C	D	E	F	G	H	I	J	K
Service Area	Facility Name	License Number	Licensed Beds in Nursing Homes	Licensed Beds in Hospitals	Licensed Beds in Adult Care Facilities	Total Licensed Beds	CON Approved/ License Pending		Available in SMFP	Total Planning Inventory
							CON	CON Bed Transfer		
Guilford	Clapp's Assisted Living	HAL-041-054	0	0	30	30	0	0	0	30
Guilford	Countryside	NH0226	16	0	0	16	0	0	0	16
Guilford	Guilford House	HAL-041-077	0	0	60	60	0	0	0	60
Guilford	Harmony at Greensboro	HAL-041-086	0	0	92	92	0	0	0	92
Guilford	Heartland Living & Rehab @ The Moses H Cone Mem Hosp	NH0601	37	0	0	37	0	0	0	37
Guilford	Holden Heights	HAL-041-080	0	0	96	96	0	0	0	96
Guilford	Lawson's Adult Enrichment Center	HAL-041-015	0	0	18	18	0	0	0	18
Guilford	Maple Grove Health and Rehabilitation Center	NH0552	40	0	0	40	0	0	0	40
Guilford	Morningview at Irving Park	HAL-041-052	0	0	105	105	0	0	0	105
Guilford	Piedmont Christian Home	HAL-041-010	0	0	93	93	0	0	0	93
Guilford	Richland Place	HAL-041-081	0	0	70	70	0	0	0	70
Guilford	Spring Arbor of Greensboro	HAL-041-074	0	0	100	100	0	0	0	100
Guilford	St. Gales Estates	HAL-041-023	0	0	60	60	0	0	0	60
Guilford	The Arboretum at Heritage Greens	HAL-041-078	0	0	66	66	0	0	0	66
Guilford	The Elms at Abbotswood	HAL-041-085	0	0	48	48	0	0	0	48
Guilford	Verra Springs at Heritage Greens	HAL-041-079	0	0	45	45	0	0	0	45
Guilford	Wellington Oaks	HAL-041-072	0	0	85	85	0	0	0	85
Guilford	Westchester Harbour	HAL-041-073	0	0	90	90	0	0	0	90
Guilford Totals			113	0	2,002	2,115	0	-92	0	2,023
Halifax	Bryan Health and Rehab	NH0656	20	0	0	20	0	0	0	20
Halifax	Carolina Rest Home	HAL-042-005	0	0	40	40	0	0	0	40
Halifax	Liberty Commons Nsg and Rehab Ctr of Halifax County (Transfer 16 to Chatham County Rehabilitation Center in Chatham County)	NH0469	25	0	0	25	0	-16	0	9
Halifax	Scotland House	HAL-042-006	0	0	60	60	0	0	0	60
Halifax	The Landings of Lake Gaston	HAL-042-007	0	0	60	60	0	0	0	60
Halifax	The Landings of Lake Gaston (Replacement facility. Transfer 60 from Woodhaven Rest Home #2)		0	0	60	60	0	60	0	120
Halifax	Woodhaven Rest Home #1 (Closed 1/01/2009. Transfer 60 to replacement facility)	HAL-042-002	0	0	0	0	0	-60	0	-60
Halifax	Woodhaven Rest Home #1 (Replacement facility)		0	0	0	0	0	60	0	60
Halifax Totals			45	0	220	265	0	44	0	309
Harnett	Absolute Care Assisted Living	HAL-043-029	0	0	12	12	0	0	0	12
Harnett	Absolute Care Assisted Living II	HAL-043-031	0	0	12	12	0	0	0	12
Harnett	Arc of Dunn	HAL-043-033	0	0	36	36	0	0	0	36
Harnett	Green Leaf Care Center	HAL-043-027	0	0	105	105	0	0	0	105
Harnett	Johnson Better Care Facility	HAL-043-003	0	0	50	50	0	0	0	50
Harnett	Oak Hill Living Center	HAL-043-015	0	0	122	122	0	0	0	122
Harnett	Pinecrest Gardens	HAL-043-022	0	0	60	60	0	0	0	60

Table 11A: Inventory of Adult Care Home (Assisted Living) Beds

A	B	C	D	E	F	G	H	I	J	K
Service Area	Facility Name	License Number	Licensed Beds in Nursing Homes	Licensed Beds in Hospitals	Licensed Beds in Adult Care Facilities	Total Licensed Beds	CON Approved/ License Pending		Available in SMFP	Total Planning Inventory
							CON	CON Bed Transfer		
Harnett	Senior Citizens Village	HAL-043-006	0	0	65	65	0	0	0	65
Harnett	Senter's Rest Home	HAL-043-024	0	0	50	50	0	0	0	50
Harnett	The Carrolton of Dunn	NH0482	8	0	0	8	0	0	0	8
Harnett	Universal Health Care/Lillington	NH0444	106	0	0	106	0	0	0	106
Harnett Totals			114	0	512	626	0	0	0	626
Haywood	Autumn Care of Waynesville	NH0366	10	0	0	10	0	0	0	10
Haywood	Chestnut Park Rest Home #1 (Closed 12/31/2020. Transfer 1 to Haywood Lodge and Retirement Center. Transfer 9 to Spicewood Cottages Meadows.)	HAL-044-002	0	0	10	10	0	-10	0	0
Haywood	Chestnut Park Retirement Center	HAL-044-022	0	0	20	20	0	0	0	20
Haywood	Creekside Villas	HAL-044-044	0	0	20	20	0	0	0	20
Haywood	Haywood House	HAL-044-042	0	0	60	60	0	0	0	60
Haywood	Haywood Lodge and Retirement Center (Transfer 3 from Spicewood Cottages Elms, 1 from Chestnut Park Rest Home #1)	HAL-044-009	0	0	68	68	0	4	0	72
Haywood	McCracken Rest Home	HAL-044-046	0	0	22	22	0	0	0	22
Haywood	Pigeon Valley Rest Home	HAL-044-012	0	0	29	29	0	0	0	29
Haywood	Richland Community Care #2	HAL-044-045	0	0	11	11	0	0	0	11
Haywood	Silver Bluff LLC	NH0458	13	0	0	13	0	0	0	13
Haywood	Spicewood Cottage Meadows (Transfer 9 from Chestnut Park Rest Home #1.)		0	0	0	0	0	9	0	9
Haywood	Spicewood Cottages Elms (Transfer 3 to Haywood Lodge and Retirement Center)	HAL-044-039	0	0	20	20	0	-3	0	17
Haywood	Spicewood Cottages Oaks	HAL-044-040	0	0	20	20	0	0	0	20
Haywood	Spicewood Cottages Willows	HAL-044-041	0	0	20	20	0	0	0	20
Haywood Totals			23	0	300	323	0	0	0	323
Henderson	Carolina Reserve of Hendersonville	HAL-045-125	0	0	61	61	0	0	0	61
Henderson	Carolina Reserve of Laurel Park	HAL-045-126	0	0	48	48	0	0	0	48
Henderson	Cherry Springs Village	HAL-045-115	0	0	60	60	0	0	0	60
Henderson	Country Meadow Rest Home (Closed 12/31/2018. Transfer 15 to The Landings of Hendersonville)	HAL-045-012	0	0	15	15	0	-15	0	0
Henderson	Henderson's Assisted Living	HAL-045-113	0	0	26	26	0	0	0	26
Henderson	Heritage Hills A Pacifica Senior Living Community	HAL-045-123	0	0	24	24	0	0	0	24
Henderson	McCullough's Rest Home	HAL-045-005	0	0	13	13	0	0	0	13
Henderson	Mountain View Assisted Living	HAL-045-112	0	0	27	27	0	0	0	27
Henderson	TerraBella Hendersonville	HAL-045-130	0	0	96	96	0	0	0	96
Henderson	The Gardens of Hendersonville	HAL-045-129	0	0	60	60	0	0	0	60
Henderson	The Gardens of the Blue Ridge (Closed. Transfer 43 to The Landings of Hendersonville)	HAL-045-128	0	0	45	45	0	-43	0	2

Table 11A: Inventory of Adult Care Home (Assisted Living) Beds

A	B	C	D	E	F	G	H	I	J	K
Service Area	Facility Name	License Number	Licensed Beds in Nursing Homes	Licensed Beds in Hospitals	Licensed Beds in Adult Care Facilities	Total Licensed Beds	CON Approved/ License Pending		Available in SMFP	Total Planning Inventory
							CON	CON Bed Transfer		
Henderson	The Landings of Hendersonville (Transfer 15 from Country Meadows Rest Home and 43 from The Gardens of the Blue Ridge)		0	0	0	0	0	58	0	58
Henderson	The Landings of Mills River	HAL-045-127	0	0	65	65	0	0	0	65
Henderson	The Laurels of Hendersonville	NH0480	20	0	0	20	0	0	0	20
Henderson Totals			20	0	540	560	0	0	0	560
Hertford	Ahoskie Assisted Living	HAL-046-020	0	0	92	92	0	0	0	92
Hertford	Ahoskie House	HAL-046-004	0	0	60	60	0	0	0	60
Hertford Totals			0	0	152	152	0	0	0	152
Hoke	Autumn Care of Raeford	NH0438	8	0	0	8	0	0	0	8
Hoke	Open Arms Retirement Center	HAL-047-014	0	0	90	90	0	0	0	90
Hoke	Wickshire Creeks Crossing	HAL-047-015	0	0	75	75	0	0	0	75
Hoke Totals			8	0	165	173	0	0	0	173
Hyde	Cross Creek Health Care	NH0515	30	0	0	30	0	0	0	30
Hyde Totals			30	0	0	30	0	0	0	30
Iredell	Autumn Care of Statesville	NH0599	10	0	0	10	0	0	0	10
Iredell	Brookdale East Broad	HAL-049-019	0	0	58	58	0	0	0	58
Iredell	Brookdale Peachtree AL	HAL-049-020	0	0	87	87	0	0	0	87
Iredell	Brookdale Peachtree MC	HAL-049-021	0	0	40	40	0	0	0	40
Iredell	Cadence Mooresville (Beds awarded per settlement agreement from 2000 & 2007)	HAL-049-034	0	0	96	96	0	0	0	96
Iredell	Crown Colony	HAL-049-010	0	0	60	60	0	0	0	60
Iredell	Heritage Place	HAL-049-036	0	0	40	40	0	0	0	40
Iredell	Jurney's Assisted Living	HAL-049-015	0	0	60	60	0	0	0	60
Iredell	Maple Leaf Health Care	NH0488	8	0	0	8	0	0	0	8
Iredell	Mill Creek Manor	HAL-049-033	0	0	80	80	0	0	0	80
Iredell	Olin Village	HAL-049-016	0	0	64	64	0	0	0	64
Iredell	Rosewood Assisted Living	HAL-049-004	0	0	54	54	0	0	0	54
Iredell	Summit Place of Mooresville	HAL-049-030	0	0	60	60	0	0	0	60
Iredell	Terrabella Lake Norman	HAL-049-032	0	0	120	120	0	0	0	120
Iredell	The Citadel Mooresville	NH0435	30	0	0	30	0	0	0	30
Iredell	The Gardens of Statesville	HAL-049-023	0	0	67	67	0	0	0	67
Iredell Totals			48	0	886	934	0	0	0	934
Jackson	Morningstar Assisted Living	HAL-050-016	0	0	55	55	0	0	0	55
Jackson	The Hermitage	HAL-050-017	0	0	90	90	0	0	0	90
Jackson Totals			0	0	145	145	0	0	0	145
Johnston	A1A - Assisted Living at The ARC of Benson	HAL-051-066	0	0	12	12	0	0	0	12
Johnston	Autumn Home Care of Johnston County I	HAL-051-002	0	0	12	12	0	0	0	12

Table 11A: Inventory of Adult Care Home (Assisted Living) Beds

A	B	C	D	E	F	G	H	I	J	K
Service Area	Facility Name	License Number	Licensed Beds in Nursing Homes	Licensed Beds in Hospitals	Licensed Beds in Adult Care Facilities	Total Licensed Beds	CON Approved/ License Pending		Available in SMFP	Total Planning Inventory
							CON	CON Bed Transfer		
Johnston	Autumn Home Care of Johnston County II	HAL-051-003	0	0	12	12	0	0	0	12
Johnston	Autumn Home Care of Johnston County III	HAL-051-001	0	0	12	12	0	0	0	12
Johnston	Brookdale Smithfield	HAL-051-024	0	0	74	74	0	0	0	74
Johnston	Cardinal Care Assisted Living Village #1 (Closed. Transfer 12 to Johnston Manor)	HAL-051-033	0	0	12	12	0	-12	0	0
Johnston	Cardinal Care Assisted Living Village #2 (Closed. Transfer 12 to Johnston Manor)	HAL-051-032	0	0	12	12	0	-12	0	0
Johnston	Cardinal Care Assisted Living Village #3 (Closed. Transfer 12 to Johnston Manor)	HAL-051-030	0	0	12	12	0	-12	0	0
Johnston	Cardinal Care Assisted Living Village #4 (Closed. Transfer 12 to Johnston Manor)	HAL-051-035	0	0	12	12	0	-12	0	0
Johnston	Cardinal Care Assisted Living Village #5 (Closed. Transfer 12 to Johnston Manor)	HAL-051-031	0	0	12	12	0	-12	0	0
Johnston	Cardinal Care Assisted Living Village #6 (Closed. Transfer 12 to Johnston Manor)	HAL-051-034	0	0	12	12	0	-12	0	0
Johnston	Classic Care Homes #1	HAL-051-062	0	0	12	12	0	0	0	12
Johnston	Classic Care Homes #2	HAL-051-064	0	0	12	12	0	0	0	12
Johnston	Classic Care Homes #3	HAL-051-063	0	0	12	12	0	0	0	12
Johnston	Clayton House	HAL-051-041	0	0	60	60	0	0	0	60
Johnston	Four Oaks Senior Living	HAL-051-060	0	0	96	96	0	0	0	96
Johnston	Gabriel Manor Assisted Living Center	HAL-051-048	0	0	77	77	0	0	0	77
Johnston	Johnston Manor (Replacement facility; of the 132 beds originally relocated to Johnston Manor, 66 were relocated to Johnston Senior Living)		0	0	0	0	0	66	0	66
Johnston	Johnston Senior Living		0	0	0	0	0	66	0	66
Johnston	Liberty Commons Nsg and Rehab Ctr of Johnston Cty	NH0606	60	0	0	60	0	0	0	60
Johnston	Meadowview Assisted Living Center	HAL-051-047	0	0	60	60	0	0	0	60
Johnston	Progressive Care of Princeton	HAL-051-052	0	0	12	12	0	0	0	12
Johnston	Providence Assisted Living	HAL-051-061	0	0	20	20	0	0	0	20
Johnston	Smithfield House West (Closed12/31/2015. Transfer 60 to Johnston Manor.)	HAL-051-042	0	0	60	60	0	-60	0	0
Johnston	Smithfield Manor Nursing and Rehab	NH0182	20	0	0	20	0	0	0	20
Johnston	The ARC of Benson	HAL-051-067	0	0	12	12	0	0	0	12
Johnston	The Landings of Smithfield	HAL-051-065	0	0	66	66	0	0	0	66
Johnston Totals			80	0	693	773	0	0	0	773
Jones	Brook Stone Living Center	NH0508	20	0	0	20	0	0	0	20
Jones Totals			20	0	0	20	0	0	0	20
Lee	A Step from Home Residential Care Facility (Closed 5/24/2015. Transfer 20 to Westfield Rehabilitation and Health Center)	HAL-053-023	0	0	20	20	0	-20	0	0

Table 11A: Inventory of Adult Care Home (Assisted Living) Beds

A	B	C	D	E	F	G	H	I	J	K
Service Area	Facility Name	License Number	Licensed Beds in Nursing Homes	Licensed Beds in Hospitals	Licensed Beds in Adult Care Facilities	Total Licensed Beds	CON Approved/ License Pending		Available in SMFP	Total Planning Inventory
							CON	CON Bed Transfer		
Lee	Oakhaven Home	HAL-053-001	0	0	40	40	0	0	0	40
Lee	Oakhaven II	HAL-053-002	0	0	12	12	0	0	0	12
Lee	Parkview Retirement Center	HAL-053-004	0	0	116	116	0	0	0	116
Lee	Sanford Manor	HAL-053-030	0	0	85	85	0	0	0	85
Lee	Sanford Senior Living	HAL-053-031	0	0	50	50	0	0	0	50
Lee	Westfield Rehabilitation and Health Center (Transfer 20 from A Step from Home Residential Care Facility)	NH0285	0	0	0	0	0	20	0	20
Lee Totals			0	0	323	323	0	0	0	323
Lenoir	Legacy Memory Care at Kinston	HAL-054-070	0	0	24	24	0	0	0	24
Lenoir	Lenoir Assisted Living	HAL-054-068	0	0	94	94	0	0	0	94
Lenoir	Rose Vista Assisted Living	HAL-054-069	0	0	60	60	0	0	0	60
Lenoir	Spring Arbor of Kinston	HAL-054-006	0	0	86	86	0	0	0	86
Lenoir	The Village of Kinston	HAL-054-067	0	0	63	63	0	0	0	63
Lenoir Totals			0	0	327	327	0	0	0	327
Lincoln	Amazing Grace Rest Home	HAL-055-001	0	0	10	10	0	0	0	10
Lincoln	Boger City Rest Home	HAL-055-002	0	0	52	52	0	0	0	52
Lincoln	Brian Center Health & Retirement/Lincolnton	NH0385	11	0	0	11	0	0	0	11
Lincoln	Heath House	HAL-055-013	0	0	60	60	0	0	0	60
Lincoln	Lakewood Care Center	HAL-055-003	0	0	60	60	0	0	0	60
Lincoln	North Brook Rest Home	HAL-055-004	0	0	12	12	0	0	0	12
Lincoln	The Addison of Lincolnton (Beds awarded per settlement agreement from 2000 & 2007)	HAL-055-009	0	0	96	96	0	0	0	96
Lincoln	Wexford House	HAL-055-012	0	0	80	80	0	0	0	80
Lincoln Totals			11	0	370	381	0	0	0	381
Macon	Chestnut Hill of Highlands	HAL-056-005	0	0	26	26	0	0	0	26
Macon	Franklin House	HAL-056-006	0	0	70	70	0	0	0	70
Macon	Grandview Manor Care Center	HAL-056-001	0	0	82	82	0	0	0	82
Macon Totals			0	0	178	178	0	0	0	178
Madison	Elderberry Health Care	NH0479	20	0	0	20	0	0	0	20
Madison	Mars Hill Retirement Community	HAL-057-011	0	0	69	69	0	0	0	69
Madison Totals			20	0	69	89	0	0	0	89
Martin	Vintage Inn Retirement Community	HAL-058-010	0	0	122	122	0	0	0	122
Martin	Williamston House	HAL-058-011	0	0	60	60	0	0	0	60
Martin Totals			0	0	182	182	0	0	0	182
McDowell	Autumn Care of Marion	NH0346	15	0	0	15	0	0	0	15
McDowell	Cedarbrook Residential Center	HAL-059-021	0	0	80	80	0	0	0	80
McDowell	Houston House	HAL-059-033	0	0	29	29	0	0	0	29
McDowell	Lake James Lodge Assisted Living	HAL-059-032	0	0	60	60	0	0	0	60

Table 11A: Inventory of Adult Care Home (Assisted Living) Beds

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							CON	CON Bed Transfer		
McDowell	McDowell Assisted Living	HAL-059-017	0	0	54	54	0	0	0	54
McDowell	McDowell House	HAL-059-034	0	0	25	25	0	0	0	25
McDowell	Rose Hill Retirement Community	HAL-059-027	0	0	87	87	0	0	0	87
McDowell Totals			15	0	335	350	0	0	0	350
Mecklenburg	Arbor Ridge at Huntersville		0	0	0	0	40	0	0	40
Mecklenburg	Briar Creek Health Center	NH0659	108	0	0	108	0	0	0	108
Mecklenburg	Brighton Gardens of Charlotte	HAL-060-019	0	0	125	125	0	0	0	125
Mecklenburg	Brookdale Carriage Club Providence II	HAL-060-049	0	0	34	34	0	0	0	34
Mecklenburg	Brookdale Charlotte East	HAL-060-060	0	0	50	50	0	0	0	50
Mecklenburg	Brookdale South Charlotte	HAL-060-101	0	0	82	82	0	0	0	82
Mecklenburg	Brookdale South Park	HAL-060-085	0	0	56	56	0	0	0	56
Mecklenburg	Brookdale Weddington Park	HAL-060-042	0	0	83	83	0	0	0	83
Mecklenburg	Cadence Huntersville	HAL-060-160	0	0	96	96	0	0	0	96
Mecklenburg	Cadence Senior Living at Mint Hill	HAL-060-159	0	0	84	84	0	0	0	84
Mecklenburg	Carrington Place	NH0060	10	0	0	10	0	0	0	10
Mecklenburg	East Towne	HAL-060-149	0	0	120	120	0	0	0	120
Mecklenburg	Hunter Village	HAL-060-014	0	0	68	68	0	0	0	68
Mecklenburg	Hunter Woods Nursing and Rehabilitation Center (Transfer 10 to CCRC Windsor Point in Wake County)	NH0503	10	0	0	10	0	-10	0	0
Mecklenburg	Legacy Heights Senior Living Community	HAL-060-152	0	0	122	122	0	0	0	122
Mecklenburg	Liberty Commons Nursing and Rehabilitation Center of Mint Hill (Transfer 12 beds from Radbourne Manor Village)		0	0	0	0	0	12	0	12
Mecklenburg	MerryWood on Park	HAL-060-155	0	0	20	20	0	0	0	20
Mecklenburg	Mint Hill Senior Living	HAL-060-136	0	0	82	82	0	0	0	82
Mecklenburg	Northlake House	HAL-060-150	0	0	48	48	0	0	0	48
Mecklenburg	Oakbridge Terrace @ Matthews Glen	HAL-060-167	0	0	60	60	0	0	0	60
Mecklenburg	Parker Terrace	HAL-060-054	0	0	53	53	0	0	0	53
Mecklenburg	Pineville Rehabilitation and Living Center	NH0521	10	0	0	10	0	0	0	10
Mecklenburg	Preston House	HAL-060-169	0	0	40	40	0	0	0	40
Mecklenburg	Queen City Assisted Living	HAL-060-126	0	0	120	120	0	0	0	120
Mecklenburg	Radbourne Manor Village (Transfer 12 to Liberty Commons Nursing & Rehabilitation Center of Mint Hill. Transfer 4 ACH beds to The Terrace at Brightmore of South Charlotte. Transfer 8 ACH beds to CCRC The Barclay at South Park.)		0	0	0	0	0	-24	0	-24
Mecklenburg	Ranson Ridge at the Villages of Mecklenburg	HAL-060-147	0	0	100	100	0	0	0	100
Mecklenburg	Saturn Nursing and Rehabilitation Center	NH0557	20	0	0	20	0	0	0	20
Mecklenburg	Summit Place of Southpark	HAL-060-116	0	0	120	120	0	0	0	120
Mecklenburg	Sunrise on Providence	HAL-060-165	0	0	95	95	0	0	0	95
Mecklenburg	TerraBella Little Avenue	HAL-060-156	0	0	62	62	0	0	0	62

Table 11A: Inventory of Adult Care Home (Assisted Living) Beds

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							CON	CON Bed Transfer		
Mecklenburg	The Charlotte Assisted Living	HAL-060-158	0	0	119	119	0	0	0	119
Mecklenburg	The Haven in Highland Creek	HAL-060-162	0	0	60	60	0	0	0	60
Mecklenburg	The Haven in the Village at Carolina Place	HAL-060-163	0	0	60	60	0	0	0	60
Mecklenburg	The Laurels in Highland Creek	HAL-060-161	0	0	105	105	0	0	0	105
Mecklenburg	The Laurels in the Village at Carolina Place	HAL-060-164	0	0	104	104	0	0	0	104
Mecklenburg	The Little Flower Assisted Living	HAL-060-109	0	0	49	49	0	0	0	49
Mecklenburg	The Parc at Sharon Amity	HAL-060-125	0	0	64	64	0	0	0	64
Mecklenburg	The Pines On Carmel Senior Living	HAL-060-168	0	0	125	125	0	0	0	125
Mecklenburg	The Social at Cotswold	HAL-060-132	0	0	104	104	0	0	0	104
Mecklenburg	The Terrace at Brightmore of South Charlotte	HAL-060-157	0	0	34	34	0	4	0	38
Mecklenburg	University Place Nursing and Rehabilitation Center	NH0016	10	0	0	10	0	0	0	10
Mecklenburg	Waltonwood at Providence	HAL-060-138	0	0	80	80	0	0	0	80
Mecklenburg	Waltonwood Cotswold (85 beds added per settlement agreement.)	HAL-060-148	0	0	125	125	0	0	0	125
Mecklenburg	Wickshire Steele Creek	HAL-060-166	0	0	90	90	0	0	0	90
Mecklenburg	Willow Ridge Assisted Living	HAL-060-111	0	0	52	52	0	0	0	52
Mecklenburg	Wilora Lake Healthcare Center (Transfer 20 to CCRC The Barclay of SouthPark)	NH0572	20	0	0	20	0	-20	0	0
Mecklenburg Totals			188	0	2,891	3,079	40	-38	0	3,081
Mitchell	Mitchell House	HAL-061-011	0	0	80	80	0	0	0	80
Mitchell Totals			0	0	80	80	0	0	0	80
Montgomery	Autumn Care of Biscoe	NH0411	10	0	0	10	0	0	0	10
Montgomery	Montgomery Senior Living	HAL-062-016	0	0	54	54	0	0	0	54
Montgomery	Poplar Springs Assisted Living	HAL-062-015	0	0	12	12	0	0	0	12
Montgomery	Sandy Ridge Assisted Living	HAL-062-009	0	0	120	120	0	0	0	120
Montgomery Totals			10	0	186	196	0	0	0	196
Moore	Accordius Health at Aberdeen	NH0597	18	0	0	18	0	0	0	18
Moore	Brookdale Pinehurst	HAL-063-024	0	0	76	76	0	0	0	76
Moore	Fox Hollow Senior Living Community	HAL-063-022	0	0	85	85	0	0	0	85
Moore	Magnolia Gardens	HAL-063-007	0	0	110	110	0	0	0	110
Moore	Peak Resources-Pinelake	NH0539	20	0	0	20	0	0	0	20
Moore	Seven Lakes Assisted Living	HAL-063-023	0	0	60	60	0	0	0	60
Moore	Tara Plantation of Carthage	HAL-063-011	0	0	80	80	0	0	0	80
Moore	TerraBella Southern Pines	HAL-063-025	0	0	94	94	0	0	0	94
Moore Totals			38	0	505	543	0	0	0	543
Nash	Autumn Care of Nash	NH0602	20	0	0	20	0	0	0	20
Nash	Breckenridge Retirement Center	HAL-064-004	0	0	64	64	0	0	0	64
Nash	Brookdale Rocky Mount	HAL-064-008	0	0	60	60	0	0	0	60

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							CON	CON Bed Transfer		
Nash	Hunter Hill Senior Living	HAL-064-032	0	0	64	64	0	0	0	64
Nash	Somerset Court of Rocky Mount	HAL-064-029	0	0	60	60	0	0	0	60
Nash	South Village (Replacement facility)		0	0	0	0	0	15	0	15
Nash	Spring Arbor of Rocky Mount	HAL-064-005	0	0	84	84	0	0	0	84
Nash	The Carrolton of Nash	NH0437	9	0	0	9	0	0	0	9
Nash	The Gardens of Nashville (Transfer 60 to The Landings of Rocky Mount)	HAL-064-031	0	0	122	122	0	-60	0	62
Nash	The Landings of Rocky Mount (Transfer 60 from the Gardens of Nashville)		0	0	0	0	0	60	0	60
Nash	The Lodge at Rocky Mount	NH0122	15	0	0	15	0	-15	0	0
Nash	Trinity Retirement Villas #1 (Closed 12/22/2021)	HAL-064-014	0	0	12	12	0	0	0	12
Nash	Trinity Retirement Villas #2 (Closed 10/04/2021)	HAL-064-013	0	0	12	12	0	0	0	12
Nash Totals			44	0	478	522	0	0	0	522
New Hanover	Autumn Care of Myrtle Grove	NH0595	20	0	0	20	0	0	0	20
New Hanover	Brookdale Wilmington	HAL-065-019	0	0	38	38	0	0	0	38
New Hanover	Castle Creek Memory Care	HAL-065-034	0	0	84	84	0	0	0	84
New Hanover	Cedar Cove Assisted Living	HAL-065-035	0	0	64	64	0	0	0	64
New Hanover	Champions Assisted Living	HAL-065-020	0	0	148	148	0	0	0	148
New Hanover	Fannie Norwood Memorial Home (Closed 2/23/2018. Transfer 16 to Tidewater at Carolina Bay)	HAL-065-004	0	0	16	16	0	-16	0	0
New Hanover	Liberty Commons Rehabilitation Center (72 beds originally to be relocated to this facility from Port South Village are now to be relocated to Tidewater at Carolina Bay)	NH0569	40	0	0	40	0	0	0	40
New Hanover	Morningside of Wilmington	HAL-065-045	0	0	101	101	0	0	0	101
New Hanover	New Hanover House (Transfer 40 from Sherwood Manor)	HAL-065-036	0	0	61	61	0	40	0	101
New Hanover	Port South Village/Carmen D. Villa (Closed 12/31/2015. Transfer 12 to Liberty Commons Rehabilitation Center)	HAL-065-031	0	0	12	12	0	-12	0	0
New Hanover	Port South Village/Catherine S. Villa (Closed 10/22/2015. Transfer 12 to Liberty Commons Rehabilitation Center)	HAL-065-043	0	0	12	12	0	-12	0	0
New Hanover	Port South Village/Crystal L. Villa (Closed 10/22/2015. Transfer 12 to Liberty Commons Rehabilitation Center)	HAL-065-042	0	0	42	42	0	-12	0	30
New Hanover	Port South Village/Lorraine B. Villa (Closed 10/22/2015. Transfer 12 to Liberty Commons Rehabilitation Center)	HAL-065-027	0	0	12	12	0	-12	0	0
New Hanover	Port South Village/Tara L. Villa (Closed 10/22/2015. Transfer 12 to Liberty Commons Rehabilitation Center)	HAL-065-025	0	0	12	12	0	-12	0	0
New Hanover	Port South Village/Teresa C. Villa (Closed 10/22/2015. Transfer 12 to Liberty Commons Rehabilitation Center)	HAL-065-040	0	0	12	12	0	-12	0	0
New Hanover	Sherwood Manor Rest Home (Transfer 40 to New Hanover House)	HAL-065-011	0	0	40	40	0	-40	0	0
New Hanover	Spring Arbor of Wilmington	HAL-065-014	0	0	66	66	0	0	0	66

Table 11A: Inventory of Adult Care Home (Assisted Living) Beds

A	B	C	D	E	F	G	H	I	J	K
Service Area	Facility Name	License Number	Licensed Beds in Nursing Homes	Licensed Beds in Hospitals	Licensed Beds in Adult Care Facilities	Total Licensed Beds	CON Approved/ License Pending		Available in SMFP	Total Planning Inventory
							CON	CON Bed Transfer		
New Hanover	The Commons at Brightmore (Transfer 32 ACH beds to The Commons of Brunswick County in Brunswick County)	HAL-065-002	0	0	201	201	0	-32	0	169
New Hanover	The Kempton at Brightmore	HAL-065-023	0	0	84	84	0	0	0	84
New Hanover	Tidewater at Carolina Bay (Transferred 16 from Fannie Norwood Memorial Home and 72 originally relocated to Liberty Commons Rehabilitation Center)		0	0	0	0	0	88	0	88
New Hanover Totals			60	0	1,005	1,065	0	-32	0	1,033
Northampton	Hampton Manor (Transfer 33 from The Oaks at Pleasant Hill)	HAL-066-012	0	0	82	82	0	33	0	115
Northampton	Pine Forest Rest Home	HAL-066-001	0	0	24	24	0	0	0	24
Northampton	Rich Square Manor	HAL-066-011	0	0	32	32	0	0	0	32
Northampton	Rich Square Villa (Transfer 33 from The Oaks at Pleasant Hill)	HAL-066-010	0	0	38	38	0	33	0	71
Northampton	The Oaks at Pleasant Hill (Closed 12/31/2021. Transfer 33 to Hampton Manor and 33 to Rich Square Villa)	HAL-066-018	0	0	66	66	0	-66	0	0
Northampton Totals			0	0	242	242	0	0	0	242
Onslow	Kempton of Jacksonville	HAL-067-008	0	0	79	79	0	0	0	79
Onslow	Lighthouse Village	HAL-067-013	0	0	80	80	0	0	0	80
Onslow	Onslow House	HAL-067-023	0	0	120	120	0	0	0	120
Onslow	Premier Nursing and Rehabilitation Center	NH0229	7	0	0	7	0	0	0	7
Onslow	The Arc Community	HAL-067-004	0	0	32	32	0	0	0	32
Onslow	The Heritage of Richlands	HAL-067-016	0	0	40	40	0	0	0	40
Onslow	The Landings of Swansboro	HAL-067-025	0	0	80	80	0	0	0	80
Onslow Totals			7	0	431	438	0	0	0	438
Orange	Adorable Senior Living	HAL-068-034	0	0	17	17	0	0	0	17
Orange	Brookdale Meadowmont	HAL-068-008	0	0	64	64	0	0	0	64
Orange	Carlisle of Carrboro	HAL-068-036	0	0	120	120	0	0	0	120
Orange	Parkview Health and Rehabilitation Center	NH0239	7	0	0	7	0	0	0	7
Orange	Peak Resources - Brookshire, Inc.	NH0545	20	0	0	20	0	0	0	20
Orange	TerraBella Hillsborough	HAL-068-035	0	0	96	96	0	0	0	96
Orange	The Stratford	HAL-068-025	0	0	77	77	0	0	0	77
Orange Totals			27	0	374	401	0	0	0	401
Pamlico	Grantsbrook Nursing and Rehabilitation Center	NH0450	8	0	0	8	0	0	0	8
Pamlico	The Gardens of Pamlico	HAL-069-002	0	0	70	70	0	0	0	70
Pamlico Totals			8	0	70	78	0	0	0	78
Pasquotank	Brookdale Elizabeth City	HAL-070-005	0	0	76	76	0	0	0	76
Pasquotank	Elizabeth City Health and Rehabilitation	NH0040	24	0	0	24	0	0	0	24
Pasquotank	Heritage Care of Elizabeth City	HAL-070-006	0	0	60	60	0	0	0	60
Pasquotank	Waterbrooke of Elizabeth City	HAL-070-008	0	0	130	130	0	0	0	130

Table 11A: Inventory of Adult Care Home (Assisted Living) Beds

A	B	C	D	E	F	G	H	I	J	K
Service Area	Facility Name	License Number	Licensed Beds in Nursing Homes	Licensed Beds in Hospitals	Licensed Beds in Adult Care Facilities	Total Licensed Beds	CON Approved/ License Pending		Available in SMFP	Total Planning Inventory
							CON	CON Bed Transfer		
Pasquotank Totals			24	0	266	290	0	0	0	290
Pender	Arbor Landing at Hampstead	HAL-071-016	0	0	19	19	0	0	0	19
Pender	Ashe Gardens	HAL-071-017	0	0	60	60	0	0	0	60
Pender	Woodbury Wellness Center Inc	NH0300	100	0	0	100	0	0	0	100
Pender Totals			100	0	79	179	0	0	0	179
Perquimans	Hertford House		0	0	0	0	50	0	0	50
Perquimans	Hertford Manor	HAL-072-013	0	0	24	24	0	0	0	24
Perquimans	The Landings of Albemarle	HAL-072-014	0	0	50	50	0	0	0	50
Perquimans Totals			0	0	74	74	50	0	0	124
Person	Cambridge Hills Assisted Living	HAL-073-003	0	0	120	120	0	0	0	120
Person	Maple Heights Assisted Living	HAL-073-010	0	0	34	34	0	0	0	34
Person	The Canterbury House	HAL-073-018	0	0	60	60	0	0	0	60
Person Totals			0	0	214	214	0	0	0	214
Pitt	Brookdale Dickinson Avenue	HAL-074-011	0	0	76	76	0	0	0	76
Pitt	Brookdale W. Arlington Boulevard	HAL-074-012	0	0	60	60	0	0	0	60
Pitt	Care One Assisted Living of Greenville	HAL-074-044	0	0	120	120	0	0	0	120
Pitt	East Carolina Rehab and Wellness	NH0505	20	0	0	20	0	0	0	20
Pitt	Oak Haven Assisted Living	HAL-074-036	0	0	54	54	0	0	0	54
Pitt	Red Oak Assisted Living	HAL-074-037	0	0	62	62	0	0	0	62
Pitt	Rising Phoenix (Transfer 29 beds from Winterville Manor/Pitt County)		0	0	0	0	0	29	0	29
Pitt	River Oak Assisted Living	HAL-074-043	0	0	80	80	0	0	0	80
Pitt	Spring Arbor - Greenville	HAL-074-010	0	0	66	66	0	0	0	66
Pitt	Winterville Manor (Closed 4/24/2022. Transfer 29 beds to Rising Phoenix)	HAL-074-026	0	0	29	29	0	-29	0	0
Pitt Totals			20	0	547	567	0	0	0	567
Polk	Laurelwoods	HAL-075-010	0	0	60	60	0	0	0	60
Polk	Ridge Rest Assisted Living	HAL-075-011	0	0	12	12	0	0	0	12
Polk	The Gardens of Columbus		0	0	0	0	50	0	0	50
Polk Totals			0	0	72	72	50	0	0	122
Randolph	Brookdale Asheboro	HAL-076-007	0	0	76	76	0	0	0	76
Randolph	Brookstone Haven	HAL-076-034	0	0	120	120	0	0	0	120
Randolph	Cross Road Retirement Community	HAL-076-003	0	0	152	152	0	0	0	152
Randolph	North Pointe	HAL-076-027	0	0	67	67	0	0	0	67
Randolph	North Pointe Assisted Living Of Archdale	HAL-076-032	0	0	56	56	0	0	0	56
Randolph	TerraBella Asheboro	HAL-076-035	0	0	96	96	0	0	0	96
Randolph Totals			0	0	567	567	0	0	0	567
Richmond	Hamlet House	HAL-077-010	0	0	60	60	0	0	0	60

Table 11A: Inventory of Adult Care Home (Assisted Living) Beds

A	B	C	D	E	F	G	H	I	J	K
Service Area	Facility Name	License Number	Licensed Beds in Nursing Homes	Licensed Beds in Hospitals	Licensed Beds in Adult Care Facilities	Total Licensed Beds	CON Approved/ License Pending		Available in SMFP	Total Planning Inventory
							CON	CON Bed Transfer		
Richmond	Hermitage Retirement Center	HAL-077-012	0	0	114	114	0	0	0	114
Richmond	Richmond Pines Healthcare and Rehabilitation Center	NH0455	10	0	0	10	0	0	0	10
Richmond Totals			10	0	174	184	0	0	0	184
Robeson	Covenant Care	HAL-078-038	0	0	30	30	0	0	0	30
Robeson	Cromartie Spring Village Rest Home	HAL-078-082	0	0	11	11	0	0	0	11
Robeson	GlenFlora	NH0533	20	0	0	20	0	0	0	20
Robeson	Greenbrier of Fairmont	HAL-078-112	0	0	100	100	0	0	0	100
Robeson	Hope Springs	HAL-078-100	0	0	63	63	0	0	0	63
Robeson	Morning Star AL # 2	HAL-078-064	0	0	12	12	0	0	0	12
Robeson	Morning Star AL # 3	HAL-078-065	0	0	12	12	0	0	0	12
Robeson	Morning Star AL # 4	HAL-078-067	0	0	12	12	0	0	0	12
Robeson	Red Springs Assisted Living	HAL-078-083	0	0	81	81	0	0	0	81
Robeson	Rivers Edge of Lumberton	HAL-078-111	0	0	104	104	0	0	0	104
Robeson Totals			20	0	425	445	0	0	0	445
Rockingham	Brookdale Eden	HAL-079-009	0	0	82	82	0	0	0	82
Rockingham	Brookdale Reidsville	HAL-079-007	0	0	76	76	0	0	0	76
Rockingham	Highgrove Long Term Care Center	HAL-079-002	0	0	62	62	0	0	0	62
Rockingham	Moyer's Agape Assisted Living	HAL-079-105	0	0	18	18	0	0	0	18
Rockingham	North Pointe of Mayodan	HAL-079-053	0	0	70	70	0	0	0	70
Rockingham	Penn Nursing Center	NH0614	10	0	0	10	0	0	0	10
Rockingham	Pine Forrest Home for the Aged	HAL-079-079	0	0	58	58	0	0	0	58
Rockingham	Reidsville House (Replacement facility)		0	0	0	0	0	43	0	43
Rockingham	Reidsville House (Closed 07/01/2011)	HAL-079-082	0	0	43	43	0	-43	0	0
Rockingham Totals			10	0	409	419	0	0	0	419
Rowan	Alpha Concord Plantation	HAL-080-027	0	0	29	29	0	0	0	29
Rowan	Angels at Heart Assisted Living	HAL-080-029	0	0	28	28	0	0	0	28
Rowan	Best Of Care Assisted Living	HAL-080-019	0	0	25	25	0	0	0	25
Rowan	Bethamy Retirement Center	HAL-080-032	0	0	43	43	0	0	0	43
Rowan	Big Elm Retirement and Nursing Centers	NH0471	96	0	0	96	0	0	0	96
Rowan	Brightmoor Nursing Center	NH0050	43	0	0	43	0	0	0	43
Rowan	Brookdale Salisbury	HAL-080-014	0	0	88	88	0	0	0	88
Rowan	Compass Assisted Living Rowan	HAL-080-028	0	0	89	89	0	0	0	89
Rowan	Deal Care Inn	HAL-080-031	0	0	21	21	0	0	0	21
Rowan	Kannon Creek Assisted Living (Closed 11/15/2018. Transfer 106 to The Landings of Salisbury.)	HAL-080-003	0	0	106	106	0	-106	0	0
Rowan	TerraBella Salisbury	HAL-080-030	0	0	128	128	0	0	0	128
Rowan	The Citadel Salisbury	NH0441	20	0	0	20	0	0	0	20

Table 11A: Inventory of Adult Care Home (Assisted Living) Beds

A	B	C	D	E	F	G	H	I	J	K
Service Area	Facility Name	License Number	Licensed Beds in Nursing Homes	Licensed Beds in Hospitals	Licensed Beds in Adult Care Facilities	Total Licensed Beds	CON Approved/ License Pending		Available in SMFP	Total Planning Inventory
							CON	CON Bed Transfer		
Rowan	The Landings of Salisbury (Replacement facility. Transfer 106 from Kannon Creek Assisted Living)		0	0	0	0	0	106	0	106
Rowan	The Laurels of Salisbury	NH0538	20	0	0	20	0	0	0	20
Rowan	The Meadows of Rockwell Retirement Center	HAL-080-026	0	0	120	120	0	0	0	120
Rowan Totals			179	0	677	856	0	0	0	856
Rutherford	Brookdale Forest City	HAL-081-014	0	0	76	76	0	0	0	76
Rutherford	Cedar Creek Living (Previously Nana's Assisted Living #2)	HAL-081-051	0	0	44	44	0	0	0	44
Rutherford	Colonial Manor Rest Home	HAL-081-001	0	0	34	34	0	0	0	34
Rutherford	Fair Haven Home	NH0531	37	0	0	37	0	0	0	37
Rutherford	Fair Haven of Forest City	NH0474	28	0	0	28	0	0	0	28
Rutherford	Haven-N-Hills Living Center (Closed 12/31/2021. Transfer 46 to Lake Lure)	HAL-081-050	0	0	46	46	0	-46	0	0
Rutherford	Henderson Care Center	HAL-081-010	0	0	86	86	0	0	0	86
Rutherford	Holly Springs Senior Citizens Home	HAL-081-005	0	0	32	32	0	0	0	32
Rutherford	Lake Lure (Transfer 16 from Oak Grove Healthcare Center and 46 from Haven-N-Hills Living Center)		0	0	0	0	0	62	0	62
Rutherford	Oak Grove Healthcare Center (Transfer 16 to Lake Lure Assisted Living)	NH0566	16	0	0	16	0	-16	0	0
Rutherford	Oakland Living Center	HAL-081-013	0	0	40	40	0	0	0	40
Rutherford	Restwell Home	HAL-081-007	0	0	20	20	0	0	0	20
Rutherford	Southern Manor Rest Home	HAL-081-008	0	0	25	25	0	0	0	25
Rutherford	Sunnyside Retirement Home	HAL-081-042	0	0	34	34	0	0	0	34
Rutherford Totals			81	0	437	518	0	0	0	518
Sampson	Clinton Village Senior Center	HAL-082-029	0	0	60	60	0	0	0	60
Sampson	Mary Gran Nursing Center	NH0089	30	0	0	30	0	0	0	30
Sampson	Rolling Ridge Assisted Living	HAL-082-030	0	0	61	61	0	0	0	61
Sampson	The Gardens of Roseboro	HAL-082-028	0	0	40	40	0	0	0	40
Sampson	The Magnolia	HAL-082-022	0	0	91	91	0	0	0	91
Sampson Totals			30	0	252	282	0	0	0	282
Scotland	Prestwick Village	HAL-083-021	0	0	100	100	0	0	0	100
Scotland Totals			0	0	100	100	0	0	0	100
Stanly	Bethany Woods Nursing and Rehabilitation Center	NH0462	10	0	0	10	0	0	0	10
Stanly	Spring Arbor of Albemarle	HAL-084-004	0	0	78	78	0	0	0	78
Stanly	Stanly Manor	NH0464	10	0	0	10	0	0	0	10
Stanly	The Taylor House	HAL-084-001	0	0	30	30	0	0	0	30
Stanly	Trinity Place	NH0140	27	0	0	27	0	0	0	27
Stanly	Woodhaven Court	HAL-084-009	0	0	76	76	0	0	0	76
Stanly Totals			47	0	184	231	0	0	0	231

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A	B	C	D	E	F	G	H	I	J	K
Service Area	Facility Name	License Number	Licensed Beds in Nursing Homes	Licensed Beds in Hospitals	Licensed Beds in Adult Care Facilities	Total Licensed Beds	CON Approved/ License Pending		Available in SMFP	Total Planning Inventory
							CON	CON Bed Transfer		
Stokes	Graceland Living Center I	HAL-085-012	0	0	12	12	0	0	0	12
Stokes	Graceland Living Center II	HAL-085-013	0	0	11	11	0	0	0	11
Stokes	Mountain Valley Living Center	HAL-085-003	0	0	26	26	0	0	0	26
Stokes	Priddy Manor Assisted Living	HAL-085-014	0	0	79	79	0	0	0	79
Stokes	Rose Tara Senior Living	HAL-085-008	0	0	65	65	0	0	0	65
Stokes	Universal Health Care/King	NH0555	24	0	0	24	0	0	0	24
Stokes	Village Care of King	NH0507	20	0	0	20	0	0	0	20
Stokes	Walnut Cove Health and Rehabilitation Center	NH0316	9	0	0	9	0	-9	0	0
Stokes	Walnut Ridge Assisted Living	HAL-085-015	0	0	63	63	0	0	0	63
Stokes Totals			53	0	256	309	0	-9	0	300
Surry	Central Care	HAL-086-001	0	0	53	53	0	0	0	53
Surry	Chatham Nursing & Rehabilitation	NH0640	28	0	0	28	0	0	0	28
Surry	Colonial Long Term Care Facility	HAL-086-002	0	0	54	54	0	0	0	54
Surry	Dunmore Plantation	HAL-086-006	0	0	60	60	0	0	0	60
Surry	Ridge Crest Retirement	HAL-086-010	0	0	28	28	0	0	0	28
Surry	Riverwood Assisted Living Facility	HAL-086-014	0	0	65	65	0	0	0	65
Surry	Twelve Oaks	HAL-086-016	0	0	112	112	0	0	0	112
Surry	Yadkin Valley Senior Living	HAL-086-015	0	0	60	60	0	0	0	60
Surry Totals			28	0	432	460	0	0	0	460
Swain	2022 Need Determination		0	0	0	0	0	0	10	10
Swain	Bryson Senior Living	HAL-087-009	0	0	50	50	0	0	0	50
Swain Totals			0	0	50	50	0	0	10	60
Transylvania	Cedar Mountain House	HAL-088-014	0	0	64	64	0	0	0	64
Transylvania	Kingsbridge House	HAL-088-015	0	0	60	60	0	0	0	60
Transylvania	The Oaks-Brevard	NH0563	10	0	0	10	0	0	0	10
Transylvania Totals			10	0	124	134	0	0	0	134
Tyrrell	Tyrrell House	HAL-089-002	0	0	50	50	0	0	0	50
Tyrrell Totals			0	0	50	50	0	0	0	50
Union	Accordius Health at Monroe	NH0493	12	0	0	12	0	0	0	12
Union	Autumn Care of Marshville	NH0421	10	0	0	10	0	0	0	10
Union	Brookdale Monroe Square 1	HAL-090-024	0	0	102	102	0	0	0	102
Union	Brookdale Monroe Square 2	HAL-090-022	0	0	65	65	0	0	0	65
Union	Brookdale Union Park	HAL-090-007	0	0	87	87	0	0	0	87
Union	Elizabethan Gardens	HAL-090-001	0	0	100	100	0	0	0	100
Union	Hillcrest Church Rest Home	HAL-090-004	0	0	20	20	0	0	0	20
Union	Monroe Manor Assisted Living Building I	HAL-090-034	0	0	12	12	0	0	0	12
Union	Monroe Manor Assisted Living Building II	HAL-090-033	0	0	12	12	0	0	0	12

Table 11A: Inventory of Adult Care Home (Assisted Living) Beds

A	B	C	D	E	F	G	H	I	J	K
Service Area	Facility Name	License Number	Licensed Beds in Nursing Homes	Licensed Beds in Hospitals	Licensed Beds in Adult Care Facilities	Total Licensed Beds	CON Approved/ License Pending		Available in SMFP	Total Planning Inventory
							CON	CON Bed Transfer		
Union	The Addison of Indian Trail (Beds awarded per settlement agreement from 2000 & 2007)	HAL-090-035	0	0	96	96	0	0	0	96
Union	Woodridge Assisted Living Facility	HAL-090-036	0	0	80	80	0	0	0	80
Union Totals			22	0	574	596	0	0	0	596
Vance	Green-Bullock Assisted Living Center (Closed 9/22/2021)	HAL-091-011	0	0	129	129	0	0	0	129
Vance	Kerr Lake Nursing and Rehabilitation Center	NH0353	23	0	0	23	0	0	0	23
Vance	Senior Citizen's Home Inc.	NH0477	54	0	0	54	0	0	0	54
Vance Totals			77	0	129	206	0	0	0	206
Wake	Brighton Gardens of Raleigh	HAL-092-024	0	0	115	115	0	0	0	115
Wake	Brookdale Cary	HAL-092-023	0	0	50	50	0	0	0	50
Wake	Brookdale MacArthur Park	HAL-092-027	0	0	80	80	0	0	0	80
Wake	Brookdale Wake Forest	HAL-092-032	0	0	70	70	0	0	0	70
Wake	Brookridge Assisted Living (Closed. Transfer 55 Mayview Assisted Living Center)	HAL-092-146	0	0	55	55	0	-55	0	0
Wake	Cadence at Wake Forest (Beds awarded per settlement agreement from 2000 & 2007)	HAL-092-213	0	0	96	96	0	0	0	96
Wake	Cadence Garner (Beds awarded per settlement agreement from 2000 & 2007)	HAL-092-215	0	0	84	84	0	0	0	84
Wake	Cadence North Raleigh (Beds awarded per settlement agreement from 2000 & 2007)	HAL-092-214	0	0	96	96	0	0	0	96
Wake	Cary Health and Rehabilitation Center (Transfer 30 ACH beds to CCRC Brightmore Healthcare Center of Cary)	NH0511	30	0	0	30	0	-30	0	0
Wake	Chatham Commons	HAL-092-203	0	0	80	80	0	0	0	80
Wake	Coventry House Of Zebulon	HAL-092-212	0	0	60	60	0	0	0	60
Wake	Falls River Court Memory Care Community	HAL-092-141	0	0	38	38	0	0	0	38
Wake	Falls River Village Assisted Living Community	HAL-092-142	0	0	60	60	0	0	0	60
Wake	Foundation Senior Living	HAL-092-186	0	0	126	126	0	0	0	126
Wake	HeartFields at Cary	HAL-092-216	0	0	97	97	0	0	0	97
Wake	Hillside Nursing Center of Wake Forest	NH0525	20	0	0	20	0	0	0	20
Wake	Lawndale Manor	HAL-092-017	0	0	62	62	0	0	0	62
Wake	Lee's Long Term Care Facility (Transferred 65 to Waltonwood Silverton)	HAL-092-009	0	0	65	65	0	-65	0	0
Wake	Litchford Falls Healthcare and Rehabilitation Center (Transfer 31 beds from Universal Health Care-Fuquay Varina and 20 beds from Universal Health Care-North Raleigh)	NH0558	24	0	0	24	0	51	0	75
Wake	Magnolia Glen (Transfer 10 to The Cardinal at North Hills CCRC)	HAL-092-180	0	0	66	66	0	-10	0	56
Wake	Mayview Assisted Living Center (Transfer 20 from Wellington Rehabilitation and 55 from Brookridge Assisted Living)		0	0	0	0	0	75	0	75
Wake	Morningside of Raleigh	HAL-092-217	0	0	110	110	0	0	0	110

Table 11A: Inventory of Adult Care Home (Assisted Living) Beds

A	B	C	D	E	F	G	H	I	J	K
Service Area	Facility Name	License Number	Licensed Beds in Nursing Homes	Licensed Beds in Hospitals	Licensed Beds in Adult Care Facilities	Total Licensed Beds	CON Approved/ License Pending		Available in SMFP	Total Planning Inventory
							CON	CON Bed Transfer		
Wake	Oliver House	HAL-092-182	0	0	100	100	0	0	0	100
Wake	Phoenix Assisted Care	HAL-092-131	0	0	120	120	0	0	0	120
Wake	Spring Arbor of Apex	HAL-092-037	0	0	76	76	0	0	0	76
Wake	Spring Arbor of Cary	HAL-092-204	0	0	80	80	0	0	0	80
Wake	Spring Arbor of Raleigh	HAL-092-079	0	0	80	80	0	0	0	80
Wake	Sunrise at North Hills	HAL-092-218	0	0	160	160	0	0	0	160
Wake	Sunrise of Cary	HAL-092-209	0	0	85	85	0	0	0	85
Wake	Sunrise of Raleigh	HAL-092-211	0	0	100	100	0	0	0	100
Wake	TerraBella Northridge	HAL-092-207	0	0	161	161	0	0	0	161
Wake	The Addison of Fuquay-Varina (Beds awarded per settlement agreement from 2000 & 2007)	HAL-092-219	0	0	96	96	0	0	0	96
Wake	The Addison of Knightdale (Beds awarded per settlement agreement from 2000 & 2007)	HAL-092-220	0	0	96	96	0	0	0	96
Wake	The Covington	HAL-092-181	0	0	120	120	0	0	0	120
Wake	The Laurels of Forest Glenn	NH0506	20	0	0	20	0	0	0	20
Wake	The Reserve at Mills Farm	HAL-092-221	0	0	35	35	0	0	0	35
Wake	Universal Health Care/Fuquay-Varina (Transfer 31 to Litchford Falls)	NH0637	31	0	0	31	0	-31	0	0
Wake	Universal Health Care/North Raleigh (Transfer 20 to Litchford Falls)	NH0611	20	0	0	20	0	-20	0	0
Wake	Wake Assisted Living	HAL-092-144	0	0	60	60	0	0	0	60
Wake	Waltonwood Cary Parkway (Transfer 9 to Waltonwood Silverton)	HAL-092-161	0	0	85	85	0	-9	0	76
Wake	Waltonwood Lake Boone	HAL-092-210	0	0	68	68	0	0	0	68
Wake	Waltonwood Silverton (Transfer 65 from Lee's Long Term Care Facility and 9 from Waltonwood Cary Parkway)		0	0	0	0	0	74	0	74
Wake	Wellington Rehabilitation and Healthcare (Transfer 20 ACH beds to Mayview Assisted Living)	NH0544	20	0	0	20	0	-20	0	0
Wake	Woodland Terrace	HAL-092-206	0	0	84	84	0	0	0	84
Wake	Zebulon House	HAL-092-143	0	0	60	60	0	0	0	60
Wake Totals			165	0	3,076	3,241	0	-40	0	3,201
Warren	Alpha Magnolia Garden	HAL-093-010	0	0	86	86	0	0	0	86
Warren	Boyd's Rest Home #2	HAL-093-001	0	0	10	10	0	0	0	10
Warren	Warren Hills Nursing Center	NH0360	20	0	0	20	0	0	0	20
Warren Totals			20	0	96	116	0	0	0	116
Washington	Cypress Manor	HAL-094-007	0	0	40	40	0	0	0	40
Washington	The Carrolton of Plymouth	NH0419	9	0	0	9	0	0	0	9
Washington Totals			9	0	40	49	0	0	0	49
Watauga	Deerfield Ridge Assisted Living	HAL-095-009	0	0	96	96	0	0	0	96

Table 11A: Inventory of Adult Care Home (Assisted Living) Beds

A	B	C	D	E	F	G	H	I	J	K
Service Area	Facility Name	License Number	Licensed Beds in Nursing Homes	Licensed Beds in Hospitals	Licensed Beds in Adult Care Facilities	Total Licensed Beds	CON Approved/ License Pending		Available in SMFP	Total Planning Inventory
							CON	CON Bed Transfer		
Watauga	Mountain Care Facilities	HAL-095-002	0	0	60	60	0	0	0	60
Watauga	The Foley Center at Chestnut Ridge	NH0638	20	0	0	20	0	0	0	20
Watauga Totals			20	0	156	176	0	0	0	176
Wayne	Brookdale Berkeley Boulevard	HAL-096-014	0	0	60	60	0	0	0	60
Wayne	Brookdale Country Day Road	HAL-096-026	0	0	104	104	0	0	0	104
Wayne	Countryside Village	HAL-096-049	0	0	40	40	0	0	0	40
Wayne	Eagle's Pointe	HAL-096-051	0	0	104	104	0	0	0	104
Wayne	Fremont Rest Center	HAL-096-024	0	0	50	50	0	0	0	50
Wayne	Goldsboro Assisted Living & Alzheimer's Care	HAL-096-031	0	0	56	56	0	0	0	56
Wayne	Helping Hands Assisted Living	HAL-096-052	0	0	73	73	0	0	0	73
Wayne	LaGrange Gardens Assisted Living	HAL-096-001	0	0	37	37	0	0	0	37
Wayne	Renu Life Extended	HAL-096-022	0	0	37	37	0	0	0	37
Wayne	Somerset Court of Goldsboro	HAL-096-047	0	0	60	60	0	0	0	60
Wayne	Sutton's Retirement Center	HAL-096-029	0	0	40	40	0	0	0	40
Wayne	Wayne County Rest Villa No. 1	HAL-096-003	0	0	12	12	0	0	0	12
Wayne	Wayne County Rest Villa No. 2	HAL-096-004	0	0	12	12	0	0	0	12
Wayne	Woodard's Retirement Village	HAL-096-009	0	0	60	60	0	0	0	60
Wayne Totals			0	0	745	745	0	0	0	745
Wilkes	Rose Glen Manor	HAL-097-015	0	0	60	60	0	0	0	60
Wilkes	The Gardens of Wilkesboro (Replacement facility.)		0	0	0	0	0	99	0	99
Wilkes	Westwood Hills Nursing and Rehabilitation Center	NH0295	10	0	0	10	0	0	0	10
Wilkes	Wilkes County Adult Care (Transfer 99 beds to replacement facility The Gardens of Wilkesboro)	HAL-097-014	0	0	99	99	0	-99	0	0
Wilkes	Wilkesboro Assisted Living Center	HAL-097-016	0	0	102	102	0	0	0	102
Wilkes	Wilkesboro Health and Rehabilitation, LLC	NH0509	19	0	0	19	0	0	0	19
Wilkes Totals			29	0	261	290	0	0	0	290
Wilson	Morning Star Assisted Living #5	HAL-098-031	0	0	58	58	0	0	0	58
Wilson	Parkwood Village	HAL-098-030	0	0	70	70	0	0	0	70
Wilson	Spring Arbor of Wilson	HAL-098-006	0	0	72	72	0	0	0	72
Wilson	Wilson Assisted Living	HAL-098-027	0	0	88	88	0	0	0	88
Wilson	Wilson House	HAL-098-023	0	0	136	136	0	0	0	136
Wilson	Wilson Pines Nursing and Rehabilitation Center	NH0218	30	0	0	30	0	0	0	30
Wilson Totals			30	0	424	454	0	0	0	454
Yadkin	Patriot Living of Yadkinville	HAL-099-018	0	0	50	50	0	0	0	50
Yadkin	Pinebrook Residential Center I	HAL-099-017	0	0	54	54	0	0	0	54
Yadkin	Pinebrook Residential Center II	HAL-099-016	0	0	65	65	0	0	0	65
Yadkin	Yadkin Nursing Care Center	NH0224	20	0	0	20	0	0	0	20
Yadkin Totals			20	0	169	189	0	0	0	189

Table 11A: Inventory of Adult Care Home (Assisted Living) Beds

A	B	C	D	E	F	G	H	I	J	K
Service Area	Facility Name	License Number	Licensed Beds in Nursing Homes	Licensed Beds in Hospitals	Licensed Beds in Adult Care Facilities	Total Licensed Beds	CON Approved/ License Pending		Available in SMFP	Total Planning Inventory
							CON	CON Bed Transfer		
Yancey	Southern Living for Seniors of Burnsville, NC	HAL-100-006	0	0	29	29	0	0	0	29
Yancey	Yancey House	HAL-100-005	0	0	70	70	0	0	0	70
Yancey Totals			0	0	99	99	0	0	0	99
Grand Totals			3,216	0	38,546	41,762	610	-101	10	42,281

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Table 11B: County Rate Calculations for Adult Care Home (Assisted Living) Bed Need Determination

A	B					C					D					E	F	G
	Patients					Populations					Rates					Actual Average Annual Change Rate	Selected Change Rate (County or Adjusted County)	Bed Rate per 1,000
	2017	2018	2019	2020	2021	2017	2018	2019	2020	2021	2017	2018	2019	2020	2021			
Alamance	574	559	595	514	409	161,076	165,749	170,483	170,698	173,384	3.5635	3.3726	3.4901	3.0112	2.3589	-0.0931	-0.0931	1.6998
Alexander	68	82	83	52	60	38,452	38,390	38,530	38,524	36,145	1.7684	2.1360	2.1542	1.3498	1.6600	0.0182	0.0182	1.7505
Alleghany	0	0	0	0	0	11,233	11,466	11,466	11,558	10,829	2.8739	2.8239	2.6395	2.5021	2.3279	-0.0511	-0.0511	0.0000
Anson	41	55	59	55	60	25,626	25,460	25,290	23,889	21,904	1.5999	2.1603	2.3329	2.3023	2.7392	0.1517	0.1517	3.9858
Ashe	103	99	97	99	35	27,218	27,551	27,861	28,020	26,444	3.7843	3.5933	3.4816	3.5332	1.3236	-0.1730	-0.1730	0.6365
Avery	89	81	92	90	76	18,072	17,913	18,022	18,182	17,775	4.9247	4.5219	5.1049	4.9500	4.2757	-0.0299	-0.0299	3.8926
Beaufort	114	91	91	84	88	47,547	47,438	47,480	47,400	44,120	2.3976	1.9183	1.9166	1.7722	1.9946	-0.0377	-0.0377	1.7692
Bertie	84	86	85	73	59	19,881	19,732	19,636	19,496	17,598	4.2251	4.3584	4.3288	3.7444	3.3527	-0.0537	-0.0537	2.8123
Bladen	77	73	74	69	65	34,393	34,298	34,497	34,421	28,771	2.2388	2.1284	2.1451	2.0046	2.2592	0.0050	0.0050	2.2932
Brunswick	211	251	225	127	217	131,726	136,126	142,088	147,644	140,411	1.6018	1.8439	1.5835	0.8602	1.5455	0.0875	0.0875	1.9509
Buncombe	841	813	826	728	676	261,532	262,483	264,056	264,408	272,880	3.2157	3.0973	3.1281	2.7533	2.4773	-0.0617	-0.0617	2.0185
Burke	284	268	310	294	235	90,246	91,555	91,810	91,708	86,783	3.1470	2.9272	3.3765	3.2058	2.7079	-0.0306	-0.0306	2.4597
Cabarrus	565	620	456	532	546	205,473	209,303	212,917	216,841	232,083	2.7498	2.9622	2.1417	2.4534	2.3526	-0.0238	-0.0238	2.1845
Caldwell	198	180	188	101	182	83,303	83,597	83,417	84,230	80,171	2.3769	2.1532	2.2537	1.1991	2.2701	0.0945	0.0945	2.9135
Camden	10	11	11	12	11	10,359	10,414	10,611	10,575	10,469	0.9653	1.0563	1.0367	1.1348	1.0507	0.0240	0.0240	1.1265
Carteret	164	191	149	157	152	70,190	70,619	71,163	71,352	67,311	2.3365	2.7047	2.0938	2.2004	2.2582	0.0022	0.0022	2.2732
Caswell	124	113	87	85	72	23,699	23,309	23,664	23,462	22,582	5.2323	4.8479	3.6765	3.6229	3.1884	-0.1124	-0.1124	2.1132
Catawba	518	521	499	501	424	156,949	157,978	159,494	160,732	161,909	3.3004	3.2979	3.1286	3.1170	2.6188	-0.0539	-0.0539	2.1952
Chatham	326	310	353	245	243	74,835	74,491	75,994	77,061	77,747	4.3563	4.1616	4.6451	3.1793	3.1255	-0.0652	-0.0652	2.5138
Cherokee	22	19	19	17	0	29,216	29,288	29,630	29,610	28,873	0.7530	0.6487	0.6412	0.5741	2.3279	0.7000	0.4609	0.0000
Chowan	100	106	94	85	71	14,292	14,123	14,114	14,114	13,640	6.9969	7.5055	6.6601	6.0224	5.2053	-0.0678	-0.0678	4.1458
Clay	46	50	50	48	43	11,488	11,646	11,860	11,759	11,066	4.0042	4.2933	4.2159	4.0820	3.8858	-0.0064	-0.0064	3.8110
Cleveland	319	301	293	315	300	98,580	98,717	99,776	100,814	100,541	3.2360	3.0491	2.9366	3.1246	2.9839	-0.0189	-0.0189	2.8145
Columbus	119	72	84	73	67	56,941	56,505	56,290	56,002	49,307	2.0899	1.2742	1.4923	1.3035	1.3588	-0.0758	-0.0758	1.0498
Craven	352	383	320	345	317	103,735	103,569	103,779	103,016	100,128	3.3933	3.6980	3.0835	3.3490	3.1659	-0.0112	-0.0112	3.0593
Cumberland	543	534	492	573	555	329,604	329,079	332,455	333,531	334,660	1.6474	1.6227	1.4799	1.7180	1.6584	0.0058	0.0058	1.6872
Currituck	63	66	72	53	42	26,604	27,321	27,526	28,048	29,305	2.3681	2.4157	2.6157	1.8896	1.4332	-0.1041	-0.1041	0.9858
Dare	68	73	68	67	67	36,792	37,197	37,290	38,027	37,342	1.8482	1.9625	1.8235	1.7619	1.7942	-0.0061	-0.0061	1.7613
Davidson	493	484	415	432	329	167,105	167,762	169,468	170,370	170,044	2.9502	2.8850	2.4488	2.5357	1.9348	-0.0937	-0.0937	1.3909
Davie	136	146	142	114	99	42,727	43,193	43,430	43,746	43,283	3.1830	3.3802	3.2696	2.6060	2.2873	-0.0740	-0.0740	1.7794
Duplin	287	296	315	278	188	59,513	59,629	59,736	60,177	47,043	4.8225	4.9640	5.2732	4.6197	3.9963	-0.0418	-0.0418	3.4951
Durham	702	751	760	663	685	306,184	311,649	315,741	321,261	329,973	2.2927	2.4098	2.4070	2.0637	2.0759	-0.0217	-0.0217	1.9408
Edgecombe	258	148	144	129	100	52,856	53,001	52,586	52,024	48,104	4.8812	2.7924	2.7384	2.4796	2.0788	-0.1758	-0.1758	0.9821
Forsyth	1,602	1,692	1,527	1,354	1,434	372,651	377,523	379,693	380,964	385,489	4.2989	4.4818	4.0217	3.5541	3.7200	-0.0324	-0.0324	3.3580
Franklin	101	124	153	112	98	66,514	67,723	69,112	71,196	70,436	1.5185	1.8310	2.2138	1.5731	1.3913	0.0025	0.0025	1.4017
Gaston	887	784	706	768	731	218,527	221,607	222,744	224,168	230,378	4.0590	3.5378	3.1696	3.4260	3.1730	-0.0564	-0.0564	2.6366
Gates	42	58	68	2	55	11,960	12,079	12,132	11,908	10,166	3.5117	4.8017	5.6050	0.1680	5.4102	7.6942	0.4609	12.8907

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Table 11B: County Rate Calculations for Adult Care Home (Assisted Living) Bed Need Determination

A	B					C					D					E	F	G
	Patients					Populations					Rates					Actual Average Annual Change Rate	Selected Change Rate (County or Adjusted County)	Bed Rate per 1,000
	2017	2018	2019	2020	2021	2017	2018	2019	2020	2021	2017	2018	2019	2020	2021			
Graham	7	8	7	0	0	8,837	8,775	8,687	8,642	7,967	0.7921	0.9117	0.8058	2.5021	2.3279	0.5176	0.4609	0.0000
Granville	66	113	74	105	100	59,975	61,241	61,406	61,628	61,410	1.1005	1.8452	1.2051	1.7038	1.6284	0.1749	0.1749	2.4826
Greene	41	49	41	40	34	21,522	21,301	21,050	20,951	20,372	1.9050	2.3004	1.9477	1.9092	1.6690	-0.0228	-0.0228	1.5546
Guilford	1,614	1,551	1,587	1,375	1,318	523,962	533,213	539,666	538,431	547,379	3.0804	2.9088	2.9407	2.5537	2.4078	-0.0584	-0.0584	1.9863
Halifax	45	63	111	91	105	51,815	51,704	51,194	50,898	47,873	0.8685	1.2185	2.1682	1.7879	2.1933	0.3085	0.3085	4.2229
Harnett	515	482	452	448	397	130,847	133,869	135,239	136,705	134,847	3.9359	3.6005	3.3422	3.2771	2.9441	-0.0695	-0.0695	2.3301
Haywood	256	234	221	209	193	62,277	62,959	63,328	63,481	62,403	4.1107	3.7167	3.4898	3.2923	3.0928	-0.0685	-0.0685	2.4570
Henderson	342	328	404	385	396	116,173	117,312	118,312	118,563	117,408	2.9439	2.7960	3.4147	3.2472	3.3729	0.0402	0.0402	3.7793
Hertford	132	129	134	116	115	23,947	24,031	24,037	23,720	19,871	5.5122	5.3681	5.5747	4.8904	5.7873	0.0183	0.0183	6.1042
Hoke	128	74	144	125	129	53,343	54,923	54,842	54,682	52,331	2.3996	1.3473	2.6257	2.2859	2.4651	0.1148	0.1148	3.3142
Hyde*	24	0	0	0	0	5,644	5,449	5,181	5,119	4,482	4.2523	2.8239	2.6395	2.5021	2.3279	-0.1307	-0.1307	0.0000
Iredell	701	672	643	674	658	176,563	179,330	181,380	183,309	191,180	3.9703	3.7473	3.5450	3.6769	3.4418	-0.0342	-0.0342	3.0884
Jackson	108	101	107	97	93	43,116	44,272	44,335	44,354	43,147	2.5049	2.2814	2.4134	2.1870	2.1554	-0.0349	-0.0349	1.9298
Johnston	396	411	378	323	369	194,705	199,768	205,951	211,626	223,975	2.0338	2.0574	1.8354	1.5263	1.6475	-0.0463	-0.0463	1.4185
Jones	15	13	11	11	13	10,356	10,100	10,196	10,067	8,947	1.4484	1.2871	1.0789	1.0927	1.4530	0.0173	0.0173	1.5286
Lee	196	183	171	163	165	59,337	60,097	61,690	61,663	64,278	3.3032	3.0451	2.7719	2.6434	2.5670	-0.0608	-0.0608	2.0989
Lenoir	257	224	251	214	230	57,477	57,232	56,372	56,876	54,783	4.4714	3.9139	4.4526	3.7626	4.1984	-0.0065	-0.0065	4.1159
Lincoln	278	282	280	262	156	83,251	84,608	86,453	88,699	88,298	3.3393	3.3330	3.2388	2.9538	1.7667	-0.1300	-0.1300	1.0777
Macon	148	150	152	140	126	35,413	36,117	36,498	37,014	37,430	4.1793	4.1532	4.1646	3.7824	3.3663	-0.0513	-0.0513	2.8480
Madison	64	66	66	59	65	22,240	22,523	22,602	22,500	21,205	2.8777	2.9303	2.9201	2.6222	3.0653	0.0204	0.0204	3.2533
Martin	147	139	64	109	88	23,510	23,290	23,150	22,904	21,713	6.2527	5.9682	2.7646	4.7590	4.0529	-0.0023	-0.0023	4.0248
McDowell	300	296	292	261	259	45,716	46,358	46,684	46,530	44,350	6.5623	6.3851	6.2548	5.6093	5.8399	-0.0274	-0.0274	5.3603
Mecklenburg	2,390	2,370	1,892	2,208	1,946	1,077,301	1,093,708	1,108,107	1,118,775	1,133,504	2.2185	2.1669	1.7074	1.9736	1.7168	-0.0524	-0.0524	1.4470
Mitchell	64	73	78	70	68	15,237	15,234	15,239	15,112	14,836	4.2003	4.7919	5.1184	4.6321	4.5834	0.0259	0.0259	4.9391
Montgomery	149	140	138	135	108	27,865	27,926	27,666	27,753	25,705	5.3472	5.0132	4.9881	4.8643	4.2015	-0.0571	-0.0571	3.4813
Moore	509	502	499	423	383	97,597	99,310	101,180	102,814	101,649	5.2153	5.0549	4.9318	4.1142	3.7679	-0.0763	-0.0763	2.9058
Nash	302	303	303	274	237	94,365	95,072	95,647	96,669	95,116	3.2003	3.1871	3.1679	2.8344	2.4917	-0.0591	-0.0591	2.0500
New Hanover	707	681	684	641	594	227,261	233,595	235,560	235,231	227,782	3.1110	2.9153	2.9037	2.7250	2.6078	-0.0429	-0.0429	2.2725
Northampton	163	159	159	137	116	20,709	20,711	20,527	20,054	16,796	7.8710	7.6771	7.7459	6.8316	6.9064	-0.0307	-0.0307	6.2706
Onslow	257	264	164	161	184	195,621	198,783	201,548	210,056	206,718	1.3138	1.3281	0.8137	0.7665	0.8901	-0.0683	-0.0683	0.7077
Orange	366	361	362	322	329	142,365	144,372	147,093	147,907	150,258	2.5709	2.5005	2.4610	2.1770	2.1896	-0.0382	-0.0382	1.9387
Pamlico	40	52	67	42	39	13,268	13,273	13,266	13,277	12,140	3.0148	3.9177	5.0505	3.1634	3.2125	0.0576	0.0576	3.7680
Pasquotank	182	181	187	169	155	40,598	39,826	39,731	39,952	40,743	4.4830	4.5448	4.7067	4.2301	3.8043	-0.0381	-0.0381	3.3692
Pender	102	122	117	103	86	60,999	62,359	63,406	63,949	61,105	1.6722	1.9564	1.8453	1.6107	1.4074	-0.0350	-0.0350	1.2595
Perquimans	20	24	22	22	67	13,546	13,729	13,639	13,807	12,847	1.4765	1.7481	1.6130	1.5934	5.2152	0.5919	0.4609	12.4262
Person	161	156	151	153	70	39,868	40,014	40,370	40,450	39,044	4.0383	3.8986	3.7404	3.7824	1.7928	-0.1475	-0.1475	0.9996
Pitt	437	469	453	418	419	176,424	179,388	179,731	183,285	170,276	2.4770	2.6144	2.5204	2.2806	2.4607	0.0008	0.0008	2.4669

Proposed 2023 SMFP

Table 11B: County Rate Calculations for Adult Care Home (Assisted Living) Bed Need Determination

A	B					C					D					E	F	G
	Patients					Populations					Rates					Actual Average Annual Change Rate	Selected Change Rate (County or Adjusted County)	Bed Rate per 1,000
	2017	2018	2019	2020	2021	2017	2018	2019	2020	2021	2017	2018	2019	2020	2021			
Polk	117	104	103	109	100	21,154	21,468	21,696	21,923	18,957	5.5309	4.8444	4.7474	4.9719	5.2751	-0.0090	-0.0090	5.1332
Randolph	396	400	341	352	327	144,672	143,907	144,914	145,246	144,818	2.7372	2.7796	2.3531	2.4235	2.2580	-0.0441	-0.0441	1.9594
Richmond	134	146	146	136	111	44,892	45,032	45,079	45,014	42,475	2.9849	3.2421	3.2388	3.0213	2.6133	-0.0293	-0.0293	2.3839
Robeson	328	385	363	349	249	132,020	131,303	131,056	131,238	113,699	2.4845	2.9321	2.7698	2.6593	2.1900	-0.0229	-0.0229	2.0396
Rockingham	283	278	252	247	239	91,790	91,273	91,788	91,915	91,113	3.0831	3.0458	2.7455	2.6873	2.6231	-0.0389	-0.0389	2.3166
Rowan	521	443	442	412	381	141,917	142,342	142,643	143,274	147,817	3.6712	3.1122	3.0986	2.8756	2.5775	-0.0831	-0.0831	1.9352
Rutherford	300	320	322	293	291	67,796	68,772	68,908	69,049	64,178	4.4250	4.6531	4.6729	4.2434	4.5343	0.0081	0.0081	4.6445
Sampson	187	186	190	161	105	63,143	64,019	64,284	64,053	58,309	2.9615	2.9054	2.9556	2.5135	1.8008	-0.1087	-0.1087	1.2135
Scotland	145	95	101	75	19	35,686	35,802	35,732	35,724	33,682	4.0632	2.6535	2.8266	2.0994	0.5641	-0.3176	-0.3176	0.0267
Stanly	182	173	182	150	159	62,443	63,465	63,727	64,691	62,220	2.9147	2.7259	2.8559	2.3187	2.5554	-0.0258	-0.0258	2.3579
Stokes	221	220	221	207	118	46,728	46,604	46,420	46,684	44,344	4.7295	4.7206	4.7609	4.4341	2.6610	-0.1155	-0.1155	1.7392
Surry	355	387	336	348	231	72,843	73,117	73,232	73,548	71,195	4.8735	5.2929	4.5882	4.7316	3.2446	-0.0825	-0.0825	2.4413
Swain	0	21	43	47	47	14,999	14,862	14,275	14,489	14,059	2.8739	1.4130	3.0123	3.2438	3.3431	0.1827	0.1827	5.1757
Transylvania	79	98	96	81	86	34,464	35,034	35,484	35,511	32,785	2.2922	2.7973	2.7054	2.2810	2.6232	0.0452	0.0452	2.9785
Tyrrell**	18	49	42	40	36	4,138	4,309	4,259	3,767	3,101	4.3499	11.3715	9.8615	10.6185	11.6092	0.4129	0.4129	25.9882
Union	425	416	400	363	313	228,171	232,814	237,287	238,740	242,651	1.8626	1.7868	1.6857	1.5205	1.2899	-0.0867	-0.0867	0.9543
Vance	49	45	42	37	27	44,862	45,157	45,969	45,435	42,096	1.0922	0.9965	0.9137	0.8144	0.6414	-0.1230	-0.1230	0.4048
Wake	2,199	2,219	1,823	2,114	1,970	1,048,771	1,073,993	1,089,579	1,102,782	1,156,274	2.0967	2.0661	1.6731	1.9170	1.7037	-0.0426	-0.0426	1.4861
Warren	78	73	78	66	22	20,133	20,174	20,022	19,767	18,319	3.8742	3.6185	3.8957	3.3389	1.2009	-0.1932	-0.1932	0.5050
Washington	42	41	45	41	39	12,349	12,239	12,071	12,039	10,818	3.4011	3.3499	3.7279	3.4056	3.6051	0.0175	0.0175	3.7941
Watauga	104	105	101	87	93	56,170	57,646	57,899	57,011	53,639	1.8515	1.8215	1.7444	1.5260	1.7338	-0.0119	-0.0119	1.6720
Wayne	497	511	529	460	409	124,945	124,658	125,825	126,339	116,094	3.9778	4.0992	4.2043	3.6410	3.5230	-0.0276	-0.0276	3.2318
Wilkes	166	179	183	153	150	70,536	69,907	70,200	70,263	65,378	2.3534	2.5605	2.6068	2.1775	2.2943	-0.0012	-0.0012	2.2858
Wilson	375	374	293	236	241	82,035	81,968	82,282	83,495	78,284	4.5712	4.5628	3.5609	2.8265	3.0785	-0.0846	-0.0846	2.2970
Yadkin	82	113	115	108	101	37,687	38,477	38,196	38,145	37,081	2.1758	2.9368	3.0108	2.8313	2.7238	0.0693	0.0693	3.2903
Yancey	80	77	80	88	60	18,199	18,363	18,623	18,909	18,557	4.3958	4.1932	4.2958	4.6539	3.2333	-0.0609	-0.0609	2.6427
State Total	29,523	29,374	27,737	26,491	24,525	10,272,692	10,401,960	10,508,254	10,587,440	10,535,205	2.8739	2.8239	2.6395	2.5021	2.3279	-0.0511		

* The 2017 patient data point for Hyde County is hypothetical and based on the proportion of the Hyde/Tyrrell service area 2017 population that was located in Hyde County (57.7%) of the total number of ACH patients served by Tyrrell House according to the 2017 facility census data (42). Therefore, the methodology assumes that 57.7% of the 42 patients in Tyrrell House were from Hyde County.

** The 2017 patient data point for Tyrrell County is hypothetical and based on the proportion of the Hyde/Tyrrell service area 2017 population that was located in Tyrrell County (42.3%) of the total number of ACH patients served by Tyrrell House according to the 2017 facility census data (42). Therefore, the methodology assumes that 42.3% of the 42 patients in Tyrrell House were from Tyrrell County.

Table 11C: Adult Care Home Bed Need Projections for 2026

A	B	C	D	E	F	G	H	I	J
County	Bed Rate per 1,000	Projected 2026 Population (Civilian)	Projected Bed Utilization	Projected Bed Utilization with Vacancy Factor*	Licensed Plus Previous Allocations (Total Planning Inventory)	Surplus/Deficit "-"	Deficit Index	Adjusted Occupancy Rate**	Bed Need
Alamance	1.6998	183,030	311	327	738	411		82.09%	0
Alexander	1.7505	35,866	63	66	126	60		71.14%	0
Alleghany	0.0000	10,809	0	0	40	40		0.00%	0
Anson	3.9858	21,611	86	91	60	-31	-33.83%	100.00%	30
Ashe	0.6365	26,103	17	17	115	98		36.92%	0
Avery	3.8926	17,755	69	73	100	27		77.43%	0
Beaufort	1.7692	42,426	75	79	217	138		88.33%	0
Bertie	2.8123	16,857	47	50	105	55		60.83%	0
Bladen	2.2932	26,225	60	63	150	87		65.74%	0
Brunswick	1.9509	156,792	306	322	803	481		57.05%	0
Buncombe	2.0185	288,417	582	613	973	360		66.37%	0
Burke	2.4597	86,625	213	224	348	124		76.19%	0
Cabarrus	2.1845	254,733	556	586	1,043	457		52.84%	0
Caldwell	2.9135	79,653	232	244	427	183		55.61%	0
Camden	1.1265	10,850	12	13	24	11		45.83%	0
Carteret	2.2732	67,822	154	162	296	134		61.02%	0
Caswell	2.1132	22,209	47	49	124	75		75.00%	0
Catawba	2.1952	168,195	369	389	706	317		63.65%	0
Chatham	2.5138	84,126	211	223	398	175		63.08%	0
Cherokee	0.0000	29,941	0	0	104	104		0.00%	0
Chowan	4.1458	13,618	56	59	120	61		60.87%	0
Clay	3.8110	11,664	44	47	70	23		68.36%	0
Cleveland	2.8145	103,389	291	306	423	117		78.74%	0
Columbus	1.0498	44,821	47	50	205	155		30.33%	0
Craven	3.0593	93,735	287	302	480	178		77.19%	0
Cumberland	1.6872	309,802	523	550	904	354		75.00%	0
Currituck	0.9858	34,349	34	36	90	54		53.91%	0

Table 11C: Adult Care Home Bed Need Projections for 2026

A	B	C	D	E	F	G	H	I	J
County	Bed Rate per 1,000	Projected 2026 Population (Civilian)	Projected Bed Utilization	Projected Bed Utilization with Vacancy Factor*	Licensed Plus Previous Allocations (Total Planning Inventory)	Surplus/Deficit "-"	Deficit Index	Adjusted Occupancy Rate**	Bed Need
Dare	1.7613	39,355	69	73	102	29		82.84%	0
Davidson	1.3909	175,787	245	257	577	320		77.18%	0
Davie	1.7794	45,637	81	85	212	127		49.33%	0
Duplin	3.4951	41,978	147	154	387	233		64.85%	0
Durham	1.9408	353,813	687	723	1,010	287		68.63%	0
Edgecombe	0.9821	45,471	45	47	312	265		57.14%	0
Forsyth	3.3580	401,791	1,349	1,420	2,033	613		80.07%	0
Franklin	1.4017	78,625	110	116	244	128		41.22%	0
Gaston	2.6366	237,461	626	659	1,069	410		72.11%	0
Gates	12.8907	9,593	124	130	80	-50	-38.54%	71.54%	0
Graham	0.0000	7,885	0	0	23	23		1.42%	0
Granville	2.4826	64,843	161	169	251	82		55.00%	0
Greene	1.5546	20,351	32	33	57	24		237.45%	0
Guilford	1.9863	574,417	1,141	1,201	2,023	822		57.12%	0
Halifax	4.2229	45,644	193	203	309	106		39.82%	0
Harnett	2.3301	141,768	330	348	626	278		70.12%	0
Haywood	2.4570	64,366	158	166	323	157		65.00%	0
Henderson	3.7793	123,853	468	493	560	67		70.91%	0
Hertford	6.1042	18,077	110	116	152	36		79.31%	0
Hoke	3.3142	53,516	177	187	173	-14	-7.34%	89.33%	0
Hyde	0.0000	4,194	0	0	30	30		0.00%	0
Iredell	3.0884	210,187	649	683	934	251		70.45%	0
Jackson	1.9298	43,693	84	89	145	56		67.72%	0
Johnston	1.4185	251,779	357	376	773	397		47.74%	0
Jones	1.5286	8,419	13	14	20	6		65.00%	0
Lee	2.0989	68,364	143	151	323	172		51.08%	0
Lenoir	4.1159	53,943	222	234	327	93		79.07%	0

Table 11C: Adult Care Home Bed Need Projections for 2026

A	B	C	D	E	F	G	H	I	J
County	Bed Rate per 1,000	Projected 2026 Population (Civilian)	Projected Bed Utilization	Projected Bed Utilization with Vacancy Factor*	Licensed Plus Previous Allocations (Total Planning Inventory)	Surplus/Deficit "-"	Deficit Index	Adjusted Occupancy Rate**	Bed Need
Lincoln	1.0777	92,655	100	105	381	276		73.56%	0
Macon	2.8480	39,360	112	118	178	60		71.70%	0
Madison	3.2533	21,539	70	74	89	15		74.49%	0
Martin	4.0248	20,799	84	88	182	94		59.48%	0
McDowell	5.3603	44,207	237	249	350	101		81.25%	0
Mecklenburg	1.4470	1,240,165	1,795	1,889	3,081	1,192		64.78%	0
Mitchell	4.9391	14,629	72	76	80	4		85.00%	0
Montgomery	3.4813	25,714	90	94	196	102		55.10%	0
Moore	2.9058	108,674	316	332	543	211		58.56%	0
Nash	2.0500	95,843	196	207	522	315		45.40%	0
New Hanover	2.2725	242,689	551	581	1,033	452		48.83%	0
Northampton	6.2706	15,736	99	104	242	138		65.95%	0
Onslow	0.7077	183,047	130	136	438	302		55.88%	0
Orange	1.9387	157,691	306	322	401	79		63.54%	0
Pamlico	3.7680	11,688	44	46	78	32		51.41%	0
Pasquotank	3.3692	41,339	139	147	290	143		54.68%	0
Pender	1.2595	65,897	83	87	179	92		51.00%	0
Perquimans	12.4262	12,558	156	164	124	-40	-24.51%	90.83%	40
Person	0.9996	39,134	39	41	214	173		67.61%	0
Pitt	2.4669	173,675	428	451	567	116		79.03%	0
Polk	5.1332	18,489	95	100	122	22		93.89%	0
Randolph	1.9594	148,077	290	305	567	262		60.65%	0
Richmond	2.3839	41,520	99	104	184	80		62.24%	0
Robeson	2.0396	105,576	215	227	445	218		68.95%	0
Rockingham	2.3166	91,115	211	222	419	197		67.46%	0
Rowan	1.9352	151,166	293	308	856	548		42.96%	0
Rutherford	4.6445	64,830	301	317	518	201		62.57%	0

Table 11C: Adult Care Home Bed Need Projections for 2026

A	B	C	D	E	F	G	H	I	J
County	Bed Rate per 1,000	Projected 2026 Population (Civilian)	Projected Bed Utilization	Projected Bed Utilization with Vacancy Factor*	Licensed Plus Previous Allocations (Total Planning Inventory)	Surplus/Deficit "-"	Deficit Index	Adjusted Occupancy Rate**	Bed Need
Sampson	1.2135	56,784	69	73	282	209		69.82%	0
Scotland	0.0267	31,773	1	1	100	99		0.00%	0
Stanly	2.3579	62,862	148	156	231	75		68.83%	0
Stokes	1.7392	44,188	77	81	300	219		38.21%	0
Surry	2.4413	71,060	173	183	460	277		60.74%	0
Swain	5.1757	14,121	73	77	60	-17	-22.01%	94.00%	20
Transylvania	2.9785	33,426	100	105	134	29		65.89%	0
Tyrrell	25.9882	2,969	77	81	50	-31	-38.44%	76.56%	0
Union	0.9543	268,824	257	270	596	326		66.67%	0
Vance	0.4048	41,361	17	18	206	188		14.22%	0
Wake	1.4861	1,282,052	1,905	2,006	3,201	1,195		56.67%	0
Warren	0.5050	17,369	9	9	116	107		60.00%	0
Washington	3.7941	10,123	38	40	49	9		79.59%	0
Watauga	1.6720	57,332	96	101	176	75		60.42%	0
Wayne	3.2318	111,289	360	379	745	366		68.17%	0
Wilkes	2.2858	63,708	146	153	290	137		59.67%	0
Wilson	2.2970	78,348	180	189	454	265		53.88%	0
Yadkin	3.2903	36,961	122	128	189	61		72.88%	0
Yancey	2.6427	19,043	50	53	99	46		60.61%	0
State Total		10,997,638	22,864	24,067	42,281				90

* Projected Bed Utilization with Vacancy Factor is calculated by dividing Projected Bed Utilization by 95%.

** Adjusted Occupancy Rate is calculated using highest of the median or weighted mean of the one-day census or the total days of care of facilities in the service area.

Table 11D: Adult Care Home Bed Need Determination*
(Proposed for Certificate of Need Review Commencing in 2023)

Service Area	HSA	Adult Care Home Bed Need Determination	Certificate of Need Application Deadline**	Certificate of Need Beginning Review Date
Anson	V	30	To be determined	To be determined
Perquimans	VI	40	To be determined	To be determined
Swain	I	20	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.0203(b). The filing deadline is 5:00 p.m. on the application deadline date.

Table 11E: Inventory of Adult Care Home Beds in Continuing Care Retirement Communities

County	License Number	Name	Adult Care Home Beds
Alamance	NH0596	Edgewood Place at the Village at Brookwood	24
Alamance	NH0621	Twin Lakes Community Memory Care	16
Alamance	NH0351	Twin Lakes Community	4
Buncombe	HAL-011-371	Heather Glen At Ardenwoods	60
Buncombe	NH0147	Givens Highland Farms	30
Buncombe	NH0484	Givens Health Center	14
Buncombe	NH0087	Deerfield Episcopal Retirement Community	62
Burke	NH0476	Grace Ridge	47
Cabarrus	NH0607	The Gardens of Taylor Glen Retirement Community	24
Catawba	NH0191	Abernethy Laurels	18
Chatham	NH0619	The Arbor	51
Chatham	HAL-019-006	Pittsboro Christian Village	40
Davidson	NH0390	Piedmont Crossing	20
Durham	NH0536	The Forest at Duke	34
Durham	HAL-032-020	Croasdaile Village	64
Forsyth	NH0067	Brookridge Retirement Community	36
Forsyth	NH0378	Arbor Acres United Methodist Retirement Community	106
Forsyth	NH0154	Salemtowne	20
Forsyth	HAL-034-103	Salemtowne	46
Gaston	NH0332	Covenant Village	42
Gaston	NH0386	Stanley Total Living Center	40
Guilford	NH0612	River Landing at Sandy Ridge	58
Guilford	NH0141	WhiteStone: A Masonic and Eastern Star Community	12
Guilford	NH0190	Friends Homes at Guilford	60
Guilford	NH0546	Well-Spring	72
Guilford	NH0554	Friends Homes West	40
Guilford	NH0005	Maryfield Nursing Home	26
Henderson	HAL-045-067	Carolina Village	60
Mecklenburg	HAL-060-059	Cuthbertson Village at Aldersgate	61
Mecklenburg	HAL-060-016	Brookdale Carriage Club Providence I	77
Mecklenburg		St. Margaret's of Trevi Village	0
Mecklenburg	HAL-060-001	Carmel Hills	38

Table 11E: Inventory of Adult Care Home Beds in Continuing Care Retirement Communities

County	License Number	Name	Adult Care Home Beds
Mecklenburg	NH0660	Windsor Run, LLC	10
Mecklenburg		The Barclay at SouthPark	0
Mecklenburg	NH0443	The Pines at Davidson	30
Mecklenburg	NH0584	The Stewart Health Center	4
Mecklenburg	NH0466	WillowBrooke Court SC Ctr at Matthews Glen	60
Mecklenburg	NH0121	Sharon Towers	40
Mecklenburg	NH0414	Southminster	25
Moore	NH0127	Penick Village	42
Moore	HAL-063-016	The Coventry	60
New Hanover	NH0649	Bradley Creek Health Center	78
Orange	HAL-068-021	Carol Woods Retirement Community - Building 7	12
Orange	HAL-068-020	The Carol Woods Retirement Community - Building 6	12
Orange	NH0258	Carol Woods	65
Pitt	HAL-074-042	Cypress Glen Retirement Community Memory Care Cottage	12
Pitt	NH0473	Cypress Glen Retirement Community	30
Polk	NH0399	White Oak Manor-Tryon	18
Polk	NH0559	WillowBrooke Court SC Center at Tryon Estates	44
Robeson	NH0240	Wesley Pines Retirement Community	42
Rowan	HAL-080-010	Trinity Oaks Continuing Care Retirement Community	38
Rowan	NH0197	Trinity Oaks	12
Scotland	NH0457	Scotia Village	32
Wake	NH0549	Glenaire	9
Wake	NH0383	Dan E & Mary Louise Stewart Health Center of Springmoor	18
Wake	NH0580	Windsor Point Continuing Care Retirement Community	55
Wake	NH0653	The Cardinal at North Hills	55
Wake	NH0636	Brittany Place	14
Wake		Brightmore Healthcare Center of Cary	0
Wake	NH0658	Swift Creek Health Center	82

Table 11F: Inventory of Nursing Homes With Six or Fewer Adult Care Home Beds

County	License Number	Name	Adult Care Home Beds
Buncombe	NH0235	Mountain Ridge Health and Rehab	3
Buncombe	NH0463	The Laurels of GreenTree Ridge	2
Burke	NH0553	College Pines Health and Rehabilitation	4
Cumberland	NH0001	Whispering Pines Nursing & Rehabilitation Center	2
Durham	NH0615	The Cedars of Chapel Hill	4
Haywood	NH0520	Haywood Nursing and Rehabilitation Center	5
Mecklenburg	NH0573	Asbury Health and Rehabilitation Center	5
Mecklenburg	NH0574	Brookdale Carriage Club Providence	2
Mitchell	NH0433	Brian Center Health & Rehabilitation/Spruce Pine	6
Orange	NH0093	Pruitt Health-Carolina Point	2
Person	NH0265	Roxboro Healthcare & Rehabilitation Center	5
Robeson	NH0472	The Carrolton of Lumberton	5
Rowan	NH0424	Autumn Care of Salisbury	3
Union	NH0310	Monroe Rehabilitation Center	5
Wake	NH0354	Tower Nursing and Rehabilitation Center	6
Wake	NH0622	The Rosewood Health Center	4

Chapter 12:

Home Health Services

CHAPTER 12

HOME HEALTH SERVICES

Introduction

G.S. 131E-176(12) defines a *home health agency* as “a private organization or public agency, whether owned or operated by one or more persons or legal entities, which furnishes or offers to furnish home health services.” Home health services are outpatient services that patients may receive in their own home or in a health care facility. The definition also specifies the activities that comprise home health services, including: part-time or intermittent nursing care; physical, occupational, or speech therapy; medical social services, home health aide services; other therapeutic services; and medical supplies and appliances.

Definitions

A home health *agency* or *office* is an agency or office that meets the definition in G.S. 131E-176(12), as quoted above.

A Medicare-certified home health agency or office’s service area is the county in which the agency or office is located. Each of the 100 counties in the state is a separate service area.

The *reporting year* for a home health agency or office is either July 1 through June 30 or October 1 through September 30; facilities may choose their reporting period. The “current” reporting year is either July 1, 2020 through June 30, 2021, or October 1, 2020 through September 30, 2021.

The methodology projects need one year beyond the publication year of the current State Medical Facilities Plan (SMFP). The current projection year is 2024.

Changes from the Previous Plan

This chapter now incorporates the provisions of Policy HH-3 into the Basic Principles, Assumptions of the Methodology, and Application of the Methodology. This change enables more transparency in presenting need determinations.

Basic Principles

1. When a county has no Medicare-certified home health agency or office physically located within the county’s borders, and the county has a population of more than 20,000 people, or if the county has a population of less than 20,000 people and there is not an existing Medicare-certificated home health agency or office located in a North Carolina county within 20 miles, a need determination for a new Medicare-certified home health agency or office in the county is thereby established.
2. The North Carolina State Health Coordinating Council encourages home health applicants to: provide an expanded scope of services (including nursing, physical therapy, speech therapy, and home health aide services); provide the widest range of treatments within a given service; offer services seven days per week as required to meet patient needs; and address special needs populations.

Data Sources

Patient origin and utilization data for the three previous reporting years comes from the License Renewal Application for each reporting year, as submitted to the North Carolina Department of Health and Human Services, Division of Health Service Regulation.

The North Carolina Office of State Budget and Management provides county population projections for the reporting and projection years (*Table 12B*).

Estimates of active duty military personnel come from the category of “Employment Status – Armed Forces” from the most recent American Community Survey 5-year Estimates.

Assumptions of the Methodology

1. The projection year is one year beyond the Plan year to allow time for completion of the certificate of need review cycles and for staffing of new agencies or offices.
2. The methodology excludes the estimated active duty military population in the 18-64 age group for any county with more than 500 active duty military personnel.
3. When the methodology determines a need for additional agencies or offices, the three annual Plans following certification of the agencies or offices developed based on that need, count the greater of 325 patients or the actual number of patients served as part of the total patients served by the new agency or office.
4. For Criterion 3 only:
 - a. Data aggregation and projections use four age groups (under 18, 18-64, 65-74, and 75 and over) to allow a more definitive examination of trends in services to children and to senior adults using current age-specific use rates as the basis for projection of future need.
 - b. The methodology calculates the average annual change in use rate per 1,000 population over the previous three reporting years for each age group in each Council of Governments (COG) region. The calculations apply this result to the current use rates per 1,000 population for each county within each COG region to calculate changes in the number of patients projected to need home health services by the projection year.
 - c. A county needs a new home health agency or office if the projected unmet need in a single county is 325 patients or more.

Application of the Methodology

The standard methodology for determining need for a home health agency or office is described below. If any of the three criteria are satisfied for a county, the county has a need determination for a Medicare-certified home health agency or office (*Table 12E*).

Criterion 1:

For each county with no home health agency or office physically located within the county, use the reporting year’s population (*Table 12B, Column I*) to determine whether the county has a population of more than 20,000 people. If the county has more than 20,000 people, then Criterion 1 is satisfied.

Criterion 2:

For each county with no home health agency or office physically located within the county, use the reporting year’s population (*Table 12B, Column I*) to determine whether the county has a population of less than 20,000 people. If the county has less than 20,000 people, then calculate the minimum driving distance (mileage) from the closest point on the county line of the county in which an existing agency or office is located to the county seat of the county in which there

is no agency. If a home health agency or office is not located within 20 miles, Criterion 2 is satisfied.

Criterion 3:

Step 1: For each COG region and each age group, calculate the Average Annual Change Rate in Number of Patients (*Table 12B, Columns B, E, and H*) over the three previous reporting years (*Table 12B, Column K*).

Step 2: For each COG region and each age group, calculate the Average Annual Change Rate in Use Rates per 1,000 Population (*Table 12B, Columns D, G, and J*) over the three previous reporting years (*Table 12B, Column L*). The use rates for the current reporting year are:

Age Group	2021 Use Rate
Under Age 18	0.65
Ages 18 – 64	9.43
Ages 65 – 74	63.39
Ages 75 & Over	160.33

Step 3: For each county, for each age group, total the number of home health patients served during the reporting year (*Table 12C, Column B*).

Step 4: For each county, multiply the COG’s Average Annual Change Rate in Number of Patients for each age group from the affiliated COG region by the number of patients for each age group from Step 3 (*Table 12C, Column C*).

Step 5: Multiply the product from Step 4 by three and add that product to the results of Step 3 for each age group. The result is the projected number of patients in each age group during the projection year (*Table 12C, Column D*).

Step 6: For each county and age group, divide the number of patients served during the reporting year (*Table 12C, Column B*) by the county population in thousands for each age group to obtain county use rates per 1,000 population (*Table 12C, Column E*).

Step 7: Multiply the COG’s Average Annual Rate of Change in Use Rate per 1,000 Population (*Table 12C, Column F*) for each age group from the affiliated COG region by the county use rates per 1,000 population for each age group from Step 6 (*Table 12C, Column E*).

Step 8: Multiply the product from Step 7 by three and add that product to the results from Step 6 for each age group. The result is the projected use rate per 1,000 population in the projection year for each age group (*Table 12C, Column G*).

Step 9: For the projection year for each age group, multiply the projected use rate per 1,000 population (*Table 12C, Column G*) by the projected population (*Table 12C, Column H*). The result is the projected number of patients during the projection year (*Table 12C, Column I*).

Step 10: In counties that have a need determination for additional agencies or offices, the three annual Plans following certification of the agencies or offices developed based on that need, count the greater of 325 patients or the actual number of patients served as part of the total patients served by the new agency or office. (*Table 12D, Column B*).

- Step 11: For each county, sum the projected number of patients in the projection year (from Step 5) across all four age groups and the adjustment placeholder (from Step 10), if applicable. The result is an Adjusted Projected Total Patients for each county for the projection year (*Table 12D, Column C*).
- Step 12: For each county, sum the projected number of patients in the projection year (from Step 9) across all four age groups. The result is the Projected Utilization in the projection year (*Table 12D, Column D*).
- Step 13: For each county, subtract the Projected Utilization in the projection (*Table 12D, Column D*) from the Adjusted Total Projected Patients (*Table 12D, Column C*). The remainder is the projected additional number of patients who will need home health services in the projection year (*Table 12D, Column E*). A deficit (unmet need) shows as a negative number of patients. A remainder of 0.50 or greater rounds to the next highest whole number. A remainder of less than 0.50 rounds to the next lowest whole number.
- Step 14: For each county, each projected deficit of 325 patients satisfies Criterion 3 and results in a need determination for one new Medicare-certified agency or office (*Table 12D, Column F*).

Unless otherwise specified by the methodology, calculations do not use rounded values. However, fractional values are rounded automatically when displayed.

The former Table 12A, Home Health Data by County of Patient Origin – 2021 Data, is available on the Healthcare Planning website at:

<https://info.ncdhhs.gov/dhsr/ncsmfp/index.html>

or

<https://info.ncdhhs.gov/dhsr/mfp/publications.html#por>

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Table 12A: Inventory of Licensed Medicare-certified Home Health Agencies or Offices

A	B	C	D	E	F
County	License Number	Name	In-County Patients	Out-of-County Patients	Total Patients
Alamance	HC0134	Amedisys Home Health	696	671	1367
Alamance	HC0249	Advanced Home Health	670	127	797
Alamance	HC0361	Hospice and Palliative Care Center of Alamance Caswell	4	0	4
Alexander	HC0476	Medi Home Health Agency	231	1244	1475
Alleghany	HC0478	Medi Home Health and Hospice	263	233	496
Anson	HC0264	Liberty Home Care	65	234	299
Ashe	HC0479	Medi Home Health and Hospice	680	1412	2092
Avery	HC0317	PruittHealth @ Home - Avery	48	4	52
Beaufort	HC0329	CenterWell Home Health	854	1521	2375
Beaufort	HC1634	Vidant Home Health and Hospice	477	151	628
Bertie	HC0480	Albemarle Home Care and Hospice	36	73	109
Bertie	HC1052	Vidant Home Health and Hospice	183	202	385
Bladen	HC0309	Liberty Home Care	250	26	276
Bladen	HC0481	Advanced Home Health	76	354	430
Brunswick	HC0288	Liberty Home Care	1153	9	1162
Brunswick	HC1500	AssistedCare Home Health	680	1155	1835
Brunswick	HC4816	PruittHealth @ Home - Brunswick	78	89	167
Buncombe	HC0114	CarePartners Home Health Services	3379	1550	4929
Buncombe	HC2114	CenterWell Home Health	2055	3313	5368
Burke	HC0105	Atrium Health At Home Blue Ridge	1088	793	1881
Cabarrus	HC0281	Advanced Home Health	333	597	930
Cabarrus	HC0486	BAYADA Home Health Care, Inc.	443	322	765
Caldwell	HC0487	Advanced Home Health	320	230	550
Camden	HC0473	Albemarle Home Care and Hospice	113	4	117
Carteret	HC0073	CenterWell Home Health	613	197	810
Carteret	HC0488	Carteret Healthcare Home Health & Hospice	893	0	893
Carteret	HC1353	Liberty Home Care	232	89	321
Caswell	HC0489	HealthView Home Health & Hospice****	0	0	0
Catawba	HC0057	Guardian Home Health	406	597	1003
Catawba	HC0227	CenterWell Home Health	1746	402	2148
Catawba	HC0272	Kindred at Home	748	1734	2482
Catawba	HC0490	CenterWell Home Health	29	1	30
Catawba	HC1902	Interim Healthcare of the Triad, Inc.	176	62	238
Chatham	HC0528	Liberty Home Care	447	190	637
Chatham	HC2803	UNC Home Health	219	0	219
Cherokee	HC0275	Mountain Home Health	2	0	2
Chowan	HC0474	Albemarle Home Care and Hospice	104	3	107
Clay	HC0104	Mountain Home Health Services	320	971	1291
Clay	HC0318	Mountain Home Health**	0	0	0
Cleveland	HC0042	Atrium Health At Home Cleveland	877	485	1362
Cleveland	HC0221	Kindred at Home	1488	951	2439
Columbus	HC0320	Liberty Home Care	661	0	661
Columbus	HC0492	Kindred at Home	218	764	982

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Table 12A: Inventory of Licensed Medicare-certified Home Health Agencies or Offices

A	B	C	D	E	F
County	License Number	Name	In-County Patients	Out-of-County Patients	Total Patients
Craven	HC0165	CarolinaEast Home Care	535	136	671
Craven	HC0493	PruittHealth @ Home - New Bern	262	162	424
Cumberland	HC0274	Liberty Home Care	28	1	29
Cumberland	HC0283	Cape Fear Valley Home Health	1315	287	1602
Cumberland	HC0292	Amedisys Home Health of Fayetteville	1773	613	2386
Cumberland	HC0359	HealthKeeperz	623	552	1175
Cumberland	HC3421	Aveanna Home Health	509	181	690
Currituck	HC0475	Albemarle Home Care and Hospice	331	235	566
Dare	HC0494	Adoration Home Health and Hospice****	0	0	0
Davidson	HC0124	Liberty Home Care	41	294	335
Davidson	HC0358	BAYADA Home Health Care, Inc.	668	367	1035
Davidson	HC0495	Amedisys Home Health Care	341	483	824
Davidson	HC0521	Medi Home Health Agency	639	1748	2387
Davidson	HC1104	Enhabit Home Health	225	845	1070
Davie	HC0496	Well Care Home Health of the Triad, Inc.	327	4338	4665
Duplin	HC0053	Vidant Home Health and Hospice	332	184	516
Durham	HC0145	Amedisys Home Health	833	625	1458
Durham	HC0327	Brookdale Home Health Raleigh	299	1181	1480
Durham	HC0360	Duke Home Health	2135	2203	4338
Durham	HC1176	Liberty Home Care	211	285	496
Durham	HC2111	CenterWeel Home Health	39	17	56
Forsyth	HC0005	BAYADA Home Health Care, Inc.	1279	594	1873
Forsyth	HC0231	CenterWell Home Health	602	178	780
Forsyth	HC0409	Wake Forest Baptist Health Care at Home, LLC	757	528	1285
Forsyth	HC0499	Advanced Home Health	1573	973	2546
Forsyth	HC0567	CenterWell Home Health	1075	407	1482
Forsyth	HC1131	CenterWell Home Health	19	8	27
Forsyth	HC1210	CenterWell Home Health	21	6	27
Forsyth	HC1304	Amedisys Home Health of Winston-Salem	588	209	797
Forsyth	HC1886	Interim HealthCare of the Triad, Inc.	342	1117	1459
Forsyth	HC4901	PruittHealth @ Home - Forsyth	149	67	216
Franklin	HC0078	Amedisys Home Health	217	1988	2205
Franklin	HC0215	CenterWell Home Health	295	577	872
Franklin	HC0500	Franklin County Home Health Agency	167	25	192
Gaston	HC0268	CenterWell Home Health	2140	25	2165
Gaston	HC0353	Amedisys Home Health Care	533	781	1314
Gaston	HC0356	BAYADA Home Health Care, Inc.	412	573	985
Gaston	HC0906	Advanced Home Health	1957	698	2655
Gaston	HC1903	Interim HealthCare of the Triad, Inc.	965	305	1270
Greene	HC0168	AssistedCare of the Carolinas	105	1337	1442
Guilford	HC0297	Advanced Home Health	1706	270	1976
Guilford	HC0303	Enhabit Home Health	999	763	1762
Guilford	HC0374	Hospice and Palliative Care of Greensboro**	0	0	0

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Table 12A: Inventory of Licensed Medicare-certified Home Health Agencies or Offices

A	B	C	D	E	F
County	License Number	Name	In-County Patients	Out-of-County Patients	Total Patients
Guilford	HC0395	Brookdale Home Health Winston	957	832	1789
Guilford	HC0952	CenterWell Home Health	2179	1755	3934
Guilford	HC1177	Liberty Home Care	10	7	17
Guilford	HC1286	BAYADA Home Health Care, Inc.	1558	607	2165
Guilford	HC1885	Interim HealthCare of the Triad, Inc.	569	471	1040
Halifax	HC0765	Liberty Home Care VI, LLC	199	81	280
Harnett	HC0125	Liberty Home Care	609	1031	1640
Harnett	HC0503	CenterWell Home Health	350	277	627
Haywood	HC0109	Home Care Services of Haywood Regional Medical Center	956	4	960
Haywood	HC0279	CarePartners Home Health Services	720	518	1238
Henderson	HC0201	Pardee Home Care	934	92	1026
Henderson	HC0440	CarePartners Home Health Services	710	825	1535
Henderson	HC0911	AdventHealth Home Care Western North Carolina	808	622	1430
Hertford	HC0504	Liberty Home Care VII, LLC	45	76	121
Hoke	HC0277	Liberty Home Care	8	0	8
Hyde	HC0379	Liberty Home Care VII, LLC	84	73	157
Iredell	HC0159	CenterWell Home Health	1650	204	1854
Iredell	HC0515	Iredell Home Health	1475	325	1800
Iredell	HC1325	Lake Norman Home Health	467	244	711
Jackson	HC0157	Harris Home Health	417	488	905
Johnston	HC0383	Johnston Health Home Care and Hospice	1399	86	1485
Johnston	HC0507	3HC	484	201	685
Jones	HC0431	CenterWell Home Health	133	1580	1713
Jones	HC0506	3HC	66	640	706
Lee	HC0426	Liberty Home Care	501	99	600
Lenoir	HC0195	3HC	560	33	593
Lenoir	HC0428	CenterWell Home Health	960	295	1255
Lenoir	HC1565	CenterWell Home Health	116	556	672
Lincoln	HC0135	Atrium Health At Home Lincoln	440	369	809
Lincoln	HC0391	CenterWell Home Health	1056	126	1182
Macon	HC0324	CarePartners Home Care & Hospice	879	36	915
Madison	HC0419	Madison Home Care & Hospice	220	59	279
Martin	HC0525	Roanoke Home Care & Hospice	212	5	217
McDowell	HC0435	Encompass Health Home Health	343	1132	1475
Mecklenburg	HC0097	CenterWell Home Health	2256	7	2263
Mecklenburg	HC0138	CenterWell Home Health	33	0	33
Mecklenburg	HC0171	Advanced Home Health	1464	349	1813
Mecklenburg	HC0355	BAYADA Home Health Care, Inc.	2038	745	2783
Mecklenburg	HC0369	Brookdale Home Health Charlotte	1032	980	2012
Mecklenburg	HC0787	CenterWell Home Health	1900	85	1985
Mecklenburg	HC1038	Atrium Health At Home Charlotte	2481	79	2560
Mecklenburg	HC1152	Amedisys Home Health Care****	0	0	0
Mecklenburg	HC1901	Interim HealthCare of the Triad, Inc.	2955	964	3919

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Table 12A: Inventory of Licensed Medicare-certified Home Health Agencies or Offices

A	B	C	D	E	F
County	License Number	Name	In-County Patients	Out-of-County Patients	Total Patients
Mecklenburg	HC3694	Liberty Home Care and Hospice	246	74	320
Mecklenburg	HC3966	PHC Home Health	634	280	914
Mecklenburg	HC4677	Atrium Health At Home University City	630	1333	1963
Mecklenburg	HC5130	Well Care Home Health of the Piedmont, Inc.	313	239	552
Mitchell	HC0319	PruittHealth @ Home - Mitchell	125	7	132
Moore	HC0002	Liberty Home Care	545	411	956
Moore	HC0332	FirstHealth Home Care	1037	420	1457
Nash	HC0497	CenterWell Home Health	744	1524	2268
Nash	HC0520	HealthView Home Health & Hospice	535	600	1135
New Hanover	HC0196	Liberty Home Care	657	18	675
New Hanover	HC1231	Well Care Home Health, Inc.	2051	6148	8199
Northampton	HC0530	Northampton County Home Health Agency	284	17	301
Onslow	HC0316	Liberty Home Care	286	92	378
Onslow	HC0531	Lower Cape Fear Lifecare	122	0	122
Onslow	HC1209	Cardinal Hospice Care**	0	0	0
Orange	HC0030	UNC Home Health	712	1004	1716
Orange	HC0166	Amedisys Home Health of Chapel Hill	388	1024	1412
Pasquotank	HC0471	Albemarle Home Care and Hospice	473	8	481
Pasquotank	HC1071	Sentara Home Care Services	449	200	649
Pender	HC0532	NHRMC Home Care	605	3304	3909
Pender	HC1241	Liberty Home Care	96	56	152
Perquimans	HC0472	Albemarle Home Care and Hospice	244	199	443
Person	HC0354	BAYADA Home Health Care, Inc.	199	534	733
Person	HC0533	Medi Home Health Agency	117	187	304
Pitt	HC0328	CenterWell Home Health	1840	746	2586
Pitt	HC0509	3HC	457	127	584
Pitt	HC1443	Vidant Home Health and Hospice	1009	301	1310
Polk	HC0436	Encompass Health Home Health	276	325	601
Randolph	HC0397	Amedisys Home Health Care	0	3	3
Randolph	HC0522	Home Health of Randolph Hospital	1529	90	1619
Randolph	HC0929	Enhabit Home Health	277	667	944
Richmond	HC0423	FirstHealth Home Care-Richmond	505	237	742
Robeson	HC0352	Liberty Home Care	539	126	665
Robeson	HC0526	Robeson County Home Health Agency	530	6	536
Robeson	HC1178	Liberty Home Care	232	9	241
Robeson	HC1185	CenterWell Home Health	235	876	1111
Rockingham	HC0217	Advanced Home Health	900	347	1247
Rowan	HC0265	CenterWell Home Health	1522	25	1547
Rowan	HC0270	CenterWell Home Health	213	2226	2439
Rowan	HC0357	BAYADA Home Health Care, Inc.	437	914	1351
Rowan	HC0399	Advanced Home Health	1064	220	1284
Rutherford	HC0186	Carolina Home Care	1048	251	1299
Rutherford	HC0445	Encompass Health Home Health	308	191	499

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Table 12A: Inventory of Licensed Medicare-certified Home Health Agencies or Offices

A	B	C	D	E	F
County	License Number	Name	In-County Patients	Out-of-County Patients	Total Patients
Sampson	HC0255	3HC	486	1264	1750
Scotland	HC0403	Healthkeeperz	368	938	1306
Stanly	HC0308	Atrium Health At Home Stanly	693	321	1014
Stanly	HC0514	Advance Home Health	51	6	57
Stokes	HC0517	CenterWell Home Health	33	2	35
Stokes	HC1699	CenterWell Home Health	594	809	1403
Surry	HC0296	PruittHealth @ Home - Pilot Mountain	60	93	153
Surry	HC0420	Liberty Home Care V, LLC	357	45	402
Transylvania	HC0067	CarePartners Home Care & Hospice	812	76	888
Tyrrell	HC0524	Roanoke Home Care & Hospice	57	1	58
Union	HC1238	Atrium Health at Home - Union	862	351	1213
Union	HC2057	Kindred at Home	1462	457	1919
Vance	HC0501	3HC	179	737	916
Vance	HC0823	Maria Parham Regional Home Health	152	134	286
Wake	HC0031	Transitions LifeCare	627	185	812
Wake	HC0074	Well Care Home Health of the Triangle, Inc.	2213	5329	7542
Wake	HC0299	CenterWell Home Health	1590	554	2144
Wake	HC0339	Intrepid USA Healthcare Services	291	78	369
Wake	HC0422	UNC Home Health Raleigh	2761	73	2834
Wake	HC0828	Aveanna Healthcare	45	7	52
Wake	HC1028	Amedisys Home Health****	0	0	0
Wake	HC1293	WakeMed Home Health	3781	384	4165
Wake	HC1437	North Carolina Home Health	114	81	195
Wake	HC2112	Medi Home Health Agency	1252	518	1770
Wake	HC2562	Liberty Home Care	604	176	780
Wake	HC3820	BAYADA Home Health Care, Inc.	1922	953	2875
Wake	HC4331	Personal Home Care of North Carolina, LLC***	0	0	0
Wake	HC4538	PruittHealth @ Home - Wake	462	356	818
Wake	HC5229	Well Care Home Health of the Southern Triangle***	0	0	0
Warren	HC0341	Warren County Home Health Agency**	0	0	0
Washington	HC0523	Roanoke Home Care	113	15	128
Watauga	HC0477	Medi Home Health and Hospice	399	508	907
Watauga	HC1544	CenterWell Home Health	519	791	1310
Wayne	HC0228	3HC	1173	14	1187
Wayne	HC1299	CenterWell Home Health	1185	280	1465
Wilkes	HC0252	CenterWell Home Health	46	23	69
Wilkes	HC0430	Wake Forest Baptist Health Care at Home, LLC	1072	149	1221
Wilson	HC0343	Home Health of Wilson	487	161	648
Wilson	HC0508	3HC	472	637	1109
Yadkin	HC0346	Yadkin Valley Home Health	669	2828	3497
Yancey	HC0323	PruittHealth @ Home - Yancey	199	27	226

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Table 12A: Inventory of Licensed Medicare-certified Home Health Agencies or Offices

A	B	C	D	E	F
County	License Number	Name	In-County Patients	Out-of-County Patients	Total Patients
Totals*		213 Agencies or Offices	139,529	108,611	248,140

* Totals include both in-state and out-of-state patients.

** Agency reported zero patients on their 2022 LRA.

*** Agency is licensed, but not Medicare certified.

**** Agency underwent a change of ownership and utilization data was not reported.

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Table 12B: Average Annual Rates of Change in Patients and Use Rates per 1,000 Population

Under Age 18											
A	B	C	D	E	F	G	H	I	J	K	L
County	Home Health Patients in 2019	Estimated 2019 Population	Use Rate for 2019	Home Health Patients in 2020	Estimated 2020 Population	Use Rate for 2020	Home Health Patients in 2021	Estimated 2021 Population	Use Rate for 2021	Average Annual Rate of Change in Number of Patients	Average Annual Rate of Change in Use Rates per 1000
Cherokee	1	4,888	0.20	0	4,943	0.00	0	4,614	0.00	-50.0000%	-50.0000%
Clay	0	2,037	0.00	0	1,973	0.00	0	1,793	0.00	0.0000%	0.0000%
Graham	0	1,725	0.00	0	1,714	0.00	0	1,694	0.00	0.0000%	0.0000%
Haywood	41	11,331	3.62	65	11,211	5.80	33	10,870	3.04	4.6529%	6.2977%
Jackson	10	7,453	1.34	15	7,404	2.03	6	7,075	0.85	-5.0000%	-3.5736%
Macon	5	6,665	0.75	2	6,657	0.30	0	6,556	0.00	-80.0000%	-79.9760%
Swain	4	3,271	1.22	3	3,346	0.90	1	3,262	0.31	-45.8333%	-46.2447%
Region A Totals	61	37,370	1.63	85	37,248	2.28	40	35,864	1.12	-6.7985%	-5.6623%
Buncombe	132	49,433	2.67	178	49,116	3.62	110	48,120	2.29	-1.6769%	-0.6022%
Henderson	45	21,945	2.05	64	21,666	2.95	29	20,917	1.39	-6.2326%	-4.5056%
Madison	12	3,974	3.02	10	3,872	2.58	12	3,596	3.34	1.6667%	7.3694%
Transylvania	36	5,621	6.40	22	5,575	3.95	14	5,216	2.68	-37.6263%	-35.1842%
Region B Totals	225	80,973	2.78	274	80,229	3.42	165	77,849	2.12	-9.0016%	-7.5165%
Cleveland	2	21,069	0.09	1	21,158	0.05	0	21,158	0.00	-75.0000%	-75.1052%
McDowell	32	9,060	3.53	28	8,931	3.14	30	8,528	3.52	-2.6786%	0.4849%
Polk	5	3,380	1.48	0	3,380	0.00	5	2,881	1.74	-50.0000%	-50.0000%
Rutherford	12	13,654	0.88	0	13,574	0.00	0	12,748	0.00	-50.0000%	-50.0000%
Region C Totals	51	47,163	1.08	29	47,043	0.62	35	45,315	0.77	-11.2238%	-8.8501%
Alleghany	0	1,936	0.00	0	1,920	0.00	0	1,873	0.00	0.0000%	0.0000%
Ashe	0	4,890	0.00	0	4,850	0.00	0	4,556	0.00	0.0000%	0.0000%
Avery	0	2,705	0.00	0	2,688	0.00	0	2,697	0.00	0.0000%	0.0000%
Mitchell	14	2,752	5.09	13	2,691	4.83	9	2,700	3.33	-18.9560%	-18.0190%
Watauga	0	6,936	0.00	0	6,809	0.00	0	6,572	0.00	0.0000%	0.0000%
Wilkes	1	13,873	0.07	2	13,692	0.15	0	12,718	0.00	0.0000%	1.3219%
Yancey	11	3,333	3.30	9	3,364	2.68	8	3,343	2.39	-14.6465%	-14.7443%
Region D Totals	26	36,425	0.71	24	36,014	0.67	17	34,459	0.49	-18.4295%	-16.3046%
Alexander	3	7,557	0.40	1	7,447	0.13	1	6,791	0.15	-33.3333%	-28.2572%
Burke	3	17,966	0.17	1	17,806	0.06	0	17,007	0.00	-83.3333%	-83.1836%
Caldwell	1	16,178	0.06	0	16,256	0.00	0	15,316	0.00	-50.0000%	-50.0000%
Catawba	5	34,478	0.15	6	34,275	0.18	2	33,408	0.06	-23.3333%	-22.5454%
Region E Totals	12	76,179	0.16	8	75,784	0.11	3	72,522	0.04	-47.9167%	-46.8996%
Anson	0	5,049	0.00	0	4,842	0.00	0	4,632	0.00	0.0000%	0.0000%
Cabarrus	76	51,395	1.48	85	51,470	1.65	62	53,185	1.17	-7.6084%	-8.8659%
Gaston	125	49,449	2.53	113	49,457	2.28	131	49,484	2.65	3.1646%	3.1257%
Iredell	11	38,842	0.28	14	38,501	0.36	16	38,678	0.41	20.7792%	21.0813%
Lincoln	12	17,337	0.69	15	17,539	0.86	22	17,116	1.29	35.8333%	36.9258%
Mecklenburg *	391	260,961	1.50	444	262,456	1.69	368	259,776	1.42	-1.7811%	-1.6769%
Rowan	7	31,515	0.22	8	31,404	0.25	1	31,753	0.03	-36.6071%	-36.4739%
Stanly	137	13,235	10.35	32	13,264	2.41	0	12,679	0.00	-88.3212%	-88.3467%
Union	38	57,803	0.66	37	54,824	0.67	35	53,196	0.66	-4.0185%	0.0744%
Region F Totals	797	525,586	1.52	748	523,757	1.43	635	520,499	1.22	-10.6275%	-10.1979%
Alamance	26	36,891	0.70	18	36,656	0.49	6	36,836	0.16	-48.7179%	-48.5775%
Caswell	1	4,170	0.24	2	4,115	0.49	0	3,864	0.00	0.0000%	1.3366%
Davidson	13	35,714	0.36	12	35,572	0.34	25	34,831	0.72	50.3205%	52.7208%
Guilford *	115	116,240	0.99	92	115,226	0.80	90	113,361	0.79	-11.0870%	-9.9302%
Montgomery	5	5,865	0.85	0	5,788	0.00	0	5,560	0.00	-50.0000%	-50.0000%
Randolph	59	31,385	1.88	8	31,091	0.26	5	30,552	0.16	-61.9703%	-61.3549%
Rockingham	4	18,118	0.22	6	17,915	0.33	3	17,427	0.17	0.0000%	1.5499%
Region G Totals	223	248,383	0.90	138	246,363	0.56	129	242,431	0.53	-22.3192%	-21.3074%

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Table 12B: Average Annual Rates of Change in Patients and Use Rates per 1,000 Population

Under Age 18											
A	B	C	D	E	F	G	H	I	J	K	L
County	Home Health Patients in 2019	Estimated 2019 Population	Use Rate for 2019	Home Health Patients in 2020	Estimated 2020 Population	Use Rate for 2020	Home Health Patients in 2021	Estimated 2021 Population	Use Rate for 2021	Average Annual Rate of Change in Number of Patients	Average Annual Rate of Change in Use Rates per 1000
Davie	1	8,435	0.12	3	8,349	0.36	11	8,091	1.36	233.3333%	240.7244%
Forsyth *	31	86,806	0.36	30	86,698	0.35	87	85,163	1.02	93.3871%	96.0609%
Stokes	4	8,379	0.48	0	8,312	0.00	3	7,686	0.39	-50.0000%	-50.0000%
Surry	3	15,060	0.20	2	15,080	0.13	7	14,587	0.48	108.3333%	114.2036%
Yadkin	0	7,675	0.00	2	7,632	0.26	4	7,389	0.54	50.0000%	53.2887%
Region I Totals	39	126,355	0.31	37	126,071	0.29	112	122,916	0.91	98.7872%	102.7790%
Chatham	4	13,946	0.29	0	13,866	0.00	0	13,448	0.00	-50.0000%	-50.0000%
Durham	33	74,042	0.45	16	75,401	0.21	11	74,987	0.15	-41.3826%	-41.6297%
Johnston	23	49,760	0.46	20	50,400	0.40	4	51,551	0.08	-46.5217%	-47.2971%
Lee	0	15,116	0.00	0	15,117	0.00	0	15,013	0.00	0.0000%	0.0000%
Moore *	1	20,710	0.05	3	20,865	0.14	2	20,509	0.10	83.3333%	82.7976%
Orange	13	26,440	0.49	7	25,990	0.27	1	25,329	0.04	-65.9341%	-65.2815%
Wake *	51	254,074	0.20	85	253,221	0.34	59	253,688	0.23	18.0392%	18.2560%
Region J Totals	125	454,088	0.28	131	454,860	0.29	77	454,525	0.17	-18.2107%	-18.2780%
Franklin	6	14,766	0.41	11	15,039	0.73	13	14,677	0.89	50.7576%	50.5510%
Granville	4	11,907	0.34	3	11,764	0.26	0	11,419	0.00	-62.5000%	-62.0442%
Person	4	8,273	0.48	3	8,181	0.37	4	7,841	0.51	4.1667%	7.4792%
Vance	2	10,579	0.19	2	10,388	0.19	4	9,682	0.41	50.0000%	58.2112%
Warren	1	3,619	0.28	0	3,534	0.00	0	3,300	0.00	-50.0000%	-50.0000%
Region K Totals	17	49,144	0.35	19	48,906	0.39	21	46,919	0.45	11.1455%	13.7578%
Edgecombe	2	11,948	0.17	2	11,746	0.17	1	11,197	0.09	-25.0000%	-22.9144%
Halifax	0	10,758	0.00	0	10,583	0.00	0	10,027	0.00	0.0000%	0.0000%
Nash	11	19,997	0.55	9	20,055	0.45	6	19,472	0.31	-25.7576%	-24.8779%
Northampton	0	3,714	0.00	0	3,621	0.00	0	3,304	0.00	0.0000%	0.0000%
Wilson	10	18,539	0.54	6	18,714	0.32	2	17,664	0.11	-53.3333%	-52.6232%
Region L Totals	23	64,956	0.35	17	64,719	0.26	9	61,664	0.15	-36.5729%	-35.1261%
Cumberland *	20	89,007	0.22	12	89,574	0.13	9	86,753	0.10	-32.5000%	-31.4705%
Harnett *	0	36,179	0.00	1	36,343	0.03	1	34,847	0.03	0.0000%	2.1465%
Sampson	12	15,442	0.78	7	15,331	0.46	3	14,185	0.21	-49.4048%	-47.4624%
Region M Totals	32	140,628	0.23	20	141,248	0.14	13	135,785	0.10	-36.2500%	-35.0796%
Bladen	6	7,084	0.85	11	6,981	1.58	8	6,550	1.22	28.0303%	31.7756%
Hoke *	3	16,702	0.18	1	16,725	0.06	1	16,161	0.06	-33.3333%	-31.6113%
Richmond	2	10,138	0.20	1	10,111	0.10	1	9,516	0.11	-25.0000%	-21.8069%
Robeson	83	30,835	2.69	89	30,719	2.90	71	24,451	2.90	-6.4979%	3.9297%
Scotland	5	8,306	0.60	1	8,285	0.12	0	7,756	0.00	-90.0000%	-89.9747%
Region N Totals	99	73,065	1.35	103	72,821	1.41	81	64,434	1.26	-8.6594%	-3.3670%
Brunswick	32	22,779	1.40	19	23,124	0.82	10	21,428	0.47	-43.9967%	-42.3568%
Columbus	5	11,593	0.43	5	11,414	0.44	0	10,246	0.00	-50.0000%	-49.2159%
New Hanover *	63	43,170	1.46	60	42,803	1.40	30	41,263	0.73	-27.3810%	-26.0396%
Pender	26	12,860	2.02	33	12,798	2.58	22	12,049	1.83	-3.2051%	-0.8256%
Region O Totals	126	90,402	1.39	117	90,139	1.30	62	84,986	0.73	-27.0757%	-25.3337%
Carteret *	3	11,946	0.25	2	11,844	0.17	1	11,012	0.09	-41.6667%	-39.4908%
Craven *	3	26,592	0.11	14	26,439	0.53	2	25,399	0.08	140.4762%	142.1189%
Duplin	19	13,942	1.36	15	13,985	1.07	10	12,790	0.78	-27.1930%	-24.1999%
Greene	1	4,335	0.23	0	4,278	0.00	0	4,159	0.00	-50.0000%	-50.0000%
Jones	0	1,965	0.00	0	1,938	0.00	5	1,764	2.83	0.0000%	0.0000%
Lenoir	4	12,251	0.33	4	12,248	0.33	2	11,926	0.17	-25.0000%	-24.3128%
Onslow *	72	61,453	1.17	61	64,223	0.95	37	63,582	0.58	-27.3110%	-28.8323%
Pamlico	0	1,983	0.00	0	1,934	0.00	0	1,802	0.00	0.0000%	0.0000%
Wayne *	9	30,405	0.30	6	30,509	0.20	2	28,785	0.07	-50.0000%	-49.1154%
Region P Totals	111	164,872	0.67	102	167,398	0.61	59	161,219	0.37	-25.1325%	-24.7173%

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Table 12B: Average Annual Rates of Change in Patients and Use Rates per 1,000 Population

Under Age 18											
A	B	C	D	E	F	G	H	I	J	K	L
County	Home Health Patients in 2019	Estimated 2019 Population	Use Rate for 2019	Home Health Patients in 2020	Estimated 2020 Population	Use Rate for 2020	Home Health Patients in 2021	Estimated 2021 Population	Use Rate for 2021	Average Annual Rate of Change in Number of Patients	Average Annual Rate of Change in Use Rates per 1000
Beaufort	1	9,338	0.11	0	9,156	0.00	0	8,640	0.00	-50.0000%	-50.0000%
Bertie	1	3,679	0.27	0	3,607	0.00	0	3,456	0.00	-50.0000%	-50.0000%
Hertford	0	4,620	0.00	0	4,535	0.00	0	4,091	0.00	0.0000%	0.0000%
Martin	1	4,625	0.22	1	4,518	0.22	1	4,361	0.23	0.0000%	2.9842%
Pitt *	1	38,807	0.03	2	39,207	0.05	0	37,930	0.00	0.0000%	-1.0202%
Region Q Totals	4	61,069	0.07	3	61,023	0.05	1	58,478	0.02	-45.8333%	-45.0797%
Camden	0	2,064	0.00	0	2,038	0.00	0	1,932	0.00	0.0000%	0.0000%
Chowan	0	2,834	0.00	0	2,780	0.00	0	2,745	0.00	0.0000%	0.0000%
Currituck	0	5,328	0.00	0	5,514	0.00	0	5,650	0.00	0.0000%	0.0000%
Dare	1	6,810	0.15	4	6,899	0.58	0	6,645	0.00	100.0000%	97.4199%
Gates	0	2,258	0.00	0	2,195	0.00	0	1,764	0.00	0.0000%	0.0000%
Hyde	0	860	0.00	0	840	0.00	0	759	0.00	0.0000%	0.0000%
Pasquotank *	0	8,986	0.00	0	9,151	0.00	0	9,066	0.00	0.0000%	0.0000%
Perquimans	0	2,469	0.00	0	2,490	0.00	0	2,319	0.00	0.0000%	0.0000%
Tyrrell	0	792	0.00	0	689	0.00	0	584	0.00	0.0000%	0.0000%
Washington	0	2,561	0.00	0	2,547	0.00	0	2,344	0.00	0.0000%	0.0000%
Region R Totals	1	34,962	0.03	4	35,143	0.11	0	33,808	0.00	100.0000%	98.9699%
Grand Totals	1,972	2,311,620	0.85	1,859	2,308,766	0.81	1,459	2,253,673	0.65	-13.6236%	-12.6060%

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Table 12B: Average Annual Rates of Change in Patients and Use Rates per 1,000 Population

Ages 18-64											
A	B	C	D	E	F	G	H	I	J	K	L
County	Home Health Patients in 2019	Estimated 2019 Population	Use Rate for 2019	Home Health Patients in 2020	Estimated 2020 Population	Use Rate for 2020	Home Health Patients in 2021	Estimated 2021 Population	Use Rate for 2021	Average Annual Rate of Change in Number of Patients	Average Annual Rate of Change in Use Rates per 1000
Cherokee	127	15,849	8.01	121	15,618	7.75	132	15,188	8.69	2.1832%	4.4321%
Clay	107	6,233	17.17	42	6,159	6.82	53	5,751	9.22	-17.2786%	-12.5665%
Graham	25	4,809	5.20	48	4,739	10.13	25	4,243	5.89	22.0417%	26.5039%
Haywood	374	35,746	10.46	457	35,759	12.78	446	35,049	12.73	9.8928%	10.8590%
Jackson	111	28,163	3.94	142	28,010	5.07	114	27,048	4.21	4.1048%	5.8819%
Macon	139	19,263	7.22	230	19,527	11.78	205	19,684	10.41	27.2990%	25.8250%
Swain	67	8,093	8.28	82	8,165	10.04	66	7,975	8.28	1.4379%	1.8571%
Region A Totals	950	118,156	8.04	1,122	117,977	9.51	1,041	114,938	9.06	5.4430%	6.7592%
Buncombe	1,810	160,998	11.24	1,879	160,245	11.73	1,644	166,315	9.88	-4.3472%	-5.7000%
Henderson	950	64,403	14.75	796	64,329	12.37	835	63,660	13.12	-5.6555%	-5.0561%
Madison	151	13,434	11.24	147	13,311	11.04	130	12,465	10.43	-7.1068%	-3.6560%
Transylvania	216	18,576	11.63	256	18,436	13.89	218	16,948	12.86	1.8374%	6.0257%
Region B Totals	3,127	257,411	12.15	3,078	256,321	12.01	2,827	259,388	10.90	-4.8608%	-5.1945%
Cleveland	1,113	59,974	18.56	1,005	60,378	16.65	972	60,099	16.17	-6.4935%	-6.5711%
McDowell	548	27,786	19.72	583	27,574	21.14	519	26,175	19.83	-2.2954%	0.4926%
Polk	104	11,820	8.80	135	11,893	11.35	144	10,311	13.97	18.2372%	26.0216%
Rutherford	689	40,472	17.02	732	40,369	18.13	715	37,599	19.02	1.9593%	5.6929%
Region C Totals	2,454	140,052	17.52	2,455	140,214	17.51	2,350	134,184	17.51	-2.1181%	-0.0251%
Alleghany	62	6,580	9.42	88	6,617	13.30	138	6,060	22.77	49.3768%	56.1869%
Ashe	172	15,831	10.86	180	15,878	11.34	184	14,889	12.36	3.4367%	6.6769%
Avery	90	11,329	7.94	125	11,436	10.93	225	11,115	20.24	59.4444%	61.3939%
Mitchell	116	8,860	13.09	124	8,764	14.15	134	8,527	15.71	7.4805%	9.5678%
Watauga	174	41,454	4.20	187	40,486	4.62	286	37,428	7.64	30.2062%	37.7389%
Wilkes	529	41,125	12.86	514	41,029	12.53	520	38,352	13.56	-0.8341%	2.8103%
Yancey	109	10,598	10.28	134	10,774	12.44	128	10,495	12.20	9.2291%	9.4947%
Region D Totals	1,252	135,777	9.22	1,352	134,984	10.02	1,615	126,866	12.73	13.7199%	17.8590%
Alexander	191	23,181	8.24	213	23,092	9.22	186	21,790	8.54	-0.5789%	2.2449%
Burke	654	55,065	11.88	706	54,746	12.90	605	51,249	11.81	-3.1774%	0.0608%
Caldwell	578	50,722	11.40	633	50,995	12.41	551	48,370	11.39	-1.7193%	0.3495%
Catawba	1,173	96,405	12.17	1,173	96,900	12.11	1,061	97,656	10.86	-4.7741%	-5.3796%
Region E Totals	2,596	225,373	11.52	2,725	225,733	12.07	2,403	219,065	10.97	-3.4237%	-2.1653%
Anson	202	15,694	12.87	185	14,579	12.69	181	13,071	13.85	-5.2890%	3.8569%
Cabarrus	1,687	132,603	12.72	1,298	135,302	9.59	1,074	146,696	7.32	-20.1580%	-24.1388%
Gaston	1,901	136,917	13.88	2,018	137,405	14.69	2,018	141,967	14.21	3.0773%	1.2821%
Iredell	1,050	113,398	9.26	1,019	114,636	8.89	1,092	120,266	9.08	2.1058%	-0.9266%
Lincoln	766	53,653	14.28	653	54,918	11.89	643	54,544	11.79	-8.1417%	-8.7859%
Mecklenburg *	4,255	717,551	5.93	4,279	721,678	5.93	4,626	734,170	6.30	4.3367%	3.1294%
Rowan	1,133	86,019	13.17	1,080	86,192	12.53	973	88,437	11.00	-7.2926%	-8.5318%
Stanly	465	38,152	12.19	398	38,574	10.32	358	37,049	9.66	-12.2294%	-10.8464%
Union	843	148,642	5.67	881	151,800	5.80	800	155,849	5.13	-2.3432%	-4.6098%
Region F Totals	12,302	1,442,629	8.53	11,811	1,455,084	8.12	11,765	1,492,049	7.89	-2.1903%	-3.8352%
Alamance	1,178	103,805	11.35	1,204	103,718	11.61	1,105	105,388	10.49	-3.0077%	-3.6920%
Caswell	191	14,459	13.21	200	14,196	14.09	67	13,601	4.93	-30.8940%	-29.1913%
Davidson	1,022	103,333	9.89	988	103,632	9.53	1,102	103,334	10.66	4.1058%	4.1272%
Guilford *	3,146	339,782	9.26	3,099	337,592	9.18	2,869	344,621	8.33	-4.4579%	-5.0825%
Montgomery	167	16,011	10.43	152	16,057	9.47	145	14,516	9.99	-6.7936%	-1.8605%
Randolph	872	87,765	9.94	807	87,803	9.19	869	87,444	9.94	0.1143%	0.3153%
Rockingham	768	54,988	13.97	759	54,876	13.83	585	54,260	10.78	-12.0484%	-11.5100%
Region G Totals	7,344	720,143	10.20	7,209	717,874	10.04	6,742	723,164	9.32	-4.1581%	-4.3451%

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Table 12B: Average Annual Rates of Change in Patients and Use Rates per 1,000 Population

Ages 18-64											
A	B	C	D	E	F	G	H	I	J	K	L
County	Home Health Patients in 2019	Estimated 2019 Population	Use Rate for 2019	Home Health Patients in 2020	Estimated 2020 Population	Use Rate for 2020	Home Health Patients in 2021	Estimated 2021 Population	Use Rate for 2021	Average Annual Rate of Change in Number of Patients	Average Annual Rate of Change in Use Rates per 1000
Davie	292	26,012	11.23	303	26,128	11.60	287	25,820	11.12	-0.7567%	-0.4221%
Forsyth *	2,370	232,111	10.21	2,158	231,955	9.30	2,167	235,391	9.21	-4.2640%	-4.9663%
Stokes	372	28,460	13.07	334	28,410	11.76	316	27,235	11.60	-7.8021%	-5.6822%
Surry	584	43,627	13.39	619	43,706	14.16	605	42,287	14.31	1.8657%	3.4098%
Yadkin	310	22,912	13.53	306	22,788	13.43	248	22,128	11.21	-10.1223%	-8.6451%
Region I Totals	3,928	353,122	11.12	3,720	352,987	10.54	3,623	352,861	10.27	-3.9514%	-3.9159%
Chatham	255	42,232	6.04	267	42,554	6.27	290	42,808	6.77	6.6601%	5.9417%
Durham	1,395	200,971	6.94	1,423	203,344	7.00	1,615	211,956	7.62	7.7499%	4.8490%
Johnston	1,053	128,228	8.21	1,064	132,006	8.06	1,038	140,965	7.36	-0.6995%	-5.2455%
Lee	350	36,292	9.64	256	36,067	7.10	296	37,836	7.82	-5.6161%	-8.0909%
Moore *	468	51,528	9.08	392	51,614	7.59	392	50,522	7.76	-8.1197%	-7.1087%
Orange	527	99,185	5.31	555	99,403	5.58	509	101,247	5.03	-1.4876%	-2.4382%
Wake *	4,181	705,007	5.93	4,123	712,624	5.79	4,763	755,986	6.30	7.0677%	3.2276%
Region J Totals	8,229	1,263,443	6.51	8,080	1,277,612	6.32	8,903	1,341,320	6.64	4.1875%	1.0263%
Franklin	399	42,370	9.42	475	43,450	10.93	442	42,896	10.30	6.0501%	5.1715%
Granville	296	39,091	7.57	358	39,086	9.16	436	38,865	11.22	21.3668%	21.7208%
Person	234	24,159	9.69	218	24,163	9.02	260	23,184	11.21	6.2142%	8.7247%
Vance	328	26,985	12.15	371	26,508	14.00	350	24,424	14.33	3.7247%	8.7672%
Warren	141	11,516	12.24	91	11,300	8.05	100	10,444	9.57	-12.7854%	-7.6653%
Region K Totals	1,398	144,121	9.70	1,513	144,507	10.47	1,588	139,813	11.36	6.5915%	8.2089%
Edgecombe	425	30,000	14.17	451	29,425	15.33	455	25,991	17.51	3.5023%	11.2038%
Halifax	206	29,768	6.92	272	29,475	9.23	356	26,906	13.23	31.4606%	38.3652%
Nash	677	57,506	11.77	630	57,795	10.90	733	56,638	12.94	4.7034%	5.6591%
Northampton	127	11,940	10.64	114	11,592	9.83	110	9,977	11.03	-6.8725%	2.2845%
Wilson	722	48,793	14.80	650	49,321	13.18	625	46,324	13.49	-6.9092%	-4.2807%
Region L Totals	2,157	178,007	12.12	2,117	177,608	11.92	2,279	165,836	13.74	2.8990%	6.8301%
Cumberland *	1,871	171,872	10.89	1,826	170,491	10.71	1,918	171,335	11.19	1.3166%	1.4532%
Harnett *	590	77,155	7.65	498	77,815	6.40	553	77,170	7.17	-2.2745%	-2.1684%
Sampson	481	37,394	12.86	472	37,083	12.73	359	33,016	10.87	-12.9059%	-7.8098%
Region M Totals	2,942	286,421	10.27	2,796	285,389	9.80	2,830	281,521	10.05	-1.8733%	-1.0061%
Bladen	262	20,236	12.95	317	20,145	15.74	301	16,512	18.23	7.9725%	18.6916%
Hoke *	224	29,973	7.47	238	29,794	7.99	228	27,901	8.17	1.0242%	4.5931%
Richmond	355	26,847	13.22	318	26,721	11.90	293	24,950	11.74	-9.1421%	-5.6608%
Robeson	1,103	80,110	13.77	1,168	79,921	14.61	1,044	69,410	15.04	-2.3617%	4.5313%
Scotland	261	20,821	12.54	295	20,661	14.28	231	19,173	12.05	-4.3340%	-0.8578%
Region N Totals	2,205	177,987	12.39	2,336	177,242	13.18	2,097	157,946	13.28	-2.1451%	3.5610%
Brunswick	734	76,227	9.63	721	78,912	9.14	824	74,298	11.09	6.2573%	8.1348%
Columbus	629	33,837	18.59	607	33,569	18.08	540	28,982	18.63	-7.2678%	0.1575%
New Hanover *	1,103	150,314	7.34	1,872	149,199	12.55	1,729	143,890	12.02	31.0400%	33.3781%
Pender	407	38,844	10.48	466	39,046	11.93	404	36,979	10.93	0.5958%	2.7226%
Region O Totals	2,873	299,222	9.60	3,666	300,726	12.19	3,497	284,149	12.31	11.4959%	13.9593%
Carteret *	315	40,566	7.77	356	40,482	8.79	366	37,651	9.72	7.9124%	11.8948%
Craven *	601	52,593	11.43	566	52,105	10.86	555	50,061	11.09	-3.8835%	-1.4407%
Duplin	616	34,971	17.61	530	35,066	15.11	472	27,168	17.37	-12.4522%	0.3760%
Greene	138	13,192	10.46	121	13,053	9.27	131	12,543	10.44	-2.0272%	0.6407%
Jones	62	6,044	10.26	73	5,867	12.44	85	5,037	16.88	17.0901%	28.4596%
Lenoir	661	32,801	20.15	561	32,961	17.02	506	31,216	16.21	-12.4663%	-10.1512%
Onslow *	1,069	83,441	12.81	1,060	88,501	11.98	885	83,895	10.55	-8.6757%	-9.2184%
Pamlico	43	7,436	5.78	40	7,410	5.40	57	6,681	8.53	17.7616%	25.6993%
Wayne *	853	72,198	11.81	849	71,850	11.82	846	64,470	13.12	-0.4111%	5.5333%
Region P Totals	4,358	343,242	12.70	4,156	347,295	11.97	3,903	318,722	12.25	-5.3614%	-1.7083%

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Table 12B: Average Annual Rates of Change in Patients and Use Rates per 1,000 Population

Ages 18-64											
A	B	C	D	E	F	G	H	I	J	K	L
County	Home Health Patients in 2019	Estimated 2019 Population	Use Rate for 2019	Home Health Patients in 2020	Estimated 2020 Population	Use Rate for 2020	Home Health Patients in 2021	Estimated 2021 Population	Use Rate for 2021	Average Annual Rate of Change in Number of Patients	Average Annual Rate of Change in Use Rates per 1000
Beaufort	447	26,286	17.01	374	26,149	14.30	362	24,090	15.03	-9.7698%	-5.4142%
Bertie	278	11,947	23.27	237	11,800	20.08	143	10,517	13.60	-27.2053%	-22.9939%
Hertford	157	14,749	10.64	148	14,437	10.25	158	11,654	13.56	0.5121%	14.2776%
Martin	230	13,174	17.46	214	12,937	16.54	203	11,826	17.17	-6.0484%	-0.7403%
Pitt *	1,362	116,936	11.65	1,168	119,006	9.81	1,092	107,549	10.15	-10.3753%	-6.1413%
Region Q Totals	2,474	183,092	13.51	2,141	184,329	11.62	1,958	165,636	11.82	-11.0037%	-6.1336%
Camden	62	6,777	9.15	60	6,715	8.94	45	6,660	6.76	-14.1129%	-13.3565%
Chowan	110	7,824	14.06	100	7,811	12.80	97	7,468	12.99	-6.0455%	-3.7422%
Currituck	146	17,606	8.29	154	17,731	8.69	74	18,571	3.98	-23.2343%	-24.6928%
Dare	192	22,355	8.59	216	22,637	9.54	64	21,958	2.91	-28.9352%	-29.1778%
Gates	87	7,475	11.64	87	7,249	12.00	51	6,146	8.30	-20.6897%	-13.8706%
Hyde	30	3,230	9.29	19	3,158	6.02	19	2,696	7.05	-18.3333%	-9.0431%
Pasquotank *	301	23,817	12.64	313	23,701	13.21	217	24,239	8.95	-13.3421%	-13.8570%
Perquimans	94	7,415	12.68	100	7,451	13.42	45	6,918	6.50	-24.3085%	-22.8320%
Tyrrell	20	2,603	7.68	17	2,259	7.53	15	1,785	8.40	-13.3824%	4.8048%
Washington	118	6,539	18.05	94	6,459	14.55	103	5,538	18.60	-5.3823%	4.2225%
Region R Totals	1,160	105,641	10.98	1,160	105,171	11.03	730	101,979	7.16	-18.5345%	-17.3261%
Grand Totals	61,749	6,373,839	9.69	61,437	6,401,053	9.60	60,151	6,379,437	9.43	-1.2992%	-1.3449%

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Table 12B: Average Annual Rates of Change in Patients and Use Rates per 1,000 Population

Ages 65-74											
A	B	C	D	E	F	G	H	I	J	K	L
County	Home Health Patients in 2019	Estimated 2019 Population	Use Rate for 2019	Home Health Patients in 2020	Estimated 2020 Population	Use Rate for 2020	Home Health Patients in 2021	Estimated 2021 Population	Use Rate for 2021	Average Annual Rate of Change in Number of Patients	Average Annual Rate of Change in Use Rates per 1000
Cherokee	120	4,986	24.07	208	4,960	41.94	244	4,841	50.40	45.3205%	47.2166%
Clay	103	2,049	50.27	101	2,023	49.93	99	1,872	52.88	-1.9610%	2.6224%
Graham	43	1,113	38.63	50	1,132	44.17	51	1,016	50.20	9.1395%	13.9865%
Haywood	501	8,858	56.56	517	8,925	57.93	579	8,780	65.95	7.5929%	8.1304%
Jackson	171	5,030	34.00	181	5,092	35.55	160	5,031	31.80	-2.8771%	-2.9856%
Macon	264	5,622	46.96	266	5,707	46.61	314	5,831	53.85	9.4013%	7.3959%
Swain	79	1,651	47.85	100	1,671	59.84	82	1,543	53.14	4.2911%	6.9348%
Region A Totals	1,281	29,309	43.71	1,423	29,510	48.22	1,529	28,914	52.88	9.2671%	9.9962%
Buncombe	1,808	31,232	57.89	1,944	32,070	60.62	2,179	33,959	64.17	9.8053%	5.2830%
Henderson	1,004	16,752	59.93	1,132	16,926	66.88	1,128	16,858	66.91	6.1978%	5.8193%
Madison	168	3,083	54.49	187	3,147	59.42	206	2,973	69.29	10.7350%	12.8268%
Transylvania	321	5,567	57.66	316	5,574	56.69	328	4,825	67.98	1.1199%	9.1145%
Region B Totals	3,301	56,634	58.29	3,579	57,717	62.01	3,841	58,615	65.53	7.8711%	6.0318%
Cleveland	1,060	11,263	94.11	963	11,629	82.81	1,092	11,625	93.94	2.1223%	0.7122%
McDowell	504	5,706	88.33	459	5,787	79.32	502	5,455	92.03	0.2198%	2.9106%
Polk	194	3,402	57.03	185	3,500	52.86	218	2,940	74.15	6.5993%	16.4869%
Rutherford	661	8,469	78.05	682	8,664	78.72	653	7,746	84.30	-0.5376%	3.9750%
Region C Totals	2,419	28,840	83.88	2,289	29,580	77.38	2,465	27,766	88.78	1.1574%	3.4915%
Alleghany	77	1,578	48.80	109	1,608	67.79	222	1,491	148.89	72.6141%	79.2846%
Ashe	227	3,986	56.95	228	4,047	56.34	257	3,793	67.76	6.5799%	9.5971%
Avery	202	2,211	91.36	211	2,264	93.20	323	2,157	149.75	28.7680%	31.3422%
Mitchell	136	1,940	70.10	144	1,929	74.65	192	1,891	101.53	19.6078%	21.2494%
Watauga	251	5,472	45.87	236	5,526	42.71	370	5,395	68.58	25.4018%	26.8458%
Wilkes	595	8,611	69.10	577	8,738	66.03	665	7,887	84.32	6.1130%	11.6261%
Yancey	186	2,588	71.87	177	2,596	68.18	213	2,515	84.69	7.7501%	9.5414%
Region D Totals	1,674	26,386	63.44	1,682	26,708	62.98	2,242	25,129	89.22	16.8858%	20.4679%
Alexander	218	4,528	48.14	230	4,598	50.02	237	4,319	54.87	4.2740%	6.7991%
Burke	646	10,678	60.50	690	10,891	63.36	741	10,520	70.44	7.1012%	7.9504%
Caldwell	679	9,672	70.20	757	9,945	76.12	724	9,531	75.96	3.5641%	4.1110%
Catawba	1,188	17,116	69.41	1,269	17,765	71.43	1,400	18,424	75.99	8.5706%	4.6464%
Region E Totals	2,731	41,994	65.03	2,946	43,199	68.20	3,102	42,794	72.49	6.5839%	5.5777%
Anson	190	2,661	71.40	165	2,584	63.85	186	2,423	76.76	-0.2153%	4.8238%
Cabarrus	1,260	17,433	72.28	1,271	18,165	69.97	1,140	19,490	58.49	-4.7169%	-9.7982%
Gaston	1,755	22,132	79.30	1,833	22,785	80.45	1,993	23,717	84.03	6.5867%	2.9537%
Iredell	1,233	17,521	70.37	1,176	18,168	64.73	1,258	19,402	64.84	1.1750%	-3.9252%
Lincoln	702	9,583	73.25	635	10,103	62.85	662	10,306	64.23	-2.6461%	-6.0007%
Mecklenburg *	4,189	80,405	52.10	4,192	84,215	49.78	4,597	86,608	53.08	4.8664%	1.0878%
Rowan	1,109	14,911	74.37	1,066	15,336	69.51	1,120	16,615	67.41	0.5941%	-4.7817%
Stanly	480	7,257	66.14	443	7,602	58.27	496	7,315	67.81	2.1278%	2.2300%
Union	907	19,101	47.48	922	19,794	46.58	983	20,639	47.63	4.1349%	0.1729%
Region F Totals	11,825	191,004	61.91	11,703	198,752	58.88	12,435	206,515	60.21	2.6115%	-1.3146%
Alamance	1,205	16,813	71.67	1,258	17,187	73.19	1,329	17,815	74.60	5.0211%	2.0232%
Caswell	157	3,027	51.87	154	3,065	50.24	93	3,022	30.77	-20.7606%	-20.9390%
Davidson	1,109	18,083	61.33	1,098	18,498	59.36	1,213	18,878	64.25	4.7409%	2.5184%
Guilford *	3,289	49,510	66.43	3,387	50,972	66.45	3,360	52,494	64.01	1.0912%	-1.8238%
Montgomery	182	3,337	54.54	200	3,429	58.33	200	3,208	62.34	4.9451%	6.9154%
Randolph	906	15,146	59.82	866	15,439	56.09	1,134	15,686	72.29	13.2659%	11.3280%
Rockingham	705	10,775	65.43	748	11,087	67.47	672	11,301	59.46	-2.0306%	-4.3741%
Region G Totals	7,553	116,691	64.73	7,711	119,677	64.43	8,001	122,404	65.37	2.9264%	0.4969%

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Table 12B: Average Annual Rates of Change in Patients and Use Rates per 1,000 Population

Ages 65-74											
A	B	C	D	E	F	G	H	I	J	K	L
County	Home Health Patients in 2019	Estimated 2019 Population	Use Rate for 2019	Home Health Patients in 2020	Estimated 2020 Population	Use Rate for 2020	Home Health Patients in 2021	Estimated 2021 Population	Use Rate for 2021	Average Annual Rate of Change in Number of Patients	Average Annual Rate of Change in Use Rates per 1000
Davie	303	5,168	58.63	349	5,312	65.70	322	5,356	60.12	3.7226%	1.7824%
Forsyth *	2,623	35,864	73.14	2,602	36,993	70.34	2,645	37,838	69.90	0.4260%	-2.2228%
Stokes	419	5,521	75.89	408	5,745	71.02	413	5,552	74.39	-0.6999%	-0.8388%
Surry	639	8,272	77.25	736	8,483	86.76	757	8,265	91.59	9.0166%	8.9406%
Yadkin	329	4,307	76.39	325	4,376	74.27	332	4,275	77.66	0.4690%	0.8969%
Region I Totals	4,313	59,132	72.94	4,420	60,909	72.57	4,469	61,286	72.92	1.7947%	-0.0112%
Chatham	348	11,095	31.37	318	11,444	27.79	342	11,721	29.18	-0.5368%	-3.2009%
Durham	1,390	25,478	54.56	1,413	26,694	52.93	1,572	26,658	58.97	6.4537%	4.2134%
Johnston	1,116	17,731	62.94	1,053	18,474	57.00	1,077	19,811	54.36	-1.6830%	-7.0317%
Lee	353	5,887	59.96	349	6,015	58.02	389	6,593	59.00	5.1641%	-0.7737%
Moore *	591	13,920	42.46	527	14,318	36.81	501	14,097	35.54	-7.8813%	-8.3755%
Orange	579	13,739	42.14	587	14,371	40.85	664	14,976	44.34	7.2496%	2.7355%
Wake *	4,487	81,578	55.00	4,268	85,812	49.74	4,626	90,884	50.90	1.7536%	-3.6174%
Region J Totals	8,864	169,428	52.32	8,515	177,128	48.07	9,171	184,740	49.64	1.8834%	-2.4235%
Franklin	454	7,293	62.25	400	7,778	51.43	419	7,879	53.18	-3.5721%	-6.9905%
Granville	246	6,402	38.43	347	6,618	52.43	451	6,818	66.15	35.5140%	31.3058%
Person	247	4,705	52.50	289	4,791	60.32	257	4,730	54.33	2.9657%	2.4890%
Vance	297	4,927	60.28	368	4,998	73.63	408	4,652	87.70	17.3876%	20.6306%
Warren	141	2,619	53.84	94	2,594	36.24	135	2,264	59.63	5.1418%	15.9299%
Region K Totals	1,385	25,946	53.38	1,498	26,779	55.94	1,670	26,343	63.39	9.8204%	9.0608%
Edgecombe	447	6,408	69.76	456	6,552	69.60	494	6,609	74.75	5.1734%	3.5852%
Halifax	250	6,170	40.52	335	6,326	52.96	415	6,483	64.01	28.9403%	25.7881%
Nash	739	11,111	66.51	795	11,570	68.71	891	11,664	76.39	9.8266%	7.2411%
Northampton	183	2,545	71.91	162	2,464	65.75	157	1,539	102.01	-7.2809%	23.2986%
Wilson	653	8,806	74.15	622	9,190	67.68	643	8,477	75.85	-0.6856%	1.6719%
Region L Totals	2,272	35,040	64.84	2,370	36,102	65.65	2,600	34,772	74.77	7.0090%	7.5728%
Cumberland *	1,507	26,215	57.49	1,649	27,205	60.61	1,927	28,534	67.53	13.1407%	8.4283%
Harnett *	613	10,572	57.98	534	10,914	48.93	656	11,150	58.83	4.9795%	2.3145%
Sampson	471	6,602	71.34	481	6,736	71.41	404	6,515	62.01	-6.9426%	-6.5338%
Region M Totals	2,591	43,389	59.72	2,664	44,855	59.39	2,987	46,199	64.66	7.4710%	4.1599%
Bladen	267	4,222	63.24	307	4,254	72.17	354	3,170	111.67	15.1454%	34.4283%
Hoke *	210	3,552	59.12	172	3,686	46.66	218	3,777	57.72	4.3245%	1.3089%
Richmond	371	4,960	74.80	324	5,014	64.62	271	4,964	54.59	-14.5132%	-14.5623%
Robeson	846	12,554	67.39	845	12,811	65.96	820	12,536	65.41	-1.5384%	-1.4759%
Scotland	225	4,051	55.54	235	4,123	57.00	200	4,120	48.54	-5.2246%	-6.1056%
Region N Totals	1,919	29,339	65.41	1,883	29,888	63.00	1,863	28,567	65.22	-1.4691%	-0.0827%
Brunswick	1,293	27,203	47.53	1,315	28,386	46.33	1,419	26,716	53.11	4.8051%	6.0585%
Columbus	554	6,336	87.44	598	6,366	93.94	534	5,784	92.32	-1.3801%	2.8583%
New Hanover *	1,338	24,309	55.04	1,359	24,778	54.85	1,411	24,196	58.32	2.6979%	2.9854%
Pender	395	7,122	55.46	478	7,313	65.36	430	7,150	60.14	5.4854%	4.9305%
Region O Totals	3,580	64,970	55.10	3,750	66,843	56.10	3,794	63,846	59.42	2.9610%	3.8680%
Carteret *	454	10,498	43.25	502	10,573	47.48	567	10,024	56.56	11.7604%	14.4613%
Craven *	736	9,524	77.28	751	9,516	78.92	710	9,787	72.55	-1.7107%	-2.9767%
Duplin	500	6,087	82.14	525	6,234	84.22	487	3,636	133.94	-1.1190%	30.7832%
Greene	117	2,149	54.44	137	2,212	61.93	125	2,241	55.78	4.1674%	1.9096%
Jones	89	1,288	69.10	86	1,341	64.13	84	1,267	66.30	-2.8482%	-1.9053%
Lenoir	644	6,654	96.78	522	6,851	76.19	506	6,879	73.56	-11.0046%	-12.3673%
Onslow *	861	11,609	74.17	954	12,440	76.69	889	12,629	70.39	1.9940%	-2.4041%
Pamlico	91	2,103	43.27	84	2,154	39.00	99	1,888	52.44	5.0824%	12.2921%
Wayne *	863	11,828	72.96	848	12,162	69.73	866	11,598	74.67	0.1923%	1.3261%
Region P Totals	4,355	61,740	70.54	4,409	63,483	69.45	4,333	59,949	72.28	-0.2419%	1.2650%

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Table 12B: Average Annual Rates of Change in Patients and Use Rates per 1,000 Population

Ages 65-74											
A	B	C	D	E	F	G	H	I	J	K	L
County	Home Health Patients in 2019	Estimated 2019 Population	Use Rate for 2019	Home Health Patients in 2020	Estimated 2020 Population	Use Rate for 2020	Home Health Patients in 2021	Estimated 2021 Population	Use Rate for 2021	Average Annual Rate of Change in Number of Patients	Average Annual Rate of Change in Use Rates per 1000
Beaufort	463	6,934	66.77	383	6,987	54.82	448	6,328	70.80	-0.1537%	5.6233%
Bertie	160	2,227	71.85	197	2,305	85.47	179	2,085	85.85	6.9940%	9.7045%
Hertford	192	2,726	70.43	135	2,791	48.37	170	2,429	69.99	-1.8808%	6.6840%
Martin	273	3,158	86.45	258	3,210	80.37	262	3,265	80.25	-1.9721%	-3.5928%
Pitt *	1,054	14,663	71.88	1,102	15,375	71.67	1,145	15,125	75.70	4.2280%	2.6658%
Region Q Totals	2,142	29,708	72.10	2,075	30,668	67.66	2,204	29,232	75.40	1.5445%	2.6372%
Camden	59	1,025	57.56	47	1,062	44.26	43	1,094	39.31	-14.4248%	-17.1506%
Chowan	119	1,860	63.98	122	1,900	64.21	101	1,812	55.74	-7.3461%	-6.4149%
Currituck	131	2,880	45.49	175	3,015	58.04	141	3,214	43.87	7.0796%	1.5945%
Dare	224	5,006	44.75	243	5,223	46.52	99	5,293	18.70	-25.3886%	-27.9115%
Gates	76	1,351	56.25	85	1,399	60.76	64	1,236	51.78	-6.4319%	-3.3858%
Hyde	28	665	42.11	30	684	43.86	33	624	52.88	8.5714%	12.3718%
Pasquotank *	253	3,692	68.53	291	3,775	77.09	292	3,999	73.02	7.6817%	3.6069%
Perquimans	93	1,949	47.72	108	1,995	54.14	93	1,754	53.02	1.1201%	5.6971%
Tyrrell	33	437	75.51	21	408	51.47	19	342	55.56	-22.9437%	-11.9520%
Washington	111	1,672	66.39	101	1,723	58.62	117	1,665	70.27	3.4163%	4.0873%
Region R Totals	1,127	20,537	54.88	1,223	21,184	57.73	1,002	21,033	47.64	-4.7761%	-6.1391%
Grand Totals	63,332	1,030,087	61.48	64,140	1,062,982	60.34	67,708	1,068,104	63.39	3.4193%	1.5992%

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Table 12B: Average Annual Rates of Change in Patients and Use Rates per 1,000 Population

Ages 75 and Over											
A	B	C	D	E	F	G	H	I	J	K	L
County	Home Health Patients in 2019	Estimated 2019 Population	Use Rate for 2019	Home Health Patients in 2020	Estimated 2020 Population	Use Rate for 2020	Home Health Patients in 2021	Estimated 2021 Population	Use Rate for 2021	Average Annual Rate of Change in Number of Patients	Average Annual Rate of Change in Use Rates per 1000
Cherokee	354	3,907	90.61	427	4,089	104.43	403	4,230	95.27	7.5004%	3.2430%
Clay	244	1,541	158.34	174	1,604	108.48	168	1,650	101.82	-16.0684%	-18.8147%
Graham	219	1,040	210.58	103	1,057	97.45	77	1,014	75.94	-39.1054%	-37.8985%
Haywood	1,058	7,393	143.11	1,016	7,586	133.93	1,168	7,704	151.61	5.4954%	3.3934%
Jackson	297	3,689	80.51	296	3,848	76.92	261	3,993	65.36	-6.0805%	-9.7406%
Macon	619	4,948	125.10	616	5,123	120.24	644	5,359	120.17	2.0304%	-1.9713%
Swain	127	1,260	100.79	126	1,307	96.40	107	1,279	83.66	-7.9334%	-8.7877%
Region A Totals	2,918	23,778	122.72	2,758	24,614	112.05	2,828	25,229	112.09	-1.4726%	-4.3274%
Buncombe	3,596	22,393	160.59	3,559	22,977	154.89	3,938	24,486	160.83	4.8101%	0.1428%
Henderson	2,377	15,212	156.26	2,078	15,642	132.85	2,376	15,973	148.75	0.8809%	-1.5054%
Madison	328	2,111	155.38	302	2,170	139.17	351	2,171	161.68	4.1492%	2.8707%
Transylvania	741	5,720	129.55	725	5,926	122.34	751	5,796	129.57	0.7135%	0.1746%
Region B Totals	7,042	45,436	154.99	6,664	46,715	142.65	7,416	48,426	153.14	2.9584%	-0.3031%
Cleveland	2,054	7,470	274.97	1,690	7,649	220.94	1,251	7,659	163.34	-21.8489%	-22.8600%
McDowell	737	4,132	178.36	767	4,238	180.98	822	4,192	196.09	5.6207%	4.9072%
Polk	451	3,094	145.77	459	3,150	145.71	364	2,825	128.85	-9.4617%	-5.8047%
Rutherford	1,119	6,313	177.25	1,035	6,442	160.66	1,178	6,085	193.59	3.1549%	5.5675%
Region C Totals	4,361	21,009	207.58	3,951	21,479	183.95	3,615	20,761	174.12	-8.9528%	-8.3619%
Alleghany	210	1,372	153.06	228	1,413	161.36	342	1,405	243.42	29.2857%	28.1376%
Ashe	557	3,154	176.60	496	3,245	152.85	531	3,206	165.63	-1.9475%	-2.5450%
Avery	375	1,777	211.03	327	1,794	182.27	512	1,806	283.50	21.8875%	20.9541%
Mitchell	284	1,687	168.35	299	1,728	173.03	396	1,718	230.50	18.8616%	17.9980%
Watauga	536	4,037	132.77	487	4,190	116.23	685	4,244	161.40	15.7576%	13.2039%
Wilkes	1,152	6,591	174.78	1,011	6,804	148.59	1,135	6,421	176.76	0.0128%	1.9873%
Yancey	288	2,104	136.88	341	2,175	156.78	401	2,204	181.94	17.9990%	15.2928%
Region D Totals	3,402	20,722	164.17	3,189	21,349	149.37	4,002	21,004	190.54	9.6164%	9.2706%
Alexander	395	3,264	121.02	432	3,387	127.55	434	3,245	133.74	4.9150%	5.1273%
Burke	1,215	8,101	149.98	1,165	8,265	140.96	1,270	8,007	158.61	2.4488%	3.2538%
Caldwell	1,203	6,845	175.75	1,249	7,034	177.57	1,156	6,954	166.24	-1.8111%	-2.6736%
Catawba	2,587	11,495	225.05	2,354	11,792	199.63	2,474	12,421	199.18	-1.9544%	-5.7614%
Region E Totals	5,400	29,705	181.79	5,200	30,478	170.61	5,334	30,627	174.16	-0.5634%	-2.0341%
Anson	300	1,886	159.07	265	1,884	140.66	328	1,778	184.48	6.0535%	9.7899%
Cabarrus	2,327	11,486	202.59	2,274	11,904	191.03	2,380	12,712	187.22	1.1919%	-3.8501%
Gaston	2,945	14,246	206.72	2,977	14,521	205.01	2,973	15,210	195.46	0.4761%	-2.7430%
Iredell	2,519	11,619	216.80	2,339	12,004	194.85	2,542	12,834	198.07	0.7666%	-4.2367%
Lincoln	1,230	5,880	209.18	1,125	6,139	183.25	1,175	6,332	185.57	-2.0461%	-5.5672%
Mecklenburg *	8,833	48,603	181.74	8,063	50,426	159.90	8,152	52,212	156.13	-3.8068%	-7.1860%
Rowan	1,905	10,198	186.80	1,736	10,342	167.86	1,673	11,012	151.93	-6.2502%	-9.8164%
Stanly	906	5,083	178.24	805	5,251	153.30	824	5,177	159.17	-4.3938%	-5.0836%
Union	1,995	11,741	169.92	1,897	12,322	153.95	2,056	12,967	158.56	1.7347%	-3.2026%
Region F Totals	22,960	120,742	190.16	21,481	124,793	172.13	22,103	130,234	169.72	-1.7730%	-5.4410%
Alamance	2,444	12,974	188.38	2,525	13,137	192.21	2,289	13,345	171.52	-3.0161%	-4.3636%
Caswell	270	2,008	134.46	299	2,086	143.34	159	2,095	75.89	-18.0410%	-20.2256%
Davidson	1,860	12,338	150.75	1,887	12,668	148.96	2,704	13,001	207.98	22.3739%	19.2174%
Guilford *	6,537	34,134	191.51	6,234	34,641	179.96	5,961	36,402	163.75	-4.5072%	-7.5180%
Montgomery	298	2,453	121.48	331	2,479	133.52	310	2,421	128.05	2.3647%	2.9041%
Randolph	1,663	10,618	156.62	1,526	10,913	139.83	1,534	11,136	137.75	-3.8569%	-6.1037%
Rockingham	1,375	7,907	173.90	1,420	8,037	176.68	1,182	8,125	145.48	-6.7439%	-8.0299%
Region G Totals	14,447	82,432	175.26	14,222	83,961	169.39	14,139	86,525	163.41	-1.0705%	-3.4399%

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Table 12B: Average Annual Rates of Change in Patients and Use Rates per 1,000 Population

Ages 75 and Over											
A	B	C	D	E	F	G	H	I	J	K	L
County	Home Health Patients in 2019	Estimated 2019 Population	Use Rate for 2019	Home Health Patients in 2020	Estimated 2020 Population	Use Rate for 2020	Home Health Patients in 2021	Estimated 2021 Population	Use Rate for 2021	Average Annual Rate of Change in Number of Patients	Average Annual Rate of Change in Use Rates per 1000
Davie	680	3,815	178.24	736	3,957	186.00	602	4,016	149.90	-4.9856%	-7.5285%
Forsyth *	5,434	24,912	218.13	5,290	25,318	208.94	5,061	26,395	191.74	-3.4895%	-6.2218%
Stokes	831	4,060	204.68	776	4,217	184.02	863	3,871	222.94	2.2964%	5.5283%
Surry	1,471	6,273	234.50	1,413	6,279	225.04	1,525	6,056	251.82	1.9918%	3.9329%
Yadkin	632	3,302	191.40	620	3,349	185.13	573	3,289	174.22	-4.7397%	-4.5851%
Region I Totals	9,048	42,362	213.59	8,835	43,120	204.89	8,624	43,627	197.68	-2.3712%	-3.7966%
Chatham	648	8,721	74.30	671	9,197	72.96	870	9,770	89.05	16.6033%	10.1215%
Durham	2,424	15,250	158.95	2,459	15,822	155.42	2,483	16,372	151.66	1.2100%	-2.3199%
Johnston	1,834	10,232	179.24	1,674	10,746	155.78	1,798	11,648	154.36	-0.6583%	-7.0000%
Lee	609	4,395	138.57	623	4,464	139.56	677	4,836	139.99	5.4833%	0.5131%
Moore *	1,462	12,948	112.91	1,327	13,393	99.08	1,258	13,579	92.64	-7.2168%	-9.3740%
Orange	1,210	7,729	156.55	1,208	8,143	148.35	1,311	8,706	150.59	4.1806%	-1.8664%
Wake *	9,775	48,100	203.22	9,199	50,257	183.04	9,771	54,644	178.81	0.1627%	-6.1205%
Region J Totals	17,962	107,375	167.28	17,161	112,022	153.19	18,168	119,555	151.96	0.7043%	-4.6127%
Franklin	672	4,683	143.50	655	4,929	132.89	678	4,984	136.04	0.4908%	-2.5126%
Granville	556	4,006	138.79	627	4,160	150.72	730	4,308	169.45	14.5986%	10.5114%
Person	473	3,233	146.30	458	3,315	138.16	455	3,289	138.34	-1.9131%	-2.7180%
Vance	417	3,478	119.90	481	3,541	135.84	517	3,338	154.88	11.4161%	13.6583%
Warren	263	2,268	115.96	177	2,339	75.67	199	2,311	86.11	-10.1351%	-10.4755%
Region K Totals	2,381	17,668	134.76	2,398	18,284	131.15	2,579	18,230	141.47	4.1310%	2.5937%
Edgecombe	608	4,230	143.74	565	4,301	131.36	595	4,307	138.15	-0.8813%	-1.7217%
Halifax	565	4,498	125.61	577	4,514	127.82	637	4,457	142.92	6.2613%	6.7862%
Nash	1,318	7,033	187.40	1,212	7,249	167.20	1,289	7,342	175.57	-0.8447%	-2.8883%
Northampton	289	2,328	124.14	284	2,377	119.48	278	1,976	140.69	-1.9214%	6.9981%
Wilson	1,199	6,144	195.15	1,049	6,270	167.30	1,073	5,819	184.40	-5.1113%	-2.0265%
Region L Totals	3,979	24,233	164.20	3,687	24,711	149.20	3,872	23,901	162.00	-1.1604%	-0.2771%
Cumberland *	2,566	16,952	151.37	2,581	17,368	148.61	2,988	17,942	166.54	8.1768%	5.1204%
Harnett *	1,072	6,983	153.52	955	7,208	132.49	1,062	7,459	142.38	0.1450%	-3.1165%
Sampson	889	4,846	183.45	895	4,903	182.54	682	4,593	148.49	-11.5620%	-9.5756%
Region M Totals	4,527	28,781	157.29	4,431	29,479	150.31	4,732	29,994	157.76	2.3362%	0.2606%
Bladen	447	2,955	151.27	485	3,041	159.49	377	2,539	148.48	-6.8835%	-0.7333%
Hoke *	292	1,907	153.12	270	1,937	139.39	327	1,962	166.67	6.7884%	5.3008%
Richmond	446	3,134	142.31	379	3,168	119.63	359	3,045	117.90	-10.1497%	-8.6926%
Robeson	1,166	7,557	154.29	1,244	7,787	159.75	1,201	7,302	164.48	1.6165%	3.2471%
Scotland	312	2,554	122.16	354	2,655	133.33	303	2,633	115.08	-0.4726%	-2.2732%
Region N Totals	2,663	18,107	147.07	2,732	18,588	146.98	2,567	17,481	146.85	-1.7242%	-0.0765%
Brunswick	2,165	15,879	136.34	2,202	17,222	127.86	2,327	17,969	129.50	3.6928%	-2.4695%
Columbus	850	4,524	187.89	981	4,653	210.83	877	4,295	204.19	2.4052%	4.5311%
New Hanover *	2,835	17,210	164.73	3,094	17,779	174.03	3,046	17,883	170.33	3.7922%	1.7595%
Pender	796	4,580	173.80	770	4,792	160.68	773	4,927	156.89	-1.4384%	-4.9535%
Region O Totals	6,646	42,193	157.51	7,047	44,446	158.55	7,023	45,074	155.81	2.8466%	-0.5352%
Carteret *	1,032	7,464	138.26	954	7,737	123.30	1,059	7,975	132.79	1.7241%	-1.5632%
Craven *	1,221	8,400	145.36	1,198	8,460	141.61	1,252	8,579	145.94	1.3119%	0.2392%
Duplin	848	4,736	179.05	954	4,892	195.01	760	3,449	220.35	-3.9177%	10.9537%
Greene	186	1,374	135.37	182	1,408	129.26	162	1,429	113.37	-6.5698%	-8.4052%
Jones	129	899	143.49	127	921	137.89	140	879	159.27	4.3429%	5.8007%
Lenoir	1,077	4,666	230.82	884	4,816	183.55	954	4,762	200.34	-5.0008%	-5.6671%
Onslow *	1,368	7,819	174.96	1,449	8,083	179.27	1,289	8,236	156.51	-2.5605%	-5.1166%
Pamlico	167	1,744	95.76	151	1,779	84.88	164	1,769	92.71	-0.4858%	-1.0683%
Wayne *	1,617	8,811	183.52	1,514	8,883	170.44	1,475	8,218	179.48	-4.4729%	-0.9106%
Region P Totals	7,645	45,913	166.51	7,413	46,979	157.79	7,255	45,296	160.17	-2.5830%	-1.8650%

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Table 12B: Average Annual Rates of Change in Patients and Use Rates per 1,000 Population

Ages 75 and Over											
A	B	C	D	E	F	G	H	I	J	K	L
County	Home Health Patients in 2019	Estimated 2019 Population	Use Rate for 2019	Home Health Patients in 2020	Estimated 2020 Population	Use Rate for 2020	Home Health Patients in 2021	Estimated 2021 Population	Use Rate for 2021	Average Annual Rate of Change in Number of Patients	Average Annual Rate of Change in Use Rates per 1000
Beaufort	734	4,922	149.13	651	5,108	127.45	649	5,062	128.21	-5.8076%	-6.9694%
Bertie	337	1,783	189.01	279	1,784	156.39	254	1,540	164.94	-13.0856%	-5.8966%
Hertford	252	1,942	129.76	227	1,957	115.99	220	1,697	129.64	-6.5022%	0.5770%
Martin	472	2,193	215.23	373	2,239	166.59	369	2,261	163.20	-11.0235%	-12.3166%
Pitt *	1,754	9,325	188.10	1,611	9,697	166.13	1,659	9,113	182.05	-2.5866%	-1.0487%
Region Q Totals	3,549	20,165	176.00	3,141	20,785	151.12	3,151	19,673	160.17	-5.5889%	-4.0737%
Camden	85	745	114.09	101	760	132.89	69	783	88.12	-6.4298%	-8.6058%
Chowan	204	1,596	127.82	198	1,623	122.00	184	1,615	113.93	-5.0059%	-5.5831%
Currituck	205	1,712	119.74	202	1,788	112.98	158	1,870	84.49	-11.6228%	-15.4319%
Dare	358	3,119	114.78	367	3,268	112.30	140	3,446	40.63	-29.6694%	-32.9917%
Gates	137	1,048	130.73	145	1,065	136.15	117	1,020	114.71	-6.7355%	-5.8003%
Hyde	40	426	93.90	28	437	64.07	33	403	81.89	-6.0714%	-1.9808%
Pasquotank *	424	2,611	162.39	420	2,670	157.30	420	2,754	152.51	-0.4717%	-3.0912%
Perquimans	178	1,806	98.56	170	1,871	90.86	138	1,856	74.35	-11.6590%	-12.9899%
Tyrrell	42	427	98.36	44	411	107.06	24	390	61.54	-20.3463%	-16.8386%
Washington	185	1,299	142.42	152	1,310	116.03	122	1,271	95.99	-18.7873%	-17.9009%
Region R Totals	1,858	14,789	125.63	1,827	15,203	120.17	1,405	15,408	91.19	-12.3832%	-14.2337%
Grand Totals	120,788	705,410	171.23	116,137	727,006	159.75	118,813	741,045	160.33	-0.7732%	-3.1703%

* Adjustments for active duty military personnel have been applied to the Ages 18-64 population.

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Table 12C: 2024 Need Projections for Medicare-certified Home Health Agencies or Offices

Under Age 18								
A	B	C	D	E	F	G	H	I
County	Home Health Patients in 2021	COG's Average Annual Rate of Change in # Patients Served	Projected # of Patients Receiving Services in 2024	Geographic Unit's Use Rate per 1000 in 2021	COG's Average Annual Rate of Change in Use Rate	Projected Use Rate per 1000 in 2024	Projected 2024 Population	Projected Home Health Patients in 2024
Cherokee	0	-6.7985%	0.00	0.0000	-5.6623%	0.0000	4,633	0.00
Clay	0	-6.7985%	0.00	0.0000	-5.6623%	0.0000	1,848	0.00
Graham	0	-6.7985%	0.00	0.0000	-5.6623%	0.0000	1,640	0.00
Haywood	33	-6.7985%	26.27	3.0359	-5.6623%	2.5202	10,955	27.61
Jackson	6	-6.7985%	4.78	0.8481	-5.6623%	0.7040	6,885	4.85
Macon	0	-6.7985%	0.00	0.0000	-5.6623%	0.0000	6,661	0.00
Swain	1	-6.7985%	0.80	0.3066	-5.6623%	0.2545	3,239	0.82
Region A Totals	40	-6.7985%	31.84	1.1153	-5.6623%	0.9259	35,861	33.28
Buncombe	110	-9.0016%	80.29	2.2860	-7.5165%	1.7705	47,300	83.74
Henderson	29	-9.0016%	21.17	1.3864	-7.5165%	1.0738	20,742	22.27
Madison	12	-9.0016%	8.76	3.3370	-7.5165%	2.5846	3,589	9.28
Transylvania	14	-9.0016%	10.22	2.6840	-7.5165%	2.0788	5,215	10.84
Region B Totals	165	-9.0016%	120.44	2.1195	-7.5165%	1.6416	76,846	126.13
Cleveland	0	-11.2238%	0.00	0.0000	-8.8501%	0.0000	21,201	0.00
McDowell	30	-11.2238%	19.90	3.5178	-8.8501%	2.5838	8,309	21.47
Polk	5	-11.2238%	3.32	1.7355	-8.8501%	1.2747	2,759	3.52
Rutherford	0	-11.2238%	0.00	0.0000	-8.8501%	0.0000	12,694	0.00
Region C Totals	35	-11.2238%	23.22	0.7724	-8.8501%	0.5673	44,963	24.99
Alleghany	0	-18.4295%	0.00	0.0000	-16.3046%	0.0000	1,849	0.00
Ashe	0	-18.4295%	0.00	0.0000	-16.3046%	0.0000	4,381	0.00
Avery	0	-18.4295%	0.00	0.0000	-16.3046%	0.0000	2,675	0.00
Mitchell	9	-18.4295%	4.02	3.3333	-16.3046%	1.7029	2,703	4.60
Watauga	0	-18.4295%	0.00	0.0000	-16.3046%	0.0000	6,532	0.00
Wilkes	0	-18.4295%	0.00	0.0000	-16.3046%	0.0000	12,397	0.00
Yancey	8	-18.4295%	3.58	2.3931	-16.3046%	1.2225	3,368	4.12
Region D Totals	17	-18.4295%	7.60	0.4933	-16.3046%	0.2520	33,905	8.72
Alexander	1	-47.9167%	-0.44	0.1473	-46.8996%	-0.0599	6,519	-0.39
Burke	0	-47.9167%	0.00	0.0000	-46.8996%	0.0000	16,731	0.00
Caldwell	0	-47.9167%	0.00	0.0000	-46.8996%	0.0000	14,926	0.00
Catawba	2	-47.9167%	-0.88	0.0599	-46.8996%	-0.0244	32,966	-0.80
Region E Totals	3	-47.9167%	-1.31	0.0414	-46.8996%	-0.0168	71,142	-1.19
Anson	0	-10.6275%	0.00	0.0000	-10.1979%	0.0000	4,521	0.00
Cabarrus	62	-10.6275%	42.23	1.1657	-10.1979%	0.8091	53,640	43.40
Gaston	131	-10.6275%	89.23	2.6473	-10.1979%	1.8374	48,941	89.92
Iredell	16	-10.6275%	10.90	0.4137	-10.1979%	0.2871	39,305	11.29
Lincoln	22	-10.6275%	14.99	1.2853	-10.1979%	0.8921	16,855	15.04
Mecklenburg *	368	-10.6275%	250.67	1.4166	-10.1979%	0.9832	264,780	260.33
Rowan	1	-10.6275%	0.68	0.0315	-10.1979%	0.0219	31,090	0.68
Stanly	0	-10.6275%	0.00	0.0000	-10.1979%	0.0000	12,460	0.00
Union	35	-10.6275%	23.84	0.6579	-10.1979%	0.4567	53,105	24.25
Region F Totals	635	-10.6275%	432.55	1.2200	-10.1979%	0.8467	524,697	444.91
Alamance	6	-22.3192%	1.98	0.1629	-21.3074%	0.0588	37,031	2.18
Caswell	0	-22.3192%	0.00	0.0000	-21.3074%	0.0000	3,737	0.00
Davidson	25	-22.3192%	8.26	0.7178	-21.3074%	0.2589	34,570	8.95
Guilford *	90	-22.3192%	29.74	0.7939	-21.3074%	0.2864	113,562	32.53
Montgomery	0	-22.3192%	0.00	0.0000	-21.3074%	0.0000	5,413	0.00
Randolph	5	-22.3192%	1.65	0.1637	-21.3074%	0.0590	30,123	1.78
Rockingham	3	-22.3192%	0.99	0.1721	-21.3074%	0.0621	17,074	1.06
Region G Totals	129	-22.3192%	42.62	0.5321	-21.3074%	0.1920	241,510	46.49

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Table 12C: 2024 Need Projections for Medicare-certified Home Health Agencies or Offices

Under Age 18								
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County	Home Health Patients in 2021	COG's Average Annual Rate of Change in # Patients Served	Projected # of Patients Receiving Services in 2024	Geographic Unit's Use Rate per 1000 in 2021	COG's Average Annual Rate of Change in Use Rate	Projected Use Rate per 1000 in 2024	Projected 2024 Population	Projected Home Health Patients in 2024
Davie	11	98.7872%	43.60	1.3595	102.7790%	5.5515	8,150	45.24
Forsyth *	87	98.7872%	344.83	1.0216	102.7790%	4.1714	84,619	352.98
Stokes	3	98.7872%	11.89	0.3903	102.7790%	1.5938	7,580	12.08
Surry	7	98.7872%	27.75	0.4799	102.7790%	1.9595	14,322	28.06
Yadkin	4	98.7872%	15.85	0.5413	102.7790%	2.2105	7,215	15.95
Region I Totals	112	98.7872%	443.93	0.9112	102.7790%	3.7207	121,886	454.32
Chatham	0	-18.2107%	0.00	0.0000	-18.2780%	0.0000	13,146	0.00
Durham	11	-18.2107%	4.99	0.1467	-18.2780%	0.0663	77,197	5.11
Johnston	4	-18.2107%	1.81	0.0776	-18.2780%	0.0350	52,850	1.85
Lee	0	-18.2107%	0.00	0.0000	-18.2780%	0.0000	15,095	0.00
Moore *	2	-18.2107%	0.91	0.0975	-18.2780%	0.0440	21,408	0.94
Orange	1	-18.2107%	0.45	0.0395	-18.2780%	0.0178	24,581	0.44
Wake *	59	-18.2107%	26.77	0.2326	-18.2780%	0.1050	254,922	26.78
Region J Totals	77	-18.2107%	34.93	0.1694	-18.2780%	0.0765	459,199	35.13
Franklin	13	11.1455%	17.35	0.8857	13.7578%	1.2513	15,165	18.98
Granville	0	11.1455%	0.00	0.0000	13.7578%	0.0000	11,335	0.00
Person	4	11.1455%	5.34	0.5101	13.7578%	0.7207	7,795	5.62
Vance	4	11.1455%	5.34	0.4131	13.7578%	0.5837	9,510	5.55
Warren	0	11.1455%	0.00	0.0000	13.7578%	0.0000	3,100	0.00
Region K Totals	21	11.1455%	28.02	0.4476	13.7578%	0.6323	46,905	30.14
Edgecombe	1	-36.5729%	-0.10	0.0893	-35.1261%	-0.0048	10,575	-0.05
Halifax	0	-36.5729%	0.00	0.0000	-35.1261%	0.0000	9,680	0.00
Nash	6	-36.5729%	-0.58	0.3081	-35.1261%	-0.0166	19,320	-0.32
Northampton	0	-36.5729%	0.00	0.0000	-35.1261%	0.0000	3,136	0.00
Wilson	2	-36.5729%	-0.19	0.1132	-35.1261%	-0.0061	17,360	-0.11
Region L Totals	9	-36.5729%	-0.87	0.1460	-35.1261%	-0.0078	60,071	-0.48
Cumberland *	9	-36.2500%	-0.79	0.1037	-35.0796%	-0.0054	86,188	-0.47
Harnett *	1	-36.2500%	-0.09	0.0287	-35.0796%	-0.0015	35,004	-0.05
Sampson	3	-36.2500%	-0.26	0.2115	-35.0796%	-0.0111	13,789	-0.15
Region M Totals	13	-36.2500%	-1.14	0.0957	-35.0796%	-0.0050	134,981	-0.67
Bladen	8	-8.6594%	5.92	1.2214	-3.3670%	1.0980	6,192	6.80
Hoke *	1	-8.6594%	0.74	0.0619	-3.3670%	0.0556	15,961	0.89
Richmond	1	-8.6594%	0.74	0.1051	-3.3670%	0.0945	9,315	0.88
Robeson	71	-8.6594%	52.56	2.9038	-3.3670%	2.6105	22,470	58.66
Scotland	0	-8.6594%	0.00	0.0000	-3.3670%	0.0000	7,428	0.00
Region N Totals	81	-8.6594%	59.96	1.2571	-3.3670%	1.1301	61,366	67.22
Brunswick	10	-27.0757%	1.88	0.4667	-25.3337%	0.1120	21,479	2.41
Columbus	0	-27.0757%	0.00	0.0000	-25.3337%	0.0000	9,462	0.00
New Hanover *	30	-27.0757%	5.63	0.7270	-25.3337%	0.1745	41,052	7.16
Pender	22	-27.0757%	4.13	1.8259	-25.3337%	0.4382	12,435	5.45
Region O Totals	62	-27.0757%	11.64	0.7295	-25.3337%	0.1751	84,428	15.02

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Table 12C: 2024 Need Projections for Medicare-certified Home Health Agencies or Offices

Under Age 18								
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County	Home Health Patients in 2021	COG's Average Annual Rate of Change in # Patients Served	Projected # of Patients Receiving Services in 2024	Geographic Unit's Use Rate per 1000 in 2021	COG's Average Annual Rate of Change in Use Rate	Projected Use Rate per 1000 in 2024	Projected 2024 Population	Projected Home Health Patients in 2024
Carteret *	1	-25.1325%	0.25	0.0908	-24.7173%	0.0235	10,615	0.25
Craven *	2	-25.1325%	0.49	0.0787	-24.7173%	0.0204	25,117	0.51
Duplin	10	-25.1325%	2.46	0.7819	-24.7173%	0.2021	12,090	2.44
Greene	0	-25.1325%	0.00	0.0000	-24.7173%	0.0000	4,010	0.00
Jones	5	-25.1325%	1.23	2.8345	-24.7173%	0.7327	1,668	1.22
Lenoir	2	-25.1325%	0.49	0.1677	-24.7173%	0.0433	11,589	0.50
Onslow *	37	-25.1325%	9.10	0.5819	-24.7173%	0.1504	66,432	9.99
Pamlico	0	-25.1325%	0.00	0.0000	-24.7173%	0.0000	1,698	0.00
Wayne *	2	-25.1325%	0.49	0.0695	-24.7173%	0.0180	27,926	0.50
Region P Totals	59	-25.1325%	14.52	0.3660	-24.7173%	0.0946	161,145	15.42
Beaufort	0	-45.8333%	0.00	0.0000	-45.0797%	0.0000	8,236	0.00
Bertie	0	-45.8333%	0.00	0.0000	-45.0797%	0.0000	3,326	0.00
Hertford	0	-45.8333%	0.00	0.0000	-45.0797%	0.0000	3,722	0.00
Martin	1	-45.8333%	-0.38	0.2293	-45.0797%	-0.0808	4,234	-0.34
Pitt *	0	-45.8333%	0.00	0.0000	-45.0797%	0.0000	37,351	0.00
Region Q Totals	1	-45.8333%	-0.38	0.0171	-45.0797%	-0.0060	56,869	-0.34
Camden	0	100.0000%	0.00	0.0000	98.9699%	0.0000	1,901	0.00
Chowan	0	100.0000%	0.00	0.0000	98.9699%	0.0000	2,698	0.00
Currituck	0	100.0000%	0.00	0.0000	98.9699%	0.0000	6,023	0.00
Dare	0	100.0000%	0.00	0.0000	98.9699%	0.0000	6,546	0.00
Gates	0	100.0000%	0.00	0.0000	98.9699%	0.0000	1,642	0.00
Hyde	0	100.0000%	0.00	0.0000	98.9699%	0.0000	721	0.00
Pasquotank *	0	100.0000%	0.00	0.0000	98.9699%	0.0000	8,934	0.00
Perquimans	0	100.0000%	0.00	0.0000	98.9699%	0.0000	2,229	0.00
Tyrrell	0	100.0000%	0.00	0.0000	98.9699%	0.0000	582	0.00
Washington	0	100.0000%	0.00	0.0000	98.9699%	0.0000	2,283	0.00
Region R Totals	0	100.0000%	0.00	0.0000	98.9699%	0.0000	33,559	0.00
Grand Totals	1,459	-13.6236%	1,247.56	0.6474	-12.6060%	0.4026	2,249,333	1,299.09

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Table 12C: 2024 Need Projections for Medicare-certified Home Health Agencies or Offices

Ages 18-64								
A	B	C	D	E	F	G	H	I
County	Home Health Patients in 2021	COG's Average Annual Rate of Change in # Patients Served	Projected # of Patients Receiving Services in 2024	Geographic Unit's Use Rate per 1000 in 2021	COG's Average Annual Rate of Change in Use Rate	Projected Use Rate per 1000 in 2024	Projected 2024 Population	Projected Home Health Patients in 2024
Cherokee	132	5.4430%	153.55	8.6911	6.7592%	10.4534	15,306	160.00
Clay	53	5.4430%	61.65	9.2158	6.7592%	11.0845	5,887	65.25
Graham	25	5.4430%	29.08	5.8921	6.7592%	7.0868	4,248	30.10
Haywood	446	5.4430%	518.83	12.7250	6.7592%	15.3054	35,298	540.25
Jackson	114	5.4430%	132.62	4.2147	6.7592%	5.0694	27,202	137.90
Macon	205	5.4430%	238.47	10.4145	6.7592%	12.5264	20,097	251.74
Swain	66	5.4430%	76.78	8.2759	6.7592%	9.9540	7,973	79.36
Region A Totals	1,041	5.4430%	1,210.99	9.0571	6.7592%	10.8936	116,011	1,264.61
Buncombe	1,644	-4.8608%	1,404.26	9.8849	-5.1945%	8.3444	171,169	1,428.31
Henderson	835	-4.8608%	713.24	13.1166	-5.1945%	11.0725	65,341	723.49
Madison	130	-4.8608%	111.04	10.4292	-5.1945%	8.8040	12,381	109.00
Transylvania	218	-4.8608%	186.21	12.8629	-5.1945%	10.8584	16,975	184.32
Region B Totals	2,827	-4.8608%	2,414.75	10.8987	-5.1945%	9.2003	265,866	2,445.12
Cleveland	972	-2.1181%	910.24	16.1733	-0.0251%	16.1611	60,764	982.02
McDowell	519	-2.1181%	486.02	19.8281	-0.0251%	19.8132	25,864	512.45
Polk	144	-2.1181%	134.85	13.9657	-0.0251%	13.9552	10,008	139.66
Rutherford	715	-2.1181%	669.57	19.0165	-0.0251%	19.0021	37,419	711.04
Region C Totals	2,350	-2.1181%	2,200.67	17.5133	-0.0251%	17.5001	134,055	2,345.17
Alleghany	138	13.7199%	194.80	22.7723	17.8590%	34.9730	6,006	210.05
Ashe	184	13.7199%	259.73	12.3581	17.8590%	18.9792	14,660	278.24
Avery	225	13.7199%	317.61	20.2429	17.8590%	31.0884	10,921	339.52
Mitchell	134	13.7199%	189.15	15.7148	17.8590%	24.1343	8,359	201.74
Watauga	286	13.7199%	403.72	7.6413	17.8590%	11.7353	39,788	466.93
Wilkes	520	13.7199%	734.03	13.5586	17.8590%	20.8229	37,318	777.07
Yancey	128	13.7199%	180.68	12.1963	17.8590%	18.7307	10,633	199.16
Region D Totals	1,615	13.7199%	2,279.73	12.7300	17.8590%	19.5503	127,685	2,472.70
Alexander	186	-3.4237%	166.90	8.5360	-2.1653%	7.9815	21,484	171.48
Burke	605	-3.4237%	542.86	11.8051	-2.1653%	11.0383	50,291	555.13
Caldwell	551	-3.4237%	494.41	11.3914	-2.1653%	10.6514	47,684	507.90
Catawba	1,061	-3.4237%	952.02	10.8647	-2.1653%	10.1589	98,931	1,005.03
Region E Totals	2,403	-3.4237%	2,156.19	10.9693	-2.1653%	10.2568	218,390	2,239.53
Anson	181	-2.1903%	169.11	13.8474	-3.8352%	12.2542	12,859	157.58
Cabarrus	1,074	-2.1903%	1,003.43	7.3213	-3.8352%	6.4789	155,397	1,006.80
Gaston	2,018	-2.1903%	1,885.40	14.2146	-3.8352%	12.5791	143,997	1,811.36
Iredell	1,092	-2.1903%	1,020.24	9.0799	-3.8352%	8.0352	126,696	1,018.03
Lincoln	643	-2.1903%	600.75	11.7886	-3.8352%	10.4323	55,317	577.08
Mecklenburg *	4,626	-2.1903%	4,322.02	6.3010	-3.8352%	5.5760	776,860	4,331.80
Rowan	973	-2.1903%	909.06	11.0022	-3.8352%	9.7363	88,764	864.24
Stanly	358	-2.1903%	334.48	9.6629	-3.8352%	8.5511	36,839	315.01
Union	800	-2.1903%	747.43	5.1332	-3.8352%	4.5426	165,256	750.69
Region F Totals	11,765	-2.1903%	10,991.92	7.8851	-3.8352%	6.9779	1,561,985	10,832.59
Alamance	1,105	-4.1581%	967.16	10.4851	-4.3451%	9.1183	108,103	985.72
Caswell	67	-4.1581%	58.64	4.9261	-4.3451%	4.2840	13,232	56.69
Davidson	1,102	-4.1581%	964.53	10.6644	-4.3451%	9.2743	104,449	968.69
Guilford *	2,869	-4.1581%	2,511.11	8.3251	-4.3451%	7.2399	352,307	2,550.67
Montgomery	145	-4.1581%	126.91	9.9890	-4.3451%	8.6869	14,435	125.40
Randolph	869	-4.1581%	760.60	9.9378	-4.3451%	8.6424	87,806	758.85
Rockingham	585	-4.1581%	512.02	10.7814	-4.3451%	9.3760	53,544	502.03
Region G Totals	6,742	-4.1581%	5,900.98	9.3229	-4.3451%	8.1077	733,876	5,948.04

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Table 12C: 2024 Need Projections for Medicare-certified Home Health Agencies or Offices

Ages 18-64								
A	B	C	D	E	F	G	H	I
County	Home Health Patients in 2021	COG's Average Annual Rate of Change in # Patients Served	Projected # of Patients Receiving Services in 2024	Geographic Unit's Use Rate per 1000 in 2021	COG's Average Annual Rate of Change in Use Rate	Projected Use Rate per 1000 in 2024	Projected 2024 Population	Projected Home Health Patients in 2024
Davie	287	-3.9514%	252.98	11.1154	-3.9159%	9.8096	26,262	257.62
Forsyth *	2,167	-3.9514%	1,910.12	9.2060	-3.9159%	8.1245	239,787	1,948.14
Stokes	316	-3.9514%	278.54	11.6027	-3.9159%	10.2397	26,598	272.35
Surry	605	-3.9514%	533.28	14.3070	-3.9159%	12.6262	41,940	529.54
Yadkin	248	-3.9514%	218.60	11.2075	-3.9159%	9.8909	21,890	216.51
Region I Totals	3,623	-3.9514%	3,193.52	10.2675	-3.9159%	9.0613	356,477	3,224.17
Chatham	290	4.1875%	326.43	6.7744	1.0263%	6.9830	44,346	309.67
Durham	1,615	4.1875%	1,817.88	7.6195	1.0263%	7.8541	219,226	1,721.82
Johnston	1,038	4.1875%	1,168.40	7.3635	1.0263%	7.5902	152,416	1,156.87
Lee	296	4.1875%	333.18	7.8232	1.0263%	8.0641	39,284	316.79
Moore *	392	4.1875%	441.24	7.7590	1.0263%	7.9979	52,523	420.07
Orange	509	4.1875%	572.94	5.0273	1.0263%	5.1821	103,188	534.73
Wake *	4,763	4.1875%	5,361.35	6.3004	1.0263%	6.4944	803,551	5,218.55
Region J Totals	8,903	4.1875%	10,021.44	6.6375	1.0263%	6.8419	1,414,534	9,678.51
Franklin	442	6.5915%	529.40	10.3040	8.2089%	12.8415	45,445	583.58
Granville	436	6.5915%	522.22	11.2183	8.2089%	13.9810	39,582	553.40
Person	260	6.5915%	311.41	11.2146	8.2089%	13.9764	22,648	316.54
Vance	350	6.5915%	419.21	14.3302	8.2089%	17.8592	23,828	425.55
Warren	100	6.5915%	119.77	9.5749	8.2089%	11.9328	10,151	121.13
Region K Totals	1,588	6.5915%	1,902.02	11.3580	8.2089%	14.1551	141,654	2,000.20
Edgecombe	455	2.8990%	494.57	17.5061	6.8301%	21.0931	24,516	517.12
Halifax	356	2.8990%	386.96	13.2312	6.8301%	15.9424	25,466	405.99
Nash	733	2.8990%	796.75	12.9418	6.8301%	15.5937	56,012	873.43
Northampton	110	2.8990%	119.57	11.0254	6.8301%	13.2845	9,684	128.65
Wilson	625	2.8990%	679.36	13.4919	6.8301%	16.2565	45,834	745.10
Region L Totals	2,279	2.8990%	2,477.20	13.7425	6.8301%	16.5584	161,512	2,670.28
Cumberland *	1,918	-1.8733%	1,810.21	11.1944	-1.0061%	10.8566	167,760	1,821.30
Harnett *	553	-1.8733%	521.92	7.1660	-1.0061%	6.9497	80,152	557.03
Sampson	359	-1.8733%	338.82	10.8735	-1.0061%	10.5453	31,986	337.30
Region M Totals	2,830	-1.8733%	2,670.96	10.0525	-1.0061%	9.7491	279,898	2,715.63
Bladen	301	-2.1451%	281.63	18.2292	3.5610%	20.1766	15,621	315.18
Hoke *	228	-2.1451%	213.33	8.1718	3.5610%	9.0447	28,920	261.57
Richmond	293	-2.1451%	274.14	11.7435	3.5610%	12.9981	24,234	314.99
Robeson	1,044	-2.1451%	976.82	15.0411	3.5610%	16.6479	65,864	1,096.50
Scotland	231	-2.1451%	216.13	12.0482	3.5610%	13.3353	18,119	241.62
Region N Totals	2,097	-2.1451%	1,962.05	13.2767	3.5610%	14.6951	152,758	2,229.87
Brunswick	824	11.4959%	1,108.18	11.0905	13.9593%	15.7349	78,823	1,240.28
Columbus	540	11.4959%	726.23	18.6323	13.9593%	26.4351	27,053	715.15
New Hanover *	1,729	11.4959%	2,325.29	12.0161	13.9593%	17.0482	149,488	2,548.51
Pender	404	11.4959%	543.33	10.9251	13.9593%	15.5003	38,331	594.14
Region O Totals	3,497	11.4959%	4,703.04	12.3069	13.9593%	17.4608	293,695	5,098.07

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Table 12C: 2024 Need Projections for Medicare-certified Home Health Agencies or Offices

Ages 18-64								
A	B	C	D	E	F	G	H	I
County	Home Health Patients in 2021	COG's Average Annual Rate of Change in # Patients Served	Projected # of Patients Receiving Services in 2024	Geographic Unit's Use Rate per 1000 in 2021	COG's Average Annual Rate of Change in Use Rate	Projected Use Rate per 1000 in 2024	Projected 2024 Population	Projected Home Health Patients in 2024
Carteret *	366	-5.3614%	307.13	9.7209	-1.7083%	9.2227	37,193	343.02
Craven *	555	-5.3614%	465.73	11.0865	-1.7083%	10.5183	49,152	517.00
Duplin	472	-5.3614%	396.08	17.3734	-1.7083%	16.4830	25,413	418.88
Greene	131	-5.3614%	109.93	10.4441	-1.7083%	9.9088	12,359	122.46
Jones	85	-5.3614%	71.33	16.8751	-1.7083%	16.0103	4,738	75.86
Lenoir	506	-5.3614%	424.61	16.2096	-1.7083%	15.3789	30,500	469.06
Onslow *	885	-5.3614%	742.66	10.5489	-1.7083%	10.0083	85,848	859.19
Pamlico	57	-5.3614%	47.83	8.5317	-1.7083%	8.0944	6,420	51.97
Wayne *	846	-5.3614%	709.93	13.1224	-1.7083%	12.4499	62,828	782.20
Region P Totals	3,903	-5.3614%	3,275.24	12.2458	-1.7083%	11.6182	314,451	3,639.63
Beaufort	362	-11.0037%	242.50	15.0270	-6.1336%	12.2619	23,214	284.65
Bertie	143	-11.0037%	95.79	13.5970	-6.1336%	11.0951	10,121	112.29
Hertford	158	-11.0037%	105.84	13.5576	-6.1336%	11.0629	10,848	120.01
Martin	203	-11.0037%	135.99	17.1656	-6.1336%	14.0070	11,179	156.58
Pitt *	1,092	-11.0037%	731.52	10.1535	-6.1336%	8.2852	107,292	888.93
Region Q Totals	1,958	-11.0037%	1,311.64	11.8211	-6.1336%	9.6459	162,654	1,562.47
Camden	45	-18.5345%	19.98	6.7568	-17.3261%	3.2447	6,731	21.84
Chowan	97	-18.5345%	43.06	12.9888	-17.3261%	6.2374	7,472	46.61
Currituck	74	-18.5345%	32.85	3.9847	-17.3261%	1.9135	20,288	38.82
Dare	64	-18.5345%	28.41	2.9147	-17.3261%	1.3997	22,438	31.41
Gates	51	-18.5345%	22.64	8.2981	-17.3261%	3.9849	5,775	23.01
Hyde	19	-18.5345%	8.44	7.0475	-17.3261%	3.3843	2,537	8.59
Pasquotank *	217	-18.5345%	96.34	8.9525	-17.3261%	4.2991	24,253	104.27
Perquimans	45	-18.5345%	19.98	6.5048	-17.3261%	3.1237	6,738	21.05
Tyrrell	15	-18.5345%	6.66	8.4034	-17.3261%	4.0354	1,689	6.82
Washington	103	-18.5345%	45.73	18.5988	-17.3261%	8.9314	5,152	46.01
Region R Totals	730	-18.5345%	324.09	7.1583	-17.3261%	3.4375	103,073	348.42
Grand Totals	60,151	-1.2992%	58,996.43	9.4289	-1.3449%	9.0485	6,538,574	60,715.02

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Table 12C: 2024 Need Projections for Medicare-certified Home Health Agencies or Offices

Ages 65-74								
A	B	C	D	E	F	G	H	I
County	Home Health Patients in 2021	COG's Average Annual Rate of Change in # Patients Served	Projected # of Patients Receiving Services in 2024	Geographic Unit's Use Rate per 1000 in 2021	COG's Average Annual Rate of Change in Use Rate	Projected Use Rate per 1000 in 2024	Projected 2024 Population	Projected Home Health Patients in 2024
Cherokee	244	9.2671%	311.83	50.4028	9.9962%	65.5179	4,794	314.09
Clay	99	9.2671%	126.52	52.8846	9.9962%	68.7439	1,828	125.66
Graham	51	9.2671%	65.18	50.1969	9.9962%	65.2501	947	61.79
Haywood	579	9.2671%	739.97	65.9453	9.9962%	85.7214	8,895	762.49
Jackson	160	9.2671%	204.48	31.8028	9.9962%	41.3400	4,803	198.56
Macon	314	9.2671%	401.30	53.8501	9.9962%	69.9990	5,893	412.50
Swain	82	9.2671%	104.80	53.1432	9.9962%	69.0801	1,517	104.79
Region A Totals	1,529	9.2671%	1,954.08	52.8810	9.9962%	68.7392	28,677	1,979.89
Buncombe	2,179	7.8711%	2,693.53	64.1656	6.0318%	75.7766	35,237	2,670.14
Henderson	1,128	7.8711%	1,394.36	66.9119	6.0318%	79.0198	17,220	1,360.72
Madison	206	7.8711%	254.64	69.2903	6.0318%	81.8286	2,964	242.54
Transylvania	328	7.8711%	405.45	67.9793	6.0318%	80.2804	4,754	381.65
Region B Totals	3,841	7.8711%	4,747.99	65.5293	6.0318%	77.3871	60,175	4,655.05
Cleveland	1,092	1.1574%	1,129.92	93.9355	3.4915%	103.7749	11,890	1,233.88
McDowell	502	1.1574%	519.43	92.0257	3.4915%	101.6650	5,471	556.21
Polk	218	1.1574%	225.57	74.1497	3.4915%	81.9166	2,794	228.87
Rutherford	653	1.1574%	675.67	84.3016	3.4915%	93.1318	7,718	718.79
Region C Totals	2,465	1.1574%	2,550.59	88.7776	3.4915%	98.0768	27,873	2,737.76
Alleghany	222	16.8858%	334.46	148.8934	20.4679%	240.3194	1,445	347.26
Ashe	257	16.8858%	387.19	67.7564	20.4679%	109.3613	3,646	398.73
Avery	323	16.8858%	486.62	149.7450	20.4679%	241.6940	2,180	526.89
Mitchell	192	16.8858%	289.26	101.5336	20.4679%	163.8790	1,907	312.52
Watauga	370	16.8858%	557.43	68.5820	20.4679%	110.6939	5,484	607.05
Wilkes	665	16.8858%	1,001.87	84.3160	20.4679%	136.0891	7,788	1,059.86
Yancey	213	16.8858%	320.90	84.6918	20.4679%	136.6958	2,444	334.08
Region D Totals	2,242	16.8858%	3,377.74	89.2196	20.4679%	144.0038	24,894	3,586.40
Alexander	237	6.5839%	283.81	54.8738	5.5777%	64.0559	4,227	270.76
Burke	741	6.5839%	887.36	70.4373	5.5777%	82.2236	10,536	866.31
Caldwell	724	6.5839%	867.00	75.9626	5.5777%	88.6735	9,550	846.83
Catawba	1,400	6.5839%	1,676.53	75.9878	5.5777%	88.7029	19,309	1,712.77
Region E Totals	3,102	6.5839%	3,714.70	72.4868	5.5777%	84.6161	43,622	3,696.67
Anson	186	2.6115%	200.57	76.7643	-1.3146%	73.7369	2,418	178.30
Cabarrus	1,140	2.6115%	1,229.31	58.4915	-1.3146%	56.1848	21,497	1,207.80
Gaston	1,993	2.6115%	2,149.14	84.0326	-1.3146%	80.7185	24,506	1,978.09
Iredell	1,258	2.6115%	1,356.56	64.8387	-1.3146%	62.2816	21,244	1,323.11
Lincoln	662	2.6115%	713.87	64.2344	-1.3146%	61.7012	10,940	675.01
Mecklenburg *	4,597	2.6115%	4,957.16	53.0782	-1.3146%	50.9850	95,373	4,862.59
Rowan	1,120	2.6115%	1,207.75	67.4090	-1.3146%	64.7505	17,370	1,124.72
Stanly	496	2.6115%	534.86	67.8059	-1.3146%	65.1318	7,370	480.02
Union	983	2.6115%	1,060.01	47.6283	-1.3146%	45.7499	23,156	1,059.39
Region F Totals	12,435	2.6115%	13,409.24	60.2135	-1.3146%	57.8389	223,874	12,889.02
Alamance	1,329	2.9264%	1,445.67	74.6001	0.4969%	75.7122	18,854	1,427.48
Caswell	93	2.9264%	101.16	30.7743	0.4969%	31.2331	3,053	95.35
Davidson	1,213	2.9264%	1,319.49	64.2547	0.4969%	65.2126	19,678	1,283.25
Guilford *	3,360	2.9264%	3,654.98	64.0073	0.4969%	64.9615	55,213	3,586.72
Montgomery	200	2.9264%	217.56	62.3441	0.4969%	63.2735	3,144	198.93
Randolph	1,134	2.9264%	1,233.56	72.2938	0.4969%	73.3715	16,309	1,196.62
Rockingham	672	2.9264%	731.00	59.4638	0.4969%	60.3502	11,714	706.94
Region G Totals	8,001	2.9264%	8,703.42	65.3655	0.4969%	66.3400	127,965	8,495.30

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Table 12C: 2024 Need Projections for Medicare-certified Home Health Agencies or Offices

Ages 65-74								
A	B	C	D	E	F	G	H	I
County	Home Health Patients in 2021	COG's Average Annual Rate of Change in # Patients Served	Projected # of Patients Receiving Services in 2024	Geographic Unit's Use Rate per 1000 in 2021	COG's Average Annual Rate of Change in Use Rate	Projected Use Rate per 1000 in 2024	Projected 2024 Population	Projected Home Health Patients in 2024
Davie	322	1.7947%	339.34	60.1195	-0.0112%	60.0993	5,696	342.33
Forsyth *	2,645	1.7947%	2,787.41	69.9033	-0.0112%	69.8798	39,596	2,766.96
Stokes	413	1.7947%	435.24	74.3876	-0.0112%	74.3627	5,693	423.35
Surry	757	1.7947%	797.76	91.5910	-0.0112%	91.5603	8,235	754.00
Yadkin	332	1.7947%	349.88	77.6608	-0.0112%	77.6348	4,306	334.30
Region I Totals	4,469	1.7947%	4,709.62	72.9204	-0.0112%	72.8960	63,526	4,620.93
Chatham	342	1.8834%	361.32	29.1784	-2.4235%	27.0570	12,352	334.21
Durham	1,572	1.8834%	1,660.82	58.9692	-2.4235%	54.6818	28,174	1,540.60
Johnston	1,077	1.8834%	1,137.85	54.3637	-2.4235%	50.4112	21,980	1,108.04
Lee	389	1.8834%	410.98	59.0020	-2.4235%	54.7122	7,000	382.99
Moore *	501	1.8834%	529.31	35.5395	-2.4235%	32.9556	14,704	484.58
Orange	664	1.8834%	701.52	44.3376	-2.4235%	41.1140	16,074	660.87
Wake *	4,626	1.8834%	4,887.38	50.9000	-2.4235%	47.1993	102,105	4,819.29
Region J Totals	9,171	1.8834%	9,689.18	49.6427	-2.4235%	46.0334	202,389	9,330.57
Franklin	419	9.8204%	542.44	53.1793	9.0608%	67.6347	8,713	589.30
Granville	451	9.8204%	583.87	66.1484	9.0608%	84.1291	7,483	629.54
Person	257	9.8204%	332.72	54.3340	9.0608%	69.1033	4,967	343.24
Vance	408	9.8204%	528.20	87.7042	9.0608%	111.5442	4,621	515.45
Warren	135	9.8204%	174.77	59.6290	9.0608%	75.8375	2,104	159.56
Region K Totals	1,670	9.8204%	2,162.00	63.3945	9.0608%	80.6265	27,888	2,237.08
Edgecombe	494	7.0090%	597.87	74.7466	7.5728%	91.7278	6,686	613.29
Halifax	415	7.0090%	502.26	64.0136	7.5728%	78.5564	6,562	515.49
Nash	891	7.0090%	1,078.35	76.3889	7.5728%	93.7432	11,769	1,103.26
Northampton	157	7.0090%	190.01	102.0143	7.5728%	125.1903	1,418	177.52
Wilson	643	7.0090%	778.20	75.8523	7.5728%	93.0847	8,523	793.36
Region L Totals	2,600	7.0090%	3,146.70	74.7728	7.5728%	91.7600	34,958	3,202.92
Cumberland *	1,927	7.4710%	2,358.90	67.5335	4.1599%	75.9614	30,441	2,312.34
Harnett *	656	7.4710%	803.03	58.8341	4.1599%	66.1764	11,894	787.10
Sampson	404	7.4710%	494.55	62.0107	4.1599%	69.7495	6,504	453.65
Region M Totals	2,987	7.4710%	3,656.48	64.6551	4.1599%	72.7238	48,839	3,553.10
Bladen	354	-1.4691%	338.40	111.6719	-0.0827%	111.3949	2,842	316.58
Hoke *	218	-1.4691%	208.39	57.7178	-0.0827%	57.5746	4,132	237.90
Richmond	271	-1.4691%	259.06	54.5931	-0.0827%	54.4576	4,949	269.51
Robeson	820	-1.4691%	783.86	65.4116	-0.0827%	65.2493	12,281	801.33
Scotland	200	-1.4691%	191.19	48.5437	-0.0827%	48.4232	4,003	193.84
Region N Totals	1,863	-1.4691%	1,780.89	65.2151	-0.0827%	65.0533	28,207	1,819.16
Brunswick	1,419	2.9610%	1,545.05	53.1142	3.8680%	59.2776	27,575	1,634.58
Columbus	534	2.9610%	581.43	92.3237	3.8680%	103.0369	5,550	571.85
New Hanover *	1,411	2.9610%	1,536.34	58.3154	3.8680%	65.0823	24,893	1,620.09
Pender	430	2.9610%	468.20	60.1399	3.8680%	67.1185	7,603	510.30
Region O Totals	3,794	2.9610%	4,131.02	59.4242	3.8680%	66.3198	65,621	4,336.83

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Table 12C: 2024 Need Projections for Medicare-certified Home Health Agencies or Offices

Ages 65-74								
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County	Home Health Patients in 2021	COG's Average Annual Rate of Change in # Patients Served	Projected # of Patients Receiving Services in 2024	Geographic Unit's Use Rate per 1000 in 2021	COG's Average Annual Rate of Change in Use Rate	Projected Use Rate per 1000 in 2024	Projected 2024 Population	Projected Home Health Patients in 2024
Carteret *	567	-0.2419%	562.89	56.5642	1.2650%	58.7108	10,056	590.40
Craven *	710	-0.2419%	704.85	72.5452	1.2650%	75.2982	10,010	753.74
Duplin	487	-0.2419%	483.47	133.9384	1.2650%	139.0212	3,037	422.21
Greene	125	-0.2419%	124.09	55.7787	1.2650%	57.8954	2,384	138.02
Jones	84	-0.2419%	83.39	66.2983	1.2650%	68.8143	1,218	83.82
Lenoir	506	-0.2419%	502.33	73.5572	1.2650%	76.3486	7,004	534.75
Onslow *	889	-0.2419%	882.55	70.3935	1.2650%	73.0649	13,645	996.97
Pamlico	99	-0.2419%	98.28	52.4364	1.2650%	54.4264	1,790	97.42
Wayne *	866	-0.2419%	859.72	74.6680	1.2650%	77.5016	12,002	930.17
Region P Totals	4,333	-0.2419%	4,301.56	72.2781	1.2650%	75.0210	61,146	4,547.49
Beaufort	448	1.5445%	468.76	70.7965	2.6372%	76.3976	6,028	460.52
Bertie	179	1.5445%	187.29	85.8513	2.6372%	92.6435	2,119	196.31
Hertford	170	1.5445%	177.88	69.9876	2.6372%	75.5248	2,399	181.18
Martin	262	1.5445%	274.14	80.2450	2.6372%	86.5937	3,243	280.82
Pitt *	1,145	1.5445%	1,198.05	75.7025	2.6372%	81.6917	15,689	1,281.66
Region Q Totals	2,204	1.5445%	2,306.12	75.3968	2.6372%	81.3619	29,478	2,400.51
Camden	43	-4.7761%	36.84	39.3053	-6.1391%	32.0663	1,209	38.77
Chowan	101	-4.7761%	86.53	55.7395	-6.1391%	45.4737	1,753	79.72
Currituck	141	-4.7761%	120.80	43.8706	-6.1391%	35.7907	3,763	134.68
Dare	99	-4.7761%	84.82	18.7039	-6.1391%	15.2592	5,519	84.22
Gates	64	-4.7761%	54.83	51.7799	-6.1391%	42.2434	1,246	52.64
Hyde	33	-4.7761%	28.27	52.8846	-6.1391%	43.1446	618	26.66
Pasquotank *	292	-4.7761%	250.16	73.0183	-6.1391%	59.5702	4,250	253.17
Perquimans	93	-4.7761%	79.67	53.0217	-6.1391%	43.2564	1,684	72.84
Tyrrell	19	-4.7761%	16.28	55.5556	-6.1391%	45.3236	346	15.68
Washington	117	-4.7761%	100.24	70.2703	-6.1391%	57.3283	1,594	91.38
Region R Totals	1,002	-4.7761%	858.43	47.6394	-6.1391%	38.8655	21,982	849.76
Grand Totals	67,708	3.4193%	75,199.75	63.3908	1.5992%	66.4320	1,121,114	74,938.43

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Table 12C: 2024 Need Projections for Medicare-certified Home Health Agencies or Offices

Ages 75 and Over								
A	B	C	D	E	F	G	H	I
County	Home Health Patients in 2021	COG's Average Annual Rate of Change in # Patients Served	Projected # of Patients Receiving Services in 2024	Geographic Unit's Use Rate per 1000 in 2021	COG's Average Annual Rate of Change in Use Rate	Projected Use Rate per 1000 in 2024	Projected 2024 Population	Projected Home Health Patients in 2024
Cherokee	403	-1.4726%	385.20	95.2719	-4.3274%	82.9034	4,769	395.37
Clay	168	-1.4726%	160.58	101.8182	-4.3274%	88.5998	1,887	167.19
Graham	77	-1.4726%	73.60	75.9369	-4.3274%	66.0785	1,070	70.70
Haywood	1,168	-1.4726%	1,116.40	151.6096	-4.3274%	131.9271	8,411	1,109.64
Jackson	261	-1.4726%	249.47	65.3644	-4.3274%	56.8786	4,567	259.76
Macon	644	-1.4726%	615.55	120.1717	-4.3274%	104.5706	5,924	619.48
Swain	107	-1.4726%	102.27	83.6591	-4.3274%	72.7982	1,349	98.20
Region A Totals	2,828	-1.4726%	2,703.07	112.0932	-4.3274%	97.5409	27,977	2,720.34
Buncombe	3,938	2.9584%	4,287.50	160.8266	-0.3031%	159.3644	28,391	4,524.51
Henderson	2,376	2.9584%	2,586.87	148.7510	-0.3031%	147.3986	17,848	2,630.77
Madison	351	2.9584%	382.15	161.6766	-0.3031%	160.2067	2,466	395.07
Transylvania	751	2.9584%	817.65	129.5721	-0.3031%	128.3941	6,186	794.25
Region B Totals	7,416	2.9584%	8,074.18	153.1409	-0.3031%	151.7485	54,891	8,344.60
Cleveland	1,251	-8.9528%	915.00	163.3373	-8.3619%	122.3628	8,641	1,057.34
McDowell	822	-8.9528%	601.22	196.0878	-8.3619%	146.8976	4,564	670.44
Polk	364	-8.9528%	266.23	128.8496	-8.3619%	96.5266	3,025	291.99
Rutherford	1,178	-8.9528%	861.61	193.5908	-8.3619%	145.0270	6,651	964.57
Region C Totals	3,615	-8.9528%	2,644.06	174.1246	-8.3619%	130.4441	22,881	2,984.35
Alleghany	342	9.6164%	440.66	243.4164	9.2706%	311.1146	1,512	470.41
Ashe	531	9.6164%	684.19	165.6269	9.2706%	211.6906	3,539	749.17
Avery	512	9.6164%	659.71	283.4994	9.2706%	362.3454	1,981	717.81
Mitchell	396	9.6164%	510.24	230.5006	9.2706%	294.6067	1,736	511.44
Watauga	685	9.6164%	882.62	161.4043	9.2706%	206.2936	4,952	1,021.57
Wilkes	1,135	9.6164%	1,462.44	176.7637	9.2706%	225.9247	6,839	1,545.10
Yancey	401	9.6164%	516.69	181.9419	9.2706%	232.5431	2,397	557.41
Region D Totals	4,002	9.6164%	5,156.55	190.5351	9.2706%	243.5262	22,956	5,572.89
Alexander	434	-0.5634%	426.66	133.7442	-2.0341%	125.5829	3,633	456.24
Burke	1,270	-0.5634%	1,248.53	158.6112	-2.0341%	148.9324	8,828	1,314.78
Caldwell	1,156	-0.5634%	1,136.46	166.2353	-2.0341%	156.0912	7,595	1,185.51
Catawba	2,474	-0.5634%	2,432.19	199.1788	-2.0341%	187.0245	14,413	2,695.58
Region E Totals	5,334	-0.5634%	5,243.85	174.1601	-2.0341%	163.5325	34,469	5,652.12
Anson	328	-1.7730%	310.55	184.4769	-5.4410%	154.3649	1,903	293.76
Cabarrus	2,380	-1.7730%	2,253.41	187.2247	-5.4410%	156.6641	15,022	2,353.41
Gaston	2,973	-1.7730%	2,814.86	195.4635	-5.4410%	163.5581	17,259	2,822.85
Iredell	2,542	-1.7730%	2,406.79	198.0676	-5.4410%	165.7372	15,267	2,530.31
Lincoln	1,175	-1.7730%	1,112.50	185.5654	-5.4410%	155.2756	7,535	1,170.00
Mecklenburg *	8,152	-1.7730%	7,718.39	156.1327	-5.4410%	130.6472	64,187	8,385.85
Rowan	1,673	-1.7730%	1,584.01	151.9252	-5.4410%	127.1265	12,438	1,581.20
Stanly	824	-1.7730%	780.17	159.1655	-5.4410%	133.1850	5,824	775.67
Union	2,056	-1.7730%	1,946.64	158.5563	-5.4410%	132.6753	15,937	2,114.45
Region F Totals	22,103	-1.7730%	20,927.32	169.7176	-5.4410%	142.0147	155,372	22,027.49
Alamance	2,289	-1.0705%	2,215.49	171.5249	-3.4399%	153.8242	14,968	2,302.44
Caswell	159	-1.0705%	153.89	75.8950	-3.4399%	68.0629	2,328	158.45
Davidson	2,704	-1.0705%	2,617.16	207.9840	-3.4399%	186.5208	14,725	2,746.52
Guilford *	5,961	-1.0705%	5,769.56	163.7547	-3.4399%	146.8559	42,109	6,183.95
Montgomery	310	-1.0705%	300.04	128.0463	-3.4399%	114.8324	2,717	312.00
Randolph	1,534	-1.0705%	1,484.74	137.7514	-3.4399%	123.5360	12,480	1,541.73
Rockingham	1,182	-1.0705%	1,144.04	145.4769	-3.4399%	130.4642	8,778	1,145.22
Region G Totals	14,139	-1.0705%	13,684.92	163.4094	-3.4399%	146.5462	98,105	14,390.31

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Table 12C: 2024 Need Projections for Medicare-certified Home Health Agencies or Offices

Ages 75 and Over								
A	B	C	D	E	F	G	H	I
County	Home Health Patients in 2021	COG's Average Annual Rate of Change in # Patients Served	Projected # of Patients Receiving Services in 2024	Geographic Unit's Use Rate per 1000 in 2021	COG's Average Annual Rate of Change in Use Rate	Projected Use Rate per 1000 in 2024	Projected 2024 Population	Projected Home Health Patients in 2024
Davie	602	-2.3712%	559.18	149.9004	-3.7966%	132.8270	4,579	608.21
Forsyth *	5,061	-2.3712%	4,700.99	191.7409	-3.7966%	169.9019	30,165	5,125.09
Stokes	863	-2.3712%	801.61	222.9398	-3.7966%	197.5474	4,348	858.94
Surry	1,525	-2.3712%	1,416.52	251.8164	-3.7966%	223.1350	6,591	1,470.68
Yadkin	573	-2.3712%	532.24	174.2171	-3.7966%	154.3741	3,571	551.27
Region I Totals	8,624	-2.3712%	8,010.53	197.6758	-3.7966%	175.1608	49,254	8,614.19
Chatham	870	0.7043%	888.38	89.0481	-4.6127%	76.7256	11,699	897.61
Durham	2,483	0.7043%	2,535.46	151.6614	-4.6127%	130.6744	19,551	2,554.82
Johnston	1,798	0.7043%	1,835.99	154.3613	-4.6127%	133.0007	14,187	1,886.88
Lee	677	0.7043%	691.30	139.9917	-4.6127%	120.6196	5,416	653.28
Moore *	1,258	0.7043%	1,284.58	92.6431	-4.6127%	79.8231	15,204	1,213.63
Orange	1,311	0.7043%	1,338.70	150.5858	-4.6127%	129.7477	10,824	1,404.39
Wake *	9,771	0.7043%	9,977.44	178.8119	-4.6127%	154.0679	68,750	10,592.17
Region J Totals	18,168	0.7043%	18,551.86	151.9635	-4.6127%	130.9348	145,631	19,202.77
Franklin	678	4.1310%	762.02	136.0353	2.5937%	146.6203	5,999	879.58
Granville	730	4.1310%	820.47	169.4522	2.5937%	182.6374	5,046	921.59
Person	455	4.1310%	511.39	138.3399	2.5937%	149.1043	3,679	548.55
Vance	517	4.1310%	581.07	154.8832	2.5937%	166.9348	3,571	596.12
Warren	199	4.1310%	223.66	86.1099	2.5937%	92.8102	2,362	219.22
Region K Totals	2,579	4.1310%	2,898.61	141.4701	2.5937%	152.4780	20,657	3,165.06
Edgecombe	595	-1.1604%	574.29	138.1472	-0.2771%	136.9986	4,729	647.87
Halifax	637	-1.1604%	614.82	142.9212	-0.2771%	141.7330	4,809	681.59
Nash	1,289	-1.1604%	1,244.13	175.5652	-0.2771%	174.1056	8,495	1,479.03
Northampton	278	-1.1604%	268.32	140.6883	-0.2771%	139.5186	1,891	263.83
Wilson	1,073	-1.1604%	1,035.65	184.3959	-0.2771%	182.8628	6,393	1,169.04
Region L Totals	3,872	-1.1604%	3,737.20	162.0016	-0.2771%	160.6547	26,317	4,241.36
Cumberland *	2,988	2.3362%	3,197.42	166.5366	0.2606%	167.8386	20,239	3,396.89
Harnett *	1,062	2.3362%	1,136.43	142.3783	0.2606%	143.4915	8,503	1,220.11
Sampson	682	2.3362%	729.80	148.4868	0.2606%	149.6477	4,989	746.59
Region M Totals	4,732	2.3362%	5,063.65	157.7649	0.2606%	158.9983	33,731	5,363.59
Bladen	377	-1.7242%	357.50	148.4837	-0.0765%	148.1427	2,528	374.50
Hoke *	327	-1.7242%	310.09	166.6667	-0.0765%	166.2840	2,347	390.27
Richmond	359	-1.7242%	340.43	117.8982	-0.0765%	117.6275	3,387	398.40
Robeson	1,201	-1.7242%	1,138.88	164.4755	-0.0765%	164.0978	8,089	1,327.39
Scotland	303	-1.7242%	287.33	115.0779	-0.0765%	114.8136	2,960	339.85
Region N Totals	2,567	-1.7242%	2,434.22	146.8451	-0.0765%	146.5080	19,311	2,830.41
Brunswick	2,327	2.8466%	2,525.72	129.5008	-0.5352%	127.4217	22,266	2,837.17
Columbus	877	2.8466%	951.89	204.1909	-0.5352%	200.9127	4,522	908.53
New Hanover *	3,046	2.8466%	3,306.12	170.3294	-0.5352%	167.5948	20,654	3,461.50
Pender	773	2.8466%	839.01	156.8906	-0.5352%	154.3718	5,633	869.58
Region O Totals	7,023	2.8466%	7,622.74	155.8104	-0.5352%	153.3090	53,075	8,076.78

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Table 12C: 2024 Need Projections for Medicare-certified Home Health Agencies or Offices

Ages 75 and Over								
A	B	C	D	E	F	G	H	I
County	Home Health Patients in 2021	COG's Average Annual Rate of Change in # Patients Served	Projected # of Patients Receiving Services in 2024	Geographic Unit's Use Rate per 1000 in 2021	COG's Average Annual Rate of Change in Use Rate	Projected Use Rate per 1000 in 2024	Projected 2024 Population	Projected Home Health Patients in 2024
Carteret *	1,059	-2.5830%	976.94	132.7900	-1.8650%	125.3605	8,918	1,117.97
Craven *	1,252	-2.5830%	1,154.98	145.9378	-1.8650%	137.7727	8,995	1,239.27
Duplin	760	-2.5830%	701.11	220.3537	-1.8650%	208.0252	3,303	687.11
Greene	162	-2.5830%	149.45	113.3660	-1.8650%	107.0233	1,598	171.02
Jones	140	-2.5830%	129.15	159.2719	-1.8650%	150.3608	962	144.65
Lenoir	954	-2.5830%	880.07	200.3360	-1.8650%	189.1274	5,166	977.03
Onslow *	1,289	-2.5830%	1,189.11	156.5080	-1.8650%	147.7516	9,158	1,353.11
Pamlico	164	-2.5830%	151.29	92.7077	-1.8650%	87.5208	1,955	171.10
Wayne *	1,475	-2.5830%	1,360.70	179.4841	-1.8650%	169.4421	8,723	1,478.04
Region P Totals	7,255	-2.5830%	6,692.80	160.1687	-1.8650%	151.2074	48,778	7,339.30
Beaufort	649	-5.5889%	540.18	128.2102	-4.0737%	112.5415	5,607	631.02
Bertie	254	-5.5889%	211.41	164.9351	-4.0737%	144.7782	1,572	227.59
Hertford	220	-5.5889%	183.11	129.6405	-4.0737%	113.7970	1,715	195.16
Martin	369	-5.5889%	307.13	163.2021	-4.0737%	143.2570	2,501	358.29
Pitt *	1,659	-5.5889%	1,380.84	182.0476	-4.0737%	159.7994	10,625	1,697.87
Region Q Totals	3,151	-5.5889%	2,622.68	160.1688	-4.0737%	140.5943	22,020	3,109.93
Camden	69	-12.3832%	43.37	88.1226	-14.2337%	50.4934	878	44.33
Chowan	184	-12.3832%	115.64	113.9319	-14.2337%	65.2819	1,692	110.46
Currituck	158	-12.3832%	99.30	84.4920	-14.2337%	48.4131	2,246	108.74
Dare	140	-12.3832%	87.99	40.6268	-14.2337%	23.2788	4,034	93.91
Gates	117	-12.3832%	73.53	114.7059	-14.2337%	65.7254	1,087	71.44
Hyde	33	-12.3832%	20.74	81.8859	-14.2337%	46.9198	429	20.13
Pasquotank *	420	-12.3832%	263.97	152.5054	-14.2337%	87.3841	3,032	264.95
Perquimans	138	-12.3832%	86.73	74.3534	-14.2337%	42.6038	1,987	84.65
Tyrrell	24	-12.3832%	15.08	61.5385	-14.2337%	35.2609	403	14.21
Washington	122	-12.3832%	76.68	95.9874	-14.2337%	54.9999	1,340	73.70
Region R Totals	1,405	-12.3832%	883.05	91.1864	-14.2337%	52.2489	17,128	886.52
Grand Totals	118,813	-0.7732%	116,951.29	160.3317	-3.1703%	145.0825	852,553	124,522.00

* Adjustments for active duty military personnel have been applied to the Ages 18-64 population.

Table 12D: 2024 Need Projections for Medicare-certified Home Health Agencies or Offices

Need Projections

A	B	C	D	E	F
County	Placeholder Adjustments for Agencies under Development	Adjusted Projected Total Patients to be Served 2024	Projected Utilization in 2024	Surplus or Deficit ("-" = Deficit)	Need for New Agencies or Offices
Cherokee	0	850.59	869.46	-18.87	0
Clay	0	348.76	358.11	-9.35	0
Graham	0	167.86	162.60	5.26	0
Haywood	0	2,401.47	2,439.99	-38.52	0
Jackson	0	591.34	601.06	-9.72	0
Macon	0	1,255.32	1,283.72	-28.40	0
Swain	0	284.64	283.19	1.46	0
Region A Totals	0	5,899.97	5,998.13	-98.15	
Buncombe	0	8,465.59	8,706.71	-241.12	0
Henderson	0	4,715.63	4,737.25	-21.62	0
Madison	0	756.60	755.89	0.71	0
Transylvania	0	1,419.53	1,371.06	48.47	0
Region B Totals	0	15,357.36	15,570.91	-213.55	
Cleveland	0	2,955.15	3,273.24	-318.08	0
McDowell	0	1,626.57	1,760.57	-133.99	0
Polk	0	629.97	664.05	-34.08	0
Rutherford	0	2,206.85	2,394.41	-187.56	0
Region C Totals	0	7,418.54	8,092.26	-673.72	
Alleghany	0	969.92	1,027.71	-57.79	0
Ashe	0	1,331.11	1,426.14	-95.03	0
Avery	0	1,463.94	1,584.22	-120.27	0
Mitchell	0	992.68	1,030.30	-37.61	0
Watauga	0	1,843.77	2,095.54	-251.77	0
Wilkes	0	3,198.34	3,382.03	-183.69	0
Yancey	0	1,021.85	1,094.77	-72.92	0
Region D Totals	0	10,821.62	11,640.70	-819.08	
Alexander	0	876.93	898.09	-21.16	0
Burke	0	2,678.76	2,736.21	-57.45	0
Caldwell	0	2,497.87	2,540.25	-42.37	0
Catawba	0	5,059.86	5,412.58	-352.72	1
Region E Totals	0	11,113.42	11,587.12	-473.70	
Anson	0	680.23	629.63	50.60	0
Cabarrus	0	4,528.38	4,611.42	-83.04	0
Gaston	0	6,938.64	6,702.22	236.42	0
Iredell	0	4,794.49	4,882.73	-88.24	0
Lincoln	0	2,442.10	2,437.13	4.97	0
Mecklenburg	650	17,898.24	17,840.58	57.67	0
Rowan	0	3,701.50	3,570.83	130.67	0
Stanly	0	1,649.51	1,570.71	78.80	0
Union	0	3,777.93	3,948.77	-170.84	0
Region F Totals	650	46,411.02	46,194.01	217.02	

Table 12D: 2024 Need Projections for Medicare-certified Home Health Agencies or Offices

Need Projections

A	B	C	D	E	F
County	Placeholder Adjustments for Agencies under Development	Adjusted Projected Total Patients to be Served 2024	Projected Utilization in 2024	Surplus or Deficit ("-" = Deficit)	Need for New Agencies or Offices
Alamance	0	4,630.30	4,717.81	-87.51	0
Caswell	0	313.70	310.49	3.21	0
Davidson	0	4,909.44	5,007.42	-97.97	0
Guilford	0	11,965.39	12,353.87	-388.48	1
Montgomery	0	644.51	636.33	8.19	0
Randolph	0	3,480.54	3,498.98	-18.44	0
Rockingham	0	2,388.05	2,355.25	32.80	0
Region G Totals	0	28,331.94	28,880.14	-548.20	
Davie	0	1,195.09	1,253.41	-58.31	0
Forsyth	0	9,743.35	10,193.18	-449.83	1
Stokes	0	1,527.28	1,566.72	-39.44	0
Surry	0	2,775.30	2,782.29	-6.99	0
Yadkin	0	1,116.57	1,118.03	-1.45	0
Region I Totals	0	16,357.60	16,913.62	-556.02	
Chatham	0	1,576.14	1,541.49	34.65	0
Durham	0	6,019.16	5,822.36	196.80	0
Johnston	0	4,144.05	4,153.65	-9.59	0
Lee	0	1,435.47	1,353.05	82.42	0
Moore	0	2,256.04	2,119.22	136.81	0
Orange	0	2,613.61	2,600.42	13.19	0
Wake	650	20,902.94	20,656.79	246.15	0
Region J Totals	650	38,947.40	38,246.98	700.42	
Franklin	0	1,851.22	2,071.44	-220.22	0
Granville	0	1,926.56	2,104.52	-177.97	0
Person	0	1,160.85	1,213.95	-53.09	0
Vance	0	1,533.82	1,542.67	-8.85	0
Warren	0	518.21	499.91	18.30	0
Region K Totals	0	6,990.66	7,432.48	-441.83	
Edgecombe	0	1,666.63	1,778.23	-111.59	0
Halifax	0	1,504.05	1,603.07	-99.02	0
Nash	0	3,118.64	3,455.40	-336.76	1
Northampton	0	577.90	570.00	7.90	0
Wilson	0	2,493.01	2,707.40	-214.39	0
Region L Totals	0	9,360.23	10,114.09	-753.86	
Cumberland	0	7,365.74	7,530.06	-164.31	0
Harnett	0	2,461.30	2,564.19	-102.89	0
Sampson	0	1,562.91	1,537.39	25.52	0
Region M Totals	0	11,389.95	11,631.64	-241.69	
Bladen	0	983.45	1,013.07	-29.62	0
Hoke	0	732.55	890.63	-158.08	0
Richmond	0	874.37	983.79	-109.42	0
Robeson	0	2,952.11	3,283.87	-331.76	1
Scotland	0	694.65	775.31	-80.66	0
Region N Totals	0	6,237.12	6,946.66	-709.54	

Table 12D: 2024 Need Projections for Medicare-certified Home Health Agencies or Offices

Need Projections

A	B	C	D	E	F
County	Placeholder Adjustments for Agencies under Development	Adjusted Projected Total Patients to be Served 2024	Projected Utilization in 2024	Surplus or Deficit ("-" = Deficit)	Need for New Agencies or Offices
Brunswick	0	5,180.82	5,714.43	-533.61	1
Columbus	0	2,259.56	2,195.53	64.03	0
New Hanover	0	7,173.38	7,637.27	-463.88	1
Pender	0	1,854.67	1,979.47	-124.80	0
Region O Totals	0	16,468.44	17,526.70	-1,058.26	
Carteret	0	1,847.20	2,051.63	-204.43	0
Craven	0	2,326.05	2,510.51	-184.45	0
Duplin	0	1,583.12	1,530.64	52.47	0
Greene	0	383.47	431.51	-48.04	0
Jones	0	285.10	305.54	-20.44	0
Lenoir	0	1,807.51	1,981.34	-173.83	0
Onslow	0	2,823.42	3,219.26	-395.84	1
Pamlico	0	297.41	320.49	-23.09	0
Wayne	0	2,930.84	3,190.92	-260.08	0
Region P Totals	0	14,284.11	15,541.84	-1,257.73	
Beaufort	0	1,251.44	1,376.19	-124.75	0
Bertie	0	494.50	536.20	-41.70	0
Hertford	0	466.83	496.36	-29.52	0
Martin	0	716.88	795.35	-78.47	0
Pitt	0	3,310.41	3,868.46	-558.05	1
Region Q Totals	0	6,240.07	7,072.56	-832.49	
Camden	0	100.18	104.94	-4.76	0
Chowan	0	245.24	236.78	8.46	0
Currituck	0	252.95	282.24	-29.28	0
Dare	0	201.22	209.53	-8.31	0
Gates	0	151.01	147.09	3.92	0
Hyde	0	57.45	55.38	2.07	0
Pasquotank	0	610.47	622.39	-11.92	0
Perquimans	0	186.39	178.55	7.84	0
Tyrrell	0	38.02	36.71	1.31	0
Washington	0	222.64	211.10	11.55	0
Region R Totals	0	2,065.57	2,084.69	-19.12	
Grand Totals	1,300	253,695.04	261,474.54	-7,779.51	9

**Table 12E: Medicare-certified Home Health Agency or Office
Need Determination***

(Proposed for Certificate of Need Review Commencing in 2023)

County Service Area	Home Health Agency/Office Need Determination	Certificate of Need Application Deadline**	Certificate of Need Beginning Review Date
Brunswick	1	To be determined	To be determined
Catawba	1	To be determined	To be determined
Edgecombe***	1	To be determined	To be determined
Forsyth	1	To be determined	To be determined
Granville***	1	To be determined	To be determined
Guilford	1	To be determined	To be determined
Montgomery***	1	To be determined	To be determined
Nash	1	To be determined	To be determined
New Hanover	1	To be determined	To be determined
Onslow	1	To be determined	To be determined
Pitt	1	To be determined	To be determined
Robeson	1	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.0203(b). The filing deadline is 5:00 p.m. on the application deadline date.

*** Need determinations are based on Criterion 1 or Criterion 2 in the Application of the Methodology.

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Chapter 13:

Hospice Services

CHAPTER 13

HOSPICE SERVICES

Introduction

G.S. 131E-176(13a) defines *hospice* as “any coordinated program of home care with provision for inpatient care for terminally ill patients and their families.” A *hospice inpatient facility* is “a freestanding licensed hospice facility or a designated inpatient unit in an existing health service facility which provides palliative and supportive medical and other health services to meet the physical, psychological, social, spiritual, and special needs of terminally ill patients and their families in an inpatient setting” (G.S. 131E 176 (13b)). A *hospice residential care facility* is “a freestanding licensed hospice facility which provides” the same services as an inpatient facility but in a “group residential setting” (G.S. 131E 176 (13c)).

Definitions

A hospice office service area is the county in which the hospice office is located. Each of the 100 counties in the state is a separate hospice office service area.

A hospice inpatient facility bed service area is the county in which the bed is located. Each of the 100 counties in the state is a separate hospice inpatient facility bed service area.

The *reporting year* for hospice facilities and offices is either July 1 through June 30 or October 1 through September 30; facilities may choose their reporting period. The *current* reporting year is either July 1, 2020 through June 30, 2021, or October 1, 2020 through September 30, 2021.

The hospice home care office methodology projects need one year beyond the publication year of the current State Medical Facilities Plan (SMFP). The *projection year* for hospice home care offices is 2024.

The hospice inpatient bed methodology projects need three years beyond the publication year of the current SMFP. The *projection year* for hospice inpatient beds is 2026.

The SMFP uses county death rates for the most recent five calendar years available. The current SMFP uses data from 2016-2020.

The methodology bases many calculations on the *three most recent years* of deaths served. For the current SMFP, these years are 2019, 2020, and 2021.

Changes from the Previous Plan

This chapter contains no substantive changes from the previous SMFP. However, the chapter includes technical edits to Step 10 of the hospice home care methodology.

Data Sources

Patient origin and utilization data for the current reporting year come from the License Renewal Application for the reporting year, as submitted to the North Carolina Department of Health and Human Services, Division of Health Service Regulation.

The North Carolina Office of State Budget and Management provides county population estimates and projections.

Estimates of the active duty military population come from the category of “Employment Status-Armed Forces” in the most recent American Community Survey 5-year Estimates.

The number of deaths and crude (unadjusted) death rates per 1,000 population come from *North Carolina Vital Statistics, Vol. 1* published by the North Carolina Department of Health and Human Services, State Center for Health Statistics.

Assumptions of the Methodologies

1. The methodologies exclude the active duty military population for any county with more than 500 estimated active duty military personnel.
2. Hospice Home Care Offices
 - a. The methodology uses county mortality (death) rates for the most recent five years as the basis for hospice patient need projection. The five-year death rate is an indicator of deaths from all sites in each county.
 - b. Because previous years’ data forms the basis for projections, the methodology calculates a two-year trailing average growth rate in statewide number of deaths served and applies it to the current reported number of deaths served to project changes in the capacity of existing agencies to serve deaths from each county by the projection year. Projected hospice deaths served will not exceed 60% of total deaths.
 - c. To calculate the median projected hospice deaths, the methodology applies a projected statewide median percentage of deaths served by hospice to projected deaths in each county. The methodology calculates the projected statewide median percentage of deaths served by applying the two-year trailing average growth rate in the statewide median percentage of deaths served over the most recent three years to the current statewide median percentage of deaths served.
 - d. A need for an additional hospice home care office exists if: the county’s deficit is 90 patients or more and the number of licensed hospice home care offices located in the county is three or fewer per 100,000 population.
3. Hospice Inpatient Beds
 - a. The methodology calculates the two-year trailing average growth rate in statewide hospice admissions over the three most recent reporting years and applies it to the current reported number of hospice admissions to project total hospice admissions.
 - b. Choose the lower of the statewide median average length of stay per admission or each county’s average length of stay per admission to form the basis for projecting inpatient days for each county.
 - c. A two-year trailing average statewide inpatient utilization rate of the total estimated days of care in each county forms the basis for projecting days of care in licensed hospice inpatient facility beds.
4. Hospice Residential Beds

This category of beds does not have a methodology to project need. A certificate of need (CON) is required.

Application of the Methodologies

Hospice Home Care Offices:

- Step 1: Enter the five-year mortality rate per 1,000 population for each county (*Table 13B, Column B*).
- Step 2: Enter the estimated population of each county for the projection year, with adjustments for the counties with more than 500 active duty military personnel (*Table 13B, Column C*).
- Step 3: Calculate the projected deaths for the projection year for each county by multiplying the county death rate (Step 1) by the estimated population in the projection year (Step 2) divided by 1,000 (*Table 13B, Column D*).
- Step 4: Enter the total number of reported hospice patient deaths, by county of patient residence, for the reporting year (*Table 13B, Column E*).
- Step 5: Calculate the Two-Year Trailing Average Growth Rate in the statewide number of deaths served for the three most recent reporting years.

Year	Statewide Number Deaths Served	Growth
2019	44,556	
2020	46,982	5.4%
2021	49,660	5.7%
Two-Year Trailing Average Growth Rate		5.6%

- Step 6: Determine the number of hospice deaths served for the projection year:
- Calculate the projected number of hospice deaths served for the projection year using the two-year trailing average growth rate by multiplying the number of reported hospice deaths (Step 4) by the statewide two-year trailing average growth rate for deaths served for three years (Step 5) (*Table 13B, Column F*).
 - Calculate the allowable number of hospice deaths served for the projection year by multiplying the projected deaths for each county (Step 2) by 60% (*Table 13B, Column G*).
 - Enter the number of hospice deaths served for the projection year (*Table 13B, Column H*). This number is the lower of:
 - the number of hospice deaths served for the projection year using the two-year trailing average growth rate (Step 6a), or;
 - the number of hospice deaths served for the projection year, limited to 60% (Step 6b).
- Step 7: Calculate the Two-Year Trailing Average Growth Rate in Statewide Median Percentage of Deaths Served over the most recent three years.

Year	Median Percent of Deaths Served	Growth
2019	39.72%	
2020	43.30%	9.0%
2021	40.14%	-7.3%
Two Year Trailing Average Growth Rate		0.9%

- Step 8: Calculate the projected median statewide percentage of deaths served for the projection year by multiplying the current statewide median percentage of deaths served by the statewide two-year trailing average growth rate for median percentage of deaths served (Step 7) for the three most recent reporting years.
- Step 9: Calculate the median hospice deaths for the projection year by multiplying deaths for the projection year (Step 3) by the statewide median percentage of deaths served for the projection year (Step 8) (*Table 13B, Column I*).
- Step 10: In counties with a need determination in a previous SMFP for at least one additional hospice home care office, assign and adjust placeholders as follows (*Table 13B, column J*):
- Before a CON is issued, enter a placeholder of 90 hospice patient deaths for each need determination in the county.
 - When the CON is issued to a new office, reassign the placeholder of 90 hospice patient deaths to that office.
 - Once a new office first reports more than 90 hospice patient deaths of residents of the county in which the office is located, do not adjust the placeholder of 90 hospice patient deaths in the current and subsequent years.
 - Does the applicant have an existing hospice home care office in the county?
 - If yes, do the following:
 - If the third SMFP following issuance of the CON has not yet been published, adjust the placeholder to equal 90 minus the number of hospice deaths served.
 - If three SMFPs have been published since the CON was issued, do not adjust the placeholder.
 - If no, do the following:
 - If the third SMFP following issuance of the license has not yet been published, adjust the placeholder to equal 90 minus the number of hospice deaths served.
 - If three SMFPs have been published since the license was issued, do not adjust the placeholder.
- Step 11: Calculate the deficit or surplus of patients by subtracting the median projected hospice deaths for the projection year (Step 9) for each county from the projected number of hospice deaths served for the projection year (Step 6c) plus any adjustment (Step 10) (*Table 13B, Column K*).
- Step 12: Enter the number of licensed hospice home care offices located in each county (*Table 13B, Column L*).
- Step 13: Calculate the number of licensed hospice home care offices per 100,000 population for each county by dividing the number of licensed hospice offices (Step 12) by the estimated population for the projection year (Step 2). Then multiply the result by 100,000 (*Table 13B, Column M*).
- Step 14: The county has a need determination if both of the following are true (*Table 13B, Column N*):

- a. the county's deficit (Step 11) is 90 or more, and;
- b. the county's number of licensed hospice home care offices per 100,000 population (Step 13) is three or fewer.

Unless otherwise specified by the methodology, calculations do not use rounded values. However, fractional values are rounded automatically when displayed.

Hospice Inpatient Beds:

- Step 1: Enter the total number of reported hospice admissions by county of patient residence (*Table 13C, Column B*).
- Step 2: Enter the total number of days of care by county of patient residence (*Table 13C, Column C*).
- Step 3: Calculate the average length of stay (ALOS) per admission by dividing total days of care (Step 2) by total admissions (Step 1) (*Table 13C, Column D*).
- Step 4: Calculate the two-year trailing average growth rate in the statewide number of admissions over the previous three reporting years:

Year	Statewide Hospice Admissions	Growth
2019	51,241	
2020	53,981	5.3%
2021	56,164	4.0%
Two-Year Trailing Average Growth Rate		4.7%

- Step 5: Calculate total admissions for each county for the projection year by multiplying the total admissions (Step 1) by the statewide two-year trailing average growth rate for hospice admissions (Step 4) for five years [total admissions x (1 + two-year trailing average growth rate)⁵] (*Table 13C, Column E*).
- Step 6:
- a. Calculate the total county days of care at the county ALOS for the projection year by multiplying the total admissions (Step 5) by the ALOS per admission for each county (Step 3) (*Table 13C, Column F*).
 - b. Calculate the total county days of care at the state ALOS for the projection year by multiplying the total admissions (Step 5) by the statewide median ALOS per admission (*Table 13C, Column G*).
 - c. The projected days of care for inpatient hospice beds for the projection year is the lower of (*Table 13C, Column H*):
 - 1) days of care for the projection year, based on the county ALOS (Step 6a), or;
 - 2) days of care for the projection year, based on the statewide ALOS (Step 6b).

Step 7: Calculate the projected inpatient days for each county for the projection year by multiplying the days of care for the projection year for inpatient estimates (Step 6c) by the two-year trailing average statewide inpatient utilization rate (*Table 13C, Column I*).

Year	General Inpatient Days of Care	Statewide Total Days of Care	Two Year Trailing Average Statewide Inpatient Utilization Rate
2020	101,051	4,180,410	
2021	93,797	4,200,481	
Totals	194,848	8,380,891	2.32%

Step 8: Calculate the projected inpatient hospice beds by dividing inpatient days for the projection year (Step 7) by 365.25 days. Then divide by 0.85 to adjust for the targeted 85% occupancy (*Table 13C, Column J*).

Step 9: Adjust the projected hospice inpatient beds (Step 8) for the projection year by the number of licensed hospice beds in each county (*Table 13C, Column K*), and by the CON approved/licensure pending beds and beds available in previous Plans (*Table 13C, Column L*).

Step 10: Calculate occupancy rates of existing hospice inpatient facilities for the reporting year (*Table 13C, Column N*).

Step 11: Adjust projected beds in Step 9 for occupancy rates of existing facilities in counties (Step 10) that are not at 85% occupancy. For such counties, enter either zero or the deficit indicated in Step 9, whichever is greater.

Step 12: A need exists for single counties with a projected deficit of six or more hospice inpatient beds. The single county deficit is the number of beds needed.

Unless otherwise specified by the methodology, calculations do not use rounded values. However, fractional values are rounded automatically when displayed.

The former Table 13A, Hospice Data by County of Patient Origin – 2021 Data, is available on the Healthcare Planning website at:

<https://info.ncdhhs.gov/dhsr/ncsmfp/index.html>

or

<https://info.ncdhhs.gov/dhsr/mfp/publications.html#por>

Table 13A: Inventory of Licensed Hospice Agencies

A	B	C	D	E	F
County	License Number	Name	Admissions	Days of Care	Deaths
Alamance	HC0361	Hospice and Palliative Care Center of Alamance Caswell	1,002	78,310	976
Alamance	HOS1136	Hospice and Palliative Care of Alamance Caswell^	0	0	0
Alamance	HOS3049	Liberty Home Care and Hospice	33	3,781	15
Alamance	HOS3063	Community Home Care and Hospice	113	11,574	62
Alamance	HOS3823	Amedisys Hospice	579	46,048	332
Alexander	HOS5039	Alexander Hospice	64	5,150	60
Alleghany	HOS1123	Medi Home Health and Hospice	197	20,135	135
Anson	HC1869	Anson Community Hospice, Inc.	24	1,950	25
Anson	HOS1898	Hospice of Anson County	56	4,087	62
Anson	HOS3064	Liberty Home Care and Hospice	82	10,872	69
Ashe	HOS1124	Medi Home Health and Hospice	130	16,176	113
Avery	HOS0363	Medi Home Hospice	200	30,892	151
Beaufort	HOS2516	Community Home Care and Hospice	197	22,567	179
Beaufort	HOS3258	Cardinal Hospice Care^^^	0	0	0
Bladen	HOS0415	Lower Cape Fear and LifeCare	96	5,377	92
Bladen	HOS1945	Community Home Care and Hospice^^^	0	0	0
Bladen	HOS2003	Liberty Home Care and Hospice	6	419	5
Brunswick	HOS0414	Lower Cape Fear LifeCare	735	39,752	673
Brunswick	HOS2006	Liberty Home Care and Hospice	94	12,018	97
Brunswick	HOS3010	Community Home Care and Hospice	73	10,417	55
Brunswick	HOS4018	Amedisys Hospice Care	171	21,336	79
Buncombe	HOS0113	CarePartners Hospice & Palliative Care Services	1,915	71,236	1,315
Burke	HOS0364	Amorem	395	27,703	351
Burke	HOS1670	Amorem^	0	0	0
Cabarrus	HOS0365	Hospice and Palliative Care of Cabarrus County	486	55,038	530
Cabarrus	HOS3389	Hospice & Palliative Care of Cabarrus County	278	6,175	360
Caldwell	HOS0185	Amorem	846	75,192	799
Caldwell	HOS4155	Amorem^	0	0	0
Carteret	HOS0613	Carteret Health Care Home Health & Hospice	102	5,310	77
Carteret	HOS2998	Community Home Care and Hospice^^^	0	0	0
Carteret	HOS3048	Liberty Home Care and Hospice***	0	0	0
Carteret	HOS3239	Cardinal Hospice Care^^^	0	0	0
Carteret	HOS4623	SECU Crystal Coast Hospice House	229	3,434	232
Catawba	HOS0367	Carolina Caring, Inc.	1,456	150,139	1,226
Catawba	HOS3144	Catawba Valley Hospice House^	0	0	0
Catawba	HOS4445	Sherrills Ford Hospice House^	0	0	0
Chatham	HOS0370	UNC Hospice	201	11,774	156
Chatham	HOS3135	Transitions LifeCare	76	5,475	69
Chatham	HOS3149	Liberty Home Care and Hospice	60	5,298	46
Chatham	HOS4907	SECU Jim & Betsy Bryan Hospice Home of UNC Health Care	322	2,515	284
Cherokee	HOS5092	Hospice of North Carolina	74	4,920	59
Chowan	HOS3319	Cardinal Hospice Care^^^	0	0	0
Clay	HOS5091	Hospice of North Carolina	10	1,883	10

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Table 13A: Inventory of Licensed Hospice Agencies

A	B	C	D	E	F
County	License Number	Name	Admissions	Days of Care	Deaths
Cleveland	HOS0371	Hospice Cleveland County	762	57,760	706
Cleveland	HOS1413	Wendover Hospice House^	0	0	0
Cleveland	HOS4089	Testa Family Hospice House^	0	0	0
Columbus	HC4028	Community Home Care and Hospice^^	0	0	0
Columbus	HOS0417	Lower Cape Fear LifeCare	229	12,818	218
Columbus	HOS2007	Liberty Home Care and Hospice	145	20,046	121
Columbus	HOS3011	Community Home Care and Hospice	157	35,791	89
Craven	HOS2302	Community Hospice, LLC	191	21,536	151
Craven	HOS3238	Cardinal Hospice Care	36	3,630	30
Craven	HOS3347	PruittHealth Hospice - New Bern	100	7,146	88
Craven	HOS4682	Craven County Hospice	209	13,222	188
Cumberland	HC0359	HealthKeeperz	166	22,687	166
Cumberland	HC1331	Community Home Care and Hospice	232	17,413	203
Cumberland	HOS2004	Liberty Home Care and Hospice	113	8,100	96
Cumberland	HOS3272	Cardinal Hospice Care^^	0	0	0
Cumberland	HOS4746	PruittHealth Hospice - Fayetteville	165	23,129	140
Cumberland	HOS4799	Cape Fear Valley Hospice and Palliative Care	327	13,252	341
Cumberland	HOS5147	3HC	84	8,943	66
Cumberland	HOS5285	BAYADA Hospice	23	1,139	5
Dare	HC0494	Adoration Home Health and Hospice**	0	0	0
Davidson	HOS0372	Hospice of Davidson County, Inc.	690	49,846	674
Davidson	HOS3051	Liberty Home Care and Hospice	119	9,144	85
Davidson	HOS3784	Hospice of Davidson County	137	1,670	194
Davie	HOS3084	Trellis Supportive Care	377	24,610	359
Davie	HOS4966	Well Care Hospice, Inc.	105	8,180	69
Duplin	HC0053	Vidant Home Health and Hospice	134	7,226	116
Duplin	HOS3303	Liberty Home Care and Hospice	1	37	0
Durham	HOS0021	Duke Hospice	604	46,699	587
Durham	HOS2958	Community Home Care and Hospice^^	0	0	0
Durham	HOS3126	Transitions LifeCare	174	15,819	153
Durham	HOS3304	Liberty Home Care and Hospice	82	7,016	62
Durham	HOS3793	Duke Hospice	329	3,224	373
Durham	HOS4029	Community Home Care and Hospice^^	0	0	0
Edgecombe	HOS2985	Community Home Care and Hospice^^	0	0	0
Edgecombe	HOS4887	Kindred Hospice	147	18,091	140
Forsyth	HOS1603	Kate B. Reynolds Hospice Home	358	6,363	640
Forsyth	HOS4614	Trellis Supportive Care	1,088	83,681	982
Franklin	HOS3005	Community Home Care and Hospice^^	0	0	0
Franklin	HOS3125	Transitions LifeCare	113	6,001	100
Franklin	HOS3250	Cardinal Hospice Care^^	0	0	0
Franklin	HOS3826	Amedisys Hospice	434	41,290	290
Gaston	HC0812	Hospice of Gaston County, Inc.	1,015	49,797	841
Gaston	HOS3717	Robin Johnson House - Gaston Hospice	153	2,723	223

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Table 13A: Inventory of Licensed Hospice Agencies

A	B	C	D	E	F
County	License Number	Name	Admissions	Days of Care	Deaths
Graham	HOS3325	Cardinal Hospice Care^^^	0	0	0
Granville	HOS3133	Transitions LifeCare	28	995	23
Granville	HOS4791	Kindred Hospice	176	26,592	158
Greene	HOS3310	Cardinal Hospice Care^^^	0	0	0
Guilford	HC0374	Hospice and Palliative Care of Greensboro	1,188	83,013	1,098
Guilford	HOS1416	Hospice and Palliative Care of Greensboro-Beacon Place^	0	0	0
Guilford	HOS1581	Hospice of the Piedmont, Inc.	952	47,548	900
Guilford	HOS3148	Hospice and Palliative Care of Greensboro	438	66,807	374
Guilford	HOS3522	Hospice Home at High Point^	0	0	0
Halifax	HOS3009	Community Home Care and Hospice	280	20,738	236
Halifax	HOS3256	Cardinal Hospice Care^^^	0	0	0
Halifax	HOS5184	Liberty Home Care VI, LLC	86	3,922	75
Harnett	HC4032	Community Home Care and Hospice^^^	0	0	0
Harnett	HOS0375	Transitions LifeCare	86	4,776	75
Harnett	HOS2048	Community Home Care and Hospice	135	16,441	117
Harnett	HOS3067	Liberty Home Care and Hospice	141	11,062	107
Harnett	HOS3306	Cardinal Hospice Care^^^	0	0	0
Haywood	HOS3825	Haywood Hospice & Palliative Care	236	8,927	211
Henderson	HOS0386	Four Seasons Compassion for Life	1,585	125,564	1,270
Henderson	HOS2143	Four Seasons Compassion for Life	225	3,511	403
Hertford	HOS0425	Vidant Home Health and Hospice	41	2,577	38
Hoke	HOS2290	Liberty Home Care and Hospice	68	6,066	59
Hyde	HOS6244	Liberty Home Care and Hospice†	0	0	0
Iredell	HOS0387	Hospice of Iredell County, Inc.	479	54,113	309
Iredell	HOS1338	Hospice of Iredell County, Inc.	198	22,899	166
Iredell	HOS3181	Gordon Hospice House	331	4,273	456
Iredell	HOS3273	Community Home Care and Hospice	87	12,096	78
Iredell	HOS6247	Hospice and Palliative Care of Iredell County†	0	0	0
Jackson	HOS4650	Harris Palliative Care and Hospice	88	3,507	70
Johnston	HC0383	Johnston Health Home Care and Hospice	63	1,641	56
Johnston	HC0507	3HC	123	12,507	95
Johnston	HC3440	Community Home Care and Hospice***	0	0	0
Johnston	HOS2135	Community Home Care and Hospice	112	10,421	86
Johnston	HOS3069	Liberty Home Care and Hospice	73	6,009	45
Johnston	HOS3124	Transitions LifeCare	136	7,070	114
Johnston	HOS3252	Cardinal Hospice Care	31	2,908	29
Johnston	HOS4088	SECU Hospice House of Johnston Health	264	4,348	258
Jones	HC0506	3HC	197	22,091	155
Lee	HOS2034	Community Home Care and Hospice	108	19,212	90
Lee	HOS3086	Liberty Home Care and Hospice	121	7,935	104
Lenoir	HC0195	3HC	64	5,450	59
Lenoir	HOS2984	Community Home Care and Hospice	202	22,529	191
Lenoir	HOS3261	Cardinal Hospice Care	45	4,911	37

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Table 13A: Inventory of Licensed Hospice Agencies

A	B	C	D	E	F
County	License Number	Name	Admissions	Days of Care	Deaths
Lincoln	HOS0389	Hospice & Palliative Care Lincoln County	580	56,153	531
Macon	HC0324	CarePartners Home Care & Hospice	133	4,796	97
Macon	HOS0390	Four Seasons Compassion for Life	538	36,204	473
Macon	HOS3312	Cardinal Hospice Care^^^	0	0	0
Madison	HC0419	Madison Home Care & Hospice	24	3,076	16
Martin	HOS3008	Community Home Care & Hospice	235	19,386	205
Martin	HOS3317	Cardinal Hospice Care^^^	0	0	0
McDowell	HOS1153	CarePartners Hospice & Palliative Care McDowell	348	23,909	203
Mecklenburg	H0010	Novant Health Presbyterian Medical Center	612	2,092	481
Mecklenburg	H0270	Novant Health Matthews Medical Center	221	799	190
Mecklenburg	HOS1445	Novant Health Hospice	1,750	61,368	1,669
Mecklenburg	HOS1702	Hospice & Palliative Care Lake Norman	479	41,602	439
Mecklenburg	HOS3132	Hospice & Palliative Care Charlotte Region	1,947	191,618	1,746
Mecklenburg	HOS3727	Levine & Dickson Hospice House^	0	0	0
Mecklenburg	HOS4436	Hospice & Palliative Care Charlotte Region	372	5,957	349
Mecklenburg	HOS4588	Levine & Dickson Hospice House at Southminster^	0	0	0
Mecklenburg	HOS4933	East Mecklenburg Inpatient Unit at Aldersgate^	0	0	0
Mitchell	HOS0832	Hospice & Palliative Care of the Blue Ridge, Inc.	278	40,093	225
Montgomery	HOS3199	Community Home Care and Hospice	199	22,955	167
Moore	HC0427	FirstHealth Hospice & Palliative Care	593	80,565	449
Moore	HC2351	Community Home Care and Hospice^^^	0	0	0
Moore	HOS3050	Liberty Home Care and Hospice	130	13,239	99
Moore	HOS4477	FirstHealth Hospice House	326	2,760	402
Nash	HC0393	Hospice and Palliative Care of Nash General Hospital	278	17,161	247
Nash	HOS2424	Community Home Care and Hospice	129	11,639	122
Nash	HOS3269	PruittHealth Hospice - Rocky Mount	116	11,669	95
Nash	HOS3309	Cardinal Hospice Care^^^	0	0	0
New Hanover	HOS0416	Lower Cape Fear and LifeCare	1,103	51,885	1,045
New Hanover	HOS1557	Lower Cape Fear LifeCare^	0	0	0
New Hanover	HOS2008	Liberty Home Care and Hospice	96	11,929	68
New Hanover	HOS3322	Cardinal Hospice Care^^^	0	0	0
Northampton	HOS3259	Cardinal Hospice Care^^^	0	0	0
Onslow	HC1209	Cardinal Hospice Care	84	6,641	71
Onslow	HOS2005	Liberty Home Care and Hospice***	0	0	0
Onslow	HOS3006	Community Home Care and Hospice	328	34,161	289
Onslow	HOS5831	Lower Cape Fear Lifecare	247	10,663	233
Orange	HOS1388	Duke Hospice at the Meadowlands***	0	0	0
Orange	HOS2997	Community Home Care and Hospice^^^	0	0	0
Orange	HOS3293	UNC Hospice, Chapel Hill	307	20,650	261
Pamlico	HOS0394	Hospice of Pamlico County, Inc.	56	2,404	48
Pamlico	HOS3308	Cardinal Hospice Care^^^	0	0	0
Pasquotank	HOS1677	Albemarle Home Care and Hospice	363	19,894	342
Pasquotank	HOS3301	Community Home Care and Hospice	212	15,734	212

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Table 13A: Inventory of Licensed Hospice Agencies

A	B	C	D	E	F
County	License Number	Name	Admissions	Days of Care	Deaths
Pender	HOS3052	Lower Cape Fear and LifeCare	344	15,018	315
Pender	HOS3059	Liberty Home Care and Hospice	17	2,706	19
Pender	HOS3242	Cardinal Hospice Care^^^	0	0	0
Person	HOS5439	Medi Home Health & Hospice	129	10,145	103
Pitt	HC0509	3HC	77	7,475	55
Pitt	HOS0331	Amedisys Hospice	210	13,093	148
Pitt	HOS1711	Vidant Home Health and Hospice	358	9,986	326
Pitt	HOS2996	Community Home Care and Hospice	235	27,658	199
Pitt	HOS3249	Cardinal Hospice Care^^^	0	0	0
Pitt	HOS3345	PruittHealth Hospice - Eastern Carolina	76	4,350	58
Pitt	HOS3749	Vidant Home Health and Hospice	284	1,426	275
Pitt	HOS4010	Community Home Care and Hospice^^^	0	0	0
Polk	HOS0396	Hospice of the Carolina Foothills	84	7,279	79
Randolph	HOS3075	Community Home Care and Hospice	124	20,197	89
Randolph	HOS4307	The Randolph Hospice House^	0	0	0
Randolph	HOS4736	Hospice of Randolph County	680	42,239	699
Richmond	HC0424	Richmond County Hospice, Inc.	186	23,008	73
Richmond	HOS2138	Hospice Haven of Richmond County	300	1,849	173
Richmond	HOS3007	Community Home Care and Hospice	129	25,793	88
Richmond	HOS3324	Cardinal Hospice Care^^^	0	0	0
Robeson	H0064	Southeastern Regional Medical Center	145	663	93
Robeson	HC4027	Amedisys Hospice Care	303	37,606	182
Robeson	HOS1599	Southeastern Hospice	88	2,267	76
Robeson	HOS2060	Community Home Care and Hospice	167	33,838	132
Robeson	HOS2861	Medi Home Hospice	80	12,543	64
Robeson	HOS3066	Liberty Home Care and Hospice	110	5,703	88
Robeson	HOS3270	Cardinal Hospice Care^^^	0	0	0
Rockingham	HOS0398	Hospice of Rockingham County	560	29,396	517
Rowan	HOS2425	Trellis Supportive Care	143	9,761	100
Rowan	HOS3323	Continuum Home Care & Hospice of Rowan County^^^	0	0	0
Rowan	HOS3918	Novant Health Hospice^^	0	0	0
Rowan	HOS4599	Novant Health Hospice	751	22,186	716
Rutherford	HOS0400	Hospice of the Carolina Foothills	488	50,994	341
Rutherford	HOS2891	Hospice of the Carolina Foothills^	0	0	0
Sampson	HC0255	3HC	118	11,135	98
Sampson	HC1844	Community Home Care and Hospice	116	15,026	86
Sampson	HC4030	Community Home Care and Hospice^^^	0	0	0
Sampson	HOS3054	Liberty Home Care and Hospice	103	6,141	98
Scotland	HOS3031	Scotland Regional Hospice	322	20,540	310
Stanly	HOS0402	Hospice of Stanly County, Inc.	220	17,664	176
Stanly	HOS3311	Cardinal Hospice Care^^^	0	0	0
Stokes	HOS3295	Trellis Supportive Care	337	24,975	312
Surry	HOS0404	Mountain Valley Hospice and Palliative Care	333	34,179	303

Table 13A: Inventory of Licensed Hospice Agencies

A	B	C	D	E	F
County	License Number	Name	Admissions	Days of Care	Deaths
Surry	HOS1001	Mountain Valley Hospice and Palliative Care	285	20,497	246
Surry	HOS1303	Mountain Valley Hospice and Palliative Care	310	25,240	262
Surry	HOS3796	Mountain Valley Hospice and Palliative Care	298	5,081	290
Transylvania	HC0067	CarePartners Home Care & Hospice	234	10,845	173
Union	HOS0405	Hospice of Union County	507	42,764	621
Union	HOS3116	Community Home Care and Hospice	301	43,373	249
Union	HOS3321	Cardinal Hospice Care^^^	0	0	0
Vance	HOS2561	Community Home Care and Hospice	228	12,963	172
Vance	HOS3314	Cardinal Hospice Care^^^	0	0	0
Wake	HOS1595	Transitions LifeCare	2,566	173,604	2,359
Wake	HOS2125	Duke Hospice	125	8,877	111
Wake	HOS2223	Community Home Care & Hospice	70	8,527	44
Wake	HOS2281	Promedica Hospice - Raleigh	912	156,580	884
Wake	HOS3058	Liberty Home Care and Hospice	91	8,945	66
Wake	HOS3147	Amedisys Hospice	530	39,587	316
Wake	HOS3305	Cardinal Hospice Care^^^	0	0	0
Washington	HOS3260	Cardinal Hospice Care^^^	0	0	0
Washington	HOS4596	Amedisys Hospice Care	271	23,163	192
Watauga	HOS1122	Medi Home Health and Hospice	153	26,290	127
Wayne	HC0228	3HC	604	21,371	582
Wayne	HC2361	Community Home Care and Hospice	228	31,801	188
Wayne	HOS1324	3HC/Kitty Askins Hospice Center^	0	0	0
Wayne	HOS3307	Cardinal Hospice Care^^^	0	0	0
Wilkes	HOS0407	Wake Forest Baptist Health Care at Home, Hospice-Wilkes	212	19,638	189
Wilkes	HOS3257	Cardinal Hospice Care^^^	0	0	0
Wilkes	HOS4413	PruittHealth Hospice - Wilkes	126	15,899	99
Wilson	HC0508	3HC	129	9,986	111
Wilson	HOS0408	Hospice of Wilson Medical Center	142	4,926	135
Wilson	HOS2241	Community Home Care and Hospice	200	17,993	175
Wilson	HOS3271	Cardinal Hospice Care^^^	0	0	0
Yadkin	HC1498	Mountain Valley Hospice and Palliative Care	259	17,749	205
Yadkin	HOS4909	Mountain Valley Hospice and Palliative Care	71	1,421	66
Yancey	HOS1027	Compassionate Care Western North Carolina	167	22,020	127
Grand Totals*		248 Agencies	56,408	4,204,422	49,886

* Grand Totals for Admissions, Days of Care, and Deaths include both in-state and out-of-state patients. Tables 13B and 13C do not include out-of-state patients.

** Agency underwent a change of ownership and utilization data was not reported.

*** Agency reported zero patients on their License Renewal Application (LRA) for the current reporting year.

^ Inpatient/residential facility; patient data reported on the agency's hospice home care LRA.

^^ Agency uses another license to serve patients and reports data on that LRA.

^^^ Legacy agency, maintains license for future development; currently serves no patients.

† Newly licensed agency; no data reported.

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Table13B: Year 2024 Hospice Home Care Office Need Projections

A	B	C	D	E	F	G	H	I	J	K	L	M	N
County	2016-2020 Death Rate/1000 Population	2024 Population (excluding military)	Projected 2024 Deaths	2021 Reported Number of Hospice Patient Deaths	2024 Number of Hospice Deaths Served at Two Year Trailing Average Growth Rate	2024 Number of Hospice Deaths Served Limited to 60%	Projected 2024 Number of Hospice Deaths Served	Median Projected 2024 Hospice Deaths	Place-holders for New Hospice Office	Projected Number of Additional Patients in Need Surplus (Deficit)	Licensed Hospice Offices in County	Licensed Home Care Offices in County per 100,000	Additional Hospice Office Need
Source or Formula =>	Deaths - N.C. Vital Statistics	N.C. Office of State Budget and Management	Col. B x (Col. C/1,000)	2022 License Renewal Applications	Col. E x 3 Years Growth at 5.6% annually	Col. D x 60%	Lower Number of Deaths between Col. F and Col. G	Col. D x Projected Statewide Median Percent Deaths Served (41.2%)		Col. H + Col. J - Col. I	Table 13A: Inventory of Licensed Hospice Agencies	Col. L / (Col. C / 100,000)	If Col. M <=3 and Col. K <= -90
Alamance	10.7	178,956	1,915	906	1,066	1,149	1,066	788	0	278	5	2.8	0
Alexander	11.4	35,863	409	219	258	245	245	168	0	77	1	2.8	0
Alleghany	13.5	10,812	146	79	93	88	88	60	0	27	1	9.2	0
Anson	13.0	21,701	282	110	129	169	129	116	0	13	3	13.8	0
Ashe	13.0	26,226	341	152	179	205	179	140	0	38	1	3.8	0
Avery	12.6	17,757	224	143	168	134	134	92	0	42	1	5.6	0
Beaufort	13.2	43,085	569	273	321	341	321	234	0	87	2	4.6	0
Bertie	13.6	17,138	233	75	88	140	88	96	0	-8	0	0.0	0
Bladen	13.0	27,183	353	178	209	212	209	146	0	64	3	11.0	0
Brunswick	11.4	150,143	1,712	842	991	1,027	991	705	0	286	4	2.7	0
Buncombe	10.6	282,097	2,990	1,932	2,273	1,794	1,794	1,231	0	563	1	0.4	0
Burke	12.0	86,386	1,037	399	469	622	469	427	0	43	2	2.3	0
Cabarrus	7.8	245,556	1,915	1,009	1,187	1,149	1,149	789	0	361	2	0.8	0
Caldwell	12.5	79,755	997	582	685	598	598	410	0	188	2	2.5	0
Camden	8.9	10,719	95	26	31	57	31	39	0	-9	0	0.0	0
Carteret *	12.5	66,782	835	478	562	501	501	344	0	157	5	7.5	0
Caswell	13.1	22,350	293	104	122	176	122	121	0	2	0	0.0	0
Catawba	11.1	165,619	1,838	1,104	1,299	1,103	1,103	757	0	346	3	1.8	0
Chatham	10.3	81,543	840	363	427	504	427	346	0	81	4	4.9	0
Cherokee	14.0	29,502	413	138	162	248	162	170	0	-8	1	3.4	0
Chowan	14.5	13,615	197	70	82	118	82	81	0	1	1	7.3	0
Clay	14.0	11,450	160	50	59	96	59	66	0	-7	1	8.7	0
Cleveland	13.2	102,496	1,353	661	778	812	778	557	0	221	3	2.9	0
Columbus	13.5	46,587	629	349	411	377	377	259	0	118	4	8.6	0
Craven *	11.5	93,274	1,073	469	552	644	552	442	0	110	4	4.3	0
Cumberland *	8.1	304,628	2,467	978	1,151	1,480	1,151	1,016	109	244	8	2.6	0

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Table13B: Year 2024 Hospice Home Care Office Need Projections

A	B	C	D	E	F	G	H	I	J	K	L	M	N
County	2016-2020 Death Rate/1000 Population	2024 Population (excluding military)	Projected 2024 Deaths	2021 Reported Number of Hospice Patient Deaths	2024 Number of Hospice Deaths Served at Two Year Trailing Average Growth Rate	2024 Number of Hospice Deaths Served Limited to 60%	Projected 2024 Number of Hospice Deaths Served	Median Projected 2024 Hospice Deaths	Place-holders for New Hospice Office	Projected Number of Additional Patients in Need Surplus (Deficit)	Licensed Hospice Offices in County	Licensed Home Care Offices in County per 100,000	Additional Hospice Office Need
Source or Formula =>	Deaths - N.C. Vital Statistics	N.C. Office of State Budget and Management	Col. B x (Col. C/1,000)	2022 License Renewal Applications	Col. E x 3 Years Growth at 5.6% annually	Col. D x 60%	Lower Number of Deaths between Col. F and Col. G	Col. D x Projected Statewide Median Percent Deaths Served (41.2%)		Col. H + Col. J - Col. I	Table 13A: Inventory of Licensed Hospice Agencies	Col. L / (Col. C / 100,000)	If Col. M <=3 and Col. K <= -90
Currituck	9.0	32,320	291	136	160	175	160	120	0	40	0	0.0	0
Dare	10.2	38,537	393	100	118	236	118	162	0	-44	1	2.6	0
Davidson	11.5	173,422	1,994	1,106	1,301	1,197	1,197	821	0	375	3	1.7	0
Davie	11.5	44,687	514	327	385	308	308	212	0	97	2	4.5	0
Duplin	9.7	43,843	425	278	327	255	255	175	0	80	2	4.6	0
Durham	6.8	344,148	2,340	1,203	1,416	1,404	1,404	964	0	441	6	1.7	0
Edgecombe	13.8	46,506	642	271	319	385	319	264	0	55	2	4.3	0
Forsyth *	9.5	394,167	3,745	2,119	2,493	2,247	2,247	1,542	0	705	2	0.5	0
Franklin	9.5	75,322	716	264	311	429	311	295	0	16	4	5.3	0
Gaston	11.1	234,703	2,605	1,445	1,700	1,563	1,563	1,073	0	490	2	0.9	0
Gates	11.8	9,750	115	49	58	69	58	47	0	10	0	0.0	0
Graham	13.5	7,905	107	29	34	64	34	44	0	-10	1	12.7	0
Granville	9.9	63,446	628	216	254	377	254	259	0	-4	2	3.2	0
Greene	10.3	20,351	210	99	116	126	116	86	0	30	1	4.9	0
Guilford *	8.8	563,191	4,956	2,386	2,808	2,974	2,808	2,041	0	767	5	0.9	0
Halifax	14.0	46,517	651	256	301	391	301	268	0	33	3	6.4	0
Harnett *	8.0	135,553	1,084	423	498	651	498	447	0	51	5	3.7	0
Haywood	13.7	63,559	871	337	397	522	397	359	0	38	1	1.6	0
Henderson	12.4	121,151	1,502	855	1,006	901	901	619	0	283	2	1.7	0
Hertford	12.4	18,684	232	95	112	139	112	95	0	16	1	5.4	0
Hoke *	7.0	51,360	360	131	154	216	154	148	0	6	1	1.9	0
Hyde	12.9	4,305	56	12	14	33	14	23	0	-9	1	23.2	0
Iredell	9.2	202,512	1,863	924	1,087	1,118	1,087	767	0	320	5	2.5	0
Jackson	9.6	43,457	417	133	156	250	156	172	0	-15	1	2.3	0
Johnston	7.8	241,433	1,883	670	788	1,130	788	775	0	13	8	3.3	0
Jones	13.9	8,586	119	34	40	72	40	49	0	-9	1	11.6	0

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Table13B: Year 2024 Hospice Home Care Office Need Projections

A	B	C	D	E	F	G	H	I	J	K	L	M	N
County	2016-2020 Death Rate/1000 Population	2024 Population (excluding military)	Projected 2024 Deaths	2021 Reported Number of Hospice Patient Deaths	2024 Number of Hospice Deaths Served at Two Year Trailing Average Growth Rate	2024 Number of Hospice Deaths Served Limited to 60%	Projected 2024 Number of Hospice Deaths Served	Median Projected 2024 Hospice Deaths	Place-holders for New Hospice Office	Projected Number of Additional Patients in Need Surplus (Deficit)	Licensed Hospice Offices in County	Licensed Home Care Offices in County per 100,000	Additional Hospice Office Need
Source or Formula =>	Deaths - N.C. Vital Statistics	N.C. Office of State Budget and Management	Col. B x (Col. C/1,000)	2022 License Renewal Applications	Col. E x 3 Years Growth at 5.6% annually	Col. D x 60%	Lower Number of Deaths between Col. F and Col. G	Col. D x Projected Statewide Median Percent Deaths Served (41.2%)		Col. H + Col. J - Col. I	Table 13A: Inventory of Licensed Hospice Agencies	Col. L / (Col. C / 100,000)	If Col. M <=3 and Col. K <= -90
Lee	10.3	66,795	688	331	389	413	389	283	0	106	2	3.0	0
Lenoir	13.6	54,259	738	261	307	443	307	304	0	3	3	5.5	0
Lincoln	10.2	90,647	925	338	398	555	398	381	0	17	1	1.1	0
Macon	14.0	38,575	540	266	313	324	313	222	0	91	3	7.8	0
Madison	12.4	21,400	265	77	91	159	91	109	0	-19	1	4.7	0
Martin	14.7	21,157	311	117	138	187	138	128	0	10	2	9.5	0
Mcdowell	12.3	44,208	544	206	242	326	242	224	0	19	1	2.3	0
Mecklenburg *	6.0	1,201,200	7,207	4,121	4,849	4,324	4,324	2,968	0	1,357	9	0.7	0
Mitchell	15.6	14,705	229	163	192	138	138	94	0	43	1	6.8	0
Montgomery	12.0	25,709	309	131	154	185	154	127	0	27	1	3.9	0
Moore *	11.9	103,839	1,236	715	841	741	741	509	0	233	4	3.9	0
Nash	12.0	95,596	1,147	441	519	688	519	472	0	47	4	4.2	0
New Hanover *	9.0	236,087	2,125	1,134	1,334	1,275	1,275	875	0	400	4	1.7	0
Northampton	14.5	16,129	234	89	105	140	105	96	0	8	1	6.2	0
Onslow *	6.4	175,083	1,121	547	644	672	644	461	0	182	4	2.3	0
Orange	5.8	154,667	897	508	598	538	538	369	0	169	3	1.9	0
Pamlico	14.1	11,863	167	58	68	100	68	69	0	-1	2	16.9	0
Pasquotank *	11.4	40,469	461	231	272	277	272	190	0	82	2	4.9	0
Pender	10.0	64,002	640	318	374	384	374	264	0	111	3	4.7	0
Perquimans	13.2	12,638	167	62	73	100	73	69	0	4	0	0.0	0
Person	11.9	39,089	465	177	208	279	208	192	0	17	1	2.6	0
Pitt *	7.7	170,957	1,316	685	806	790	790	542	0	248	8	4.7	0
Polk	15.0	18,586	279	137	161	167	161	115	0	46	1	5.4	0
Randolph	11.5	146,718	1,687	828	974	1,012	974	695	0	280	3	2.0	0
Richmond	13.2	41,885	553	320	377	332	332	228	0	104	4	9.5	0
Robeson	11.5	108,704	1,250	630	741	750	741	515	0	227	7	6.4	0

Proposed 2023 SMFP

Table13B: Year 2024 Hospice Home Care Office Need Projections

A	B	C	D	E	F	G	H	I	J	K	L	M	N
County	2016-2020 Death Rate/1000 Population	2024 Population (excluding military)	Projected 2024 Deaths	2021 Reported Number of Hospice Patient Deaths	2024 Number of Hospice Deaths Served at Two Year Trailing Average Growth Rate	2024 Number of Hospice Deaths Served Limited to 60%	Projected 2024 Number of Hospice Deaths Served	Median Projected 2024 Hospice Deaths	Place-holders for New Hospice Office	Projected Number of Additional Patients in Need Surplus (Deficit)	Licensed Hospice Offices in County	Licensed Home Care Offices in County per 100,000	Additional Hospice Office Need
Source or Formula =>	Deaths - N.C. Vital Statistics	N.C. Office of State Budget and Management	Col. B x (Col. C/1,000)	2022 License Renewal Applications	Col. E x 3 Years Growth at 5.6% annually	Col. D x 60%	Lower Number of Deaths between Col. F and Col. G	Col. D x Projected Statewide Median Percent Deaths Served (41.2%)		Col. H + Col. J - Col. I	Table 13A: Inventory of Licensed Hospice Agencies	Col. L / (Col. C / 100,000)	If Col. M <=3 and Col. K <= -90
Rockingham	13.6	91,110	1,239	586	690	743	690	510	0	179	1	1.1	0
Rowan	12.2	149,662	1,826	840	988	1,096	988	752	90	327	4	2.7	0
Rutherford	13.5	64,482	871	288	339	522	339	358	0	-20	2	3.1	0
Sampson	11.4	57,268	653	189	222	392	222	269	0	-46	4	7.0	0
Scotland	12.8	32,510	416	270	318	250	250	171	0	78	1	3.1	0
Stanly	12.1	62,493	756	352	414	454	414	311	0	103	2	3.2	0
Stokes	13.0	44,219	575	357	420	345	345	237	0	108	1	2.3	0
Surry	13.8	71,088	981	627	738	589	589	404	0	185	4	5.6	0
Swain	15.0	14,078	211	118	139	127	127	87	0	40	0	0.0	0
Transylvania	12.9	33,130	427	237	279	256	256	176	0	80	1	3.0	0
Tyrrell	11.6	3,020	35	14	16	21	16	14	0	2	0	0.0	0
Union	6.5	257,454	1,673	1,182	1,391	1,004	1,004	689	0	315	3	1.2	0
Vance	12.7	41,530	527	174	205	316	205	217	0	-12	2	4.8	0
Wake *	5.5	1,229,328	6,761	3,524	4,147	4,057	4,057	2,784	0	1,273	7	0.6	0
Warren	13.7	17,717	243	75	88	146	88	100	0	-12	0	0.0	0
Washington	14.5	10,369	150	72	85	90	85	62	0	23	2	19.3	0
Watauga	6.7	56,756	380	270	318	228	228	157	0	72	1	1.8	0
Wayne *	11.0	111,479	1,226	814	958	736	736	505	0	231	4	3.6	0
Wilkes	12.8	64,342	824	413	486	494	486	339	0	147	3	4.7	0
Wilson	11.6	78,110	906	424	499	544	499	373	0	126	4	5.1	0
Yadkin	12.4	36,982	459	218	257	275	257	189	0	68	2	5.4	0
Yancey	13.5	18,842	254	138	162	153	153	105	0	48	1	5.3	0
Grand Totals	9.3	10,761,574	100,083	49,660	58,433	60,050	58,433	41,208	199	17,424	248	2.3	0

* Population projections were adjusted to exclude active duty military personnel.

Table 13C: Year 2026 Hospice Inpatient Bed Need Projections

A	B	C	D	E	F	G	H	I	J	K	L	M	N	O
County	Total Admissions (2021 Data)	Total Days of Care (2021 Data)	ALOS per Admission	Total 2026 Admissions	2026 Days of Care at County ALOS	2026 Days of Care at Statewide ALOS	Projected 2026 Days of Care for Inpatient Estimates	Projected Inpatient Days	Projected Total Inpatient Beds	Currently Licensed Beds	CON Approved/ License Pending/ Previous Need Determination	Surplus (-) Deficit (+)	Occupancy Rate	Inpatient Bed Need
Source or Formula =>	2022 License Renewal Applications	2022 License Renewal Applications	Col. C / Col. B	Col. B x 5 Years Growth at 4.7% annually	Col. D x Col. E	Col E. x Statewide Median ALOS per Admission (75.0)	Lower # of Days of Care between Col. F and Col. G	Col. H x 2.32%	(Col. I / 365.25) / 85%	Licensure Inventory		Col. J - (Col. K + Col. L)	2022 License Renewal Applications	If Col. M >= 6 and Col. N >= 85 or blank
Alamance	1,058	85,564	80.87	1,331	107,630	99,832	99,832	2,321	7	14	0	-6.52	20.98%	0
Alexander	238	20,161	84.71	299	25,360	22,457	22,457	522	2		0	1.68		0
Alleghany	106	11,482	108.32	133	14,443	10,002	10,002	233	1		0	0.75		0
Anson	121	12,706	105.01	152	15,983	11,417	11,417	265	1		0	0.85		0
Ashe	172	20,673	120.19	216	26,004	16,230	16,230	377	1		0	1.22		0
Avery	162	23,047	142.27	204	28,991	15,286	15,286	355	1		0	1.14		0
Beaufort	306	22,571	73.76	385	28,392	28,874	28,392	660	2		0	2.13		0
Bertie	91	7,234	79.49	114	9,100	8,587	8,587	200	1		0	0.64		0
Bladen	210	28,114	133.88	264	35,364	19,815	19,815	461	1		0	1.48		0
Brunswick	956	68,198	71.34	1,203	85,786	90,207	85,786	1,994	6	7	0	-0.58	64.27%	0
Buncombe	2,610	139,812	53.57	3,283	175,868	246,277	175,868	4,089	13	25	0	-11.83	43.74%	0
Burke	469	37,695	80.37	590	47,416	44,254	44,254	1,029	3	11	0	-7.69	24.88%	0
Cabarrus	951	78,264	82.30	1,196	98,448	89,735	89,735	2,086	7	14	0	-7.28	24.52%	0
Caldwell	627	58,536	93.36	789	73,632	59,163	59,163	1,375	4	12	0	-7.57	55.66%	0
Camden	27	1,358	50.30	34	1,708	2,548	1,708	40	0		0	0.13		0
Carteret	549	35,819	65.24	691	45,056	51,803	45,056	1,048	3	6	0	-2.63	78.45%	0
Caswell	113	8,490	75.13	142	10,679	10,663	10,663	248	1		0	0.80		0
Catawba	1,238	111,200	89.82	1,557	139,878	116,816	116,816	2,716	9	17	0	-8.25	49.52%	0
Chatham	429	35,414	82.55	540	44,547	40,480	40,480	941	3	6	0	-2.97	62.05%	0
Cherokee	164	11,647	71.02	206	14,651	15,475	14,651	341	1		0	1.10		0
Chowan	93	8,444	90.80	117	10,622	8,775	8,775	204	1		0	0.66		0
Clay	56	5,802	103.61	70	7,298	5,284	5,284	123	0		0	0.40		0
Cleveland	707	54,052	76.45	889	67,992	66,712	66,712	1,551	5	10	0	-5.00	39.48%	0
Columbus	438	48,002	109.59	551	60,381	41,329	41,329	961	3	6	0	-2.91	38.95%	0
Craven	548	44,886	81.91	689	56,462	51,709	51,709	1,202	4		0	3.87		0
Cumberland	1,119	89,092	79.62	1,408	112,068	105,588	105,588	2,455	8	0	0	7.91		8

Table 13C: Year 2026 Hospice Inpatient Bed Need Projections

A	B	C	D	E	F	G	H	I	J	K	L	M	N	O
County	Total Admissions (2021 Data)	Total Days of Care (2021 Data)	ALOS per Admission	Total 2026 Admissions	2026 Days of Care at County ALOS	2026 Days of Care at Statewide ALOS	Projected 2026 Days of Care for Inpatient Estimates	Projected Inpatient Days	Projected Total Inpatient Beds	Currently Licensed Beds	CON Approved/ License Pending/ Previous Need Determination	Surplus (-) Deficit (+)	Occupancy Rate	Inpatient Bed Need
Source or Formula =>	2022 License Renewal Applications	2022 License Renewal Applications	Col. C / Col. B	Col. B x 5 Years Growth at 4.7% annually	Col. D x Col. E	Col E. x Statewide Median ALOS per Admission (75.0)	Lower # of Days of Care between Col. F and Col. G	Col. H x 2.32%	(Col. I / 365.25) / 85%	Licensure Inventory		Col. J - (Col. K + Col. L)	2022 License Renewal Applications	If Col. M >= 6 and Col. N >= 85 or blank
Currituck	152	7,684	50.55	191	9,666	14,343	9,666	225	1		0	0.72		0
Dare	112	5,183	46.28	141	6,520	10,568	6,520	152	0		0	0.49		0
Davidson	1,130	72,946	64.55	1,421	91,758	106,626	91,758	2,133	7	8	0	-1.13	49.14%	0
Davie	308	20,610	66.92	387	25,925	29,063	25,925	603	2		0	1.94		0
Duplin	312	23,410	75.03	392	29,447	29,440	29,440	684	2		0	2.20		0
Durham	1,338	99,150	74.10	1,683	124,720	126,252	124,720	2,900	9	12	0	-2.66	73.61%	0
Edgecombe	283	24,445	86.38	356	30,749	26,704	26,704	621	2		0	2.00		0
Forsyth	2,191	152,372	69.54	2,756	191,667	206,740	191,667	4,456	14	30	0	-15.65	34.37%	0
Franklin	296	28,173	95.18	372	35,439	27,930	27,930	649	2		0	2.09		0
Gaston	1,602	96,857	60.46	2,015	121,836	151,163	121,836	2,833	9	13	0	-3.88	0.00%	0
Gates	55	4,117	74.85	69	5,179	5,190	5,179	120	0		0	0.39		0
Graham	34	1,439	42.32	43	1,810	3,208	1,810	42	0		0	0.14		0
Granville	248	23,941	96.54	312	30,115	23,401	23,401	544	2		0	1.75		0
Greene	109	7,927	72.72	137	9,971	10,285	9,971	232	1		0	0.75		0
Guilford	2,648	212,422	80.22	3,331	267,204	249,862	249,862	5,809	19	26	0	-7.29	47.06%	0
Halifax	295	19,153	64.93	371	24,092	27,836	24,092	560	2		0	1.80		0
Harnett	505	45,998	91.09	635	57,860	47,651	47,651	1,108	4		0	3.57		0
Haywood	422	21,706	51.44	531	27,304	39,819	27,304	635	2		0	2.04		0
Henderson	933	51,592	55.30	1,174	64,897	88,037	64,897	1,509	5	19	0	-14.14	36.08%	0
Hertford	112	7,298	65.16	141	9,180	10,568	9,180	213	1		0	0.69		0
Hoke	160	12,970	81.06	201	16,315	15,097	15,097	351	1		0	1.13		0
Hyde	15	2,295	153.00	19	2,887	1,415	1,415	33	0	0	0	0.11		0
Iredell	1,013	81,878	80.83	1,274	102,994	95,586	95,586	2,222	7	15	0	-7.84	83.20%	0
Jackson	158	9,934	62.87	199	12,496	14,909	12,496	291	1		0	0.94		0
Johnston	784	48,115	61.37	986	60,523	73,977	60,523	1,407	5	12	0	-7.47	8.56%	0
Jones	39	4,217	108.13	49	5,305	3,680	3,680	86	0		0	0.28		0

Table 13C: Year 2026 Hospice Inpatient Bed Need Projections

A	B	C	D	E	F	G	H	I	J	K	L	M	N	O
County	Total Admissions (2021 Data)	Total Days of Care (2021 Data)	ALOS per Admission	Total 2026 Admissions	2026 Days of Care at County ALOS	2026 Days of Care at Statewide ALOS	Projected 2026 Days of Care for Inpatient Estimates	Projected Inpatient Days	Projected Total Inpatient Beds	Currently Licensed Beds	CON Approved/ License Pending/ Previous Need Determination	Surplus (-) Deficit (+)	Occupancy Rate	Inpatient Bed Need
Source or Formula =>	2022 License Renewal Applications	2022 License Renewal Applications	Col. C / Col. B	Col. B x 5 Years Growth at 4.7% annually	Col. D x Col. E	Col E. x Statewide Median ALOS per Admission (75.0)	Lower # of Days of Care between Col. F and Col. G	Col. H x 2.32%	(Col. I / 365.25) / 85%	Licensure Inventory		Col. J - (Col. K + Col. L)	2022 License Renewal Applications	If Col. M >= 6 and Col. N >= 85 or blank
Lee	409	27,272	66.68	514	34,305	38,593	34,305	798	3		0	2.57		0
Lenoir	293	26,699	91.12	369	33,584	27,647	27,647	643	2		0	2.07		0
Lincoln	391	33,628	86.01	492	42,300	36,894	36,894	858	3		0	2.76		0
Macon	319	16,501	51.73	401	20,756	30,100	20,756	483	2	0	6	-4.45		0
Madison	106	9,000	84.91	133	11,321	10,002	10,002	233	1		0	0.75		0
Martin	131	10,222	78.03	165	12,858	12,361	12,361	287	1		0	0.93		0
Mcdowell	313	22,615	72.25	394	28,447	29,534	28,447	661	2		0	2.13		0
Mecklenburg	4,554	299,061	65.67	5,728	376,186	429,710	376,186	8,746	28	49	0	-20.83	36.62%	0
Mitchell	195	27,810	142.62	245	34,982	18,400	18,400	428	1		0	1.38		0
Montgomery	146	12,719	87.12	184	15,999	13,776	13,776	320	1		0	1.03		0
Moore	805	84,156	104.54	1,013	105,859	75,959	75,959	1,766	6	11	0	-5.31	57.83%	0
Nash	507	32,664	64.43	638	41,088	47,840	41,088	955	3		0	3.08		0
New Hanover	1,241	70,355	56.69	1,561	88,499	117,099	88,499	2,058	7	18	0	-11.37	55.28%	0
Northampton	112	9,110	81.34	141	11,459	10,568	10,568	246	1		0	0.79		0
Onslow	605	42,181	69.72	761	53,059	57,087	53,059	1,234	4	0	0	3.97		0
Orange	601	45,072	75.00	756	56,696	56,710	56,696	1,318	4	6	0	-1.75	0.00%	0
Pamlico	73	5,182	70.99	92	6,518	6,888	6,518	152	0		0	0.49		0
Pasquotank	235	17,903	76.18	296	22,520	22,174	22,174	516	2		0	1.66		0
Pender	359	21,125	58.84	452	26,573	33,875	26,573	618	2		0	1.99		0
Perquimans	73	4,435	60.75	92	5,579	6,888	5,579	130	0		0	0.42		0
Person	211	15,282	72.43	265	19,223	19,910	19,223	447	1		0	1.44		0
Pitt	809	52,252	64.59	1,018	65,727	76,336	65,727	1,528	5	8	0	-3.08	0.00%	0
Polk	151	11,040	73.11	190	13,887	14,248	13,887	323	1		0	1.04		0
Randolph	862	60,177	69.81	1,084	75,696	81,337	75,696	1,760	6	12	0	-6.33	45.53%	0
Richmond	579	41,900	72.37	728	52,706	54,634	52,706	1,225	4	6	0	-2.05	58.31%	0
Robeson	789	80,152	101.59	992	100,823	74,449	74,449	1,731	6	12	0	-6.42	15.14%	0

Table 13C: Year 2026 Hospice Inpatient Bed Need Projections

A	B	C	D	E	F	G	H	I	J	K	L	M	N	O
County	Total Admissions (2021 Data)	Total Days of Care (2021 Data)	ALOS per Admission	Total 2026 Admissions	2026 Days of Care at County ALOS	2026 Days of Care at Statewide ALOS	Projected 2026 Days of Care for Inpatient Estimates	Projected Inpatient Days	Projected Total Inpatient Beds	Currently Licensed Beds	CON Approved/ License Pending/ Previous Need Determination	Surplus (-) Deficit (+)	Occupancy Rate	Inpatient Bed Need
Source or Formula =>	2022 License Renewal Applications	2022 License Renewal Applications	Col. C / Col. B	Col. B x 5 Years Growth at 4.7% annually	Col. D x Col. E	Col E. x Statewide Median ALOS per Admission (75.0)	Lower # of Days of Care between Col. F and Col. G	Col. H x 2.32%	(Col. I / 365.25) / 85%	Licensure Inventory		Col. J - (Col. K + Col. L)	2022 License Renewal Applications	If Col. M >= 6 and Col. N >= 85 or blank
Rockingham	643	35,073	54.55	809	44,118	60,673	44,118	1,026	3	5	0	-1.70	27.78%	0
Rowan	944	43,666	46.26	1,187	54,927	89,075	54,927	1,277	4	7	0	-2.89	44.85%	0
Rutherford	428	42,441	99.16	538	53,386	40,386	40,386	939	3	10	0	-6.98	47.75%	0
Sampson	241	22,680	94.11	303	28,529	22,740	22,740	529	2		0	1.70		0
Scotland	286	19,217	67.19	360	24,173	26,987	24,173	562	2	6	0	-4.19	63.20%	0
Stanly	417	36,437	87.38	525	45,834	39,348	39,348	915	3		0	2.95		0
Stokes	372	27,826	74.80	468	35,002	35,102	35,002	814	3		0	2.62		0
Surry	684	52,794	77.18	860	66,409	64,541	64,541	1,501	5	16	0	-11.17	51.85%	0
Swain	123	5,924	48.16	155	7,452	11,606	7,452	173	1		0	0.56		0
Transylvania	284	16,428	57.85	357	20,665	26,798	20,665	480	2		0	1.55		0
Tyrrell	17	1,678	98.71	21	2,111	1,604	1,604	37	0		0	0.12		0
Union	1,117	81,208	72.70	1,405	102,151	105,399	102,151	2,375	8	6	0	1.65	56.94%	0
Vance	216	12,277	56.84	272	15,443	20,382	15,443	359	1		0	1.16		0
Wake	3,980	353,498	88.82	5,006	444,662	375,548	375,548	8,731	28	30	0	-1.88	44.26%	0
Warren	96	7,449	77.59	121	9,370	9,058	9,058	211	1		0	0.68		0
Washington	83	7,288	87.81	104	9,168	7,832	7,832	182	1		0	0.59		0
Watauga	297	38,878	130.90	374	48,904	28,025	28,025	652	2	0	6	-3.90		0
Wayne	892	57,487	64.45	1,122	72,312	84,168	72,312	1,681	5	12	0	-6.58	64.54%	0
Wilkes	452	32,570	72.06	569	40,970	42,650	40,970	953	3		0	3.07		0
Wilson	464	30,521	65.78	584	38,392	43,783	38,392	893	3		0	2.88		0
Yadkin	257	15,088	58.71	323	18,979	24,250	18,979	441	1	4	0	-2.58	54.66%	0
Yancey	190	27,445	144.45	239	34,523	17,928	17,928	417	1		0	1.34		0
Grand Totals	56,164	4,200,481		70,648	5,283,749	5,299,572	4,852,679	112,820	363	481	12			8

Patients originating from out of state were not included in the calculation of the two-year trailing average statewide hospice inpatient utilization rate (2.32%).

Table 13D: Hospice Inpatient Facilities

County	License Number	Facility	Number of Licensed Beds	Number of Beds CON Approved/ License Pending
Alamance	HOS1136	Hospice and Palliative Care of Alamance Caswell	14	0
Brunswick	HOS0414	Lower Cape Fear LifeCare	7	0
Buncombe	HOS0113	CarePartners Hospice & Palliative Care Services	25	0
Burke	HOS1670	Amorem	11	0
Cabarrus	HOS3389	Hospice & Palliative Care of Cabarrus County	14	0
Caldwell	HOS4155	Amorem	8	0
Caldwell	HOS0185	Amorem	4	0
Carteret	HOS4623	SECU Crystal Coast Hospice House	6	0
Catawba	HOS3144	Catawba Valley Hospice House	11	0
Catawba	HOS4445	Sherrills Ford Hospice House	6	0
Chatham	HOS4907	SECU Jim & Betsy Bryan Hospice Home of UNC Health Care	6	0
Cleveland	HOS1413	Wendover Hospice House	6	0
Cleveland	HOS4089	Testa Family Hospice House	4	0
Columbus	HOS0417	Lower Cape Fear LifeCare	6	0
Davidson	HOS3784	Hospice of Davidson County	8	0
Durham	HOS3793	Duke Hospice	12	0
Forsyth	HOS1603	Kate B. Reynolds Hospice Home	30	0
Gaston	HOS3717	Robin Johnson House - Gaston Hospice	13	0
Guilford	HOS3522	Hospice Home at High Point	15	0
Guilford	HOS1416	Hospice and Palliative Care of Greensboro-Beacon Place	11	0
Henderson	HOS2143	Four Seasons Compassion for Life	19	0
Iredell	HOS3181	Gordon Hospice House	9	0
Iredell	HOS6247	Hospice and Palliative Care of Iredell County	6	0
Johnston	HOS4088	SECU Hospice House of Johnston Health	12	0
Macon		Hospice House of Western North Carolina	0	6
Mecklenburg	HOS3727	Levine & Dickson Hospice House	16	0
Mecklenburg	H0010	Novant Health Presbyterian Medical Center	14	0
Mecklenburg	HOS4588	Levine & Dickson Hospice House at Southminster	10	0
Mecklenburg	HOS4933	East Mecklenburg Inpatient Unit at Aldersgate	6	0
Mecklenburg	H0270	Novant Health Matthews Medical Center	3	0
Moore	HOS4477	FirstHealth Hospice House	11	0
New Hanover	HOS1557	Lower Cape Fear LifeCare	18	0
Orange	HOS1388	Duke Hospice at the Meadowlands	6	0
Pitt	HOS3749	Vidant Home Health and Hospice	8	0
Randolph	HOS4307	The Randolph Hospice House	12	0
Richmond	HOS2138	Hospice Haven of Richmond County	6	0
Robeson	H0064	Southeastern Regional Medical Center	12	0
Rockingham	HOS0398	Hospice of Rockingham County	5	0
Rowan	HOS4599	Novant Health Hospice	7	0
Rutherford	HOS2891	Hospice of the Carolina Foothills	10	0
Scotland	HOS3031	Scotland Regional Hospice	6	0
Surry	HOS3796	Mountain Valley Hospice and Palliative Care	16	0
Union	HOS0405	Hospice of Union County	6	0
Wake	HOS1595	Transitions LifeCare	30	0
Watauga		Caldwell Hospice Patient Care Unit	0	6
Wayne	HOS1324	3HC/Kitty Askins Hospice Center	12	0
Yadkin	HOS4909	Mountain Valley Hospice and Palliative Care	4	0
Grand Totals			481	12

Proposed 2023 SMFP

Table 13E: Hospice Inpatient Facilities Occupancy Rate for FY2021

County	Facility	Number of Licensed Beds 10/1/2020	Number of Beds Added during FY2021	Number of Licensed Beds 9/30/2021	Days of Care per 2022 License Renewal Applications	Occupancy Rate for Reporting Period
Alamance	Hospice and Palliative Care of Alamance Caswell	14	0	14	1,072	20.98%
Brunswick	Lower Cape Fear LifeCare	7	0	7	1,642	64.27%
Buncombe	CarePartners Hospice & Palliative Care Services	25	0	25	3,991	43.74%
Burke	Amorem	11	0	11	999	24.88%
Cabarrus	Hospice & Palliative Care of Cabarrus County	14	0	14	1,253	24.52%
Caldwell	Amorem	8	0	8	1,997	68.39%
Caldwell	Amorem	4	0	4	441	30.21%
Carteret	SECU Crystal Coast Hospice House	6	0	6	1,718	78.45%
Catawba	Catawba Valley Hospice House	11	0	11	2,304	57.38%
Catawba	Sherrills Ford Hospice House	6	0	6	769	35.11%
Chatham	SECU Jim & Betsy Bryan Hospice Home of UNC Health Care	6	0	6	1,359	62.05%
Cleveland	Wendover Hospice House	6	0	6	973	44.43%
Cleveland	Testa Family Hospice House	4	0	4	468	32.05%
Columbus	Lower Cape Fear LifeCare	6	0	6	853	38.95%
Davidson	Hospice of Davidson County	8	0	8	1,435	49.14%
Durham	Duke Hospice	12	0	12	3,224	73.61%
Forsyth	Kate B. Reynolds Hospice Home	30	0	30	3,764	34.37%
Gaston	Robin Johnson House - Gaston Hospice	13	0	13	0	0.00%
Guilford	Hospice Home at High Point	15	0	15	3,011	55.00%
Guilford	Hospice and Palliative Care of Greensboro-Beacon Place	11	0	11	1,455	36.24%
Henderson	Four Seasons Compassion for Life	19	0	19	2,502	36.08%
Iredell	Gordon Hospice House	9	0	9	2,733	83.20%
Johnston	SECU Hospice House of Johnston Health	12	0	12	375	8.56%
Mecklenburg	Levine & Dickson Hospice House	16	0	16	1,393	23.85%
Mecklenburg	Novant Health Presbyterian Medical Center	14	0	14	2,092	40.94%
Mecklenburg	Levine & Dickson Hospice House at Southminster	10	0	10	1,095	30.00%
Mecklenburg	East Mecklenburg Inpatient Unit at Aldersgate	6	0	6	1,171	53.47%
Mecklenburg	Novant Health Matthews Medical Center	3	0	3	799	72.97%
Moore	FirstHealth Hospice House	11	0	11	2,322	57.83%
New Hanover	Lower Cape Fear LifeCare	18	0	18	3,632	55.28%
Orange	Duke Hospice at the Meadowlands*	6	0	6	0	0.00%
Pitt	Vidant Home Health and Hospice	8	0	8	0	0.00%
Randolph	The Randolph Hospice House	12	0	12	1,994	45.53%
Richmond	Hospice Haven of Richmond County	6	0	6	1,277	58.31%
Robeson	Southeastern Regional Medical Center	12	0	12	663	15.14%
Rockingham	Hospice of Rockingham County	5	0	5	507	27.78%
Rowan	Novant Health Hospice	7	0	7	1,146	44.85%
Rutherford	Hospice of the Carolina Foothills	10	0	10	1,743	47.75%
Scotland	Scotland Regional Hospice	6	0	6	1,384	63.20%
Surry	Mountain Valley Hospice and Palliative Care	16	0	16	3,028	51.85%
Union	Hospice of Union County	6	0	6	1,247	56.94%
Wake	Transitions LifeCare	30	0	30	4,847	44.26%
Wayne	3HC/Kitty Askins Hospice Center	12	0	12	2,827	64.54%
Yadkin	Mountain Valley Hospice and Palliative Care	4	0	4	798	54.66%

Proposed 2023 SMFP

Table 13E: Hospice Inpatient Facilities Occupancy Rate for FY2021

County	Facility	Number of Licensed Beds 10/1/2020	Number of Beds Added during FY2021	Number of Licensed Beds 9/30/2021	Days of Care per 2022 License Renewal Applications	Occupancy Rate for Reporting Period
Grand Totals		475	0	475	72,303	

* No patients seen at this location during the reporting period.

Table 13F: Hospice Residential Facilities

County	License Number	Facility	Number of Licensed Beds	Number of Beds CON Approved/ License Pending
Alamance	HOS1136	Hospice and Palliative Care of Alamance Caswell	8	0
Buncombe	HOS0113	CarePartners Hospice & Palliative Care Services	2	0
Burke	HOS1670	Amorem	3	0
Cabarrus	HOS3389	Hospice & Palliative Care of Cabarrus County	10	0
Caldwell	HOS4155	Amorem	4	0
Caldwell	HOS0185	Amorem	2	0
Carteret	HOS4623	SECU Crystal Coast Hospice House	4	0
Catawba	HOS3144	Catawba Valley Hospice House	10	0
Chatham	HOS4907	SECU Jim & Betsy Bryan Hospice Home of UNC Health Care	4	0
Cleveland	HOS1413	Wendover Hospice House	10	0
Cleveland	HOS4089	Testa Family Hospice House	4	0
Davidson	HOS3784	Hospice of Davidson County	4	0
Forsyth	HOS1603	Kate B. Reynolds Hospice Home	10	0
Gaston	HOS3717	Robin Johnson House - Gaston Hospice	6	0
Guilford	HOS1416	Hospice and Palliative Care of Greensboro-Beacon Place	3	0
Guilford	HOS3522	Hospice Home at High Point	3	0
Iredell	HOS3181	Gordon Hospice House	6	0
Iredell	HOS6247	Hospice and Palliative Care of Iredell County	4	0
Johnston	HOS4088	SECU Hospice House of Johnston Health	6	0
Randolph	HOS4307	The Randolph Hospice House	4	0
Rockingham	HOS0398	Hospice of Rockingham County	3	0
Rowan	HOS4599	Novant Health Hospice	7	0
Rutherford	HOS2891	Hospice of the Carolina Foothills	8	0
Scotland	HOS3031	Scotland Regional Hospice	6	0
Surry	HOS3796	Mountain Valley Hospice and Palliative Care	4	0
Union	HOS0405	Hospice of Union County	20	0
Watauga		Caldwell Hospice Patient Care Unit	0	1
Wayne	HOS1324	3HC/Kitty Askins Hospice Center	12	0
Yadkin	HOS4909	Mountain Valley Hospice and Palliative Care	2	0
Grand Totals			169	1

Table 13G: Hospice Home Care Office Need Determination

County Service Area	Hospice Home Care Office Need Determination	Certificate of Need Application Deadline	Certificate of Need Beginning Review Date
It is determined that there is no need anywhere in the state and no reviews are scheduled.			

Table 13H: Hospice Inpatient Bed Need Determination*

(Proposed for Certificate of Need Review Commencing in 2023)

County Service Area	Hospice Inpatient Bed Need Determination	Certificate of Need Application Deadline**	Certificate of Need Beginning Review Date
Cumberland	8	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.0203(b). The filing deadline is 5:00 p.m. on the application deadline date.

Chapter 14:

Psychiatric Inpatient Services

CHAPTER 14

PSYCHIATRIC INPATIENT SERVICES

Introduction

Psychiatric facilities, acute care (community) hospitals, and state-operated psychiatric facilities provide psychiatric inpatient services. Entities may develop psychiatric inpatient beds in three ways. First, an entity may obtain a certificate of need (CON). Second, acute care hospitals may convert acute care beds to psychiatric beds pursuant to G.S. 131E-184 by executing a contract with the North Carolina Division of Mental Health, Developmental Disabilities and Substance Abuse Services or one or more of the local management entities-managed care organizations (LME-MCOs), which exempts the hospital from Certificate of Need review. Finally, pursuant to Policy PSY-1 in the State Medical Facilities Plan (SMFP), facilities may obtain a required CON to transfer beds from state-operated psychiatric facilities. However, with the opening of Broughton Hospital in 2019, the Division of State Operated Healthcare Facilities identified a final group of facilities that may apply for a CON to relocate the final group of beds under PSY-1. No additional beds may be transferred pursuant to Policy PSY-1.

Definitions

The *reporting year* is October 1 through September 30. The *current* reporting year is October 1, 2020 through September 30, 2021.

Changes from the Previous Plan

This chapter contains no substantive changes from the previous SMFP.

Data Sources

Bed inventory data comes from the North Carolina Department of Health and Human Services, Division of Health Service Regulation, Mental Health Licensure and Certification Section; Acute and Home Care Licensure and Certification Section; and Certificate of Need.

Days of care for the current reporting year come from two sources. The first source is the Hospital Industry Data Institute (HIDI), a collector of hospital patient discharge information. All acute care hospitals and several private psychiatric hospitals provide data to HIDI. Major Diagnostic Category (MDC) code 19 (Mental Diseases and Disorders) was used to select discharge records. HIDI provides this data to the Cecil G. Sheps Center for Health Services Research at the University of North Carolina at Chapel Hill. The Sheps Center compiles the information and provides data to the Agency on days of care by facility and age group. Second, where days of care data from HIDI is not available, the Agency obtains this data from the Mental Health/Substance Abuse Hospital License Renewal Application for the current reporting year.

Table 14A: Inventory and Utilization of Psychiatric Beds, Excluding State Hospitals

County	Hospital	Total Beds	Licensed Beds	Not Yet Licensed Beds		Total Days of Care*	% Utilization of Total Beds	% Utilization of Licensed Beds Only
				Child/Adolescent	Adult			
Alamance	Alamance Regional Medical Center	44	44	0	0	3,812	23.7	23.7
Alexander	Alexander Hospital ****	25	0	0	25	0	0.0	0.0
Avery	Charles A. Cannon Memorial Hospital (Appalachian Behavioral Healthcare) ^^	10	10	0	0	2,713	74.3	74.3
Beaufort	Vidant Beaufort Hospital	22	22	0	0	60	0.7	0.7
Brunswick	Carolina Dunes Behavioral Health	40	40	0	0	8,940	61.2	61.2
Buncombe	Mission Hospital/Copestone Center ^^^	82	82	0	0	25,404	84.8	84.8
Burke	UNC Health Blue Ridge	22	22	0	0	6,412	79.8	79.8
Cabarrus	Atrium Health Cabarrus	10	10	0	0	2,706	74.1	74.1
Caldwell	Caldwell UNC Health Care ^^^^	27	27	0	0	5,489	55.7	55.7
Catawba	Catawba Valley Medical Center	38	38	0	0	5,536	39.9	39.9
Catawba	Frye Regional Medical Center	84	84	0	0	17,640	57.5	57.5
Cleveland	Atrium Health Cleveland	14	14	0	0	6,106	119.4	119.4
Craven	CarolinaEast Medical Center	23	23	0	0	4,806	57.2	57.2
Cumberland	Cape Fear Valley Medical Center	28	28	0	0	8,372	81.9	81.9
Davidson	Novant Health Thomasville Medical Center	45	45	0	0	6,948	42.3	42.3
Duplin	Vidant Duplin Hospital	25	25	0	0	47	0.5	0.5
Durham	Duke Regional Hospital †	42	42	0	0	8,223	53.6	53.6
Durham	Duke University Hospital ††	0	0	0	0	5,313	0.0	0.0
Forsyth	Atrium Health Wake Forest Baptist	44	44	0	0	9,268	57.7	57.7
Forsyth	Novant Health Forsyth Medical Center	80	80	0	0	11,842	40.5	40.5
Forsyth	Old Vineyard Youth Services	156	156	0	0	47,654	83.6	83.6
Franklin	Maria Parham Franklin ***	33	33	0	0	4,987	41.4	41.4
Gaston	CaroMont Regional Medical Center	63	63	0	0	9,127	39.7	39.7
Guilford	Atrium Health Wake Forest Baptist High Point Medical Center	24	24	0	0	2,819	32.2	32.2
Guilford	Cone Health (Behavioral Health Center)	80	80	0	0	10,342	35.4	35.4
Halifax	Vidant North Hospital	20	20	0	0	4,089	56.0	56.0
Harnett	Good Hope Hospital	16	16	0	0	4,874	83.4	83.4
Haywood	Haywood Regional Medical Center	33	33	0	0	3,625	30.1	30.1
Henderson	AdventHealth Hendersonville	41	41	0	0	5,293	35.3	35.3
Henderson	Margaret R. Pardee Memorial Hospital	21	21	0	0	3,306	43.1	43.1
Hertford	Vidant Roanoke-Chowan Hospital	28	28	0	0	7,367	72.0	72.0
Iredell	Davis Regional Medical Center	42	42	0	0	8,132	53.0	53.0
Johnston	Johnston Health **	26	20	0	6	6,986	73.6	95.6
Lee	Central Carolina Hospital	10	10	0	0	39	1.1	1.1
Mecklenburg	Carolinas Medical Center (Behavioral Health)	132	132	0	0	46,888	97.3	97.3
Mecklenburg	Novant Health Presbyterian Medical Center	75	75	0	0	19,111	69.8	69.8
Moore	FirstHealth Moore Reg. Hospital and Pinehurst Treatment	36	36	0	0	4,285	32.6	32.6
Nash	Nash General Hospital	44	44	0	0	5,227	32.5	32.5
New Hanover	New Hanover Regional Medical Center	62	62	0	0	16,133	71.2	71.2
Onslow	Brynn Marr Behavioral Health System **	82	72	0	10	21,323	71.2	81.1
Orange	University of North Carolina Hospitals	76	76	0	0	18,169	65.5	65.5
Pitt	Vidant Medical Center	52	52	0	0	13,272	69.9	69.9

Table 14A: Inventory and Utilization of Psychiatric Beds, Excluding State Hospitals

County	Hospital	Total Beds	Licensed Beds	Not Yet Licensed Beds		Total Days of Care*	% Utilization of Total Beds	% Utilization of Licensed Beds Only
				Child/Adolescent	Adult			
Robeson	Southeastern Regional Medical Center ^	33	33	0	0	7,553	62.7	62.7
Rowan	Novant Health Rowan Medical Center (Lifeworks Behavioral Health Unit)	40	40	0	0	9,255	63.3	63.3
Rutherford	Rutherford Regional Medical Center	14	14	0	0	2,463	48.2	48.2
Stanly	Atrium Health Stanly	12	12	0	0	3,761	85.8	85.8
Stokes	LifeBrite Community Hospital of Stokes	6	6	0	0	19	0.9	0.9
Surry	Northern Regional Hospital ****	17	0	0	17	28	0.5	0.0
Wake	Holly Hill Hospital	268	268	0	0	75,752	77.4	77.4
Wake	Strategic Behavioral Center-Garner	56	56	0	0	13,836	67.6	67.6
Wake	Triangle Springs	43	43	0	0	15,428	98.2	98.2
Wake	UNC Hospitals at WakeBrook	28	28	0	0	6,746	66.0	66.0
Wayne	Wayne UNC Healthcare	61	61	0	0	182	0.8	0.8
Wilson	Wilson Medical Center	24	24	0	0	4,559	52.0	52.0
Alleghany	Alleghany Memorial Hospital	0	0			32		
Anson	Atrium Health Anson	0	0			165		
Ashe	Ashe Memorial Hospital	0	0			19		
Bladen	Cape Fear Valley Bladen Healthcare	0	0			32		
Brunswick	Dosher Memorial Hospital	0	0			2		
Brunswick	Novant Health Brunswick Medical Center	0	0			6		
Carteret	Carteret Health Care	0	0			158		
Chatham	Chatham Hospital UNC Health Care	0	0			23		
Cherokee	Erlanger Murphy Medical Center	0	0			5		
Chowan	Vidant Chowan Hospital	0	0			7		
Columbus	Columbus Regional Healthcare System	0	0			28		
Dare	The Outer Banks Hospital	0	0			9		
Davidson	Lexington Medical Center	0	0			61		
Davie	Davie Medical Center	0	0			23		
Durham	North Carolina Specialty Hospital	0	0			34		
Edgecombe	Vidant Edgecombe Hospital	0	0			4		
Gaston	Carolinas Rehabilitation-Mount Holly	0	0			18		
Granville	Granville Health System	0	0			16		
Harnett	Betsy Johnson Hospital	0	0			330		
Hoke	Cape Fear Valley Hoke Hospital	0	0			22		
Iredell	Iredell Health System	0	0			94		
Iredell	Lake Norman Regional Medical Center	0	0			2		
Jackson	Harris Regional Hospital	0	0			13		
Lenoir	UNC Lenoir Health Care	0	0			42		
Lincoln	Atrium Health Lincoln	0	0			86		
Macon	Angel Medical Center	0	0			19		
Macon	Highlands-Cashiers Hospital	0	0			14		
Martin	Martin General Hospital	0	0			17		
McDowell	Mission Hospital McDowell	0	0			12		
Mecklenburg	Atrium Health Pineville	0	0			244		

Table 14A: Inventory and Utilization of Psychiatric Beds, Excluding State Hospitals

County	Hospital	Total Beds	Licensed Beds	Not Yet Licensed Beds		Total Days of Care*	% Utilization of Total Beds	% Utilization of Licensed Beds Only
				Child/Adolescent	Adult			
Mecklenburg	Atrium Health University City	0	0			258		
Mecklenburg	Novant Health Huntersville Medical Center	0	0			141		
Mecklenburg	Novant Health Matthews Medical Center	0	0			256		
Mecklenburg	Novant Health Mint Hill Medical Center	0	0			30		
Mitchell	Blue Ridge Regional Hospital	0	0			16		
Onslow	Onslow Memorial Hospital	0	0			83		
Pasquotank	Sentara Albemarle Medical Center	0	0			31		
Person	Person Memorial Hospital	0	0			11		
Polk	St. Luke's Hospital	0	0			2		
Randolph	Randolph Health	0	0			92		
Rockingham	Annie Penn Hospital	0	0			8		
Rockingham	UNC Rockingham Health Care	0	0			59		
Sampson	Sampson Regional Medical Center	0	0			58		
Scotland	Scotland Health Care System	0	0			59		
Surry	Hugh Chatham Memorial Hospital	0	0			27		
Swain	Swain Community Hospital	0	0			5		
Transylvania	Transylvania Regional Hospital	0	0			27		
Union	Atrium Health Union	0	0			491		
Wake	Duke Raleigh Hospital	0	0			532		
Wake	UNC REX Healthcare	0	0			1,411		
Wake	WakeMed Cary Hospital	0	0			300		
Wake	WakeMed Raleigh Campus	0	0			1,081		
Watauga	Watauga Medical Center	0	0			142		
Wilkes	Wilkes Medical Center	0	0			68		
State Totals		2,459	2,401	0	58	548,992	60.4	61.8

* Days of care provided to NC and out-of-state residents

** CON-approved projects that are Policy PSY-1 bed transfers from State Psychiatric Hospitals

*** Consolidation of Duke Life Point Maria Parham Medical Center with the closed Franklin Medical Center was effective October 23, 2017. Franklin Medical Center has been reopened as Maria Parham Franklin. The licensee received a grant from the Dorothea Dix Hospital Property Fund to develop 20 new psychiatric beds at Maria Parham Franklin. The remaining 13 psychiatric beds were new beds developed pursuant to CON #K-8674-11.

**** Adult beds are to be converted from acute care beds to inpatient psychiatric beds. This conversion is exempt from certificate of need review, pursuant to G.S. 131E-184(c).

^ Southeastern Regional Medical Center received a grant from the Dorothea Dix Hospital Property Fund to develop 10 adult psychiatric inpatient beds. Development of these beds does not require a certificate of need, and they are not yet accounted for in Table 14A.

^^ Charles A. Cannon, Jr. Memorial Hospital received a grant from the Dorothea Dix Hospital Property Fund to convert 27 acute care beds to adult psychiatric beds. Development of these beds does not require a certificate of need, and they are not yet accounted for in Table 14A.

^^^ Beds were added pursuant to Session law 2017-57 using allocations from the Dorothea Dix Hospital Property Fund.

^^^^ Caldwell Memorial Hospital received a grant from the Dorothea Dix Hospital Property Fund to develop 27 adult psychiatric beds. Development of these beds does not require a certificate of need.

† Percent utilization of licensed beds is based on 42 beds in service during the 2021 reporting period. Duke Regional Hospital licensed 19 beds that were relocated from Duke University Hospital on April 13, 2021.

†† Percent utilization of licensed beds is based on no beds in service during the 2021 reporting period. These beds were relocated to Duke Regional Hospital on April 13, 2021.

Chapter 15:

Substance Use Disorder Inpatient and Residential Services
(Chemical Dependency Treatment Beds)

CHAPTER 15

SUBSTANCE USE DISORDER INPATIENT AND RESIDENTIAL SERVICES (CHEMICAL DEPENDENCY TREATMENT BEDS)

Introduction

G.S. 131E-176 (5a) defines a chemical dependency treatment facility as “a public or private facility, or unit in a facility, which is engaged in providing 24-hour a day treatment for chemical dependency or substance abuse.” The facility may be a unit within or attached to a general hospital or psychiatric hospital. It may also be a freestanding facility “specializing in treatment of people who are substance abusers or chemically dependent” that is licensed under Article 1 or Article 1A of G.S. 122. The statute specifically excludes facilities that provide social setting or medical detoxification only. In addition, Session Law 2003-390, House Bill 815 resulted in changing the existing medical detoxification beds on acute care hospital licenses to licensed chemical dependency/substance use disorder beds (Appendix H).

Definitions

The *reporting year* is October 1 through September 30. The *current* reporting year is October 1, 2020 through September 30, 2021.

Changes from the Previous Plan

This chapter contains no substantive changes from the previous SMFP.

Data Sources

Bed inventory data comes from the North Carolina Department of Health and Human Services, Division of Health Service Regulation: Mental Health Licensure and Certification Section; Acute and Home Care Licensure and Certification Section; and Certificate of Need.

Substance use disorder days of care for the current reporting year come from two sources. The first source is the Hospital Industry Data Institute (HIDI), a collector of hospital discharge information. All acute care (general) hospitals and several private psychiatric hospitals provide data to HIDI. Major Diagnostic Category (MDC) code 20 (Alcohol/Drug Use or Induced Mental Disorders) was used to identify discharges relevant to this chapter. HIDI provides this data to the Cecil G. Sheps Center for Health Services Research at the University of North Carolina at Chapel Hill. The Sheps Center compiles the information and provides data on days of care by facility and age group. Second, where days of care data from HIDI is not available, the Agency obtains this data from the following license renewal documents submitted to the North Carolina Department of Health and Human Services, Division of Health Service Regulation: Mental Health/Substance Abuse Hospital License Renewal Application; or the Substance Abuse Residential Treatment Data Collection Form, as attached to the License Renewal Application for MH/DD/SAS Facilities.

**Table 15A: Inventory and Utilization of Chemical Dependency (Substance Use Disorder) Beds,
Excluding State Facilities**

County	Facility Name	Type*	Total Beds	Licensed Beds	Not Yet Licensed Beds		Total Days of Care**	% Utilization of Total Beds	% Utilization of Licensed Beds Only
					Child/Adolescent	Adult			
Alamance	Alamance Regional Medical Center	H	12	12	0	0	514	11.7	11.7
Buncombe	Robert Swain Recovery Center	R	22	22	0	0	3,681	45.8	45.8
Catawba	Frye Regional Medical Center	H	16	16	0	0	927	15.9	15.9
Cleveland	Atrium Health Cleveland	H	6	6	0	0	917	41.8	41.8
Cumberland	Cape Fear Valley Medical Center	H	4	4	0	0	1,110	76.0	76.0
Davidson	Path of Hope, Men	R	12	12	0	0	2,511	57.3	57.3
Davidson	Path of Hope, Women	R	6	6	0	0	1,236	56.4	56.4
Forsyth	Addiction Recovery Care Association	R	68	36	0	32	8,255	33.2	62.8
Forsyth	Old Vineyard Behavioral Health Services	H	8	8	0	0	3,333	114.1	114.1
Gaston	Phoenix Counseling Center	R	6	6	0	0	112	5.1	5.1
Guilford	Daymark Guilford Residential Treatment Facility	R	40	40	0	0	5,048	34.6	34.6
Guilford	Fellowship Hall	H	60	60	0	0	11,070	50.5	50.5
Guilford	High Point Regional Health	H	4	4	0	0	2,229	152.6	152.6
Guilford	Lodge II (of Fellowship Hall)	R	15	15	0	0	1,445	26.4	26.4
Guilford	Mose Kiser, Jr. Lodge (of Fellowship Hall)	R	20	20	0	0	4,481	61.3	61.3
Mecklenburg	Anuvia Prevention and Recovery Center	R	32	32	0	0	12,264	104.9	104.9
Mecklenburg	Carolinas Medical Ctr./Ctr. For Mental Health	H	11	11	0	0	6,401	159.3	159.3
Mecklenburg	McLeod Addictive Disease Center	R	30	30	0	0	7,767	70.9	70.9
Moore	FirstHealth Moore Regional Hospital	H	14	14	0	0	1,839	36.0	36.0
Nash	Nash UNC Health Care	H	16	16	0	0	1,500	25.7	25.7
New Hanover	The Wilmington Treatment Center	H	44	44	0	0	12,153	75.6	75.6
Onslow	Brynn Marr Behavioral Health System	H	12	12	0	0	84	1.9	1.9
Pitt	Haven at Blue Creek	R	70	0	0	70	0	0.0	0.0
Polk	Pavillon International	R	46	46	0	0	11,210	66.7	66.7
Richmond	Samaritan Colony	R	12	12	0	0	3,790	86.5	86.5
Richmond	Samaritan Women's Recovery Center	R	14	0	0	14	0	0.0	0.0
Robeson	Community Outreach Youth Services	R	8	8	0	0	73	2.5	2.5
Rowan	Novant Health Rowan Medical Center	H	15	15	0	0	906	16.5	16.5
Surry	Hope Valley, Men	R	22	22	0	0	4,562	56.8	56.8
Surry	Hope Valley, Women	R	8	8	0	0	2,298	78.6	78.6
Transylvania	Transylvania Regional Hospital	H	40	40	0	0	177	1.2	1.2
Wake	Holly Hill Hospital	H	28	28	0	0	2,006	19.6	19.6
Wake	Triangle Springs	H	34	34	0	0	5,725	46.1	46.1
Alleghany	Alleghany Memorial Hospital	H	0	0			3		
Anson	Atrium Health Anson	H	0	0			11		
Ashe	Ashe Memorial Hospital	H	0	0			59		
Avery	Charles A. Cannon Jr. Memorial Hospital	H	0	0			30		
Beaufort	Vidant Beaufort Hospital	H	0	0			184		
Bertie	Vidant Bertie Hospital	H	0	0			9		
Bladen	Cape Fear Valley Bladen Healthcare	H	0	0			5		
Brunswick	Dosher Memorial Hospital	H	0	0			16		
Buncombe	Mission Hospital	H	0	0			3,144		
Brunswick	Novant Health Brunswick Medical Center	H	0	0			117		

**Table 15A: Inventory and Utilization of Chemical Dependency (Substance Use Disorder) Beds,
Excluding State Facilities**

County	Facility Name	Type*	Total Beds	Licensed Beds	Not Yet Licensed Beds		Total Days of Care**	% Utilization of Total Beds	% Utilization of Licensed Beds Only
					Child/Adolescent	Adult			
Burke	Carolinas HealthCare System Blue Ridge	H	0	0			777		
Cabarrus	Atrium Health Cabarrus	H	0	0			634		
Caldwell	Caldwell UNC Health Care	H	0	0			459		
Carteret	Carteret Health Care	H	0	0			273		
Catawba	Catawba Valley Medical Center	H	0	0			3,084		
Chatham	Chatham Hospital UNC Health Care	H	0	0			133		
Cherokee	Erlanger Western Carolina Hospital	H	0	0			48		
Chowan	Vidant Chowan Hospital	H	0	0			48		
Columbus	Columbus Regional Healthcare System	H	0	0			463		
Craven	CarolinaEast Health System	H	0	0			251		
Dare	The Outer Banks Hospital	H	0	0			1		
Davidson	Lexington Medical Center	H	0	0			154		
Davidson	Novant Health Thomasville Medical Center	H	0	0			148		
Davie	Davie Medical Center	H	0	0			21		
Duplin	Vidant Duplin Hospital	H	0	0			54		
Durham	Duke Regional Hospital	H	0	0			916		
Durham	Duke University Hospital	H	0	0			1,844		
Edgecombe	Vidant Edgecombe Hospital	H	0	0			83		
Forsyth	Novant Health Forsyth Medical Center	H	0	0			3,373		
Forsyth	Wake Forest Baptist Medical Center	H	0	0			941		
Gaston	CaroMont Health	H	0	0			1,406		
Granville	Granville Health System	H	0	0			25		
Guilford	Cone Health	H	0	0			1,879		
Halifax	Vidant North Hospital	H	0	0			228		
Harnett	Betsy Johnson Hospital	H	0	0			181		
Haywood	Haywood Regional Medical Center	H	0	0			603		
Henderson	AdventHealth Hendersonville	H	0	0			379		
Henderson	Pardee UNC Health Care	H	0	0			2,434		
Hertford	Vidant Roanoke-Chowan Hospital	H	0	0			79		
Hoke	FirstHealth Moore Regional Hospital - Hoke	H	0	0			12		
Hoke	Cape Fear Valley Hoke Hospital	H	0	0			20		
Iredell	Davis Regional Medical Center	H	0	0			486		
Iredell	Iredell Health System	H	0	0			329		
Iredell	Lake Norman Regional Medical Center	H	0	0			29		
Jackson	Harris Regional Hospital	H	0	0			103		
Johnston	Johnston UNC Healthcare	H	0	0			733		
Lee	Central Carolina Hospital	H	0	0			90		
Lenoir	UNC Lenoir Health Care	H	0	0			116		
Lincoln	Atrium Health Lincoln	H	0	0			169		
Macon	Angel Medical Center	H	0	0			28		
Macon	Highlands-Cashiers Hospital	H	0	0			19		
Martin	Martin General Hospital	H	0	0			6		
McDowell	Mission Hospital McDowell	H	0	0			132		

**Table 15A: Inventory and Utilization of Chemical Dependency (Substance Use Disorder) Beds,
Excluding State Facilities**

County	Facility Name	Type*	Total Beds	Licensed Beds	Not Yet Licensed Beds		Total Days of Care**	% Utilization of Total Beds	% Utilization of Licensed Beds Only
					Child/Adolescent	Adult			
Mecklenburg	Atrium Health Pineville	H	0	0			271		
Mecklenburg	Atrium Health University City	H	0	0			225		
Mecklenburg	Novant Health Huntersville Medical Center	H	0	0			200		
Mecklenburg	Novant Health Matthews Medical Center	H	0	0			342		
Mecklenburg	Novant Health Mint Hill Medical Center	H	0	0			71		
Mecklenburg	Novant Health Presbyterian Medical Center	H	0	0			2,343		
Mitchell	Blue Ridge Regional Hospital	H	0	0			47		
New Hanover	New Hanover Regional Medical Center	H	0	0			1,418		
Onslow	Onslow Memorial Hospital	H	0	0			279		
Orange	UNC Hospitals	H	0	0			2,824		
Pasquotank	Sentara Albemarle Medical Center	H	0	0			159		
Person	Person Memorial Hospital	H	0	0			53		
Pitt	Vidant Medical Center	H	0	0			663		
Polk	St. Luke's Hospital	H	0	0			67		
Randolph	Randolph Health	H	0	0			126		
Richmond	FirstHealth Moore Regional Hospital - Richmond	H	0	0			52		
Robeson	UNC Health Southeastern	H	0	0			1,409		
Rockingham	Annie Penn Hospital	H	0	0			157		
Rockingham	UNC Rockingham Health Care	H	0	0			43		
Rutherford	Rutherford Regional Health System	H	0	0			38		
Sampson	Sampson Regional Medical Center	H	0	0			59		
Scotland	Scotland Health Care System	H	0	0			53		
Stanly	Atrium Health Stanly	H	0	0			127		
Stokes	LifeBrite Community Hospital of Stokes	H	0	0			10		
Surry	Hugh Chatham Memorial Hospital	H	0	0			61		
Surry	Northern Regional Hospital	H	0	0			112		
Swain	Swain Community Hospital	H	0	0			15		
Union	Atrium Health Union	H	0	0			228		
Vance	Maria Parham Health	H	0	0			43		
Wake	Duke Raleigh Hospital	H	0	0			380		
Wake	UNC Hospitals at WakeBrook	H	0	0			503		
Wake	UNC REX Healthcare	H	0	0			903		
Wake	WakeMed Cary Hospital	H	0	0			801		
Wake	WakeMed Raleigh Campus	H	0	0			2,073		
Watauga	Watauga Medical Center	H	0	0			185		
Wayne	Wayne UNC Health Care	H	0	0			77		
Wilkes	Wilkes Medical Center	H	0	0			188		
Wilson	Wilson Medical Center	H	0	0			1,103		
State Totals			755	639	0	116	164,101	43.4	51.3

* H = Hospital. R = Residential facility.

** Days of care provided to NC and out-of-state residents

Chapter 16:

Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID)

CHAPTER 16

INTERMEDIATE CARE FACILITIES FOR INDIVIDUALS WITH INTELLECTUAL DISABILITIES

Background Information

Intermediate Care Facilities for Individuals with Intellectual Disabilities or developmental disabilities (ICF/IID) is a category of group home care designated by the federal-state Medicaid program. Under G.S. 122C-117(a)(2), area mental health, developmental disability and substance use disorder authorities – the Local Management Entity-Managed Care Organizations (LME-MCO) – have a responsibility to ensure provision of services to people in need within their catchment areas.

The North Carolina Department of Health and Human Services (DHHS) is committed to the integration of people with intellectual and developmental disabilities into community living to the fullest extent possible. One way DHHS encourages community-based alternatives is through the transfer of ICF/IID beds from state developmental centers.

The LME-MCOs serve as the portals of entry and exit for the admission and discharge of clients in ICF/IID facilities (G.S. 122C-115.4) within the applicable Mental Health, Developmental Disabilities, and Substance Abuse Services (MH/DD/SAS) catchment areas. This involvement is essential to ensure that only clients in need of the intensive array of services provided in an ICF/IID program are admitted and served as close as possible to their own homes, and to ensure coordination with services outside the facility.

Definitions

The *current reporting time point* reflects the inventory of ICF/IID beds as of January 2022.

Changes from the Previous Plan

This chapter contains no substantive changes from the previous SMFP.

Basic Principles

1. People with conditions other than an intellectual disability (such as autism, cerebral palsy, epilepsy or related conditions) may be appropriate for placement in an ICF/IID setting if they are in need of the services the program is certified to provide. In the development of services for this population, potential providers should explore the full continuum of services to determine the most appropriate level of care for their needs.
2. Services for people with a developmental disability should provide a continuum of care. For most individuals, admission to a community-based facility is preferable to admission to a regional, state operated facility because community-based treatment provides greater potential for reintegration into the community. The role of state facilities is to complement and supplement the community mental health system. State facilities should be the setting of last resort and should provide services that cannot be economically provided in the community. Development of community programs may be accomplished through establishing appropriate treatment programs and support services in the community to avoid institutionalization, and by relocating people from state facilities to community programs to the extent appropriate services exist in the community.
3. The ICF/IID bed inventory excludes beds located in state developmental centers because such facilities are not subject to the state's certificate of need (CON) law.

Data Sources

Healthcare Planning obtains the inventory of ICF/IID beds for the current reporting time point from the North Carolina Department of Health and Human Services, Division of Health Service Regulation, Mental Health Licensure and Certification Section.

The number of beds in state developmental centers comes from the Division of State Operated Healthcare Facilities (*Table 16B*).

Data on certificates of need comes from the Division of Health Service Regulation, Healthcare Planning and Certificate of Need Section.

The SMFP does not have a methodology to project the need for additional ICF/IID beds. A need determination is not required to transfer beds from state developmental centers. However, it is necessary to obtain a certificate of need pursuant to Policy ICF/IID-5 in Chapter 4 of the SMFP to transfer beds from a state developmental center.

Table 16A: Inventory of ICF/IID Facilities and Beds

County	Provider Name	CON Approved		CON Project Number	Total Licensed Beds	Total Beds (Approved + Licensed)
		Child Beds	Adult Beds			
Alamance	Poplar Street Group Home	0	0		6	6
Alamance	Ralph Scott Lifeservices, Inc.	0	0		6	6
Alamance	Ralph Scott Lifeservices, Inc./Laramie Drive Group Home	0	0		6	6
Alamance	Ralph Scott Lifeservices, Inc./Veterans Drive	0	0		6	6
Alamance	Ralph Scott Lifeservices, Inc./Rosemont Street	0	0		6	6
Alexander	Little River Group Home	0	0		6	6
Alexander	VOCA-Second Avenue Group Home	0	0		6	6
Alexander	Ellendale Group Home	0	0		6	6
Alleghany	New River Cottage, Inc.	0	0		5	5
Anson	Ansonville Group Home	0	0		6	6
Ashe	Ridgecrest II	0	0		6	6
Ashe	Ridgecrest I	0	0		6	6
Ashe	Thomas Street Home	0	0		6	6
Beaufort	LIFE, Inc./Edgewood Group Home	0	0		6	6
Beaufort	LIFE, Inc./Dixon Road Group Home	0	0		6	6
Beaufort	LIFE, Inc./Slatestone Road Group Home	0	0		6	6
Beaufort	LIFE, Inc./Beaufort Heights Group Home	0	0		6	6
Beaufort	LIFE, Inc./Minute Man Group Home	0	0		6	6
Bladen	Northridge Residential	0	0		6	6
Bladen	Midlake Residential	0	0		6	6
Brunswick	LIFE, Inc./Folly Street Group Home	0	0		6	6
Brunswick	LIFE, Inc./Lockwood Street Group Home	0	0		6	6
Buncombe	BlueWest Opportunities-Swannanoa Residential	0	0		32	32
Buncombe	BlueWest Opportunities-Ora House	0	0		6	6
Buncombe	IWC-Rose Street Home	0	0		12	12
Buncombe	Chiles Avenue Group Home	0	0		6	6
Buncombe	Irene Wortham Residential Center-Azalea	0	0		6	6
Buncombe	BlueWest Opportunities-Pisgah House	0	0		6	6
Buncombe	BlueWest Opportunities-Kenmore House	0	0		6	6
Buncombe	BlueWest Opportunities-Montford House	0	0		5	5
Buncombe	IWRC-Dogwood	0	0		6	6
Buncombe	BlueWest Opportunities-New Stock House	0	0		6	6
Buncombe	Emory Road Home	0	0		6	6

Table 16A: Inventory of ICF/IID Facilities and Beds

County	Provider Name	CON Approved		CON Project Number	Total Licensed Beds	Total Beds (Approved + Licensed)
		Child Beds	Adult Beds			
Burke	Hartland Group Home	0	0		6	6
Burke	Chesterfield Group Home	0	0		6	6
Burke	SCI-Burke ICF/MR Group Home	0	0		5	5
Cabarrus	Michigan Street Home	0	0		5	5
Cabarrus	Bost Children's Center	0	0		10	10
Cabarrus	Clear Creek	0	0		120	120
Cabarrus	Christy Woods Group Home	0	0		5	5
Cabarrus	Wilhelm Place Home	0	0		5	5
Caldwell	Creekside Group Home	0	0		6	6
Caldwell	VOCA-Laurel Group Home	0	0		6	6
Caldwell	Playmore Group Home	0	0		6	6
Caldwell	Lower Creek Group Home	0	0		6	6
Carteret	LIFE, Inc./Grey Fox Run Group Home	0	0		6	6
Carteret	LIFE, Inc./Nine Foot Road Group Home	0	0		6	6
Catawba	Penny Lane #1	0	0		6	6
Catawba	23rd Street Home	0	0		6	6
Catawba	Penny Lane II	0	0		6	6
Catawba	Shannonbrook Home	0	0		6	6
Catawba	Wendover Home	0	0		6	6
Chatham	CLLC(Carolina Living & Learning Center)	0	0		15	15
Chowan	Luke Street	0	0		6	6
Chowan	LIFE, Inc./Albemarle Group Home	0	0		6	6
Chowan	LIFE, Inc./Chowan Group Home	0	0		6	6
Chowan	LIFE, Inc./Coke Avenue Group Home	0	0		6	6
Cleveland	VOCA-Young Group Home	0	0		6	6
Cleveland	Wooding Place Group Home	0	0		6	6
Columbus	Strawberry House	0	0		6	6
Columbus	Riverside Residential	0	0		6	6
Craven	LIFE, Inc./Cherry Lane	0	0		6	6
Craven	Brices Creek Road Home	0	0		6	6
Craven	Dogwood House	0	0		5	5
Craven	Riverbend	0	0		125	125
Craven	LIFE, Inc./Oakdale Home	0	0		6	6

Table 16A: Inventory of ICF/IID Facilities and Beds

County	Provider Name	CON Approved		CON Project Number	Total Licensed Beds	Total Beds (Approved + Licensed)
		Child Beds	Adult Beds			
Craven	LIFE, Inc./Lavenham Group Home	0	0		6	6
Craven	Kimberly Road	0	0		6	6
Cumberland	Hope Mills Home	0	0		6	6
Cumberland	Southern Avenue Home	0	0		6	6
Cumberland	Wilmington Road Group Home	0	0		6	6
Cumberland	Strickland Bridge Homes A & B	0	0		12	12
Cumberland	No Place Like Home	0	0		5	5
Cumberland	Northside Group Home	0	0		6	6
Cumberland	Holliday's Place Group Home	0	0		6	6
Cumberland	Extra Special Care	0	0		6	6
Cumberland	The Carter Clinic Residential Home	0	0		6	6
Cumberland	My Place	0	0		6	6
Cumberland	Thomas S. Decatur Home	0	0		6	6
Davidson	Scotthurst I & II	0	0		12	12
Davie	Twinbrooks	0	0		6	6
Davie	Boxwood Acres	0	0		6	6
Davie	Pleasant Acres	0	0		6	6
Duplin	Skill Creations of Kenansville	0	0		15	15
Duplin	SCI-Duplin House	0	0		6	6
Durham	Seven Oaks Road-Durham	0	0		5	5
Durham	Chandler Road	0	0		6	6
Durham	Keywest Center	0	0		6	6
Durham	Mineral Springs I	0	0		6	6
Durham	Mineral Springs II	0	0		6	6
Durham	Lynn Road	0	0		6	6
Durham	Holloway Street Home	0	0		6	6
Durham	Voca-Otis Street Home	0	0		6	6
Durham	VOCA-Obie	0	0		6	6
Durham	SCI-Triangle House I	0	0		6	6
Durham	SCI-Triangle House II	0	0		6	6
Durham	VOCA-Gentry	0	0		6	6
Durham	Kenwood Drive Home	0	0		6	6
Edgecombe	Skill Creations of Tarboro	0	0		15	15

Table 16A: Inventory of ICF/IID Facilities and Beds

County	Provider Name	CON Approved		CON Project Number	Total Licensed Beds	Total Beds (Approved + Licensed)
		Child Beds	Adult Beds			
Forsyth	Pineview	0	0		5	5
Forsyth	The Atrium/The Respite Center	0	0		30	30
Forsyth	Forsyth Group Home #1	0	0		6	6
Forsyth	Forsyth Group Home #2	0	0		6	6
Forsyth	Wilson Smith Cottage	0	0		6	6
Forsyth	The Arches-Horizons Residential Care Center	0	0		10	10
Forsyth	Konnoak Group Home	0	0		6	6
Gaston	Meek Road Group Home	0	0		6	6
Gaston	Belmont Group Home	0	0		5	5
Gaston	Cherryville Group Home	0	0		5	5
Gaston	Mountain Ridge Group Home	0	0		6	6
Gaston	Holy Angels Services-McAuley Residences	0	0		48	48
Gaston	Franklin Group Home	0	0		5	5
Gaston	Springdale Lane Group Home	0	0		5	5
Granville	Dove Road Home	0	0		6	6
Granville	Stem Road Home	0	0		6	6
Granville	Park Avenue Home	0	0		6	6
Granville	Granville ICF/MR Group Home	0	0		5	5
Guilford	Northbay Group Home	0	0		5	5
Guilford	VOCA-Meadowood Drive Group Home	0	0		6	6
Guilford	Watson's Group Home	0	0		6	6
Guilford	Gatewood	0	0		15	15
Guilford	Friendway Group Home	0	0		6	6
Guilford	Summerlyn	0	0		6	6
Guilford	West Friendly	0	0		6	6
Guilford	Westridge	0	0		6	6
Guilford	Guilford #1	0	0		6	6
Guilford	Guilford #2	0	0		6	6
Guilford	Guilford #3	0	0		6	6
Guilford	Rollingwood	0	0		6	6
Guilford	Southridge Road	0	0		5	5
Guilford	Westminister	0	0		6	6
Guilford	Guilford IV	0	0		6	6

Table 16A: Inventory of ICF/IID Facilities and Beds

County	Provider Name	CON Approved		CON Project Number	Total Licensed Beds	Total Beds (Approved + Licensed)
		Child Beds	Adult Beds			
Guilford	Ridgely Oak	0	0		6	6
Guilford	Holden Group Home	0	0		6	6
Halifax	Idlewood Group Home	0	0		6	6
Halifax	LIFE, Inc./ Lakeview	0	0		6	6
Halifax	SCI-Roanoke House	0	0		12	12
Halifax	McFarland Road	0	0		6	6
Halifax	LIFE, Inc./King Street Group Home	0	0		6	6
Harnett	Lillington Group Home	0	0		6	6
Harnett	Erwin Avenue Home	0	0		6	6
Harnett	Erwin #2 Group Home	0	0		6	6
Haywood	Haywood County Group Home #3	0	0		5	5
Henderson	Rayside A	0	0		4	4
Henderson	Rayside B	0	0		4	4
Henderson	Pinebrook Group Home	0	0		6	6
Henderson	Country Cove Group Home	0	0		6	6
Hertford	Roanoke Place	0	0		6	6
Hoke	Old Farm Road	0	0		6	6
Hoke	Ashley Heights Home	0	0		6	6
Iredell	Oakdale Group Home	0	0		6	6
Iredell	Fanjoy Home #1	0	0		6	6
Iredell	Bonnie Lane Group Home	0	0		6	6
Iredell	Dal-Wan Heights Group Home	0	0		6	6
Iredell	Fanjoy Home #2	0	0		6	6
Iredell	Hollingswood Group Home	0	0		6	6
Iredell	Pinewood Group Home	0	0		6	6
Jackson	Smoky ICF/MR Group Home	0	0		6	6
Jackson	Webster Group Home	0	0		6	6
Johnston	Country Manor Group Home	0	0		6	6
Johnston	Heath Avenue Home	0	0		6	6
Johnston	Canterbury Road Home	0	0		6	6
Johnston	VOCA-Greenwood Group Home	0	0		6	6
Johnston	VOCA-Laurelwood	0	0		6	6
Lee	Skill Creations of Sanford	0	0		15	15

Table 16A: Inventory of ICF/IID Facilities and Beds

County	Provider Name	CON Approved		CON Project Number	Total Licensed Beds	Total Beds (Approved + Licensed)
		Child Beds	Adult Beds			
Lee	T.L.C. Home, Inc.	0	0		10	10
Lee	Hickory II Group Home	0	0		6	6
Lee	VOCA-Sixth Street Group Home	0	0		6	6
Lee	Pine Ridge Group Home	0	0		6	6
Lenoir	Bear Creek	0	0		113	113
Lenoir	Roseanne Group Home	0	0		5	5
Lenoir	Skill Creations of Kinston	0	0		15	15
Lenoir	LaGrange Home	0	0		6	6
Lenoir	Washington Street East Group Home	0	0		6	6
Lenoir	Fox Run Group Home	0	0		6	6
Lenoir	Robin's Nest Group Home	0	0		6	6
Lincoln	Riverview Home	0	0		6	6
Lincoln	Sunny Hill Group Home #1	0	0		6	6
Lincoln	Brookwood Home	0	0		6	6
Lincoln	Sunny Hill II	0	0		6	6
Lincoln	Linoak Group Home	0	0		6	6
Lincoln	Ridgefield Home	0	0		6	6
Macon	Macon County Group Home	0	0		6	6
Macon	Iotla Street Group Home	0	0		6	6
Madison	BlueWest Opportunities-Mars Hills Residential Services	0	0		32	32
Martin	LIFE, Inc./Twin Acres Group Home	0	0		6	6
Mcdowell	Laurelwood Group Home	0	0		6	6
Mecklenburg	Oak Street Group Home-St. Mark	0	0		6	6
Mecklenburg	VOCA-Denbur Drive Group Home	0	0		6	6
Mecklenburg	VOCA-Norwich Road Group Home	0	0		6	6
Mecklenburg	VOCA-Mallard Drive	0	0		6	6
Mecklenburg	VOCA-Woodbridge Road Group Home	0	0		6	6
Mecklenburg	Dalmoor Drive Group Home	0	0		6	6
Mecklenburg	Bon Rea Drive Group Home	0	0		6	6
Mecklenburg	VOCA-Simpson Group Home	0	0		6	6
Mecklenburg	Starnes Group Home	0	0		6	6
Mecklenburg	VOCA-Freedom Group Home	0	0		6	6
Mecklenburg	Enoch Drive	0	0		6	6

Table 16A: Inventory of ICF/IID Facilities and Beds

County	Provider Name	CON Approved		CON Project Number	Total Licensed Beds	Total Beds (Approved + Licensed)
		Child Beds	Adult Beds			
Mecklenburg	VOCA-Harrisburg Road Group Home	0	0		6	6
Mecklenburg	VOCA-St. John's Church Road Group Home	0	0		6	6
Mecklenburg	VOCA-Oak Drive Group Home	0	0		6	6
Mecklenburg	VOCA-Purser Group Home	0	0		6	6
Mecklenburg	VOCA-Wilson Avenue Group Home	0	0		6	6
Mecklenburg	Tuckaseegee Group Home	0	0		6	6
Mecklenburg	Flowe Drive Group Home	0	0		6	6
Mecklenburg	Mantle Court Group Home	0	0		6	6
Mecklenburg	VOCA-Sandburg Group Home	0	0		6	6
Mecklenburg	VOCA-Oakhaven Drive Group Home	0	0		6	6
Mecklenburg	VOCA-Toddville Road Group Home	0	0		6	6
Mecklenburg	Monroe Road	0	0		6	6
Mecklenburg	Heathcroft	0	0		6	6
Mecklenburg	Burtonwood Circle Home	0	0		6	6
Mecklenburg	Ravendale Drive Group Home	0	0		6	6
Mecklenburg	Leaves	0	0		6	6
Mecklenburg	Lakeview	0	0		6	6
Mecklenburg	Browne Group Home	0	0		6	6
Mecklenburg	Shelburne Place	0	0		6	6
Mecklenburg	Gail B. Hanks Group Home	0	0		6	6
Montgomery	Myrtlewood Group Home	0	0		6	6
Montgomery	Mt. Gilead Children's Home	0	0		6	6
Moore	Sherwood Park Home	0	0		15	15
Moore	Magnolia Group Home	0	0		6	6
Moore	Crest Road Group Home	0	0		6	6
Moore	Moore County Home For Autistic Adults	0	0		6	6
Nash	SCI-Nash House I	0	0		6	6
Nash	SCI-Nash House II	0	0		6	6
Nash	LIFE, Inc/ Green Tee Lane	0	0		6	6
New Hanover	Lifetime Resources, Inc. Echo Farms Group Home	0	0		6	6
New Hanover	Greenville Loop Group Home	0	0		6	6
New Hanover	Myrtle Grove Group Home	0	0		6	6
New Hanover	SCI-Coastal House I and II	0	0		12	12

Table 16A: Inventory of ICF/IID Facilities and Beds

County	Provider Name	CON Approved		CON Project Number	Total Licensed Beds	Total Beds (Approved + Licensed)
		Child Beds	Adult Beds			
New Hanover	The Pine Valley Home	0	0		6	6
New Hanover	Robin Hood Group Home	0	0		6	6
New Hanover	LIFE, Inc./Cherokee Trail Group Home	0	0		6	6
Onslow	Queen's Pond	0	0		14	14
Onslow	Sandridge	0	0		24	24
Onslow	Countryview Residential	0	0		6	6
Orange	Residential Services, Inc. Retirement Center	0	0		15	15
Orange	Silo Drive Facility-Chapel Hill	0	0		6	6
Orange	West Main Street Facility-Carrboro	0	0		6	6
Orange	Shadylawn	0	0		6	6
Orange	Christopher Road	0	0		6	6
Orange	Quail Roost Group Home (ICF/MR)	0	0		6	6
Person	Cates Street ICF/MR	0	0		6	6
Person	Frank Street ICF/MR	0	0		6	6
Pitt	Skill Creations of Greenville	0	0		15	15
Pitt	Tar River	0	0		30	30
Pitt	SCI-East	0	0		12	12
Pitt	King George Group Home	0	0		6	6
Pitt	Forest Hills Group Home	0	0		6	6
Pitt	Curry House	0	0		6	6
Pitt	Pitt County Group Home #1	0	0		6	6
Pitt	Pitt County Group Home #2	0	0		6	6
Pitt	Pitt County Group Home #3	0	0		6	6
Randolph	Brookwood	0	0		6	6
Randolph	Timberlea Group Home	0	0		6	6
Richmond	Mallard Lane Center	0	0		5	5
Richmond	Hoffman Group Home	0	0		6	6
Richmond	Pence Place	0	0		9	9
Robeson	Eastbrook	0	0		6	6
Robeson	Wakulla I & II	0	0		12	12
Robeson	Westside Residential	0	0		6	6
Robeson	Corbel Residential	0	0		6	6
Rockingham	Rouse's Group Homes	0	0		30	30

Table 16A: Inventory of ICF/IID Facilities and Beds

County	Provider Name	CON Approved		CON Project Number	Total Licensed Beds	Total Beds (Approved + Licensed)
		Child Beds	Adult Beds			
Rockingham	Rouse's Group Home #6	0	0		5	5
Rowan	Rockwell 1 & 2	0	0		12	12
Rowan	Myron Place	0	0		6	6
Rowan	Laura Springs Road Home	0	0		6	6
Rowan	Smith Street Home	0	0		6	6
Rowan	Stoneridge	0	0		6	6
Rutherford	VOCA-Woodland	0	0		6	6
Rutherford	VOCA-Rollins Group Home	0	0		6	6
Sampson	Skill Creations of Clinton	0	0		15	15
Scotland	Lee Forest Home	0	0		6	6
Scotland	Scotland Forest Home	0	0		6	6
Scotland	College Park	0	0		6	6
Stanly	Marie G. Smith Group Home	0	0		6	6
Stanly	Moss I Group Home	0	0		5	5
Stanly	Robert W. Thompson Group Home	0	0		6	6
Stanly	A. Jack Wall Group Home	0	0		6	6
Stanly	Carolina Farms Group Home #1	0	0		6	6
Stanly	Carolina Farms Group Home #2	0	0		6	6
Stanly	Carolina Farms Group Home #3	0	0		6	6
Stanly	Moss II Group Home	0	0		6	6
Stanly	Morrow Valley Farmstead	0	0		10	10
Stokes	Pilotview	0	0		5	5
Surry	Sydnor Street Group Home	0	0		6	6
Surry	Park Drive Group Home	0	0		6	6
Transylvania	Forest Bend Group Home	0	0		6	6
Union	Meadowview Home	0	0		6	6
Union	Karen Lane Home	0	0		6	6
Wake	Hilltop Home	0	0		22	22
Wake	Tammy Lynn Center for Developmental Disabilities	0	0		30	30
Wake	Dartmouth Road Group Home	0	0		6	6
Wake	Georgia Court	0	0		6	6
Wake	Forest Creek Group Home	0	0		6	6
Wake	Rolling Meadows	0	0		6	6

Table 16A: Inventory of ICF/IID Facilities and Beds

County	Provider Name	CON Approved		CON Project Number	Total Licensed Beds	Total Beds (Approved + Licensed)
		Child Beds	Adult Beds			
Wake	Blanche Drive	0	0		6	6
Wake	Jade Tree	0	0		6	6
Wake	Hickory Avenue Home	0	0		6	6
Wake	Country Lane	0	0		6	6
Wake	VOCA-Creekway	0	0		6	6
Wake	Dickens Drive Home	0	0		6	6
Wake	Helmsdale Group Home	0	0		6	6
Wake	Lockley Road	0	0		6	6
Wake	VOCA Olive Home	0	0		6	6
Wake	Mason Street	0	0		6	6
Wake	Avent Ferry Home	0	0		6	6
Wake	Trotters Bluff	0	0		6	6
Wake	Stonegate	0	0		6	6
Wake	Rockwood	0	0		6	6
Wake	Huntleigh	0	0		6	6
Wake	Bass Lake	0	0		6	6
Washington	LIFE, Inc./Old Roper Road Group Home	0	0		6	6
Washington	LIFE, Inc./ Wilson Street Group Home	0	0		6	6
Watauga	Wildcat Group Home	0	0		15	15
Wayne	LIFE, Inc./Walnut Street Group Home	0	0		6	6
Wayne	LIFE, Inc./William Street Home	0	0		6	6
Wayne	Skill Creations	0	0		15	15
Wayne	Walnut Creek	0	0		37	37
Wayne	Highway 117 Group Home	0	0		6	6
Wayne	Airport Road Group Home	0	0		6	6
Wayne	Daughtry Field Road Group Home	0	0		6	6
Wayne	Norwood Avenue Home	0	0		6	6
Wayne	Holly Street Home	0	0		6	6
Wayne	North Drive Group Home	0	0		6	6
Wilkes	Lewis Fork Homes I & II	0	0		12	12
Wilkes	VOCA-Welborn Ave.	0	0		6	6
Wilkes	Lakewood	0	0		6	6
Wilkes	VOCA-Apple Valley	0	0		6	6

Table 16A: Inventory of ICF/IID Facilities and Beds

County	Provider Name	CON Approved		CON Project Number	Total Licensed Beds	Total Beds (Approved + Licensed)
		Child Beds	Adult Beds			
Wilkes	VOCA-College Street	0	0		6	6
Wilkes	VOCA-Blairfield	0	0		6	6
Wilkes	VOCA-Kimsey	0	0		6	6
Wilson	Skill Creations of Wilson	0	0		15	15
Wilson	LIFE, Inc./Raven Ridge Group Home	0	0		6	6
Wilson	McKeel Loop Road Home	0	0		6	6
Yadkin	Yadkin I	0	0		6	6
Yadkin	Yadkin II & III	0	0		12	12
Totals		0	0		2,800	2,800

Table 16B: State Facility Beds Excluded from ICF/IID Inventory by County

County	Facility Name	Number of Certified ICF/IID Beds
Granville	Murdoch Developmental Center	640
Lenoir	Caswell Developmental Center	807
Wayne	O’Berry Neuro-Medical Treatment Center*	338
Burke	J. Iverson Riddle Developmental Center	481
Total		2,266

* This facility operates nursing home beds in addition to the 338 ICF/IID beds.

Chapter 17:

Technology and Equipment

- A. Cardiac Catheterization Equipment
- B. Gamma Knives
- C. Linear Accelerators
- D. Lithotriptors
- E. Magnetic Resonance Imaging Scanners
- F. Positron Emission Tomography Scanners

CHAPTER 17

TECHNOLOGY AND EQUIPMENT

Introduction

This chapter covers six types of medical equipment subject to the Certificate of Need (CON) Law: cardiac catheterization equipment, gamma knives, linear accelerators (LINAC), lithotriptors, magnetic resonance imaging (MRI) scanners, and positron emission tomography scanners (PET).

Definitions

The reporting year for all types of equipment is October 1 through September 30. The *current* reporting year is October 1, 2020 through September 30, 2021.

The *inventory* is the number of units of equipment in operation, as reported at the end of the reporting year. The *planning inventory* is the inventory and any adjustments for certificates of need and prior need determinations.

Changes from the Previous Plan

The MRI methodology has been extensively revised. Also, the cardiac catheterization methodology includes a change to the rounding method. No other substantive changes have been incorporated into this chapter.

Data Sources

Inventory and utilization data come from the Hospital License Renewal Application for equipment on a hospital campus or at a facility on a hospital license. Data for equipment in freestanding facilities and mobile units comes from the Registration and Inventory of Medical Equipment form for each type of equipment.

A. CARDIAC CATHETERIZATION EQUIPMENT

Introduction

G.S. 131E-176(2f) defines *cardiac catheterization equipment* as “equipment used to provide cardiac catheterization services.” G.S. 131E-176(2g) defines *cardiac catheterization services* as “those procedures, excluding pulmonary angiography procedures, in which a catheter is introduced into a vein or artery and threaded through the circulatory system into the heart specifically to diagnose abnormalities in the motion, contraction, and blood flow of the moving heart or to perform surgical therapeutic interventions to restore, repair, or reconstruct the coronary blood vessels of the heart.” Tables 17A-1 and 17A-2 show the number of cardiac catheterization procedures performed during the reporting year.

Changes from the Previous Plan

The total number of units required in a service area are now rounded up to the next higher whole number when calculating need.

Assumptions of the Methodology

1. Cardiac catheterization equipment service areas are the Acute Care Bed Service Areas defined in Chapter 5 and shown in Figure 5.1.
2. The capacity of a unit of cardiac catheterization equipment is defined as 1,500 diagnostic-equivalent procedures per year, with the trigger of need at 80% of capacity. One interventional cardiac catheterization procedure is valued at 1.75 diagnostic-equivalent procedures. One cardiac catheterization procedure performed on a patient age 14 or younger is valued at two diagnostic-equivalent procedures. All other procedures are valued at one diagnostic-equivalent procedure.
3. Cardiac catheterization equipment and services shall only be approved for development on hospital sites (i.e., in facilities that are on a hospital’s license) or in a licensed ambulatory surgical facility (excluding endoscopy-only facilities).

Application of the Methodology

Fixed Equipment

Methodology 1 (Table 17A-3)

The need determination methodology in service areas with at least one unit of equipment in the current inventory is as follows:

- Step 1: Determine the planning inventory (*Column F*) for each facility with fixed cardiac catheterization equipment, to include the total of: existing equipment in operation (*Column C*), approved equipment for which a certificate of need was issued but is under development (*Column D*), and need determinations for which no certificate of need has yet been issued (*Column E*).
- Step 2: Determine the number of adult and pediatric diagnostic and interventional procedures performed at each facility during the current reporting year (*Table 17A-1*). If mobile procedures are provided in a county that is part of more than one service area, divide the procedures equally between the service areas.
- Step 3: Calculate the total weighted (diagnostic-equivalent) cardiac catheterization procedures for each facility by multiplying adult diagnostic procedures by 1.0, interventional procedures by 1.75, and pediatric procedures performed on patients age 14 or younger by 2.00 (*Column H*).

- Step 4: For each facility, determine the number of units of fixed cardiac catheterization equipment required for the number of procedures performed by dividing the number of weighted (diagnostic-equivalent) cardiac catheterization procedures performed at each facility by 1,200 procedures (i.e., 80% of the 1,500-procedure capacity). Round the result to the nearest hundredth (*Column I*).
- Step 5: Sum the number of units of fixed cardiac catheterization equipment required for all facilities in the same service area as calculated in Step 4 (*Column I*). Round up to the nearest whole number (*Column J*).
- Step 6: In each service area, subtract the total planning inventory (*Column F*) from the number of units of fixed cardiac catheterization equipment required (*Column I*). The difference is the number of additional units of fixed cardiac catheterization equipment needed (*Column J*).

Unless otherwise specified by the methodology, calculations do not use rounded values. However, fractional values are rounded automatically when displayed.

Methodology 2 (Table 17A-2)

For cardiac catheterization equipment in a service area that does not have a unit of fixed cardiac catheterization equipment, a need determination exists for one unit of shared fixed cardiac catheterization equipment (i.e., fixed equipment that is used to perform both cardiac catheterization procedures and angiography procedures) when:

1. The number of cardiac catheterization procedures as defined in 10A NCAC 14C .1601(5) performed at any mobile site in the service area exceeds 240 (300 procedures x 80%) procedures per year for each eight hours per week the mobile equipment is operated at that site during the current reporting year (*Table 17A-2*); and
2. No other fixed or mobile cardiac catheterization service is provided in the same service area.

Unless otherwise specified by the methodology, calculations do not use rounded values. However, fractional values are rounded automatically when displayed.

Mobile Equipment

The State Medical Facilities Plan (SMFP) does not have a methodology to project need for additional mobile cardiac catheterization equipment. A summer petition is required to place a need in the upcoming SMFP. If the need determination is approved, any person may apply for a certificate of need to acquire the mobile cardiac catheterization equipment.

Table 17A-1: Cardiac Catheterization Procedures by Facility and Type, 2021

County	Hospital	Diagnostic				Interventional				Total
		Adult		Pediatric		Adult		Pediatric		
		Fixed	Mobile	Fixed	Mobile	Fixed	Mobile	Fixed	Mobile	
Alamance	Alamance Regional Medical Center	648	-	-	-	193	-	-	-	841
Buncombe	Mission Hospital	3,581	-	-	-	1,298	-	-	-	4,879
Burke	UNC Health Blue Ridge	526	-	-	-	130	-	-	-	656
Cabarrus	Atrium Health Cabarrus	1,642	-	-	-	1,095	-	-	-	2,737
Caldwell	Caldwell Memorial Hospital	307	-	-	-	416	-	-	-	723
Carteret	Carteret General Hospital	516	-	-	-	187	-	-	-	703
Catawba	Catawba Valley Medical Center	435	-	-	-	266	-	-	-	701
Catawba	Frye Regional Medical Center	1,898	-	-	-	1,106	-	-	-	3,004
Cleveland	Atrium Health Cleveland	3	-	-	-	-	-	-	-	3
Craven	CarolinaEast Medical Center	1,030	-	-	-	860	-	-	-	1,890
Cumberland	Cape Fear Valley Medical Center	846	-	-	-	1,691	-	-	-	2,537
Durham	Duke Regional Hospital	908	-	-	-	359	-	-	-	1,267
Durham	Duke University Hospital	4,230	-	229	-	1,509	-	232	-	6,200
Forsyth	North Carolina Baptist Hospital	2,440	-	18	-	1,216	-	31	-	3,705
Forsyth	Novant Health Forsyth Medical Center	2,685	-	-	-	1,483	-	-	-	4,168
Gaston	Caromont Regional Medical Center	1,790	-	-	-	574	-	-	-	2,364
Guilford	Cone Health	2,871	-	-	-	1,187	-	-	-	4,058
Guilford	High Point Regional Medical Center	1,385	-	-	-	569	-	-	-	1,954
Halifax	Vidant North Hospital	123	-	-	-	42	-	-	-	165
Harnett	Cape Fear Betsy Johnson Hospital	244	-	-	-	51	-	-	-	295
Haywood	Haywood Regional Hospital	613	-	-	-	229	-	-	-	842
Henderson	Margaret R. Pardee Memorial Hospital	352	-	-	-	169	-	-	-	521
Iredell	Davis Regional Medical Center	184	-	-	-	24	-	-	-	208
Iredell	Iredell Memorial Hospital	608	-	-	-	162	-	-	-	770
Iredell	Lake Norman Regional Medical Center	220	-	-	-	78	-	-	-	298
Johnston	Johnston Health	828	-	-	-	462	-	-	-	1,290
Lee	Central Carolina Hospital	210	-	-	-	29	-	-	-	239

Table 17A-1: Cardiac Catheterization Procedures by Facility and Type, 2021

County	Hospital	Diagnostic				Interventional				Total
		Adult		Pediatric		Adult		Pediatric		
		Fixed	Mobile	Fixed	Mobile	Fixed	Mobile	Fixed	Mobile	
Lenoir	UNC Lenoir Health Care	297	-	-	-	-	-	-	-	297
Mecklenburg	Atrium Health Pineville	1,041	-	-	-	768	-	-	-	1,809
Mecklenburg	Carolinas Medical Center	2,419	-	147	-	897	-	247	-	3,710
Mecklenburg	Novant Health Huntersville Medical Center	556	-	-	-	256	-	-	-	812
Mecklenburg	Novant Health Matthews Medical Center	1,000	-	-	-	582	-	-	-	1,582
Mecklenburg	Novant Health Presbyterian Medical Center	1,121	-	-	-	850	-	-	-	1,971
Moore	First Health Moore Regional Hospital	2,704	-	-	-	1,045	-	-	-	3,749
Nash	Nash General Hospital	913	-	-	-	658	-	-	-	1,571
New Hanover	New Hanover Regional Medical Center	2,462	-	-	-	2,719	-	-	-	5,181
Onslow	Onslow Memorial Hospital	16	-	-	-	-	-	-	-	16
Orange	UNC Hospitals	2,696	-	101	-	1,113	-	84	-	3,994
Pasquotank	Sentrara Albermarle Medical Center	863	-	-	-	1	-	-	-	864
Pitt	Vidant Medical Center	3,142	-	10	-	979	-	15	-	4,146
Randolph	Randolph Hospital	-	-	-	-	-	-	-	-	-
Robeson	Southeastern Regional Medical Center	629	-	-	-	639	-	-	-	1,268
Rowan	Novant Health Rowan Medical Center	404	-	-	-	254	-	-	-	658
Rutherford	Rutherford Regional Medical Center	77	-	-	-	-	-	-	-	77
Scotland	Scotland Memorial Hospital	246	-	-	-	56	-	-	-	302
Stanly	Atrium Health Stanly	-	-	-	-	-	-	-	-	-
Union	Atrium Health Union	351	-	-	-	141	-	-	-	492
Vance	Maria Parham Medical Center	243	-	-	-	52	-	-	-	295
Wake	Duke Raleigh Hospital	462	-	-	-	168	-	-	-	630
Wake	Rex Hospital	3,513	-	-	-	2,124	-	-	-	5,637
Wake	WakeMed	2,228	-	-	-	1,836	-	-	-	4,064
Wake	WakeMed Cary Hospital	546	-	-	-	91	-	-	-	637
Watauga	Watauga Medical Center	554	-	-	-	199	-	-	-	753
Wayne	Wayne UNC Health Care	1,168	-	-	-	329	-	-	-	1,497

Table 17A-1: Cardiac Catheterization Procedures by Facility and Type, 2021

County	Hospital	Diagnostic				Interventional				Total
		Adult		Pediatric		Adult		Pediatric		
		Fixed	Mobile	Fixed	Mobile	Fixed	Mobile	Fixed	Mobile	
Wilkes	Wilkes Regional Medical Center	-	-	-	-	-	-	-	-	-
Wilson	Wilson Medical Center	104	-	-	-	20	-	-	-	124
Total		60,878	-	505	-	31,162	-	609	-	93,154

Table 17A-2: Mobile Cardiac Catheterization Capacity and Volume

County	Service Site	Days/Week On Site	Procedure Capacity	Procedures Reported in 2021
Columbus	Columbus Regional Healthcare System	1.00	300	3
Davidson	Novant Health Thomasville Medical Center	1.00	300	105
Jackson	Harris Regional Hospital	1.00	300	177
Brunswick	Novant Health Brunswick Medical Center	1.00	300	35
Total		4.00	1,200	320

Table 17A-3: Fixed Cardiac Catheterization Equipment, Capacity and Volume

A	B	C	D	E	F	G	H	I	J	K
Cardiac Catheterization Equipment Service Areas	Facility	Current Inventory	CON Issued/ Pending Development	Pending Review or Appeal	Total Planning Inventory	Footnote	2021 Procedures (Weighted Totals)	Machines Required Based on 80% Utilization	Number of Additional Machines Required by Facility	Number of Additional Machines Needed by Service Area
Alamance	Alamance Regional Medical Center	1			1	b	986	0.82	0	
	TOTAL				1			1		0
Buncombe/Graham/Madison/Yancey	Mission Hospital	5			5	a	5,853	4.88	0	
	TOTAL				5			5		0
Burke	UNC Health Blue Ridge	1			1	c	754	0.63	0	
	TOTAL				1			1		0
Cabarrus	Atrium Health Cabarrus	2	1		3	b	3,558	2.97	0	
	TOTAL				3			3		0
Caldwell	Caldwell Memorial Hospital [DLP Healthcare]	1			1	c, d	1,035	0.86	0	
	TOTAL				1			1		0
Carteret	Carteret General Hospital	1			1	c	843	0.70	0	
	TOTAL				1			1		0
Catawba	Catawba Valley Medical Center	1			1	b	901	0.75	0	
	Frye Regional Medical Center	4			4	b	3,834	3.19	0	
	TOTAL				5			4		0
Cleveland	Atrium Health Cleveland [DLP Healthcare]	1			1	c	3	0.00	0	
	TOTAL				1			1		0
Craven/Jones/ Pamlico	CarolinaEast Medical Center	2	1		3	b	2,535	2.11	0	
	TOTAL				3			3		0
Cumberland	Cape Fear Valley Medical Center	4			4	b	3,805	3.17	0	
	TOTAL				4			4		0
Durham/Caswell/Warren	Duke Regional Hospital	2			2	b	1,536	1.28	0	
	Duke University Hospital	7			7	a	7,793	6.49	0	
	TOTAL				9			8		0
Forsyth	North Carolina Baptist Hospital	5			5	a	4,666	3.89	0	
	Novant Health Forsyth Medical Center	8			8	b	5,280	4.40	0	
	TOTAL				13			9		0
Gaston	CaroMont Regional Medical Center	3			3	b	2,795	2.33	0	
	TOTAL				3			3		0
Guilford	Cone Health	7			7	b	4,948	4.12	0	
	High Point Regional Medical Center	4			4	b	2,381	1.98	0	
	TOTAL				11			7		0
Halifax/ Northampton	Vidant North Hospital	1			1	c	197	0.16	0	
	TOTAL				1			1		0
Harnett	Cape Fear Betsy Johnson Hospital	1			1	c	333	0.28	0	
	TOTAL				1			1		0
Haywood	Haywood Regional Hospital	1			1	c	1,014	0.84	0	
	TOTAL				1			1		0
Henderson	Margaret R. Pardee Memorial Hospital [DLP Healthcare]	1	1		2	c	648	0.54	0	
	TOTAL				2			1		0

Table 17A-3: Fixed Cardiac Catheterization Equipment, Capacity and Volume

A	B	C	D	E	F	G	H	I	J	K
Cardiac Catheterization Equipment Service Areas	Facility	Current Inventory	CON Issued/ Pending Development	Pending Review or Appeal	Total Planning Inventory	Footnote	2021 Procedures (Weighted Totals)	Machines Required Based on 80% Utilization	Number of Additional Machines Required by Facility	Number of Additional Machines Needed by Service Area
Iredell	Davis Regional Medical Center	1			1	c	226	0.19	0	
	Iredell Memorial Hospital	1			1	c	892	0.74	0	
	Lake Norman Regional Medical	1			1	c	357	0.30	0	
	2022 Need Determination			1	1					
	TOTAL				4			2		0
Johnston	Johnston Health	1			1	c	1,637	1.36	0	
	TOTAL				1			2		1
Lee	Central Carolina Hospital	1			1	c	261	0.22	0	
	TOTAL				1			1		0
Lenoir	UNC Lenoir Health Care	1			1	c	297	0.25	0	
	TOTAL				1			1		0
Mecklenburg	Atrium Health Pineville	3			3	a	2,385	1.99	0	
	Carolinas Medical Center	9			9	a	4,777	3.98	0	
	Novant Health Huntersville Medical Center	1			1	b	1,004	0.84	0	
	Novant Health Matthews Medical Center	1			1	c	2,019	1.68	1	
	Novant Health Presbyterian Medical Center	2			2	b	2,609	2.17	0	
	2022 Need Determination	1			1					
	TOTAL				17			11		0
Moore	FirstHealth Moore Regional Hospital	6			6	b	4,533	3.78	0	
	TOTAL				6			4		0
Nash	Nash General Hospital	2			2	c	2,065	1.72	0	
	TOTAL				2			2		0
New Hanover	New Hanover Regional Medical Center	5	1		6	b	7,220	6.02	0	
	TOTAL				6			7		1
Onslow	Onslow Memorial Hospital	1			1	c	16	0.01	0	
	TOTAL				1			1		0
Orange	UNC Hospitals	4			4	a	5,014	4.18	0	
	TOTAL				4			5		1
Pasquotank/ Camden/ Currituck/ Perquimans	Sentara Albemarle Medical Center	1			1	c	865	0.72	0	
	TOTAL				1			1		0
Pitt/Greene/ Hyde/Tyrell	Vidant Medical Center	7			7	a	4,905	4.09	0	
	TOTAL				7			5		0
Randolph	Randolph Hospital	1			1	c	0	0.00	0	
	TOTAL				1			0		0
Robeson	Southeastern Regional Medical Center	2			2	b	1,747	1.46	0	
	TOTAL				2			2		0
Rowan	Novant Health Rowan Medical Center	1			1	c	849	0.71	0	
	TOTAL				1			1		0
Dutherford	Rutherford Regional Medical Center	1			1	c	77	0.06	0	

Table 17A-3: Fixed Cardiac Catheterization Equipment, Capacity and Volume

A	B	C	D	E	F	G	H	I	J	K
Cardiac Catheterization Equipment Service Areas	Facility	Current Inventory	CON Issued/ Pending Development	Pending Review or Appeal	Total Planning Inventory	Footnote	2021 Procedures (Weighted Totals)	Machines Required Based on 80% Utilization	Number of Additional Machines Required by Facility	Number of Additional Machines Needed by Service Area
North Carolina	TOTAL				1			1		0
Scotland	Scotland Memorial Hospital	1			1	c	344	0.29	0	
	TOTAL				1			1		0
Stanly	Atrium Health Stanly	1			1		0	0.00	0	
	TOTAL				1			0		0
Union	Atruim Health Union	1			1	c	598	0.50	0	
	TOTAL				1			1		0
Vance/Warren	Maria Parham Medical Center	1			1	c	334	0.28	0	
	TOTAL				1			1		0
Wake	Duke Raleigh Hospital [DLP Healthcare]	3			3	c	756	0.63	0	
	Rex Hospital	6			6	b	7,230	6.03	0	
	WakeMed	9			9	b	5,441	4.53	0	
	WakeMed Cary Hospital	1			1	c	705	0.59	0	
	TOTAL				19			12		0
Watauga	Watauga Medical Center	1			1	c	902	0.75	0	
	TOTAL				1			1		0
Wayne	Wayne UNC Health Care	1			1	c	1,744	1.45	0	
	TOTAL				1			2		1
Wilkes	Wilkes Regional Medical Center	1			1	c	0	0.00	0	
	TOTAL				1			0		0
Wilson	Wilson Medical Center	1			1	c	139	0.12	0	
	TOTAL				1			1		0
NORTH CAROLINA TOTALS		144	4	1	149		117,640	120		4

^a Adult procedures plus angioplasty x 1.75 plus pediatric procedures x 2

^b Adult procedures plus angioplasty x 1.75

^c Adult procedures

^d Procedures performed on mobile machine

**Table 17A-4: Fixed Cardiac Catheterization Equipment
Need Determination***

(Proposed for Certificate of Need Review Commencing in 2023)

Service Area	Fixed Cardiac Catheterization Equipment Need Determination**	Certificate of Need Application Deadline	Certificate of Need Beginning Review Date
Johnston	1	To be determined	To be determined
New Hanover	1	To be determined	To be determined
Orange	1	To be determined	To be determined
Wayne	1	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.0203(b). The filing deadline is 5:00 p.m. on the application deadline date.

**Table 17A-5: Shared Fixed Cardiac Catheterization Equipment
Need Determination**

(Proposed for Certificate of Need Review Commencing in 2023)

Service Area	Shared Cardiac Catheterization Equipment Need Determination	Certificate of Need Application Deadline	Certificate of Need Beginning Review Date
It is determined that there is no need anywhere in the state and no reviews are scheduled.			

B. GAMMA KNIVES

Introduction

Gamma knife, as defined in G.S.131E-176(7c), means “equipment which emits photon beams from a stationary radioactive cobalt source to treat lesions deep within the brain and is one type of stereotactic radiosurgery.” Two types of equipment, both using photon beams, perform this kind of radiosurgery. In one type, beams from a linear accelerator are focused from a device that rotates around the patient. The other type of equipment, gamma knife, emits 201 beams from stationary radioactive cobalt sources.

North Carolina has two gamma knife planning regions (service areas) - the western region (Health Service Areas [HSA] I, II, and III) and the eastern region (HSAs IV, V, and VI). Appendix A identifies the multicounty groupings that comprise the HSAs. The gamma knife at North Carolina Baptist Hospital in Forsyth County (HSA II) serves the western region. This facility performed 479 procedures during the reporting year. The gamma knife at Vidant Medical Center in Pitt County (HSA VI) serves the eastern region. This facility performed 230 procedures during the reporting year. Pursuant to the 2020 adjusted need determination, Carolinas Medical Center received a certificate of need (F-011898-20) to acquire a gamma knife in Mecklenburg County (HSA III).

The SMFP does not have a methodology to project need for additional gamma knives. A summer petition is required to place a need in the State Medical Facilities Plan (SMFP). If the need determination is approved, any person may apply for a certificate of need to acquire the gamma knife.

C. LINEAR ACCELERATORS

Introduction

G.S. 131E-176 (14g) defines a **linear accelerator** as “a machine used to produce ionizing radiation in excess of 1,000,000 electron volts in the form of a beam of electrons or photons to treat cancer patients.”

Table 17C-1 lists the facilities that have linear accelerators. Table 17C-2 lists the facilities that also provide stereotactic radiosurgery treatment using appropriately equipped linear accelerators.

Data Sources

In addition to the data sources listed in the Introduction to this chapter, this methodology also obtains the July 1 estimated county population for 2022 provided by the North Carolina Office of State Budget and Management.

Definition

A linear accelerator’s **service area** is one of the 28 multicounty groupings described in the Assumptions of the Methodology.

Assumptions of the Methodology

1. The methodology incorporates: (a) a geographic accessibility criterion, which is a population base of 120,000 as suggested by the Inter-Society Council for Radiation Oncology; (b) a criterion aimed at assuring efficient use of megavoltage radiation facilities (when Equivalent Simple Treatment Visit [ESTV] procedures divided by 6,750 minus the number of present linear accelerators equals ≥ 0.25); and (c) a patient origin criterion (when a service area has 45% or more of the patients coming from outside the service area). A need determination exists when two of the three criteria are met within a service area.
2. The American College of Radiology recommends use of ESTVs because radiation treatments vary in complexity. In addition, when developing the original methodology ESTVs were recommended as part of the comments received during public hearings. Providers report procedures by Current Procedural Terminology (CPT) codes, which are converted to ESTVs (*Table 17C-3*).
3. Patient origin data from the current reporting year forms the basis for defining service areas (*Table 17C-4*). Counties are the basic units for the formation of linear accelerator service areas, based on proximity, utilization patterns, and patient origin data. A small percentage of the population lives some distance from a linear accelerator, but the sparsity of population in and around these areas does not provide the population required to support a linear accelerator. In these cases, two exceptions apply:
 - a. Where patient origin data indicates a county’s residents primarily use a linear accelerator that is outside their home county, the county is aligned with the county where at least 45% of its residents go for linear accelerator services.
 - b. When a county with a linear accelerator has a population less than 120,000, that county is combined with an adjacent county to which the largest percentage of patients go for linear accelerator services, based on patient origin data.
4. Three principal questions must be addressed when determining whether a service area needs an additional linear accelerator:

- a. Do the linear accelerators in the service area perform more than 6,750 procedures (ESTVs) per accelerator per year?
- b. Is the population of the service area greater than 120,000 per accelerator?
- c. Does the patient origin data show that more than 45% of the patients come from outside the service area?

Application of the Methodology

The standard methodology for determining need for linear accelerators is calculated as follows:

Criterion 1:

- Step 1: Sum the population estimates for the counties that comprise each linear accelerator service area to determine the population for the service areas (*Table 17C-4*).
- Step 2: For each linear accelerator service area, sum the number of existing linear accelerators, the number of approved linear accelerators not yet operational but for which a certificate of need has been awarded, and the linear accelerator need determinations from previous years (*Table 17C-1*).
- Step 3: Divide the service area population by the result of Step 2 to determine the population residing in the service area per linear accelerator. If the result is greater than or equal to 120,000 per linear accelerator, Criterion 1 is satisfied (*Table 17C-5*).

Criterion 2:

- Step 4: For each service area, use current patient origin data for the reporting year to count the number of patients served on linear accelerators located in the service area, and who reside in a county outside the service area.
- Step 5: For each service area, divide the results of Step 4 by the total number of patients served on linear accelerators located in the service area. If more than 45% of total patients served on linear accelerators located in a service area reside outside the service area, then Criterion 2 is satisfied (*Table 17C-5*).

Criterion 3:

- Step 6: For each linear accelerator service area, sum the number of reported ESTV procedures performed on the linear accelerators located in the service area.
- Step 7: Divide the results of Step 6 by the number of linear accelerators in the service area which are counted in Step 2 to determine the average number of ESTV procedures performed per linear accelerator in each linear accelerator service area.
- Step 8: Divide the results of Step 7 by 6,750 ESTV procedures.
- Step 9: Subtract the number of linear accelerators in the service area counted in Step 2 from the results of Step 8. If the difference is greater than or equal to positive 0.25, Criterion 3 is satisfied (*Table 17C-5*).

If any two of the above three criteria are satisfied in a linear accelerator service area, the service area has a need determination for one additional linear accelerator (*Table 17C-5*).

Criterion 4:

Regardless of the results of Steps 1-9 above, if a county has a population of 120,000 or more and there is not a linear accelerator counted in Step 2 for that county, a need is determined for one linear accelerator in that county. As a result, the county becomes a separate, new linear accelerator service area.

Unless otherwise specified by the methodology, calculations do not use rounded values. However, fractional values are rounded automatically when displayed.

Table 17C-1: Hospital and Free-Standing Linear Accelerators and Radiation Oncology Procedures

Facility Name	Service Area Number	County	Number of Linear Accelerators	Number of Procedures (ESTVs) 10/1/2020-9/30/2021	Average Number of Procedures per Unit
Harris Regional Hospital	1	Jackson	1	1,117	1,117
North Carolina Radiation Therapy Management Services - Franklin	1	Macon	1	1,582	1,582
Mission Hospital - Mission Cancer Care	2	Buncombe	3	17,296	5,765
North Carolina Radiation Therapy Management Services - Asheville	2	Buncombe	1	4,006	4,006
North Carolina Radiation Therapy Management Services - Asheville	2	Buncombe	1	0	0
North Carolina Radiation Therapy Management Services - Weaverville	2	Buncombe	1	2,747	2,747
North Carolina Radiation Therapy Management Services - Clyde	2	Haywood	1	4,572	4,572
North Carolina Radiation Therapy Management Services - Marion	2	McDowell	1	3,926	3,926
Watauga Medical Center	3	Watauga	1	2,260	2,260
Margaret R. Pardee Memorial Hospital	4	Henderson	1	5,517	5,517
North Carolina Radiation Therapy Management Services - Hendersonville	4	Henderson	1	2,642	2,642
North Carolina Radiation Therapy Management - Brevard	4	Transylvania	1	2,034	2,034
Carolinas Healthcare System Blue Ridge	5	Burke	2	5,050	2,525
Caldwell Memorial Hospital	5	Caldwell	1	3,373	3,373
Catawba Valley Medical Center	5	Catawba	2	11,171	5,586
Frye Regional Medical Center	5	Catawba	1	3,059	3,059
Atrium Health Cleveland	6	Cleveland	1	6,782	6,782
CaroMont Regional Medical Center*	6	Gaston	3	23,115	7,705
North Carolina Radiation Therapy Management Services - Forest City	6	Rutherford	1	3,430	3,430
2022 Need Determination	7	Mecklenburg	1	0	0
Atrium Health Pineville	7	Mecklenburg	1	11,783	11,783
Atrium Health University City	7	Mecklenburg	1	8,089	8,089
Carolinas Medical Center	7	Mecklenburg	3	18,235	6,078
Matthews Radiation Oncology Center	7	Mecklenburg	2	11,071	5,535
Novant Health Huntersville Medical Center	7	Mecklenburg	1	9,013	9,013
Novant Health Presbyterian Medical Center	7	Mecklenburg	2	12,895	6,448
Atrium Health Union	7	Union	1	8,080	8,080
Iredell Memorial Hospital	8	Iredell	2	6,094	3,047
Lake Norman Radiation Oncology	8	Iredell	1	6,160	6,160
Novant Health Rowan Medical Center	8	Rowan	1	7,398	7,398
Atrium Health Cabarrus	9	Cabarrus	3	12,017	4,006
Atrium Health Stanly	9	Stanly	1	3,547	3,547
North Carolina Baptist Hospital	10	Forsyth	4	26,394	6,599
Novant Health Forsyth Medical Center	10	Forsyth	5	22,537	4,507

Table 17C-1: Hospital and Free-Standing Linear Accelerators and Radiation Oncology Procedures

Facility Name	Service Area Number	County	Number of Linear Accelerators	Number of Procedures (ESTVs) 10/1/2020-9/30/2021	Average Number of Procedures per Unit
Hugh Chatham Memorial Hospital	10	Surry	1	4,323	4,323
Lexington Medical Center	11	Davidson	1	3,743	3,743
Cone Health-Moses H. Cone Memorial Hospital	12	Guilford	4	28,509	7,127
High Point Regional Health	12	Guilford	2	9,825	4,912
UNC Rockingham Health Care	12	Rockingham	1	3,104	3,104
Randolph Hospital	13	Randolph	1	3,338	3,338
University of North Carolina Hospitals	14	Orange	6	40,297	6,716
Alamance Regional Medical Center	15	Alamance	2	9,613	4,806
Duke Regional Hospital	16	Durham	1	4,011	4,011
Duke University Hospital	16	Durham	8	38,293	4,787
Maria Parham Medical Center	16	Vance	1	3,974	3,974
FirstHealth Moore Regional Hospital	17	Moore	2	8,265	4,133
Scotland Memorial Hospital	17	Scotland	1	3,780	3,780
Cape Fear Valley Medical Center	18	Cumberland	5	15,977	3,195
Southeastern Regional Medical Center***	18	Robeson	2	7,090	3,545
North Carolina Radiation Therapy Management Services - Clinton	18	Sampson	1	2,521	2,521
New Hanover Regional Medical Center	19	New Hanover	5	22,889	4,578
Franklin County Cancer Center	20	Franklin	1	0	0
Duke Raleigh Hospital	20	Wake	4	21,075	5,269
UNC Hospital Radiation Oncology -Holly Springs	20	Wake	1	0	0
UNC Rex Cancer Center of East Raleigh	20	Wake	1	5,148	5,148
UNC Rex Hospital	20	Wake	4	21,639	5,410
Central Harnett Hospital	21	Harnett	1	0	0
Clayton Radiation Oncology	22	Johnston	1	7,498	7,498
Smithfield Radiation Oncology	22	Johnston	1	2,110	2,110
UNC Lenoir HealthCare	23	Lenoir	1	8,855	8,855
North Carolina Radiation Therapy Management Services - Goldsboro	23	Wayne	1	5,145	5,145
2022 Need Determination	24	Carteret	1	0	0
Carteret General Hospital	24	Carteret	1	7,322	7,322
CarolinaEast Medical Center	24	Craven	2	9,539	4,770
Onslow Radiation Oncology, LLC	25	Onslow	1	4,559	4,559
North Carolina Radiation Therapy Management Services - Roanoke Rapids	26	Halifax	1	2,405	2,405
Nash General Hospital	26	Nash	2	9,534	4,767
Wilson Medical Center	26	Wilson	1	1,443	1,443
Vidant Beaufort Hospital	27	Beaufort	1	3,696	3,696
Vidant Radiation Oncology	27	Hertford	1	1,937	1,937
Vidant Radiation Oncology	27	Pitt	3	20,071	6,690

Table 17C-1: Hospital and Free-Standing Linear Accelerators and Radiation Oncology Procedures

Facility Name	Service Area Number	County	Number of Linear Accelerators	Number of Procedures (ESTVs) 10/1/2020-9/30/2021	Average Number of Procedures per Unit
Vidant Radiation Oncology	27	Pitt	1	6,262	6,262
The Outer Banks Hospital, Inc.	28	Dare	1	3,340	3,340
Sentara Albemarle Medical Center	28	Pasquotank	1	4,686	4,686
Totals (74 Facilities)			131	622,797	4,754

* CaroMont Regional Medical Center has two linear accelerators in Gaston County and one linear accelerator in Lincoln County.

** New Hanover Regional Medical Center has three linear accelerators in New Hanover County and one linear accelerator in Brunswick County.

*** Southeastern Regional Medical Center received conditional approval for second linear accelerator. N-011697-19

Table 17C-2: Stereotactic Radiosurgery Procedures

County	Facility	Number of Procedures
Alamance	Alamance Regional Medical Center	189
Buncombe	Mission Health	747
Buncombe	North Carolina Radiation Therapy Management Services - Asheville	133
Buncombe	North Carolina Radiation Therapy Management Services - Weaverville	38
Cabarrus	Atrium Cabarrus	373
Carteret	Carteret General Hospital	295
Catawba	Catawba Valley Medical Center	368
Catawba	Frye Regional Medical Center	133
Cleveland	Atrium Health Cleveland	101
Craven	CarolinaEast Health System	341
Cumberland	Cape Fear Valley Medical Center	368
Durham	Duke Regional Hospital	94
Durham	Duke University Hospital	2,372
Forsyth	North Carolina Baptist Hospital	702
Forsyth	Novant Health Forsyth Medical Center	274
Franklin	North Carolina Radiation Therapy Management Services-Franklin	15
Gaston	CaroMont Regional Medical Center	23
Guilford	Cone Health	752
Guilford	High Point Regional Health	154
Haywood	North Carolina Radiation Therapy Management Services - Clyde	23
Henderson	North Carolina Radiation Therapy Management Services - Hendersonville	20
Henderson	Margaret R. Pardee Memorial Hospital	30
Iredell	Iredell Memorial Hospital	56
Jackson	Harris Regional Hospital	77
Lenoir	UNC Lenoir Health Care	224
McDowell	North Carolina Radiation Therapy Management Services - Marion	60
Mecklenburg	Atrium Health University City	49
Mecklenburg	Carolinas Medical Center	910
Mecklenburg	Novant Health Huntersville Medical Center	148
Mecklenburg	Atrium Health Pineville	87
Moore	FirstHealth Moore Regional Hospital	454
New Hanover	New Hanover Regional Medical Center	507
Orange	University of North Carolina Hospitals	1,475
Robeson	Southeastern Regional Medical Center	140
Rowan	Novant Health Rowan Medical Center	74
Rutherford	North Carolina Radiation Therapy Management Services - Forest City	41
Scotland	Scotland Memorial Hospital	-
Rutherford	North Carolina Radiation Therapy Management Services - Brevard	-
Union	Atrium Health Union	43
Wake	Duke Raleigh Hospital	434
Wake	Rex Hospital	560
Wayne	North Carolina Radiation Therapy Management Services - Goldsboro	13
Wilson	Wilson Medical Center	23
Total		12,920

Table 17C-3: Linear Accelerator Treatment Data - Hospital and Free-Standing

CPT Code	Description	ESTVs/ Procedures Under ACR
<i>Simple Treatment Delivery</i>		
77401	Radiation treatment delivery	1.00
77402	Radiation treatment delivery (≤ 5 MeV)	1.00
77403	Radiation treatment delivery (6-10 MeV)	1.00
77404	Radiation treatment delivery (11-19 MeV)	1.00
77406	Radiation treatment delivery (≥ 20 MeV)	1.00
<i>Intermediate Treatment Delivery</i>		
77407	Radiation treatment delivery (≤ 5 MeV)	1.00
77408	Radiation treatment delivery (6-10 MeV)	1.00
77409	Radiation treatment delivery (11-19 MeV)	1.00
77411	Radiation treatment delivery (≥ 20 MeV)	1.00
<i>Complex Treatment Delivery</i>		
77412	Radiation treatment delivery (≤ 5 MeV)	1.00
77413	Radiation treatment delivery (6-10 MeV)	1.00
77414	Radiation treatment delivery (11-19 MeV)	1.00
77416	Radiation treatment delivery (≥ 20 MeV)	1.00
<i>Other CPT Codes</i>		
77417	Additional field check radiographs	.50
77418	Intensity modulated radiation treatment (IMRT) delivery	1.00
77371	Radiation treatment delivery, stereotactic radiosurgery (SRS), complete course of treatment of cranial lesion(s) consisting of 1 session; multisource Cobalt 60 based (Gamma Knife)	3.00
77372	Radiation treatment delivery, stereotactic radiosurgery (SRS), complete course of treatment of cranial lesion(s) consisting of 1 session; linear accelerator	3.00
77373	Stereotactic body radiation therapy, treatment delivery, per fraction to 1 or more lesions, including image guidance, entire course not to exceed 5 fractions	3.00
G0339	(Image-guided) robotic linear accelerator-based stereotactic radiosurgery in one session or first fraction	3.00
G0340	(Image-guided) robotic linear accelerator-based stereotactic radiosurgery, fractionated treatment, 2nd-5th fraction	3.00
	Total body irradiation	2.50
	Hemibody irradiation	2.00
	Intraoperative radiation therapy (conducted by bringing the anesthetized patient down to the linear accelerator)	10.00
	Neutron and proton radiation therapy	2.00
	Limb salvage irradiation	1.00
	Pediatric patient under anesthesia	1.50

Table 17C-4: Linear Accelerator Service Areas

Area	County	2022 Total Population
1	Cherokee	29,065
1	Clay	11,178
1	Graham	7,938
1	Jackson	43,222
1	Macon	37,786
1	Swain	14,051
	Total	143,240
2	Buncombe	275,777
2	Haywood	62,748
2	Madison	21,255
2	McDowell	44,207
2	Mitchell	14,781
2	Yancey	18,640
	Total	437,408
3	Ashe	26,346
3	Avery	17,756
3	Watauga	54,355
	Total	98,457
4	Henderson	118,529
4	Polk	18,780
4	Transylvania	32,834
	Total	170,143
5	Alexander	35,984
5	Burke	86,355
5	Caldwell	79,946
5	Catawba	163,042
	Total	365,327
6	Cleveland	101,248
6	Gaston	231,941
6	Lincoln	89,108
6	Rutherford	64,137
	Total	486,434
7	Anson	21,814
7	Mecklenburg	1,154,783
7	Union	247,058
	Total	1,423,655
8	Iredell	194,835
8	Rowan	148,685
	Total	343,520
9	Cabarrus	236,706
9	Stanly	62,212
	Total	298,918
10	Alleghany	10,815
10	Davie	43,738
10	Forsyth	388,244
10	Stokes	44,269
10	Surry	71,113
10	Wilkes	64,988
10	Yadkin	37,015
	Total	660,182

Table 17C-4: Linear Accelerator Service Areas

Area	County	2022 Total Population
11	Davidson	171,063
	Total	171,063
12	Guilford	552,646
12	Rockingham	91,078
	Total	643,724
13	Randolph	145,359
	Total	145,359
14	Chatham	78,963
14	Orange	151,632
	Total	230,595
15	Alamance	174,862
15	Caswell	22,493
	Total	197,355
16	Durham	334,486
16	Granville	62,050
16	Person	39,037
16	Vance	41,830
16	Warren	18,098
	Total	495,501
17	Hoke	52,765
17	Lee	65,227
17	Montgomery	25,696
17	Moore	103,298
17	Richmond	42,251
17	Scotland	33,238
	Total	322,475
18	Bladen	28,188
18	Cumberland	334,508
18	Robeson	111,758
18	Sampson	57,883
	Total	532,337
19	Brunswick	143,549
19	Columbus	48,355
19	New Hanover	230,587
19	Pender	62,107
	Total	484,598
20	Franklin	72,018
20	Wake	1,179,121
	Total	1,251,139
21	Harnett	136,079
	Total	136,079
22	Johnston	230,077
	Total	230,077
23	Duplin	45,897
23	Lenoir	54,573
23	Wayne	115,408
	Total	215,878

Table 17C-4: Linear Accelerator Service Areas

Area	County	2022 Total Population
24	Carteret	67,233
24	Craven	99,851
24	Jones	8,806
24	Pamlico	12,040
	Total	187,930
25	Onslow	208,825
	Total	208,825
26	Edgecombe	47,541
26	Halifax	47,389
26	Nash	95,246
26	Northampton	16,517
26	Wilson	78,096
	Total	284,789
27	Beaufort	43,748
27	Bertie	17,420
27	Greene	20,352
27	Hertford	19,431
27	Hyde	4,419
27	Martin	21,512
27	Pitt	170,273
27	Washington	10,629
	Total	307,784
28	Camden	10,554
28	Chowan	13,611
28	Currituck	30,291
28	Dare	37,716
28	Gates	9,992
28	Pasquotank	40,882
28	Perquimans	12,758
28	Tyrrell	3,071
	Total	158,875

Table 17C-5: Linear Accelerator Service Areas and Calculations

Service Area	2022 Population	Accelerators	Population within Service Area Per Accelerator	Percentage of Patients from Outside the Service Area	2020-2021 ESTV Procedures	Procedures Per Accelerator	ESTV Procedures Divided by 6,750 Minus # of Accelerators	Need Determinations
Area 1	143,240	2	71,620	4.05%	2,699	1,349	-1.60	
Area 2	437,408	8	54,676	25.25%	32,547	4,068	-3.18	
Area 3	98,457	1	98,457	18.49%	2,260	2,260	-0.67	
Area 4	170,143	3	56,714	14.42%	10,193	3,398	-1.49	
Area 5	365,327	6	60,888	9.13%	22,652	3,775	-2.64	
Area 6	486,434	5	97,287	9.85%	33,327	6,665	-0.06	
Area 7	1,423,655	12	118,638	22.19%	79,164	6,597	-0.27	
Area 8	343,520	4	85,880	22.71%	19,652	4,913	-1.09	
Area 9	298,918	4	74,730	26.06%	15,564	3,891	-1.69	
Area 10	660,182	10	66,018	28.05%	53,254	5,325	-2.11	
Area 11*	171,063	1	171,063	9.33%	3,743	3,743	-0.45	
Area 12	643,724	7	91,961	21.48%	41,438	5,920	-0.86	
Area 13*	145,359	1	145,359	12.77%	3,338	3,338	-0.51	
Area 14**	230,595	6	38,433	80.60%	40,297	6,716	-0.03	
Area 15	197,355	2	98,678	15.68%	9,613	4,806	-0.58	
Area 16**	495,501	10	49,550	61.53%	46,277	4,628	-3.14	
Area 17	322,475	3	107,492	23.96%	12,045	4,015	-1.22	
Area 18	532,337	8	66,542	16.59%	25,588	3,198	-4.21	
Area 19	484,598	5	96,920	17.38%	22,889	4,578	-1.61	
Area 20	1,251,139	11	113,740	17.45%	47,861	4,351	-3.91	
Area 21*	136,079	1	136,079	0	0	0	-1.00	
Area 22**	230,077	2	115,039	46.87%	9,608	4,804	-0.58	
Area 23	215,878	2	107,939	14.36%	14,000	7,000	0.07	
Area 24	187,930	4	46,983	17.73%	16,861	4,215	-1.50	
Area 25*	208,825	1	208,825	14.88%	4,559	4,559	-0.32	
Area 26	284,789	4	71,197	6.18%	13,382	3,345	-2.02	
Area 27	307,784	6	51,297	29.68%	31,966	5,328	-1.26	
Area 28	158,875	2	79,438	4.43%	8,026	4,013	-0.81	
Totals	10,631,667	131	81,158		622,797	4,754	-38.73	

* Service Area has at least 120,000 base population per accelerator.

** Area has more than 45% of its patients coming from outside the service areas.

Table 17C-6: Linear Accelerators Need Determination
(Proposed for Certificate of Need Review Commencing in 2023)

Service Area	Linear Accelerator Need Determination	Certificate of Need Application Deadline	Certificate of Need Beginning Review Date
It is determined that there is no need anywhere in the state and no reviews are scheduled.			

D. LITHOTRIPTORS

Introduction

A *lithotripter*, according to G.S. 131E-176(14i), means “extra-corporeal shockwave technology used to treat persons with kidney stones and gallstones.” Lithotripsy is defined as the pulverization of urinary stones by means of a lithotripter. A technician places an emitter in contact with the patient's abdomen to focus the shock waves on the stone. The shock waves then shatter the stone, which can be expelled in the urine. Extracorporeal shock wave lithotripsy (ESWL) is the non-invasive procedure to which this section pertains.

Data Sources

In addition to the standard data sources listed in the Introduction to this chapter, this methodology also obtains the July 1 estimated population data from the North Carolina Office of State Budget and Management. The data is for the current SMFP publication year, which is two years beyond the current reporting year.

Definition

A lithotripter's service area is statewide. A *statewide* service area is defined as a planning area that encompasses the entire state when determining need. For mobile equipment, the definition does not imply that a CON applicant is required to project that it will provide mobile services in a certain number of counties, HSAs, or regions. Similarly, once developed, the equipment does not have to serve a certain number of counties, HSAs, or regions.

Assumptions of the Methodology

1. The incidence of urinary stone disease forms the basis of the methodology. The annual incidence of urinary stone disease is approximately 16 per 10,000 population. Lithotripsy is not an appropriate treatment for all cases of urinary stone disease. It has been estimated that lithotripsy is appropriate for 85% to 90% of kidney stone patients, when surgery is indicated¹. Therefore, the need determination methodology assumes that lithotripsy is appropriate in 90% of cases of urinary stone disease.
2. The annual treatment capacity of a lithotripter is 1,500 cases. The methodology considers 67% (or 1,000 cases) to be full utilization for purposes of projecting need.

Application of the Methodology

- Step 1: Divide the July 1 estimated state population by 10,000 and multiply the result by 16, which yields the estimated incidence of urinary stone disease per 10,000 population.
- Step 2: Multiply the result from Step 1 by 90% to calculate the number of patients in the state who have the potential to be treated by lithotripsy in one year.
- Step 3: Divide the result of Step 2 by 1,000 and round to the nearest whole number to calculate the low range of the annual treatment capacity of a lithotripter. A remainder of 0.50 or greater rounds to the next highest whole number; a remainder of less than 0.50 rounds to the next lowest whole number.

¹ Pahiri, J.J. & Razack, A.A. (2001) “Chapter 9: Nephrolithiasis.” In *Clinical Manual of Urology*, 3rd edition, by Philip M. Hanno, Alan J. Wein, & S. Bruce Malkowicz. New York: McGraw-Hill.

- Step 4: Sum the number of existing lithotriptors in the state (*Table 17D-1*), lithotriptors not yet operational but for which a certificate of need has been issued, and lithotriptor need determinations from previous years for which a certificate of need has yet to be issued.
- Step 5: Subtract the result of Step 4 from the result of Step 3 to calculate the number of additional lithotriptors needed in the state (*Table 17D-2*).

Unless otherwise specified by the methodology, calculations do not use rounded values. However, fractional values are rounded automatically when displayed.

Table 17D-1: Mobile and Fixed Lithotripsy Providers and Locations Served

MOBILE LITHOTRIPSY

Provider	Machines	Area Generally Served	Facility	Location	State	Number of Procedures
Carolina Lithotripsy	2	Eastern NC	Carolina East Medical Center	New Bern	NC	53
			Carteret General Hospital	Morehead City	NC	15
			Duke Raleigh Hospital	Raleigh	NC	25
			FirstHealth Moore Regional Hospital	Pinehurst	NC	196
			Halifax Regional Medical Center	Roanoke Rapids	NC	30
			Highsmith Rainey Specialty Hospital	Fayetteville	NC	31
			Johnston Medical Center	Smithfield	NC	51
			Lenoir Memorial Hospital	Kinston	NC	17
			New Hanover Regional Med Center	Wilmington	NC	105
			Novant Health (Brunswick Medical Center)	Bolivia	NC	60
			Rex Surgery Center of Cary	Cary	NC	71
			Scotland Memorial Hospital	Laurinburg	NC	120
			Southeastern Regional Med Center	Lumberton	NC	2
			Vidant (Beaufort Hospital)	Washington	NC	10
			Vidant (Pitt Medical Center)	Greenville	NC	170
			WakeMed (Raleigh Campus)	Raleigh	NC	89
			Wayne Memorial Hospital	Goldsboro	NC	35
			Wilson Medical Center	Wilson	NC	6
Total Procedures						1,086
Average Procedures per Lithotriptor						543
Catawba Valley Medical Center	1	Western and Central NC	Catawba Valley Medical Center	Hickory	NC	234
Total Procedures						234
Average Procedures per Lithotriptor						234

MOBILE LITHOTRIPSY						
Provider	Machines	Area Generally Served	Facility	Location	State	Number of Procedures
Fayetteville Lithotriptors - SC II	1	Western NC	Advent Healthcare (Park Ridge Hospital)	Hendersonville	NC	50
			Charles George VA Medical Center	Asheville	NC	3
			Frye Regional Medical Center	Hickory	NC	18
			Harris Regional Medical Center	Sylva	NC	35
			Haywood Regional Medical Center	Clyde	NC	91
			Margaret Pardee Hospital	Hendersonville	NC	78
			Rutherford Regional Medical Center	Rutherfordton	NC	29
			St. Luke's Hospital	Columbus	NC	19
			Transylvania Community Hospital	Brevard	NC	4
Total Procedures						327
Average Procedures per Lithotriptor						327
Fayetteville Lithotriptors - VA I	1	Eastern NC	The Outer Banks Hospital	Nags Head	NC	8
			Vidant Chowan Hospital	Edenton	NC	11
		Other Locations	Bon Secours Mercy Petersburg	Petersburg	VA	19
			Mary Immaculate Hospital	Newport News	VA	54
			Mary Washington Hospital	Fredericksburg	VA	253
			Riverside Doctors Surgical	Williamsburg	VA	38
			Southside Community Hospital	Farmville	VA	42
			Spotsylvania Regional Medical Center	Fredericksburg	VA	10
			Strafford Regional Hospital	Stafford	VA	34
Total Procedures						469
Average Procedures per Lithotriptor						469

MOBILE LITHOTRIPSY						
Provider	Machines	Area Generally Served	Facility	Location	State	Number of Procedures
Piedmont Stone Center	5	Western and Central NC	Appalachain Regional Healthcare System (Watauga Medical Center)	Boone	NC	135
			Atrium Health Wake Forest Baptist (High Point Medical Center)	High Point	NC	136
			Atrium Health Wake Forest Baptist (Lexington Medical Center)	Lexington	NC	110
			Caldwell UNC Health Care	Lenoir	NC	97
			Cone Health (Alamance Regional Medical Center)	Burlington	NC	72
			Cone Health (Annie Penn Hospital)	Reidsville	NC	11
			Cone Health (Wesley Long Hospital)	Greensboro	NC	299
			Davis Regional Medical Center	Statesville	NC	108
			Hugh Chatham Memorial Hospital	Elkin	NC	133
			Iredell Memorial Hospital	Statesville	NC	48
			Maria Parham Health	Henderson	NC	32
			Northern Regional Hospital	Mount Airy	NC	12
			Novant Health (Forsyth Medical Center)	Winston-Salem	NC	72
			Novant Health (Rowan Medical Center)	Salisbury	NC	127
			Novant Health (Thomasville Medical Center)	Thomasville	NC	16
			Piedmont Stone Center, PLLC	Winston-Salem	NC	590
			Randolph Hospital	Asheboro	NC	77
			UNC Health (Blue Ridge Healthcare Hospital-Valdese)	Valdese	NC	51
			UNC Health (Blue Ridge-Morganton)	Morganton	NC	411
			Wake Forest Baptist Medical Center	Winston-Salem	NC	149
			Wilkes Medical Center	North Wilkesboro	NC	7
		Other Locations	Carilion New River Valley Medical Center	Christiansburg	VA	109
			Sentara Martha Jefferson Hospital	Charlottesville	VA	202
Total Procedures						3,004
Average Procedures per Lithotripter						601

MOBILE LITHOTRIPSY						
Provider	Machines	Area Generally Served	Facility	Location	State	Number of Procedures
Stone Institute of the Carolinas	2	Western and Central NC	Atrium Health (Cabarrus)	Concord	NC	115
			Atrium Health (Carolinas Medical Center)	Charlotte	NC	45
			Atrium Health (Huntersville)	Huntersville	NC	83
			Atrium Health (Matthews Medical Center)	Charlotte	NC	66
			Atrium Health (Mint Hill Medical Center)	Mint Hill	NC	24
			Atrium Health (Pineville)	Charlotte	NC	182
			Atrium Health (Union)	Monroe	NC	63
			Atrium Health (University)	Charlotte	NC	144
			Cleveland Regional Medical Center	Shelby	NC	124
			Gaston Memorial Hospital	Gastonia	NC	164
			Lake Norman Regional Medical Center	Mooresville	NC	136
			Novant Health Presbyterian Medical Center	Charlotte	NC	101
Total Procedures						1,247
Average Procedures per Lithotripter						624
Provider	Machines	Area Generally Served	Facility	Location	State	Number of Procedures
Triangle Lithotripsy Corporation	1	East Central NC	Durham Ambulatory Surgery Center	Durham	NC	70
			Nash Day	Rocky Mount	NC	41
			North Carolina Specialty Hospital	Durham	NC	64
			Rex Hospital	Raleigh	NC	315
			Wake Medical	Raleigh	NC	248
			Wayne Memorial Hospital	Goldsboro	NC	49
Total Procedures						787
Average Procedures per Lithotripter						787

FIXED LITHOTRIPSY

Provider	Machines	Area Generally Served	Facility	Location	State	Number of Procedures
Mission Hospital	1		Mission Hospital	Asheville	NC	156
Total Procedures						156
Average Procedures per Lithotripter						156

Table 17D-2: Mobile and Fixed Lithotripsy

Total Procedures Reported	Units Reported	Average Procedures Per Unit
7,310	14	522

Table 17D-3: Lithotripter Need Determination
(Proposed for Certificate of Need Review Commencing in 2023)

Service Area	Lithotripter Need Determination	Certificate of Need Application Deadline	Certificate of Need Beginning Review Date
It is determined that there is no need anywhere in the state and no reviews are scheduled.			

E. MAGNETIC RESONANCE IMAGING SCANNERS

Introduction

G.S. 131E-176 (14m) defines a *magnetic resonance imaging (MRI) scanner* as “medical imaging equipment that uses nuclear magnetic resonance.” The methodology designates MRI scanners as either fixed or mobile. A *mobile* MRI scanner means an MRI scanner and transporting equipment that is moved at least weekly to provide services at two or more host facilities. A *fixed* MRI scanner means an MRI scanner that is not a mobile MRI scanner.

Changes from the Previous Plan

The MRI need determination methodology underwent extensive revisions based on the recommendations of the MRI Methodology Workgroup. The major changes to the Proposed 2023 State Medical Facilities Plan (SMFP) are:

- Adjustment of procedure times to reflect current practice;
- Projection of need three years beyond the reporting year;
- Consideration of population growth in the prediction of utilization for the projection year; and
- Inclusion of utilization from three prior reporting years in the prediction of future utilization for the projection year.

Based on a petition, the State Health Coordinating Council approved a revision to Policy TE-3 to allow development of a new fixed MRI scanner on a satellite acute care hospital campus separate from the main hospital campus.

Definitions

A *base outpatient* scan is a scan performed on an outpatient and does not use contrast or intravenous (IV) sedation.

A *complex outpatient* scan is a scan performed on an outpatient and uses contrast or IV sedation.

A *base inpatient* scan is a scan performed on an inpatient and does not use contrast or IV sedation.

A *complex inpatient* scan is a scan performed on an inpatient and uses contrast or IV sedation.

The *projection year* is three years beyond the reporting year. The *current projection year* is 2024.

Data Sources

Population data by county comes from the North Carolina Office of State Budget and Management.

Assumptions of the Methodology

1. An MRI procedure is a single procedure performed on one patient on one defined body part during one visit. Each MRI procedure must be directly linked to a single billable CPT code associated with the MRI procedure. For example, an MRI brain scan with and without contrast is a single procedure with a single CPT code.
2. A fixed MRI scanner's *service area* is the same as an Acute Care Bed Service Area as defined in Chapter 5 and shown in Figure 5.1.
3. A placeholder of one MRI scanner appears in the inventory in Table 17E-1 for each new fixed MRI scanner for which a certificate of need has been issued.

4. The inventory shall exclude MRI scanners used for research only, non-clinical MRI scanners, and MRI scanners awarded based on need determinations for a dedicated purpose or demonstration project (*Table 17E-3*).
5. Intraoperative Magnetic Resonance Imaging Scanners (iMRI), approved through Policy TE-2, shall not be counted in the inventory of fixed MRI scanners and the procedures performed on an iMRI will not be used in calculating the need methodology. Hospitals shall report intraoperative procedures and inpatient procedures performed on an iMRI separately (*Table 17E-3*). An iMRI scanner shall not be used for outpatients and may not be replaced with a conventional MRI scanner.
6. Need thresholds are arranged in tiers based on the number of scanners, weighting of procedures based on complexity, and a component addressing MRI service areas that have no fixed MRIs but have mobile MRI scanners serving the area. The complexity of an MRI procedure is weighted based on whether the procedure is inpatient or outpatient and whether the procedure includes contrast or IV sedation. The methodology for determining need is based on fixed and mobile procedures performed at hospitals, fixed procedures performed at freestanding facilities, and procedures performed on mobile MRI scanners at mobile sites.

The weighted tiers are based on the assumption that the time necessary to complete one base outpatient MRI procedure is 33 minutes. Capacity of a single MRI scanner is defined as that of an MRI scanner being available and staffed for use at least 66 hours per week for 52 weeks per year, which equals 6,240 procedures annually, at 33 minutes per procedure ($66 \times 52 \times (60/33) = 6,240$). This definition of capacity represents 100% of the procedure volume the equipment can complete under ideal conditions.

7. The need determination for any one service area shall not exceed two MRI scanners per year, unless the SMFP includes an adjusted need determination for a specific MRI service area.
8. In general, projection of need three years beyond the reporting year allows sufficient time to place a new MRI scanner into operation.
9. A facility that offers MRI services on a full-time basis pursuant to a service agreement with an MRI provider is not precluded from applying for a need determination to replace the existing contracted service with a fixed MRI scanner under the applicant's ownership and control. It is consistent with the purposes of the Certificate of Need law and the SMFP for a facility to acquire and operate an MRI scanner to replace such a contracted service, if the acquisition and operation of the facility's own MRI scanner will allow the facility to reduce the cost of providing the MRI service at that facility.

Application of the Methodology

Use the following table to obtain the Adjusted Threshold, based on the number of fixed scanners in the service area. Multiply 6,240 by the Planning Threshold to obtain the Inpatient and Contrast Adjusted Threshold corresponding to the number of fixed scanners in the service area (e.g., for facilities with two or more MRIs, multiply 6,240 by 80% to obtain the Adjusted Threshold of 4,992).

Number of Fixed Scanners in Service Area	Planning Threshold	Adjusted Thresholds
2 or more	80.0%	4,992
1	70.0%	4,368
0	30.0%	1,872

The following table shows the calculations for the weighting values to be assigned based on the complexity of the procedure type. For example, a base outpatient scan is not weighted; in other words, its weight is “1.” To calculate the weight for a complex outpatient scan, divide its procedure time (40) by the procedure time for a base outpatient scan (33).

Procedure Type	Procedure Time in Minutes	Weight
Base Outpatient	33	1.0
Complex Outpatient	40	40/33
Base Inpatient	60	60/33
Complex Inpatient	70	70/33

The standard methodology used to determine need for fixed MRI scanners is as follows:

Calculation of Total Adjusted Procedures (Table 17E-1)

- Step 1: List the number of clinical fixed and mobile MRI scanners in each MRI service area by site to include: existing fixed or mobile MRI scanners in operation, approved fixed or mobile MRI scanners for which a certificate of need was issued but is pending development, and prior need determinations for which no certificate of need has yet been issued. The total is the number of fixed magnets in each service area (*Column E*).
- Step 2: Convert the number of fixed and mobile MRI scanners to fixed equivalent magnets as follows (*Column F*):
- For each existing fixed MRI scanner, assign a value of one fixed equivalent magnet;
 - For each approved fixed MRI scanner, assign a value of one fixed equivalent magnet, even though the site may be receiving mobile services temporarily until the fixed scanner is operational. Table 17E-1 does not list mobile services separately from the approved fixed MRI scanner if the mobile unit will no longer be used when the fixed MRI scanner is operational.
 - For each existing mobile MRI scanner site, calculate the fixed equivalent for each mobile site by dividing the number of MRI scans performed at each site by the threshold for the MRI service area, with the exception that the fixed equivalent shall be no greater than one.
- Step 3: Sum the number of fixed equivalent magnets for each MRI service area (*Column F*).

- Step 4: Determine the total number of MRI scans performed at each site regardless of whether the MRI scanner is fixed or mobile. If procedures are provided in a county that is part of more than one MRI service area, divide the procedures equally between the service areas (*Column G*).
- Step 5: Of the total number of procedures performed, determine the number performed by type (i.e., base or complex, inpatient or outpatient; *Columns H-K*).
- Step 6: For each site, multiply the number of complex outpatient procedures by $(40 \div 33)$, the number of base inpatient scans by $(60 \div 33)$, and the number of complex inpatient scans by $(70 \div 33)$ to calculate the number of adjusted scans of each type.
- Step 7: For each site, sum the total from Step 6 to calculate the Adjusted Total MRI Procedures for each site (*Column L*).
- Step 8: For each service area, sum the number of adjusted total procedures for all sites in the service area (*Column L*).

Calculate MRI Needs (Table 17E-2)

- Step 9: Enter the number of Adjusted Scans from the three most recent reporting years. The scans have been adjusted by using the weights described above. The Proposed 2023 SMFP includes scans from the 2018, 2019, and 2021 reporting years. Calculations exclude scans from the 2020 reporting year due to the impact of the COVID-19 pandemic on utilization (*Column B*).
- Step 10: Calculate the Average Annual Change Rate (AACR) in the number of Adjusted Scans for the three most recent reporting years (*Column C*).
- Step 11: Multiply the number of Adjusted Scans from the reporting year by the AACR (*Column C*) and add the number of Adjusted Scans from the reporting year to obtain the projected scans as per AACR (*Column D, AACR Projected Scans*).
- Step 12: Calculate the population growth as $[(\text{projection year population} - \text{reporting year population}) / \text{reporting year population}]$ (*Column E*). If the population is projected to decline during that period, the Population Growth Used is zero; otherwise, the Population Growth Used (*Column F*) is the same as the calculated Population Growth (*Column E*).
- Step 13: Calculate the number of Population Projected Scans based on population growth by multiplying the value in Column D by the value in Column F and adding the value in Column D (*Column G*).
- Step 14: Transfer the number of Fixed Equivalent scanners from Table 17E-1 (*Column F*) and enter it into Column H.
- Step 15: Divide the number of Population Projected Scans in Column G by the number of Fixed Equivalent scanners in Column H to calculate the Average Scans per scanner (*Column I*).
- Step 16: Divide the Average Scans per scanner (*Column I*) by the Planning Threshold (*Column J*) to calculate the MRI Need. If the result is greater than or equal to 1, but less than 2, enter a “1” in Column K. If the result is greater than or equal to 2, enter a “2” in Column K.

Unless otherwise specified by the methodology, calculations do not use rounded values. However, fractional values are rounded automatically when displayed.

The SMFP does not have a methodology to project need for additional mobile MRI scanners. A summer petition is required to place a need in the upcoming SMFP. If the need determination is approved, any person may apply for a certificate of need to acquire the mobile MRI scanner.

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Table 17E-1: MRI Fixed and Mobile Procedures by MRI Service Area with Tiered Thresholds and Fixed Equivalents

A	B	C	D	E	F	G	H	I	J	K	L
Service Area	Service Type	CON #	Service Site (Provider/Owner)	Fixed Magnet	Fixed Equiv	Total MRI Scans	Base Outpatient	Complex Outpatient	Base Inpatient	Complex Inpatient	Adjusted Total
Alamance	Hospital Fixed	G-006214-00	Alamance Regional Medical Center	2	2.00	8,976	4,846	2,548	1,097	485	10,958
Alamance	Freestanding Fixed	G-011999-20	DRI Burlington (Diagnostic Radiology & Imaging, LLC)	1	1.00	0	0	0	0	0	0
Alamance	Mobile	J-008443-09	Emergeoortho-Burlington (EmergeOrtho)	0	0.15	739	728	11	0	0	741
Alamance	Mobile		UNC Burlington (Alliance HealthCare Services)	0	0.10	497	295	202	0	0	540
Alamance				3	3.25	10,212					12,239
			No Service Site								
Alexander											
			No Service Site								
Alleghany											
Anson	Mobile	F-007040-04	Atrium Health Anson (Carolinas Imaging Services, LLC)	0	0.05	99	66	33	0	0	106
Anson				0	0.05	99					106
Ashe	Hospital Fixed	D-008162-08	Ashe Memorial Hospital, Inc.	1	1.00	701	592	18	90	1	780
Ashe				1	1.00	701					780
			No Service Site								
Avery											
Beaufort	Hospital Fixed	Q-005992-99	Vidant Beaufort Hospital	1	1.00	2,295	1,262	629	200	204	2,821
Beaufort				1	1.00	2,295					2,821
			No Service Site								
Bertie											
Bladen	Mobile	M-006605-02	Bladen Healthcare, LLC (Mobile Imaging of North Carolina, LLC)	0	0.16	302	233	69	0	0	317
Bladen				0	0.16	302					317
Brunswick	Hospital Fixed	O-011125-16	J. Arthur Doshier Memorial Hospital	1	1.00	1,644	1,083	534	19	8	1,782
Brunswick	Hospital Fixed	O-006658-02	Novant Health Brunswick Medical Center	1	1.00	5,253	3,066	1,757	255	175	6,031
Brunswick	Mobile	Legacy	EmergeOrtho Shallotte (Insight Imaging)	0	0.22	1,092	1,047	45	0	0	1,102
Brunswick	Mobile	Legacy	Emergeoortho-Leland (Insight Imaging)	0	0.29	1,467	1,356	111	0	0	1,491
Brunswick	Mobile	Legacy	New Hanover Regional-Brunswick (Alliance HealthCare Services)	0	0.03	143	66	77	0	0	159
Brunswick	Mobile	O-007001-04	New Hanover Regional-Brunswick (Alliance HealthCare Services)	0	0.20	997	509	488	0	0	1,101
Brunswick	Mobile	O-006434-01	Novant Health Imaging South Brunswick (Cape Fear Diagnostic Imaging, LLC)	0	0.10	475	475	0	0	0	475
Brunswick				2	2.84	11,071					12,139
Buncombe	Hospital Fixed		Mission Childrens	1	1.00	1,287	678	609	0	0	1,416
Buncombe	Hospital Fixed		Mission Hospital - Carolina Spine & Neurosurgery	1	1.00	2,714	1,391	1,323	0	0	2,995
Buncombe	Hospital Fixed	B-006869-03; B-008459-10	Mission Hospital - Main	3	3.00	8,245	1,221	1,599	2,810	2,615	13,815

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Table 17E-1: MRI Fixed and Mobile Procedures by MRI Service Area with Tiered Thresholds and Fixed Equivalents

A	B	C	D	E	F	G	H	I	J	K	L
Service Area	Service Type	CON #	Service Site (Provider/Owner)	Fixed Magnet	Fixed Equiv	Total MRI Scans	Base Outpatient	Complex Outpatient	Base Inpatient	Complex Inpatient	Adjusted Total
Buncombe	Hospital Fixed	B-012035-21	Mission Imaging Services Asheville	1	1.00	0	0	0	0	0	0
Buncombe	Freestanding Fixed	Legacy	EmergeOrtho-Blue Ridge Division (Insight Imaging)	1	1.00	0	0	0	0	0	0
Buncombe	Freestanding Fixed	B-006646-01	Mission Imaging Services (MH Mission Imaging, LLLP)	1	1.00	4,947	1,826	3,121	0	0	5,609
Buncombe	Freestanding Fixed	B-004178-90	Mission Imaging Services (MMH Mission Imaging, LLLP)	1	1.00	5,647	2,688	2,959	0	0	6,275
Buncombe	Freestanding Fixed	B-006440-01	Open MRI of Asheville (Asheville Open MRI, LLC)	1	1.00	5,152	3,776	1,376	0	0	5,444
Buncombe	Freestanding Fixed	B-005492-96	Open MRI of Asheville (Asheville Open MRI, LLC)	1	1.00	5,962	4,218	1,744	0	0	6,332
Buncombe	Mobile		EmergeOrtho-Blue Ridge Division (Insight Imaging)	0	0.70	3,509	3,439	70	0	0	3,524
Buncombe	Mobile		Margaret Pardee Hospital (Alliance HealthCare Services)	0	0.03	131	131	0	0	0	131
Buncombe	Mobile		Margaret Pardee Hospital (Alliance HealthCare Services Inc.)	0	0.06	296	296	0	0	0	296
Buncombe	Mobile	Legacy	Open MRI of Asheville (Kings Medical Group)	0	0.24	1,209	1,207	2	0	0	1,209
Buncombe/Graham/Madison/Yancey				11	12.03	39,099					47,046
Burke	Hospital Fixed	E-006961-03; E-007203-05	Carolinas Healthcare System Blue Ridge - Main	1	1.00	3,112	1,282	771	801	258	4,220
Burke	Hospital Fixed		Carolinas Healthcare System Blue Ridge - Valdese	1	1.00	1,013	661	352	0	0	1,088
Burke	Mobile	E-7066-04	BR Healthcare Medical Group, /NC- Hickory (Blue Ridge Healthcare Medical Group, Inc)	0	0.41	2,066	1,493	573	0	0	2,188
Burke	Mobile	E-008230-80	EmergeOrtho-Morganton (EmergeOrtho, PA)	0	0.31	1,559	1,501	58	0	0	1,571
Burke				2	2.73	7,750					9,067
Cabarrus	Hospital Fixed		Atrium Health Cabarrus	1	1.00	695	457	238	0	0	745
Cabarrus	Hospital Fixed		Atrium Health Cabarrus - Copperfield Imaging Center	2	2.00	6,385	3,480	2,905	0	0	7,001
Cabarrus	Hospital Fixed	F-005933-98; F-006629-02; F-007086-04	Atrium Health Cabarrus-Main	2	2.00	9,054	2,254	1,874	3,263	1,663	13,986
Cabarrus	Freestanding Fixed	F-007859-07	Atrium Health Imaging-Kannapolis (Union Medical Services, LLC)	1	1.00	1,652	412	1,240	0	0	1,915
Cabarrus	Freestanding Fixed	F-005916-98	Novant Health Imaging Cabarrus (Novant Health Imaging Cabarrus formerly Cabarrus Diagnostic Imaging, LLC)	1	1.00	2,092	1,573	519	0	0	2,202
Cabarrus	Mobile	Legacy	Carolina Neurosurgery & Spine Assoc. (Alliance HealthCare Services)	0	0.26	1,294	1,155	139	0	0	1,323
Cabarrus	Mobile	Legacy	OrthoCarolina, PA (Alliance Healthcare Services, Inc.)	0	0.53	2,628	2,478	150	0	0	2,660
Cabarrus				7	7.79	23,800					29,833
Caldwell	Hospital Fixed	E-007222-05	Caldwell Memorial Hospital	1	1.00	2,646	1,372	699	424	151	3,310
Caldwell	Mobile	E-008230-80	EmergeOrtho-Lenoir (EmergeOrtho, PA)	0	0.34	1,475	1,397	78	0	0	1,492
Caldwell				1	1.34	4,121					4,802
Carteret	Hospital Fixed	P-005282-95	Carteret General Hospital	1	1.00	4,273	2,379	1,326	310	258	5,097

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Service Area	Service Type	CON #	Service Site (Provider/Owner)	Fixed Magnet	Fixed Equiv	Total MRI Scans	Base Outpatient	Complex Outpatient	Base Inpatient	Complex Inpatient	Adjusted Total
Carteret	Freestanding Fixed	P-008049-03	Seashore Imaging, LLC	1	1.00	2,249	1,516	733	0	0	2,404
Carteret	Mobile	O-006434-01	Carolina Center for Surgery (Cape Fear Diagnostic Imaging, LLC)	0	0.13	656	656	0	0	0	656
Carteret				2	2.13	7,178					8,158
Catawba	Hospital Fixed		Catawba Valley Medical Center - Imaging Center	1	1.00	2,375	1,150	1,225	0	0	2,635
Catawba	Hospital Fixed		Catawba Valley Medical Center - Main	1	1.00	3,150	810	1,200	616	524	4,496
Catawba	Hospital Fixed		Frye Regional Medical Center - Tate Campus	1	1.00	2,691	1,955	736	0	0	2,847
Catawba	Hospital Fixed		Frye Regional Medical Center- Main	1	1.00	3,023	1,135	906	588	394	4,138
Catawba	Mobile	E-008230-80	EmergeOrtho-Hickory (EmergeOrtho, PA)	0	0.45	2,234	1,977	257	0	0	2,289
Catawba	Mobile	E-008230-80	EmergeOrtho-Newton (EmergeOrtho, PA)	0	0.08	393	360	33	0	0	400
Catawba	Mobile		Frye Regional Medical Center - Tate Campus	0	0.28	1,385	808	577	0	0	1,507
Catawba	Mobile	G-006271-00	OrthoCarolina Hickory Orthopaedic Center (Alliance HealthCare Services)	0	0.56	2,790	2,597	193	0	0	2,831
Catawba	Mobile	Legacy	OrthoCarolina Hickory Orthopedic Center (Alliance HealthCare Services)	0	0.01	58	55	3	0	0	59
Catawba				4	5.37	18,099					21,202
Chatham	Mobile		Chatham Hospital (Alliance HealthCare Services)	0	0.00	7	3	3	0	1	9
Chatham	Mobile		Chatham Hospital (Alliance HealthCare Services)	0	0.39	738	398	266	24	50	870
Chatham				0	0.40	745					879
Cherokee	Hospital Fixed	A-006767-03	Erlanger Murphy Medical Center	1	1.00	2,088	1,507	464	99	18	2,288
Cherokee/Clay				1	1.00	2,088					2,288
Chowan	Hospital Fixed	R-008168-08	Vidant Chowan Hospital	1	1.00	1,887	1,183	568	70	66	2,139
Chowan				1	1.00	1,887					2,139
Cleveland	Hospital Fixed	C-005725-97	Atrium Health Cleveland	1	1.00	5,236	2,020	1,480	1,146	590	7,149
Cleveland	Hospital Fixed		Cleveland Advanced Imaging Center	1	1.00	1,819	739	768	209	103	2,268
Cleveland	Mobile	Legacy	OrthoCarolina-(Miller Orthopedic-Shelby) (Alliance Healthcare Services)	0	0.09	432	432	0	0	0	432
Cleveland	Mobile		OrthoCarolina-Miller Orthopedic-Shelby (Alliance HealthCare Services)	0	0.10	508	508	0	0	0	508
Cleveland				2	2.19	7,995					10,357
Columbus	Hospital Fixed	O-006426-01	Columbus Regional Healthcare System	1	1.00	2,583	1,459	565	387	172	3,212
Columbus				1	1.00	2,583					3,212
Craven	Hospital Fixed		CarolinaEast Medical Center	2	2.00	7,530	3,441	2,179	1,411	499	9,706
Craven	Freestanding Fixed	P-008108-08	CCHC Imaging Center (Coastal Carolina Health Care, PA)	1	1.00	3,805	2,736	1,069	0	0	4,032

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Craven	Freestanding Fixed	P-006764-03	CCHC Imaging Center (Coastal Carolina Health Care, PA)	1	1.00	2,979	2,542	437	0	0	3,072
Craven/Jones/Pamlico				4	4.00	14,314					16,810
Cumberland	Hospital Fixed		Cape Fear Valley Medical Center	3	3.00	9,220	2,858	1,706	3,343	1,313	13,789
Cumberland	Freestanding Fixed	M-005899-98	Carolina Imaging of Fayetteville	1	1.00	4,391	3,465	926	0	0	4,587
Cumberland	Freestanding Fixed	M-007924-07	Carolina Imaging of Fayetteville	1	1.00	4,579	3,607	972	0	0	4,785
Cumberland	Freestanding Fixed		Valley Regional Imaging (Medical Imaging Center)	1	1.00	4,556	3,811	745	0	0	4,714
Cumberland	Freestanding Fixed		Valley Regional Imaging (Medical Imaging Center, LLC)	1	1.00	5,332	4,215	1,117	0	0	5,569
Cumberland	Mobile	O-006434-01	Cape Fear Orthopedic (Cape Fear Diagnostic Imaging, LLC)	0	0.01	62	59	3	0	0	63
Cumberland				7	7.01	28,140					33,507
Dare	Hospital Fixed	R-007329-05	The Outer Banks Hospital, Inc.	1	1.00	2,282	1,422	769	57	34	2,530
Dare				1	1.00	2,282					2,530
Davidson	Hospital Fixed	G-006443-01	Lexington Medical Center	1	1.00	3,226	1,913	897	269	147	3,801
Davidson	Hospital Fixed	G-006826-03	Novant Health Thomasville Medical Center	1	1.00	3,127	2,132	575	277	143	3,636
Davidson				2	2.00	6,353					7,437
Davie	Hospital Fixed		Davie Medical Center	1	1.00	1,047	598	386	31	32	1,190
Davie	Mobile	Legacy	Davie County Hospital (Alliance HealthCare Services)	0	0.37	1,602	900	526	128	48	1,872
Davie				1	1.37	2,649					3,062
Duplin	Mobile	Q-006884-03	Duplin General Hospital (Alliance HealthCare Services)	0	0.72	1,351	564	357	206	224	1,846
Duplin				0	0.72	1,351					1,846
Durham	Hospital Fixed	Legacy; J-006207-00	Duke Regional Hospital	2	2.00	9,506	4,314	2,606	1,672	914	12,452
Durham	Hospital Fixed	J-005589-97; J-006109-99; J-008030-07; J-008275-08; J-008466-10; J-008663-11; J-001112-15	Duke University Hospital - Main	9	9.00	43,694	13,248	21,460	3,735	5,251	57,190
Durham	Hospital Fixed		Duke University Hospital - Southpoint Clinic	1	1.00	1,827	1,406	421	0	0	1,916
Durham	Freestanding Fixed	J-011913-20	Duke Imaging Arrington (Duke University Health System, Inc)	1	1.00	1,048	740	308	0	0	1,113
Durham	Freestanding Fixed	J-006760-03	Durham-Independence Park (Durham Diagnostic Imaging, LLC (Independence Park))	1	1.00	1,684	1,026	658	0	0	1,824
Durham	Freestanding Fixed	J-008107-08	EmergeOrtho- Southpoint (EmergeOrtho)	1	1.00	2,383	2,293	90	0	0	2,402
Durham	Freestanding Fixed	J-007031-04	EmergeOrtho-William Penn Plaza (EmergeOrtho)	1	1.00	4,607	4,196	411	0	0	4,694

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Service Area	Service Type	CON #	Service Site (Provider/Owner)	Fixed Magnet	Fixed Equiv	Total MRI Scans	Base Outpatient	Complex Outpatient	Base Inpatient	Complex Inpatient	Adjusted Total
Durham	Mobile	G-007038-04 for first 2 weeks then Legacy unit when it was exchanged with ESP66	Duke Regional Hospital (Alliance HealthCare Services, Inc.)	0	0.58	2,920	1,872	1,048	0	0	3,142
Durham	Mobile		Duke University Hospital - Page Road	0	0.13	625	625	0	0	0	625
Durham	Mobile	J-006665-02	Durham Diagnostic Imaging-Durham SouthPoint (Cape Fear Mobile Imaging)	0	0.08	391	290	101	0	0	412
Durham	Mobile	M-006605-02	Durham Diagnostic-SouthPark- Triangle (Mobile Imaging of North Carolina, LLC)	0	0.12	606	449	157	0	0	639
Durham	Mobile	Legacy	EmergeOrtho, P.A. (Alliance Healthcare Services)	0	0.00	16	11	5	0	0	17
Durham	Mobile	Legacy	Raleigh Neurology Imaging (Alliance HealthCare Services)	0	0.06	280	85	195	0	0	321
Durham/Caswell				16	16.97	69,587					86,748
Edgecombe	Hospital Fixed	L-008327-09	Vidant Edgecombe Hospital	1	1.00	2,061	1,196	533	145	187	2,502
Edgecombe				1	1.00	2,061					2,502
Forsyth	Hospital Fixed	G-007083-04; G-008372-09	North Carolina Baptist Hospital	6	6.00	23,906	5,477	11,548	2,732	4,149	33,243
Forsyth	Hospital Fixed		Novant Health Forsyth Medical Center	3	3.00	11,133	3,403	1,436	4,152	2,142	17,236
Forsyth	Hospital Fixed		Novant Health Forsyth Medical Center-Clemmons	1	1.00	2,184	1,627	504	37	16	2,339
Forsyth	Hospital Fixed		Novant Health Forsyth Medical Center-Kernersville	1	1.00	1,748	1,070	405	187	86	2,083
Forsyth	Hospital Fixed		Novant Health Forsyth Medical Center-Novant Health Imaging Kernersville	1	1.00	2,254	1,618	636	0	0	2,389
Forsyth	Hospital Fixed	Legacy; G-007387-05	Novant Health Forsyth Medical Center-Novant Health Imaging Maplewood	2	2.00	8,553	4,681	3,872	0	0	9,374
Forsyth	Freestanding Fixed	G-007601-06	Novant Health Breast Clinic	1	1.00	0	0	0	0	0	0
Forsyth	Freestanding Fixed	G-006893-03	Piedmont Imaging, LLC	1	1.00	5,758	4,479	1,279	0	0	6,029
Forsyth	Freestanding Fixed	Legacy	Piedmont Imaging, LLC	1	1.00	4,247	3,168	1,079	0	0	4,476
Forsyth	Freestanding Fixed	G-007780-07	Wake Forest Baptist Imaging (Wake Forest Baptist Imaging, LLC)	1	1.00	6,401	2,551	3,850	0	0	7,218
Forsyth	Freestanding Fixed	G-011798-19	Wake Forest Baptist Imaging - Kernersville	1	1.00	0	0	0	0	0	0
Forsyth	Freestanding Fixed	G-007780-07	Wake Forest Baptist Imaging Kernersville (Wake Forest Baptist, LLC)	0	0.11	566	445	121	0	0	592
Forsyth	Mobile	G-007723-06	OrthoCarolina Clemmons (OrthoCarolina, PA)	0	0.03	135	134	1	0	0	135
Forsyth	Mobile	G-007723-06	OrthoCarolina Kernersville (OrthoCarolina, PA)	0	0.06	304	296	8	0	0	306
Forsyth	Mobile	G-007723-06	OrthoCarolina Winston (OrthoCarolina, PA)	0	0.90	4,505	4,275	230	0	0	4,554
Forsyth	Mobile	G-007065-04	Piedmont Imaging (Forsyth Medical Hospital, Inc (Forsyth Mobile))	0	0.28	1,377	1,176	201	0	0	1,420
Forsyth	Mobile	J-007008-04	Piedmont Imaging (Foundation Health Mobile Imaging, LLC)	0	0.13	631	558	73	0	0	646
Forsyth	Mobile		Wake Forest Baptist Outpatient Imaging (Alliance HealthCare Services)	0	0.02	80	62	18	0	0	84

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Forsyth				19	20.52	73,782					92,124
Franklin	Hospital Fixed		Maria Parham Health Franklin	1	1.00	38	27	11	0	0	40
Franklin				1	1.00	38					40
Gaston	Hospital Fixed		CaroMont Regional Hospital - The Diagnostic Center	1	1.00	0	0	0	0	0	0
Gaston	Hospital Fixed		CaroMont Regional Medical Center	1	1.00	6,711	1,475	2,086	1,605	1,545	10,199
Gaston	Hospital Fixed	F-006622-02	CaroMont Regional Medical Center (CIS Belmont)	1	1.00	1,987	1,021	966	0	0	2,192
Gaston	Hospital Fixed		CaroMont Regional Medical Center-CaroMont Imaging Services Summit	1	1.00	1,975	1,022	953	0	0	2,177
Gaston	Freestanding Fixed	F-008793-12	Novant Health Imaging Gastonia (Mecklenburg Diagnostic Imaging, LLC)	1	1.00	2,092	1,574	518	0	0	2,202
Gaston	Mobile	F-5723-97	Carolina Ortho & Sports Medicine (Insight Imaging)	0	0.47	2,355	2,144	211	0	0	2,400
Gaston	Mobile	F-008000-07	MRI Specialists of the Carolinas, LLC	0	0.46	2,296	1,309	987	0	0	2,505
Gaston	Mobile	Legacy	OrthoCarolina (Alliance Healthcare Services, Inc.)	0	0.34	1,700	1,462	238	0	0	1,750
Gaston	Mobile	Legacy	OrthoCarolina, P. A. (Alliance Healthcare Services)	0	0.01	31	24	7	0	0	32
Gaston				5	6.28	19,147					23,458
Granville	Hospital Fixed	K-010064-12	Granville Health System	1	1.00	1,251	921	211	112	7	1,395
Granville	Mobile	J-008443-09	EmergeOrtho-Oxford (EmergeOrtho)	0	0.14	607	596	11	0	0	609
Granville				1	1.14	1,858					2,005
Guilford	Hospital Fixed		Cone Health-Moses H. Cone Memorial Hospital	3	3.00	10,538	3,028	1,790	4,109	1,611	16,086
Guilford	Hospital Fixed		Cone Health-Wesley Long Hospital	1	1.00	4,497	1,272	1,922	757	546	6,136
Guilford	Hospital Fixed	G-005924-98	High Point Regional Health	2	2.00	4,723	1,687	1,203	1,286	547	6,644
Guilford	Freestanding Fixed	G-008347-09	EmergeOrtho-Triad Region (EmergeOrtho, P.A)	1	1.00	6,773	6,483	290	0	0	6,835
Guilford	Freestanding Fixed		Greensboro Imaging (Diagnostic Radiology & Imaging, LLC)	1	1.00	4,813	2,368	2,445	0	0	5,332
Guilford	Freestanding Fixed	G-006952-03	Greensboro Imaging (Diagnostic Radiology & Imaging, LLC)	1	1.00	5,021	3,279	1,742	0	0	5,391
Guilford	Freestanding Fixed		Greensboro Imaging (Diagnostic Radiology & Imaging, LLC)	1	1.00	4,714	2,533	2,181	0	0	5,177
Guilford	Freestanding Fixed	G-011986-20	Southeastern Orthopaedic Specialist	1	1.00	0	0	0	0	0	0
Guilford	Freestanding Fixed		Triad Imaging (Novant Health Imaging Triad (Triad Imaging, LLC))	1	1.00	3,723	3,144	579	0	0	3,846
Guilford	Freestanding Fixed	G-007269-05	WFHN Imaging (Wake Forest Baptist Hospital)	1	1.00	0	0	0	0	0	0
Guilford	Mobile	Legacy	Carolina Neuro. & Spine Assoc. (Alliance HealthCare Services)	0	0.00	21	15	6	0	0	22

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Guilford	Mobile	Legacy	Carolina Neurosurgery & Spine Assoc. (Alliance HealthCare Services)	0	0.36	1,790	1,253	537	0	0	1,904
Guilford	Mobile	Legacy	Cone Health MedCenter High Point (Alliance HealthCare Services)	0	0.10	523	361	162	0	0	557
Guilford	Mobile		Cone Health-MedCenter High Point	0	0.11	527	363	164	0	0	562
Guilford	Mobile	Legacy	Guilford Neurologic Associates (GNA) (Kings Medical Group)	0	0.17	871	309	562	0	0	990
Guilford	Mobile	G-005924-98	High Point Regional Health	0	0.00	0	0	0	0	0	0
Guilford	Mobile	G-007064-04	Premier Imaging (High Point Regional Health System)	0	0.00	0	0	0	0	0	0
Guilford	Mobile	G-007064-04	Premier Imaging (High Point Regional Health System)	0	0.31	1,537	1,174	363	0	0	1,614
Guilford	Mobile	G-007064-04	Premier Imaging (High Point Regional Health System)	0	0.05	242	199	43	0	0	251
Guilford	Mobile	Legacy	SE Orthopaedic Specialists, PA (Alliance HealthCare Services)	0	0.54	2,695	2,401	294	0	0	2,757
Guilford	Mobile	Legacy	Southeastern Orthopaedic Specialists PA (Alliance HealthCare Services)	0	0.37	1,854	1,663	191	0	0	1,895
Guilford				13	15.02	54,862					65,997
Halifax	Hospital Fixed	L-007257-05	Vidant North Hospital	1	1.00	1,853	1,214	249	330	60	2,243
Halifax/Northampton				1	1.00	1,853					2,243
Harnett	Hospital Fixed	M-006712-02; M-008287-09	Central Harnett Hospital	2	2.00	2,775	1,509	626	403	237	3,503
Harnett	Mobile	M-006605-02	Carolina Regional Radiology (CPR-Angier) (Mobile Imaging of North Carolina, LLC)	0	0.19	932	745	187	0	0	972
Harnett				2	2.19	3,707					4,475
Haywood	Hospital Fixed	A-005060-94; A-007807-07	Haywood Regional Medical Center	2	2.00	4,265	2,793	1,083	281	108	4,846
Haywood				2	2.00	4,265					4,846
Henderson	Hospital Fixed	B-006012-99; B-007384-05	AdventHealth Hendersonville	1	1.00	2,544	432	1,298	611	203	3,547
Henderson	Hospital Fixed	B-006004-99	Margaret R. Pardee Memorial Hospital	2	2.00	6,430	3,789	2,105	280	256	7,393
Henderson				3	3.00	8,974					10,939
Hertford	Hospital Fixed	Q-007213-05	Vidant Roanoke-Chowan Hospital	1	1.00	1,767	1,052	352	217	146	2,183
Hertford/Gates				1	1.00	1,767					2,183
Hoke	Hospital Fixed		Cape Fear Valley Hoke Hospital	1	1.00	0	0	0	0	0	0
Hoke	Hospital Fixed	N-011284-17	FirstHealth Moore Regional Hospital - Hoke Campus	1	1.00	0	0	0	0	0	0
Hoke	Mobile	O-006434-01	First Health Hoke Community Hospital (Cape Fear Diagnostic Imaging, LLC)	0	0.02	93	74	19	0	0	97
Hoke	Mobile	J-007008-04	First Health Hoke Community Hospital (Foundation Health Mobile Imaging, LLC)	0	0.04	178	135	43	0	0	187
Hoke	Mobile	H-061004-99	FirstHealth Moore Regional Hospital-Hoke (First Health of The Carolinas, Inc)	0	0.32	1,609	1,231	322	22	34	1,733
Hoke				2	2.38	1,880					2,018
Iredell	Hospital Fixed	F-006728-02	Davis Regional Medical Center	1	1.00	1,074	684	153	173	64	1,320

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Iredell	Hospital Fixed	F-005340-96	Iredell Memorial Hospital	1	1.00	3,570	1,214	932	603	821	5,182
Iredell	Hospital Fixed	F-005815-98; F-006591-02	Lake Norman Regional Medical Center	2	2.00	2,873	1,499	874	390	110	3,501
Iredell	Freestanding Fixed	F-006957-03	Piedmont HealthCare, PA (Alliance Healthcare Services, Inc. (Lessor) and Piedmont HealthCare (Lessee))	1	1.00	2,273	1,540	733	0	0	2,428
Iredell	Mobile	F-007164-04	Mooresville Diagnostic Imaging (Presbyterian Mobile Imaging, LLC)	0	0.31	1,540	1,280	260	0	0	1,595
Iredell	Mobile	F-006626-02	Novant Health Imaging - Mooresville (Jacksonville Diagnostic Imaging, LLC)	0	0.09	428	290	138	0	0	457
Iredell	Mobile	G-007065-04	Novant Health Imaging Mooresville (Forsyth Medical Hospital, Inc (Forsyth Mobile))	0	0.31	1,546	1,128	418	0	0	1,635
Iredell	Mobile	Legacy	Ortho Carolina, P.A. (Alliance Healthcare Services, Inc.)	0	0.39	1,964	1,964	0	0	0	1,964
Iredell	Mobile	Legacy	Piedmont Healthcare (Alliance HealthCare Services)	0	0.10	522	332	190	0	0	562
Iredell	Mobile		Piedmont Healthcare (Alliance HealthCare Services)	0	0.30	1,520	921	599	0	0	1,647
Iredell	Mobile	Legacy	Piedmont Healthcare (Alliance HealthCare Services)	0	0.01	42	23	19	0	0	46
Iredell				5	6.51	17,352					20,337
Jackson	Hospital Fixed	A-006797-03; A-008195-08	Harris Regional Hospital	2	2.00	2,881	1,907	722	141	111	3,274
Jackson				2	2.00	2,881					3,274
Johnston	Hospital Fixed	J-007900-07	Johnston Health-Clayton	1	1.00	2,242	1,120	740	252	130	2,751
Johnston	Hospital Fixed		Johnston Health-Smithfield	1	1.00	3,085	1,524	897	448	216	3,884
Johnston	Mobile	J-082608-08	Cardinal Points Imaging of the Carolinas Clayton (Pinnacle Health Service of North carolina, LLC)	0	0.67	3,347	2,605	742	0	0	3,504
Johnston	Mobile	J-008443-09	Emergeortho-Smithfield (EmergeOrtho)	0	0.17	829	743	86	0	0	847
Johnston	Mobile		Raleigh Radiology (Alliance HealthCare Services)	0	0.12	605	431	174	0	0	642
Johnston				2	2.96	10,108					11,628
Lee	Hospital Fixed	J-005901-98	Central Carolina Hospital	1	1.00	1,756	1,054	212	418	72	2,224
Lee	Mobile	J-007008-04	First Health Lee Campus (Foundation Health Mobile Imaging, LLC)	0	0.11	498	409	89	0	0	517
Lee				1	1.11	2,254					2,741
Lenoir	Hospital Fixed		UNC Lenoir Health Care	1	1.00	2,822	1,123	923	301	475	3,797
Lenoir				1	1.00	2,822					3,797
Lincoln	Hospital Fixed	F-008081-08; F011440-17	Atrium Health Lincoln	2	2.00	5,313	2,707	1,320	925	361	6,755
Lincoln	Hospital Fixed	F-012064-21	Carolinas Imaging Services – Denver (Carolinas Imaging Services, LLC)	1	1.00	0	0	0	0	0	0
Lincoln				3	3.00	5,313					6,755
Macon	Hospital Fixed		Angel Medical Center	1	1.00	1,767	1,075	562	110	20	1,999
Macon	Hospital Fixed	A-007197-05	Highlands-Cashiers Hospital	1	1.00	463	331	112	13	7	505

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Macon				2	2.00	2,230					2,504
Martin	Mobile		Martin General Hospital (Alliance HealthCare Services)	0	0.16	300	238	40	21	1	327
Martin	Mobile	Legacy	Martin General Hospital (Alliance HealthCare Services)	0	0.09	175	141	23	9	2	189
Martin				0	0.25	475					516
McDowell	Hospital Fixed	C-007304-05	Mission Hospital McDowell	1	1.00	1,981	1,187	651	84	59	2,254
McDowell	Mobile	E-7066-04	BR Healthcare Medical Group, Inc.- McDowell (Blue Ridge Healthcare Medical Group, Inc)	0	0.16	713	591	122	0	0	739
McDowell				1	1.16	2,694					2,993
Mecklenburg	Hospital Fixed	F-006830-03; F-011425-17	Atrium Health Pineville	2	2.00	8,458	2,945	2,574	1,856	1,083	11,737
Mecklenburg	Hospital Fixed	F-005919-98	Atrium Health University City	1	1.00	6,372	2,701	2,144	937	590	8,255
Mecklenburg	Hospital Fixed		Carolinas Medical Center - Main	5	5.00	14,997	3,343	5,674	3,139	2,841	21,954
Mecklenburg	Hospital Fixed		Carolinas Medical Center - Mercy	1	1.00	5,406	1,985	929	1,789	703	7,855
Mecklenburg	Hospital Fixed	F-005580-97; F-008237-08/F-001184-16	Novant Health Huntersville Medical Center	2	2.00	9,792	5,171	3,788	536	297	11,367
Mecklenburg	Hospital Fixed	F-006379-01; F-008688-11	Novant Health Matthews Medical Center	1	1.00	6,613	2,884	2,422	849	458	8,335
Mecklenburg	Hospital Fixed		Novant Health Mint Hill Medical Center	1	1.00	3,163	1,854	964	250	95	3,679
Mecklenburg	Hospital Fixed		Novant Health Presbyterian Medical Center-Charlotte Orthopedic Hospital	1	1.00	3,152	1,995	1,109	26	22	3,433
Mecklenburg	Hospital Fixed	F-002332-85	Novant Health Presbyterian Medical Center-Main	3	3.00	13,465	4,046	5,214	2,469	1,736	18,538
Mecklenburg	Hospital Fixed		Novant Health Presbyterian Medical Center-Novant Health Imaging Museum	1	1.00	2,908	1,724	1,184	0	0	3,159
Mecklenburg	Freestanding Fixed	F-0011760-19	Atrium Health Imaging-Kenilworth (Carolinas Physicians Network, Inc.)	1	1.00	1,189	110	1,079	0	0	1,418
Mecklenburg	Freestanding Fixed	F-011182-16	Atrium Huntersville ED (Carolinas Imaging Services, LLC)	1	1.00	203	129	74	0	0	219
Mecklenburg	Freestanding Fixed	F-008106-08	Carolina Neurosurgery & Spine Associates-Charlotte (Carolina Neurosurgery & Spine Associates)	1	1.00	0	0	0	0	0	0
Mecklenburg	Freestanding Fixed	F-050755-18	Carolinas Imaging Services-Ballantyne (Carolinas Imaging Services, LLC)	1	1.00	4,585	2,890	1,695	0	0	4,945
Mecklenburg	Freestanding Fixed	F-005918-98	Carolinas Imaging Services-Southpark (Carolinas Imaging Services, LLC)	1	1.00	4,293	2,554	1,739	0	0	4,662
Mecklenburg	Freestanding Fixed	F-005748-97	Novant Health Imaging Ballantyne (Presbyterian Ambulatory Holdings, LLC)	1	1.00	2,970	2,088	882	0	0	3,157
Mecklenburg	Freestanding Fixed	F-011946-20	Novant Health Imaging Southpark (Novant Health)	1	1.00	0	0	0	0	0	0
Mecklenburg	Freestanding Fixed	F-007068-04	Novant Health Imaging- SouthPark (Mecklenburg Diagnostic Imaging, LLC NHI (South Park))	1	1.00	4,672	3,615	1,057	0	0	4,896

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Mecklenburg	Freestanding Fixed	F-010287-14	OrthoCarolina Ballantyne (OrthoCarolina, PA)	1	1.00	8,232	7,746	486	0	0	8,335
Mecklenburg	Freestanding Fixed	F-006698-02	OrthoCarolina Spine Center (OrthoCarolina, PA)	1	1.00	5,552	4,633	919	0	0	5,747
Mecklenburg	Mobile	Legacy	Carolina Neurosurgery & Spine (Alliance HealthCare Services)	0	0.27	1,362	1,184	178	0	0	1,400
Mecklenburg	Mobile	F-006734-03	Carolina Neurosurgery & Spine Associates-Ballantyne (Carolina Neurosurgery & Spine Associates)	0	0.00	0	0	0	0	0	0
Mecklenburg	Mobile	F-006734-03	Carolina Neurosurgery & Spine Associates-Charlotte (Carolina Neurosurgery & Spine Associates)	0	0.00	0	0	0	0	0	0
Mecklenburg	Mobile		Charlotte Eye, Ear, Nose & Throat (Alliance HealthCare Services)	0	0.21	1,041	177	864	0	0	1,224
Mecklenburg	Mobile	Legacy	Noavnt Health Imaging Matthews Medical Center (Kings Medical Group)	0	0.00	22	12	10	0	0	24
Mecklenburg	Mobile	F-006626-02	Novant Health Imaging - University (Jacksonville Diagnostic Imaging, LLC)	0	0.03	138	102	36	0	0	146
Mecklenburg	Mobile	Legacy	Novant Health Imaging Steele Creek (Kings Medical Group)	0	0.20	1,012	727	285	0	0	1,072
Mecklenburg	Mobile	Legacy	Novant Health Imaging Steele Creek (Kings Medical Group)	0	0.15	773	589	184	0	0	812
Mecklenburg	Mobile	Legacy	Novant Health Imaging University (Kings Medical Group)	0	0.22	1,089	776	313	0	0	1,155
Mecklenburg	Mobile	Legacy	Novant Health Imaging University (Kings Medical Group)	0	0.14	686	497	189	0	0	726
Mecklenburg	Mobile	F-007164-04	Novant Health Imaging-Ballantyne (Presbyterian Mobile Imaging, LLC)	0	0.04	183	113	70	0	0	198
Mecklenburg	Mobile	F-007164-04	Novant Health Imaging-Steele Creek (Presbyterian Mobile Imaging, LLC)	0	0.03	146	94	52	0	0	157
Mecklenburg	Mobile	F-007164-04	Novant Health Imaging-University (Presbyterian Mobile Imaging, LLC)	0	0.03	157	94	63	0	0	170
Mecklenburg	Mobile	F-006379-01; F-008688-11	Novant Health Matthews Medical Center	0	0.06	279	156	123	0	0	305
Mecklenburg	Mobile	G-007065-04	Novant Health Matthews Medical Center (Forsyth Medical Hospital, Inc (Forsyth Mobile))	0	0.05	257	144	113	0	0	281
Mecklenburg	Mobile		Novant Health Mint Hill Medical Center	0	0.11	553	362	145	29	17	627
Mecklenburg	Mobile		Novant Health Mint Hill Medical Center (Alliance HealthCare Services)	0	0.01	29	17	12	0	0	32
Mecklenburg	Mobile		Novant Health Mint Hill Medical Center (Alliance HealthCare Services Inc.)	0	0.06	277	181	71	18	7	315
Mecklenburg	Mobile	G-007065-04	Novant Health Mint Hill Medical Center (Forsyth Medical Hospital, Inc (Forsyth Mobile))	0	0.01	62	34	28	0	0	68
Mecklenburg	Mobile	Legacy	Novant Health Mint Hill Medical Center (Kings Medical Group)	0	0.01	45	26	19	0	0	49
Mecklenburg	Mobile	F-007987-07	OrthoCarolina Huntersville (OrthoCarolina, PA)	0	0.32	1,583	1,431	152	0	0	1,615
Mecklenburg	Mobile	F-007987-07	OrthoCarolina Matthews (OrthoCarolina, PA)	0	0.52	2,572	2,571	1	0	0	2,572
Mecklenburg	Mobile		OrthoCarolina Randolph Spine Center (Alliance HealthCare Services)	0	0.08	424	374	50	0	0	435
Mecklenburg	Mobile	Legacy	OrthoCarolina Randolph Spine Center (Alliance Healthcare Services)	0	0.08	414	356	58	0	0	426
Mecklenburg	Mobile	F-007987-07	OrthoCarolina Spine Center (OrthoCarolina, PA)	0	0.45	2,269	2,012	257	0	0	2,324
Mecklenburg	Mobile	Legacy	OrthoCarolina, P. A. (Alliance Healthcare Services)	0	0.11	536	536	0	0	0	536
Mecklenburg	Mobile		OrthoCarolina, P.A. (Alliance HealthCare Services)	0	0.15	734	734	0	0	0	734
Mecklenburg	Mobile	Legacy	OrthoCarolina, PA (Alliance Healthcare Services, Inc.)	0	0.00	16	16	0	0	0	16

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Mecklenburg			2022 Need Determination	1	1.00	0	0	0	0	0	0
Mecklenburg				29	32.34	122,681					149,108
Mitchell	Hospital Fixed	D-006866-03	Blue Ridge Regional Hospital	1	1.00	1,370	832	461	47	30	1,540
Mitchell				1	1.00	1,370					1,540
Montgomery	Mobile	J-007008-04	First Health Montgomery (Troy) Memorial Hospital (Foundation Health Mobile Imaging, LLC)	0	0.23	433	350	83	0	0	451
Montgomery				0	0.23	433					451
Moore	Hospital Fixed	H-005602-97; H-006846-03; H-007097-04	FirstHealth Moore Regional Hospital	3	3.00	13,481	10,078	1,677	1,449	277	15,333
Moore	Freestanding Fixed	H-008365-09	First Health Southern Pines (Triad Imaging, LLC)	1	1.00	0	0	0	0	0	0
Moore	Freestanding Fixed	H-006845-03	Pinehurst Surgical Clinic PA	1	1.00	5,452	4,929	523	0	0	5,563
Moore				5	5.00	18,933					20,896
Nash	Hospital Fixed	L-005908-98	Nash General Hospital	2	2.00	5,127	2,827	1,005	1,117	178	6,454
Nash	Mobile	Legacy	Emerge Boice Willis Clinic (Insight Imaging)	0	0.13	665	273	392	0	0	748
Nash				2	2.13	5,792					7,202
New Hanover	Hospital Fixed		New Hanover Regional Medical Center Medical Mall	1	1.00	2,686	1,388	1,298	0	0	2,961
New Hanover	Hospital Fixed		New Hanover Regional Medical Center-Main Campus	2	2.00	8,496	1,645	1,741	3,098	2,012	13,656
New Hanover	Hospital Fixed		New Hanover Regional Medical Center-Orthopedic Hospital	1	1.00	5,388	2,226	3,057	61	44	6,136
New Hanover	Hospital Fixed		Novant Health Scotts Hill Medical Center	1	1.00	0	0	0	0	0	0
New Hanover	Freestanding Fixed	O-007259-05	EmergeOrtho (EmergeOrtho P.A.)	1	1.00	4,510	4,028	482	0	0	4,612
New Hanover	Freestanding Fixed	O-011063-15	Wilmington Health, PLLC	1	1.00	3,463	2,069	1,394	0	0	3,759
New Hanover	Mobile	Legacy	Delaney Radiologists (Insight Imaging)	0	0.55	2,724	1,998	726	0	0	2,878
New Hanover	Mobile	O-007254-05	Delaney Radiologists (Porter's Neck Imaging, LLC)	0	0.69	3,455	1,181	2,274	0	0	3,937
New Hanover	Mobile	O-007254-05	Delaney Radiologists (Porter's Neck Imaging, LLC)	0	0.15	729	729	0	0	0	729
New Hanover	Mobile	Legacy	EmergeOrtho-Wilmington Porters Neck (Insight Imaging)	0	0.10	486	454	32	0	0	493
New Hanover	Mobile	Legacy	New Hanover Reg. Med-Health (Alliance HealthCare Services)	0	0.01	31	17	14	0	0	34
New Hanover	Mobile	Legacy	New Hanover Regional Medical Ct (Alliance HealthCare Services)	0	0.05	270	128	142	0	0	300
New Hanover	Mobile	O-007001-04	New Hanover Regional-Scotts Hill (Alliance HealthCare Services)	0	0.54	2,687	1,252	1,435	0	0	2,991
New Hanover				7	9.08	34,925					42,487
Onslow	Hospital Fixed		Onslow Memorial Hospital	1	1.00	3,069	1,811	914	274	70	3,566
Onslow	Freestanding Fixed	P-008326-09	Coastal Diagnostic Imaging (Jacksonville Diagnostic Imaging, LLC)	1	1.00	3,268	2,521	747	0	0	3,426

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Onslow	Freestanding Fixed	P-007324-05	Coastal Diagnostic Imaging (Jacksonville Diagnostic Imaging, LLC)	1	1.00	2,565	1,981	584	0	0	2,689
Onslow	Mobile	Legacy	Diagnostic Imaging Partners (Insight Imaging)	0	0.13	668	454	214	0	0	713
Onslow				3	3.13	9,570					10,394
Orange	Hospital Fixed		University of North Carolina Hospitals- Hillsborough	1	1.00	4,749	1,759	2,485	110	395	5,809
Orange	Hospital Fixed		University of North Carolina Hospitals- Medical Center	6	6.00	20,900	4,896	8,846	2,610	4,548	30,011
Orange	Hospital Fixed		University of North Carolina Hospitals-Imaging Center	2	2.00	8,083	2,665	5,418	0	0	9,232
Orange	Freestanding Fixed		Wake Radiology (Chapel Hill Diagnostic Imaging, LLC)	1	1.00	2,103	1,056	1,047	0	0	2,325
Orange	Mobile		UNC Eastowne Medical Center (Alliance HealthCare Services)	0	0.02	83	35	48	0	0	93
Orange	Mobile		UNC Eastowne Medical Office (Alliance HealthCare Services)	0	0.07	349	121	228	0	0	397
Orange	Mobile	Legacy	UNC Hospital- Hillsborough Campus (Alliance HealthCare Services)	0	0.43	2,141	844	1,297	0	0	2,416
Orange	Mobile	G-007038-04	UNC Hospital Imaging & Spine Center (Alliance HealthCare Services)	0	0.14	699	292	407	0	0	785
Orange	Mobile	G-007038-04	UNC Hospital Imaging & Spine Center (Alliance HealthCare Services)	0	0.09	437	158	279	0	0	496
Orange			2021 Need Determination (under appeal)	1	1.00	0	0	0	0	0	0
Orange				11	11.74	39,544					51,566
Pasquotank	Hospital Fixed	R-007623-06	Sentara Albemarle Medical Center	1	1.00	1,834	1,096	444	215	79	2,193
Pasquotank	Mobile	R-007623-06	Sentara Albemarle Medical Center	0	0.60	2,992	1,898	699	314	81	3,488
Pasquotank			2022 Need Determination	1	1.00	0	0	0	0	0	0
Pasquotank/Camden/Currituck/Perquimans				2	2.60	4,826					5,681
Pender	Mobile	Legacy	Pender Memorial Hospital (Alliance HealthCare Services)	0	0.01	10	6	4	0	0	11
Pender	Mobile	O-007001-04	Pender Memorial Hospital (Alliance HealthCare Services)	0	0.00	7	4	3	0	0	8
Pender				0	0.01	17					18
Person	Hospital Fixed		Person Memorial Hospital	1	1.00	386	174	159	32	21	469
Person				1	1.00	386					469
Pitt	Hospital Fixed	Q-005898-98; Q-006709-02; Q-007658-06; Q-008671-11	Vidant Medical Center	4	4.00	14,682	2,423	3,785	4,399	4,075	23,653
Pitt	Freestanding Fixed		ECU Physicians MRI (Brody School of Medicine at East Carolina University)	1	1.00	4,053	2,534	1,519	0	0	4,375
Pitt	Freestanding Fixed		Greenville MRI LLC (Greenville MRI, LLC)	1	1.00	5,665	3,497	2,168	0	0	6,125
Pitt	Freestanding Fixed		Greenville MRI LLC (Greenville MRI, LLC)	1	1.00	6,617	4,289	2,328	0	0	7,111
Pitt	Freestanding Fixed		Physicians East P.A. (King's Medical Group)	1	1.00	4,223	3,212	1,011	0	0	4,437
Pitt	Mobile	Legacy	Orthopaedics East, Inc. (Alliance Healthcare Services)	0	0.52	2,581	2,519	62	0	0	2,594

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Pitt			2022 Need Determination	1	1.00	0	0	0	0	0	0
Pitt/Greene/Hyde/Tyrrell				9	9.52	37,821					48,296
Polk	Mobile	F-007040-04	St. Luke's Hospital (Carolinas Imaging Services, LLC)	0	0.42	777	654	108	13	2	813
Polk				0	0.42	777					813
Randolph	Hospital Fixed	G-006817-03; G-008342-09	Randolph Hospital	1	1.00	1,010	276	119	419	196	1,598
Randolph	Freestanding Fixed	G-010355-14	MRI Asheboro (American Healthcare Systems)	1	1.00	3,384	2,602	782	0	0	3,550
Randolph				2	2.00	4,394					5,148
Richmond	Hospital Fixed	H-011629-18 - relocate MRI from FirstHealthMoore Regional Hospital-Hamlet (closed)	FirstHealth Moore Regional Hospital - Richmond	1	1.00	0	0	0	0	0	0
Richmond	Mobile	H-061004-99	FirstHealth Moore Regional Hospital-Richmond (First Health of The Carolinas, Inc)	0	0.61	2,648	1,462	990	125	71	3,040
Richmond				1	1.61	2,648					3,040
Robeson	Hospital Fixed		Southeastern Regional Medical Center	2	2.00	6,229	3,702	1,118	1,007	402	7,741
Robeson				2	2.00	6,229					7,741
Rockingham	Hospital Fixed	G-006691-02	Annie Penn Hospital	1	1.00	2,590	1,410	546	508	126	3,263
Rockingham	Hospital Fixed	G-006297-00	UNC Rockingham Health Care	1	1.00	1,491	1,052	260	122	57	1,710
Rockingham				2	2.00	4,081					4,973
Rowan	Hospital Fixed	F-005829-98; F-006919-03; F-008314-09	Novant Health Rowan Medical Center	2	2.00	6,354	3,742	1,318	968	326	7,791
Rowan	Hospital Fixed		Novant Health Rowan Medical Center-Novant Health Imaging	2	2.00	3,570	2,854	715	0	1	3,723
Rowan				4	4.00	9,924					11,514
Rutherford	Hospital Fixed	C-006229-00; C-007298-05; C-008313-09	Rutherford Regional Medical Center	1	1.00	1,946	1,154	456	179	157	2,365
Rutherford				1	1.00	1,946					2,365
Sampson	Hospital Fixed	M-007218-05	Sampson Regional Medical Center	1	1.00	1,319	930	350	35	4	1,426
Sampson				1	1.00	1,319					1,426
Scotland	Hospital Fixed	N-007805-07	Scotland Memorial Hospital	1	1.00	3,197	1,971	774	358	94	3,759
Scotland	Mobile		OrthoCarolina P.A. (Alliance HealthCare Services)	0	0.17	764	764	0	0	0	764
Scotland	Mobile	Legacy	OrthoCarolina PA (Alliance Healthcare Services)	0	0.13	572	572	0	0	0	572
Scotland				1	1.31	4,533					5,095
Stanly	Hospital Fixed	F-007461-06	Atrium Health Stanly	1	1.00	3,580	1,753	1,154	427	246	4,450
Stanly	Mobile	F-007040-04	Atrium Health – West Stanly Imaging (Carolinas Imaging Services, LLC)	0	0.11	464	352	112	0	0	488
Stanly				1	1.11	4,044					4,938

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			No Service Site								
Stokes											
Surry	Hospital Fixed	G-006792-03	Hugh Chatham Memorial Hospital	1	1.00	2,930	2,000	551	291	88	3,384
Surry	Hospital Fixed	G-006569-02; G-008115-08	Northern Hospital of Surry County	1	1.00	3,049	1,922	557	453	117	3,669
Surry				2	2.00	5,979					7,053
			No Service Site								
Swain											
Transylvania	Hospital Fixed	B-007019-04	Transylvania Regional Hospital	1	1.00	1,659	1,050	428	121	60	1,916
Transylvania				1	1.00	1,659					1,916
Union	Hospital Fixed	F-005920-98; F-011536-18	Atrium Health Union	2	2.00	6,159	2,323	1,519	1,580	737	8,600
Union	Freestanding Fixed	F-006972-03	Union West MRI Center (Union Medical Services, LLC)	1	1.00	1,786	1,320	466	0	0	1,885
Union	Mobile	F-006626-02	Novant Health Imaging - Monroe (Jacksonville Diagnostic Imaging, LLC)	0	0.25	1,247	921	326	0	0	1,316
Union	Mobile	F-007164-04	Novant Health Imaging-Monroe (Presbyterian Mobile Imaging, LLC)	0	0.09	462	329	133	0	0	490
Union	Mobile	G-006271-00	OrthoCarolina Monroe (Alliance HealthCare Services)	0	0.18	887	887	0	0	0	887
Union	Mobile	Legacy	OrthoCarolina, P.A. (Alliance HealthCare Services)	0	0.00	18	18	0	0	0	18
Union	Mobile		OrthoCarolina, P.A. (Alliance HealthCare Services)	0	0.11	536	516	20	0	0	540
Union	Mobile	Legacy	OrthoCarolina, P.A. (Alliance Healthcare Services)	0	0.08	391	377	14	0	0	394
Union				3	3.71	11,486					14,131
Vance	Hospital Fixed	K-006527-01; K-007839-07	Maria Parham Medical Center	2	2.00	2,438	993	721	449	275	3,267
Vance/Warren				2	2.00	2,438					3,267
Wake	Hospital Fixed	Legacy; J-008529-10	Duke Raleigh Hospital	2	2.00	10,360	4,500	3,829	1,024	1,007	13,139
Wake	Hospital Fixed		Rex Hospital-Main	2	2.00	7,554	1,945	2,182	1,605	1,822	11,373
Wake	Hospital Fixed		Rex Hospital-UNC Rex Health Care of Cary	1	1.00	0	0	0	0	0	0
Wake	Hospital Fixed		WakeMed	2	2.00	10,771	3,848	2,532	2,530	1,861	15,465
Wake	Hospital Fixed		WakeMed Cary Hospital	1	1.00	4,235	2,037	932	751	515	5,625
Wake	Freestanding Fixed	J-007289-05	Cardinal Points Imaging of the Carolinas Midtown (Pinnacle Health Services of North Carolina, LLC)	1	1.00	5,435	3,185	2,250	0	0	5,912
Wake	Freestanding Fixed	J-011913-20	Duke Health Arrington Radiology (Duke University Health Systems)	1	1.00	0	0	0	0	0	0
Wake	Freestanding Fixed	J-011167-16	Duke Imaging Holly Springs (Duke University Health Systems, Inc.)	1	1.00	1,763	940	823	0	0	1,938

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Table 17E-1: MRI Fixed and Mobile Procedures by MRI Service Area with Tiered Thresholds and Fixed Equivalents

A	B	C	D	E	F	G	H	I	J	K	L
Service Area	Service Type	CON #	Service Site (Provider/Owner)	Fixed Magnet	Fixed Equiv	Total MRI Scans	Base Outpatient	Complex Outpatient	Base Inpatient	Complex Inpatient	Adjusted Total
Wake	Freestanding Fixed		Duke Imaging North Raleigh (Duke University Health System)	0	0.00	0	0	0	0	0	0
Wake	Freestanding Fixed		Raleigh Neurology Associates, P.A.	1	1.00	4,829	2,616	2,213	0	0	5,298
Wake	Freestanding Fixed	Legacy	Raleigh Neurology Imaging, PLLC (Alliance Healthcare Services, Inc.)	1	1.00	5,109	2,860	2,249	0	0	5,586
Wake	Freestanding Fixed	Legacy	Raleigh Radiology (Alliance Healthcare Services, Inc.)	1	1.00	6,658	4,544	2,114	0	0	7,106
Wake	Freestanding Fixed	Legacy	Raleigh Radiology (Alliance Healthcare Services, Inc.)	1	1.00	6,715	4,682	2,033	0	0	7,146
Wake	Freestanding Fixed	J-007605-06	The Bone and Joint Surgery Clinic	1	1.00	2,208	2,208	0	0	0	2,208
Wake	Freestanding Fixed	Legacy	Wake Radiology (Alliance Healthcare Services, Inc.)	1	1.00	3,794	2,180	1,614	0	0	4,136
Wake	Freestanding Fixed	Legacy	Wake Radiology Diagnostic Imaging (Alliance Healthcare Services, Inc.)	1	1.00	4,667	2,760	1,907	0	0	5,072
Wake	Freestanding Fixed	J-005783-97	Wake Radiology MRI (WR Imaging, LLC (formerly Raleigh MRI Center))	1	1.00	4,342	1,761	2,581	0	0	4,889
Wake	Freestanding Fixed		Wake Radiology MRI (WR Imaging, LLC (formerly Raleigh MRI Center))	1	1.00	3,478	1,646	1,832	0	0	3,867
Wake	Mobile		Cardinal Points Brier Creek (Foundation Health Mobile Imaging, LLC (MQ23))	0	0.22	1,093	771	322	0	0	1,161
Wake	Mobile	J-082608-08	Cardinal Points Imaging of the Carolinas Wake Forest (Pinnacle Health Service of North Carolina, LLC)	0	0.36	1,806	1,481	325	0	0	1,875
Wake	Mobile		Cardinal Points Imaging-Midtown (Foundation Health Mobile Imaging, LLC (MQ23))	0	0.03	173	124	49	0	0	183
Wake	Mobile		Cardinal Points Imaging-Wake Forest (Foundation Health Mobile Imaging, LLC (MQ23))	0	0.09	449	361	88	0	0	468
Wake	Mobile	J-006665-02	Cary Ortho (Cape Fear Mobile Imaging)	0	0.23	1,125	1,088	37	0	0	1,133
Wake	Mobile		Cary Orthopaedics (Cary Ortho) (Foundation Health Mobile Imaging, LLC (MQ23))	0	0.19	948	900	48	0	0	958
Wake	Mobile	Legacy	Duke Health Raleigh Hospital (Alliance HealthCare Services, Inc.)	0	0.74	3,692	2,130	1,562	0	0	4,023
Wake	Mobile	G-007038-04	Duke Heritage Medical (Alliance HealthCare Services)	0	0.13	628	470	158	0	0	662
Wake	Mobile	G-007038-04	Duke Heritage Medical (Alliance HealthCare Services)	0	0.20	1,003	918	85	0	0	1,021
Wake	Mobile	Legacy	Duke Raleigh Hospital-Cary (Alliance HealthCare Services)	0	0.54	2,700	1,625	1,075	0	0	2,928
Wake	Mobile	Legacy	EmergoOrtho, P.A. (Alliance Healthcare Services)	0	0.13	629	621	8	0	0	631
Wake	Mobile	J-008443-09	EmergoOrtho-Apex (EmergoOrtho)	0	0.01	36	36	0	0	0	36
Wake	Mobile	J-008443-09	EmergoOrtho-Duraleigh (EmergoOrtho)	0	0.54	2,682	2,416	266	0	0	2,738
Wake	Mobile	J-006665-02	Orthopaedic Specialists of NC (OSNC) (Cape Fear Mobile Imaging)	0	0.38	1,894	1,768	126	0	0	1,921
Wake	Mobile	Legacy	Raleigh Neurology Imaging, PLLC (Alliance HealthCare Services)	0	0.00	17	17	0	0	0	17
Wake	Mobile	Legacy	Raleigh Neurology Imaging, PLLC (Alliance HealthCare Services)	0	0.00	21	21	0	0	0	21
Wake	Mobile		Raleigh Neurology Imaging, PLLC (Alliance HealthCare Services)	0	0.00	21	19	2	0	0	21

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Table 17E-1: MRI Fixed and Mobile Procedures by MRI Service Area with Tiered Thresholds and Fixed Equivalents

A	B	C	D	E	F	G	H	I	J	K	L
Service Area	Service Type	CON #	Service Site (Provider/Owner)	Fixed Magnet	Fixed Equiv	Total MRI Scans	Base Outpatient	Complex Outpatient	Base Inpatient	Complex Inpatient	Adjusted Total
Wake	Mobile	J-007008-04	Raleigh Neurosurgical Clinic (Foundation Health Mobile Imaging, LLC)	0	0.01	70	35	35	0	0	77
Wake	Mobile		Raleigh Neurosurgical Clinic (Foundation Health Mobile Imaging, LLC (MQ23))	0	0.09	467	266	201	0	0	510
Wake	Mobile	J-007756-06	Raleigh Orthopaedic Clinic (Raleigh Orthopaedic Clinic, PA)	0	0.31	1,546	1,546	0	0	0	1,546
Wake	Mobile	J-007756-06	Raleigh Orthopaedic Clinic, PA	0	0.60	2,978	2,978	0	0	0	2,978
Wake	Mobile	Legacy	Raleigh Orthopedic (Alliance Healthcare Services)	0	0.16	802	799	3	0	0	803
Wake	Mobile		Raleigh Radiology (Alliance HealthCare Services)	0	0.07	349	264	85	0	0	367
Wake	Mobile		Raleigh Radiology (Alliance HealthCare Services)	0	0.13	663	496	167	0	0	698
Wake	Mobile		Raleigh Radiology (Alliance HealthCare Services)	0	0.41	2,035	1,588	447	0	0	2,130
Wake	Mobile	Legacy	Raleigh Radiology-Fuquay Varina (Alliance Healthcare Services)	0	0.39	1,936	1,433	503	0	0	2,043
Wake	Mobile		Raleigh Radiology-Oberlin (Alliance HealthCare Services)	0	0.06	298	200	98	0	0	319
Wake	Mobile	J-007012-04	Wake Radiology Cary (WR Imaging, LLC Mobile MRI 1)	0	0.14	695	439	256	0	0	749
Wake	Mobile	J-011291-17	Wake Radiology Holly Springs (WR Imaging, LLC Mobile MRI 2)	0	0.10	502	502	0	0	0	502
Wake	Mobile		Wake Radiology MRI (WR Imaging, LLC (formerly Raleigh MRI Center))	0	0.08	383	146	237	0	0	433
Wake	Mobile	J-011291-17	Wake Radiology Panther Creek (WR Imaging, LLC Mobile MRI 2)	0	0.09	465	268	197	0	0	507
Wake	Mobile	J-011291-17	Wake Radiology Wakefield (WR Imaging, LLC Mobile MRI 2)	0	0.27	1,364	662	702	0	0	1,513
Wake	Mobile	Legacy	WakeMed Garner Healthplex (Alliance HealthCare Services)	0	0.06	315	181	134	0	0	343
Wake	Mobile		WakeMed North	0	0.32	1,577	937	411	141	88	1,878
Wake	Mobile	Legacy	WakeMed-Apex Healthplex (Alliance HealthCare Services)	0	0.05	252	138	114	0	0	276
Wake	Mobile	Legacy	WakeMed-Raleigh Medical Park (Alliance HealthCare Services)	0	0.13	633	361	272	0	0	691
Wake			2019 Need Determination (under appeal)	1	1.00	0	0	0	0	0	0
Wake				21	28.26	118,165					136,921
			No Service Site								
Washington											
Watauga	Hospital Fixed	D-006652-02	Watauga Medical Center	1	1.00	4,399	2,519	1,174	506	200	5,286
Watauga	Freestanding Fixed	D-011899-20	AppMedical Services (Appalachian Regional Medical Associates, Inc.)	1	1.00	0	0	0	0	0	0
Watauga				2	2.00	4,399					5,286
Wayne	Hospital Fixed	P-006889-03; P-007447-05	Wayne Memorial Hospital, Inc.	2	2.00	7,066	4,905	1,578	356	227	7,947
Wayne				2	2.00	7,066					7,947
Wilkes	Hospital Fixed	D-005911-98	Wilkes Regional Medical Center	1	1.00	2,917	1,911	722	165	119	3,339
Wilkes				1	1.00	2,917					3,339
Wilson	Hospital Fixed		Wilson Medical Center	2	2.00	3,407	1,212	1,412	186	597	4,528
Wilson	Freestanding Fixed		EmergeOrtho	1	1.00	2,910	2,737	173	0	0	2,947

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Table 17E-1: MRI Fixed and Mobile Procedures by MRI Service Area with Tiered Thresholds and Fixed Equivalents

A	B	C	D	E	F	G	H	I	J	K	L
Service Area	Service Type	CON #	Service Site (Provider/Owner)	Fixed Magnet	Fixed Equiv	Total MRI Scans	Base Outpatient	Complex Outpatient	Base Inpatient	Complex Inpatient	Adjusted Total
Wilson	Mobile	Q-006884-03	Vidant Health Plex (Alliance HealthCare Services)	0	0.02	102	72	30	0	0	108
Wilson				3	3.02	6,419					7,583
			No Service Site								
Yadkin											
Total				260	294.07	961,745					

Threshold **2+ Fixed Scanners = 4,992**
 1 Fixed Scanner = 4,368
 0 Fixed Scanners = 1,872

Table 17E-2: MRI Need Determinations by Service Area

Proposed 2023 SMFP

A	B			C	D	E	F	G	H	I	J	K
Service Area	Adjusted Scans			Average Annual Change Rates	AACR Projected Scans	Population Growth	Population Growth Used	Population Projected Scans	Fixed Equiv	Average Scans	Threshold	MRI Need
	2018	2019	2021									
Alamance	10,607.2	11,226.3	12,239.0	0.0743	13,148.2	0.0321	0.0321	13,570.7	3.25	4,178.7	4992	0
Alexander	0.0	0.0	0.0	0.0000	0.0	-0.0078	0.0000	0.0	0.00	0.0	1872	0
Alleghany	105.3	19.6	0.0	-0.9068	0.0	-0.0016	0.0000	0.0	0.00	0.0	1872	0
Anson	71.0	114.6	106.0	0.2698	134.6	-0.0093	0.0000	134.6	0.00	0.0	1872	0
Ashe	1,190.9	903.4	779.6	-0.1892	632.1	-0.0082	0.0000	632.1	1.00	632.1	4368	0
Avery	389.4	203.0	0.0	-0.7394	0.0	-0.0010	0.0000	0.0	0.00	0.0	1872	0
Beaufort	2,295.9	2,437.8	2,820.8	0.1095	3,129.6	-0.0235	0.0000	3,129.6	1.00	3,129.6	4368	0
Bertie	0.0	0.0	0.0	0.0000	0.0	-0.0261	0.0000	0.0	0.00	0.0	1872	0
Bladen	779.7	711.3	316.6	-0.3213	214.9	-0.0552	0.0000	214.9	0.00	0.0	1872	0
Brunswick	8,880.3	8,233.6	12,139.3	0.2008	14,576.5	0.0693	0.0693	15,586.8	2.84	5,495.8	4992	1
Buncombe/Graham/Madison/Yancey	44,128.0	49,273.3	47,045.8	0.0357	48,725.2	0.0301	0.0301	50,189.5	12.03	4,171.8	4992	0
Burke	8,191.6	9,644.0	9,066.7	0.0587	9,599.1	-0.0046	0.0000	9,599.1	2.73	3,521.1	4992	0
Cabarrus	29,717.1	31,247.5	29,832.9	0.0031	29,925.9	0.0581	0.0581	31,663.2	7.79	4,066.9	4992	0
Caldwell	4,511.6	4,135.3	4,802.0	0.0389	4,988.9	-0.0052	0.0000	4,988.9	1.34	3,729.5	4368	0
Carteret	7,151.2	5,601.8	8,157.7	0.1198	9,135.0	0.0018	0.0018	9,151.2	2.13	4,293.5	4992	0
Catawba	18,387.3	20,815.0	21,201.5	0.0753	22,798.0	0.0229	0.0229	23,320.4	5.37	4,339.3	4992	0
Chatham	798.8	909.4	878.9	0.0525	925.0	0.0488	0.0488	970.2	0.00	0.0	1872	0
Cherokee/Clay	1,884.9	2,011.3	2,287.6	0.1022	2,521.4	0.0254	0.0254	2,585.4	1.00	2,585.4	4368	0
Chowan	2,243.6	2,111.8	2,138.8	-0.0230	2,089.6	-0.0018	0.0000	2,089.6	1.00	2,089.6	4368	0
Cleveland	8,015.0	8,798.0	10,357.5	0.1375	11,781.4	0.0194	0.0194	12,010.4	2.19	5,488.5	4992	1
Columbus	2,948.5	3,123.0	3,212.3	0.0439	3,353.3	-0.0552	0.0000	3,353.3	1.00	3,353.3	4368	0
Craven/Jones/Pamlico	14,888.6	14,265.0	16,809.6	0.0682	17,956.8	-0.0098	0.0000	17,956.8	4.00	4,489.2	4992	0
Cumberland	33,933.1	29,389.2	33,507.4	0.0031	33,611.6	0.0002	0.0002	33,618.1	7.01	4,794.1	4992	0
Dare	2,665.1	2,541.1	2,529.9	-0.0255	2,465.4	0.0320	0.0320	2,544.3	1.00	2,544.3	4368	0
Davidson	6,762.2	6,702.2	7,437.1	0.0504	7,811.9	0.0199	0.0199	7,967.1	2.00	3,983.5	4992	0
Davie	2,248.2	2,471.2	3,062.2	0.1692	3,580.3	0.0324	0.0324	3,696.4	1.37	2,704.5	4368	0
Duplin	1,611.8	1,733.1	1,846.4	0.0703	1,976.3	-0.0680	0.0000	1,976.3	0.72	1,976.3	1872	1
Durham/Caswell	80,632.7	83,142.0	86,748.0	0.0372	89,979.0	0.0395	0.0395	93,537.6	16.97	5,512.2	4992	1
Edgecombe	2,659.1	2,864.2	2,502.4	-0.0246	2,440.8	-0.0332	0.0000	2,440.8	1.00	2,440.8	4368	0
Forsyth	87,216.9	93,662.7	92,123.9	0.0287	94,771.4	0.0243	0.0243	97,077.5	20.52	4,730.4	4992	0
Franklin	0.0	0.0	40.3	0.0000	40.3	0.0694	0.0694	43.1	1.00	43.1	4368	0
Gaston	23,534.8	23,009.0	23,458.0	-0.0014	23,424.8	0.0188	0.0188	23,864.5	6.28	3,801.0	4992	0
Granville	1,617.9	1,741.4	2,004.6	0.1137	2,232.5	0.0332	0.0332	2,306.5	1.14	2,025.1	4368	0
Guilford	68,049.2	64,803.5	65,997.5	-0.0146	65,031.5	0.0298	0.0298	66,969.6	15.02	4,460.1	4992	0
Halifax/Northampton	2,491.3	2,503.8	2,243.1	-0.0495	2,132.0	-0.0313	0.0000	2,132.0	1.00	2,132.0	4368	0
Harnett	4,055.3	4,160.8	4,474.9	0.0507	4,702.0	0.0365	0.0365	4,873.8	2.19	2,228.8	4992	0
Haywood	5,107.8	5,166.2	4,845.7	-0.0253	4,723.1	0.0185	0.0185	4,810.6	2.00	2,405.3	4992	0

Table 17E-2: MRI Need Determinations by Service Area

Proposed 2023 SMFP

A	B			C	D	E	F	G	H	I	J	K
Service Area	Adjusted Scans			Average Annual Change Rates	AACR Projected Scans	Population Growth	Population Growth Used	Population Projected Scans	Fixed Equiv	Average Scans	Threshold	MRI Need
	2018	2019	2021									
Henderson	9,969.0	9,264.5	10,939.5	0.0551	11,541.9	0.0319	0.0319	11,909.8	3.00	3,969.9	4992	0
Hertford/Gates	2,312.0	2,495.2	2,182.9	-0.0230	2,132.8	-0.0534	0.0000	2,132.8	1.00	2,132.8	4368	0
Hoke	968.4	1,540.2	2,017.6	0.4502	2,925.9	0.0298	0.0298	3,013.1	2.38	1,267.8	4992	0
Iredell	20,463.4	19,731.8	20,337.1	-0.0025	20,285.5	0.0593	0.0593	21,487.9	6.51	3,298.3	4992	0
Jackson	3,873.5	3,686.3	3,274.0	-0.0801	3,011.7	0.0072	0.0072	3,033.4	2.00	1,516.7	4992	0
Johnston	11,619.9	11,718.4	11,628.5	0.0004	11,633.1	0.0779	0.0779	12,539.9	2.96	4,239.7	4992	0
Lee	2,372.6	2,268.7	2,740.6	0.0821	2,965.6	0.0392	0.0392	3,081.7	1.11	2,766.3	4368	0
Lenoir	3,653.6	3,607.5	3,796.6	0.0199	3,872.2	-0.0096	0.0000	3,872.2	1.00	3,872.2	4368	0
Lincoln	5,852.5	6,141.3	6,754.6	0.0746	7,258.5	0.0266	0.0266	7,451.6	3.00	2,483.9	4992	0
Macon	3,058.6	3,140.3	2,503.9	-0.0880	2,283.6	0.0306	0.0306	2,353.5	2.00	1,176.7	4992	0
Martin	485.3	477.5	516.3	0.0326	533.1	-0.0256	0.0000	533.1	0.00	0.0	1872	0
McDowell	2,789.4	3,102.5	2,992.8	0.0385	3,107.9	-0.0032	0.0000	3,107.9	1.16	2,671.8	4368	0
Mecklenburg	150,362.9	156,962.5	149,108.3	-0.0031	148,650.0	0.0604	0.0604	157,624.5	32.34	4,874.4	4992	0
Mitchell	1,501.0	1,705.2	1,539.9	0.0195	1,570.0	-0.0088	0.0000	1,570.0	1.00	1,570.0	4368	0
Montgomery	383.0	373.3	450.6	0.0909	491.6	0.0002	0.0002	491.6	0.00	0.0	1872	0
Moore	23,351.5	24,499.0	20,895.8	-0.0490	19,872.5	0.0505	0.0505	20,875.9	5.00	4,175.2	4992	0
Nash	6,382.6	7,244.2	7,201.8	0.0646	7,666.8	0.0050	0.0050	7,705.5	2.13	3,612.2	4992	0
New Hanover	40,489.5	48,158.8	42,486.5	0.0358	44,008.2	0.0389	0.0389	45,719.0	9.08	5,035.3	4992	1
Onslow	9,861.2	9,411.5	10,394.3	0.0294	10,700.0	0.0326	0.0326	11,048.9	3.13	3,525.7	4992	0
Orange	45,943.8	52,070.9	51,565.7	0.0618	54,754.0	0.0293	0.0293	56,360.6	11.74	4,799.5	4992	0
Pasquotank/Camden/Currituck/Perquimans	5,300.3	5,559.9	5,680.7	0.0353	5,881.5	0.0371	0.0371	6,099.9	2.60	2,346.7	4992	0
Pender	412.6	618.4	18.5	-0.2357	14.1	0.0474	0.0474	14.8	0.00	0.0	1872	0
Person	536.8	639.8	469.5	-0.0372	452.0	0.0012	0.0012	452.5	1.00	452.5	4368	0
Pitt/Greene/Hyde/Tyrrell	38,394.8	31,247.5	48,295.5	0.1797	56,974.9	0.0048	0.0048	57,251.1	9.52	6,015.6	4992	1
Polk	1,089.4	744.4	812.8	-0.1124	721.4	-0.0196	0.0000	721.4	0.00	0.0	1872	0
Randolph	1,823.4	5,257.2	5,147.7	0.9312	9,941.2	0.0131	0.0131	10,071.6	2.00	5,035.8	4992	1
Richmond	2,493.4	2,444.0	3,039.9	0.1120	3,380.3	-0.0139	0.0000	3,380.3	1.61	2,104.5	4368	0
Robeson	8,356.5	7,664.3	7,740.8	-0.0364	7,458.8	-0.0439	0.0000	7,458.8	2.00	3,729.4	4992	0
Rockingham	5,505.7	5,515.5	4,972.6	-0.0483	4,732.3	0.0000	0.0000	4,732.3	2.00	2,366.2	4992	0
Rowan	10,935.2	11,308.1	11,513.9	0.0262	11,815.0	0.0125	0.0125	11,962.4	4.00	2,990.6	4992	0
Rutherford	2,846.6	2,780.2	2,365.2	-0.0863	2,161.1	0.0047	0.0047	2,171.3	1.00	2,171.3	4368	0
Sampson	1,690.8	1,627.8	1,426.4	-0.0805	1,311.5	-0.0179	0.0000	1,311.5	1.00	1,311.5	4368	0
Scotland	4,639.5	4,855.7	5,095.5	0.0480	5,340.0	-0.0348	0.0000	5,340.0	1.31	4,089.3	4368	0
Stanly	3,817.8	4,349.7	4,937.7	0.1373	5,615.4	0.0044	0.0044	5,640.1	1.11	5,098.5	4368	1
Stokes	0.0	0.0	0.0	0.0000	0.0	-0.0028	0.0000	0.0	0.00	0.0	1872	0
Surry	6,619.2	6,977.8	7,052.6	0.0324	7,281.4	-0.0015	0.0000	7,281.4	2.00	3,640.7	4992	0
Swain	0.0	0.0	0.0	0.0000	0.0	0.0014	0.0014	0.0	0.00	0.0	1872	0

Table 17E-2: MRI Need Determinations by Service Area

Proposed 2023 SMFP

A	B			C	D	E	F	G	H	I	J	K
Service Area	Adjusted Scans			Average Annual Change Rates	AACR Projected Scans	Population Growth	Population Growth Used	Population Projected Scans	Fixed Equiv	Average Scans	Threshold	MRI Need
	2018	2019	2021									
Transylvania	1,914.6	1,968.8	1,916.1	0.0008	1,917.5	0.0105	0.0105	1,937.7	1.00	1,937.7	4368	0
Union	12,895.9	12,098.1	14,130.7	0.0531	14,880.7	0.0610	0.0610	15,788.5	3.71	4,256.4	4992	0
Vance/Warren	3,026.0	3,328.7	3,266.6	0.0407	3,399.5	-0.0193	0.0000	3,399.5	2.00	1,699.8	4992	0
Wake	116,582.3	126,278.7	136,920.9	0.0837	148,384.5	0.0641	0.0641	157,897.1	28.26	5,587.1	4992	1
Washington	0.0	0.0	0.0	0.0000	0.0	-0.0415	0.0000	0.0	0.00	0.0	1872	0
Watauga	3,953.3	4,348.3	5,286.3	0.1578	6,120.5	0.0581	0.0581	6,476.2	2.00	3,238.1	4992	0
Wayne	8,079.5	7,814.2	7,946.5	-0.0080	7,883.3	-0.0137	0.0000	7,883.3	2.00	3,941.7	4992	0
Wilkes	2,945.5	3,327.1	3,338.6	0.0665	3,560.6	-0.0158	0.0000	3,560.6	1.00	3,560.6	4368	0
Wilson	7,114.4	7,606.6	7,583.1	0.0330	7,833.7	-0.0022	0.0000	7,833.7	3.02	2,593.6	4992	0
Yadkin	0.0	0.0	0.0	0.0000	0.0	-0.0027	0.0000	0.0	0.00	0.0	1872	0
Totals	1,086,438.5	1,125,636.2	1,159,299.3		1,210,884.8			1,253,584.1	292.55			9

Table 17E-3: Existing and Approved Specialized MRI Scanners, Excluded from Inventory

Scanner Use	County	Provider	CON Project ID	Number of Scanners
Cardiovascular Clinical Use (Policy AC-3)	Durham	Duke University Hospital	J-006511-01	3
Dedicated Breast Scanning	Mecklenburg	Charlotte Radiology Breast Center	F-006725-02	1
Dedicated Pediatric Use	Mecklenburg	Carolinas Medical Center (Levine Children's Hospital)	F-007219-05	1
Radiation Oncology	Durham	Duke University Hospital	J-006295-00	1
Radiation Oncology	Forsyth	North Carolina Baptist Hospital	G-006816-03	1
Use in Operating Room Suite (Policy AC-3)	Durham	Duke University Hospital	J-008030-07	1
Intraoperative MRI (iMRI)	Mecklenburg	Carolinas Medical Center	F-011210-16	1

Note: These scanners shall be used only for the purposes indicated above. They shall not be used for general clinical purposes.

Table 17E-4: Fixed MRI Scanner Need Determination*
(Proposed for Certificate of Need Review Commencing in 2023)

Service Area	Fixed MRI Scanner Need Determination	Certificate of Need Application Deadline**	Certificate of Need Beginning Review Date
Brunswick	1	To be determined	To be determined
Cleveland	1	To be determined	To be determined
Duplin	1	To be determined	To be determined
Durham/Caswell	1	To be determined	To be determined
New Hanover	1	To be determined	To be determined
Pitt/Greene/Hyde/Tyrell	1	To be determined	To be determined
Randolph	1	To be determined	To be determined
Stanly	1	To be determined	To be determined
Wake	1	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.0203(b). The filing deadline is 5:00 p.m. on the application deadline date.

F. POSITRON EMISSION TOMOGRAPHY SCANNERS

Introduction

A *positron emission tomography (PET) scanner*, as defined in G.S. 131E-176(19a), means “equipment that utilizes a computerized radiographic technique that employs radioactive substances to examine the metabolic activity of various body structures.”

The first PET scanners were dedicated machines performing only that service, supported by cyclotrons on-site. However, PET scanners also include hybrid machines, performing a variety of nuclear medicine studies and supported by new tracer production facilities housing cyclotrons in stand-alone facilities. Many PET scanners are configured with a single gantry to accommodate computed tomography (CT) to acquire sequential PET and CT images during the same exam. All of these machines are PET scanners as defined in G.S. 131E-176 (19a), but they vary widely in their capabilities.

Dedicated PET scanners can be fixed or mobile. **Mobile** PET scanner means a dedicated PET scanner and its transporting equipment that is moved, at least weekly, to provide services at two or more host facilities. A **fixed** PET scanner is one that is not mobile.

Changes from Previous Plan

This section of the chapter contains technical edits for clarity only in how the need determination is calculated. No changes were made to the methodology or its application.

Definition

A fixed PET scanner’s **service area** is the HSA in which it is located (*Table 17F-1*). Appendix A identifies the multicounty groupings that comprise the HSAs. A mobile PET scanner’s service area is statewide. A **statewide service area** is defined as a planning area that encompasses the entire state when determining need. For mobile equipment, the definition does not imply that a CON applicant is required to project that it will provide mobile services in a certain number of counties, HSAs, or regions. Similarly, once developed, the equipment does not have to serve a certain number of counties, HSAs, or regions.

Assumptions of the Methodology

1. The methodology concerns dedicated fixed PET scanners only. Dedicated scanners do not perform other nuclear medicine procedures.
2. The facility has a deficit when its overall utilization of dedicated fixed PET scanners is at or above 80% of capacity during the current reporting year. For the purpose of need determination calculations, the annual capacity of a dedicated fixed PET scanner is 3,000 procedures; 80% capacity is 2,400 procedures.

Application of the Methodology

Part 1 (Table 17F-1):

Determine the planning inventory of all fixed PET scanners in the state to include existing fixed PET scanners in operation, approved fixed PET scanners for which a certificate of need was issued but is pending development, and need determinations in prior SMFPs for which a certificate of need has not yet been issued (*Column C*).

Step 1: For each facility that operates a PET scanner, determine the total number of procedures performed on all fixed PET scanners located at the facility for the current reporting year (*Column D*).

- Step 2: Multiply the number of fixed PET scanners at each facility by 3,000 procedures to determine the PET scanner capacity at each facility.
- Step 3: Divide the total number of PET scanner procedures performed at each facility, as determined in Step 1, by the capacity calculated in Step 2. Multiply the results by 100 to convert the numbers to a utilization percentage (*Column E*). A facility has a deficit if its total utilization is 80% or greater (*Column F*).
- Step 4: To calculate the need determination for the service area, add all facility deficits (*Column F*) and adjust the sum by the number of placeholders for need determinations in previous SMFPs. The total is the need determination for an additional fixed PET scanner except as provided in Step 7 for both parts of the methodology combined (*Column G*).

Part 2:

- Step 5: Identify each major cancer treatment facility, program or provider in the state, defined as providers that operate two linear accelerators that performed over 12,500 ESTV procedures during the current reporting year (*Table 17C-5*).
- Step 6: A service area has a need determination for one additional fixed PET scanner if a major cancer treatment facility, program, or provider identified in Step 5 is hospital-based (i.e., on a hospital's license) and does not own or operate a dedicated fixed PET scanner, except as provided in Step 7 for both parts of the methodology combined.
- Step 7: The maximum need determination for a single HSA in any one year will be no more than two additional fixed PET scanners regardless of the numbers generated individually by each part of the methodology (*Table 17F-1, Column F*).

Unless otherwise specified by the methodology, calculations do not use rounded values. However, fractional values are rounded automatically when displayed.

The SMFP does not have a methodology to project need for additional mobile PET scanners. A summer petition is required to place a need in the upcoming SMFP. If the need determination is approved, any person may apply for a certificate of need to acquire the mobile PET scanner.

Table 17F-1: Utilization of Existing Dedicated Fixed PET Scanners

A	B	C	D	E	F	G
HSA	Facility	Planning Inventory	2020-2021 Procedures	Facility Utilization Rate	Service Area Deficit	Need Determination
I	Catawba Valley Medical Center / Frye Regional Medical Center	1	1,140	38.00%	0	
	Mission Hospital	1	2,808	93.60%	1	
	Messino Cancer Center*	1	0	0.00%	0	
	HSA I Totals					1
II	Alamance Regional Medical Center	1	745	24.83%	0	
	Cone Health	1	1,818	60.60%	0	
	High Point Regional Health	1	1,013	33.77%	0	
	North Carolina Baptist Hospital	2	3,216	53.60%	0	
	Novant Health Forsyth Medical Center	1	2,742	91.40%	1	
	HSA II Totals					1
III	Atrium Health Cabarrus	1	0	0.00%	0	
	Atrium Health Union	1	585	19.50%	0	
	Carolinas Medical Center	2	4,455	74.25%	0	
	CaroMont Regional Medical Center	1	855	28.50%	0	
	Iredell Memorial Hospital	1	612	20.40%	0	
	Novant Health Presbyterian Medical Center	1	2,001	66.70%	0	
	HSA III Totals					
IV	Duke Raleigh Hospital	1	946	0.00%	0	
	Duke University Hospital	3	5,405	60.06%	0	
	Rex Hospital	2	3,906	65.10%	0	
	UNC Hospitals	2	3,952	65.87%	0	
	Wake PET Services, Wake Radiology Oncology, Wake Radiology	1	209	6.97%	0	
	HSA IV Totals					
V	Cape Fear Valley Medical Center	1	1,123	37.43%	0	
	First Imaging of the Carolinas	1	0	0.00%	0	
	New Hanover Regional Medical Center**	2	3,091	51.52%	0	
	Southeastern Regional Medical Center***	1	0	0.00%	0	
	HSA V Totals					
VI	CarolinaEast Medical Center	1	997	33.23%	0	
	Nash General Hospital	1	476	15.87%	0	
	Vidant Medical Center	2	3,169	52.82%	0	
	HSA VI Totals					
	TOTAL	34	45,264	37.72%	2	2

* CON issued for new PET February 2, 2022. CON Project ID: B-012059-21

** CON issued for new PET April 28, 2022. CON Project ID: O-012143-21

*** CON issued for new PET June 27, 2020. CON Project ID: N-011866-20

Table 17F-2: PET Scanner Provider of Mobile Dedicated Scanners

Mobile Provider	Procedures	Utilization Rate
		Year 2020-2021 Procedures, 2,600
Alliance Imaging I	4,383	169%
Alliance Imaging II	3,440	132%
Alliance Imaging III*	0	0%
Insight Health Corp.	0	0%
Novant Health Forsyth Medical Center (NHFCM)	1,750	67%
TOTAL	9,573	

*CON issued for new mobile PET April 12, 2022. CON Project ID: G-012156-21

Table 17F-3: PET Scanner Sites and Utilization of Existing Mobile Dedicated Scanners

Mobile Site	Mobile Provider	Number of Sites	Procedures
			2020-2021
Advent Healthcare Park Ridge Hospital	Alliance I	1	242
Atrium Health Lincoln	Alliance I	1	256
Caldwell Memorial Hospital	Alliance I	1	201
Carteret General Hospital	Alliance II	1	424
Cleveland Regional Medical Center	Alliance I	1	839
Columbus Regional Healthcare System	Alliance II	1	127
Cone Health Annie Penn Hospital	Alliance I	1	227
Haywood Regional Medical Center	Alliance I	1	187
Johnston Health	Alliance II	1	288
Lake Norman Regional Medical Center	Alliance I	1	95
Lexington Medical Center	Alliance I	1	103
Margaret R. Pardee Memorial Hospital	Alliance I	1	532
Maria Parham Medical Center	Alliance II	1	143
Northern Hospital of Surry County	Alliance I	1	178
Novant Health Huntersville Medical Center	NHFCM	1	663
Novant Health Kernersville Medical Center	NHFCM	1	400
Novant Health Matthews Medical Center	NHFCM	1	549
Novant Health Mint Hill Medical Center	NHFCM	1	111
Novant Health Rowan Medical Center - Julian Road	NHFCM	1	4
Novant Health Thomasville Medical Center	NHFCM	1	23
Onslow Memorial Hospital	Alliance II	1	327
Randolph Hospital	Alliance I	1	91
Rutherford Regional Medical Center	Alliance I	1	154
Scotland Memorial Hospital	Alliance II	1	165
Sentara Albemarle Medical Center	Alliance II	1	406
Southeastern Regional Medical Center	Alliance II	1	293
Stanly Regional Medical Center	Alliance I	1	297
The Outer Banks Hospital	Alliance II	1	155
UNC Health Blue Ridge - Morganton	Alliance I	1	124
UNC Health Blue Ridge Healthcare Hospital - Valdese	Alliance I	1	198
UNC Lenoir Healthcare	Alliance II	1	205
Vidant Chowan Hospital	Alliance II	1	95
Vidant Duplin Hospital	Alliance II	1	60
Watauga Medical Center	Alliance I	1	188
Wayne Memorial Hospital	Alliance II	1	327
WestCare Health System	Alliance I	1	318
Wilkes Regional Medical Center	Alliance I	1	153
Wilson Medical Center	Alliance II	1	425
TOTAL		38	9,573

Table 17F-4: Dedicated Fixed PET Scanner Need Determination

(Proposed for Certificate of Need Review Commencing in 2023)

Service Area	Dedicated Fixed PET Scanner Need Determination	Certificate of Need Application Deadline	Certificate of Need Beginning Review Date
HSA I	1	To be determined	To be determined
HSA II	1	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.			

Table 17F-5: Mobile PET Scanner Need Determination

(Proposed for Certificate of Need Review Commencing in 2023)

Service Area	Mobile PET Need Determination	Certificate of Need Application Deadline	Certificate of Need Beginning Review Date
It is determined that there is no need anywhere in the state and no reviews are scheduled.			

Appendix A:

North Carolina Health Service Areas

Appendix B:

List of Contiguous Counties

Appendix C:

Executive Orders 46 and 187

Appendix D:

North Carolina Certificate of Need Statute

Appendix E:

Certificate of Need Regulations

Appendix F:

Academic Medical Center Teaching Hospitals

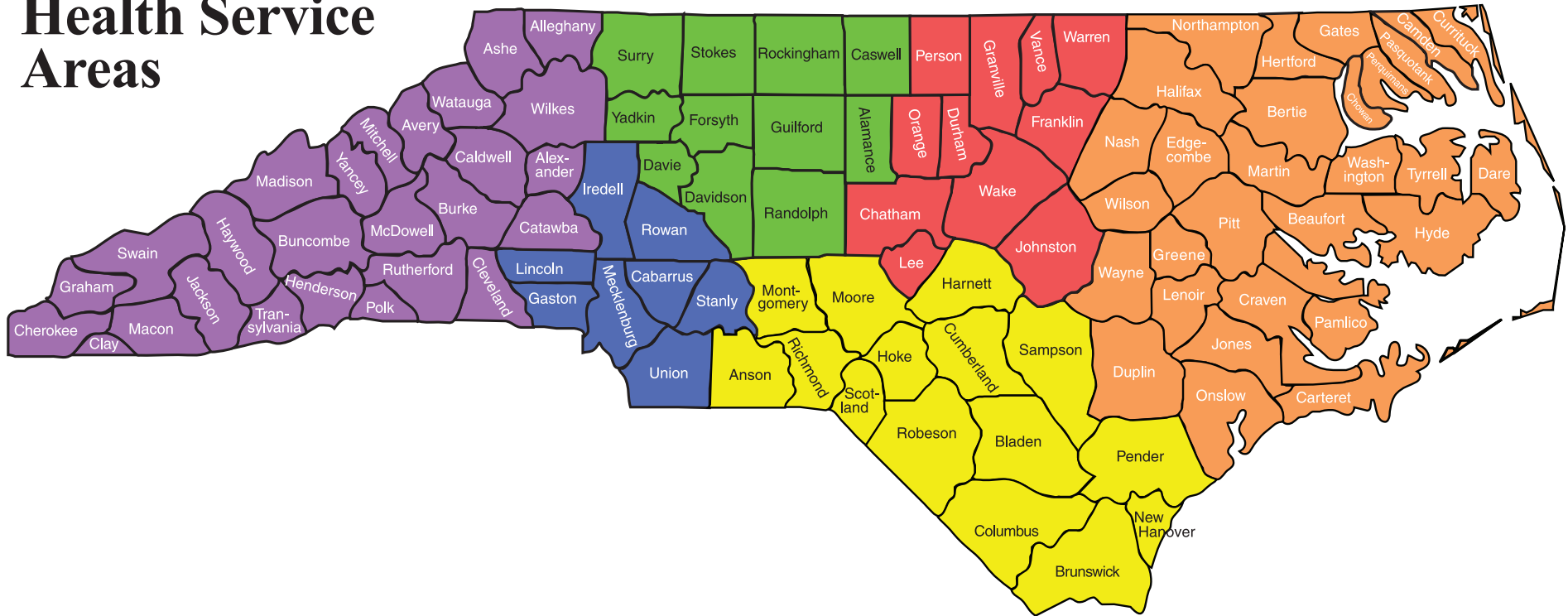
Appendix G:

Critical Access Hospitals

Appendix H:

Regulation of Detoxification Services Provided in Hospitals
Licensed under Articles 5, Chapter 131E, of the General
Statutes

Appendix A: North Carolina Health Service Areas



Health Service Areas	Counties	Color Code
HSA I	Alexander, Alleghany, Ashe, Avery, Buncombe, Burke, Caldwell, Catawba, Cherokee, Clay, Cleveland, Graham, Haywood, Henderson, Jackson, Macon, Madison, McDowell, Mitchell, Polk, Rutherford, Swain, Transylvania, Watauga, Wilkes, Yancey	
HSA II	Alamance, Caswell, Davidson, Davie, Forsyth, Guilford, Randolph, Rockingham, Stokes, Surry, Yadkin	
HSA III	Cabarrus, Gaston, Iredell, Lincoln, Mecklenburg, Rowan, Stanly, Union	
HSA IV	Chatham, Durham, Franklin, Granville, Johnston, Lee, Orange, Person, Vance, Wake, Warren	
HSA V	Anson, Bladen, Brunswick, Columbus, Cumberland, Harnett, Hoke, Montgomery, Moore, New Hanover, Pender, Richmond, Robeson, Sampson, Scotland	
HSA VI	Beaufort, Bertie, Camden, Carteret, Chowan, Craven, Currituck, Dare, Duplin, Edgecombe, Gates, Greene, Halifax, Hertford, Hyde, Jones, Lenoir, Martin, Nash, Northampton, Onslow, Pamlico, Pasquotank, Perquimans, Pitt, Tyrrell, Washington, Wayne, Wilson	

APPENDIX B

LIST OF CONTIGUOUS COUNTIES

For purposes of the State Medical Facilities Plan, Healthcare Planning defines contiguous groupings in relation to a base county and includes any North Carolina county that touches that base county.

ALAMANCE	ALEXANDER	ALLEGHANY	ANSON	ASHE	AVERY
Caswell	Caldwell	Ashe	Montgomery	Alleghany	Burke
Chatham	Catawba	Surry	Richmond	Watauga	Caldwell
Guilford	Iredell	Wilkes	Stanly	Wilkes	McDowell
Orange	Wilkes		Union		Mitchell
Randolph					Watauga
Rockingham					

BEAUFORT	BERTIE	BLADEN	BRUNSWICK	BUNCOMBE	BURKE
Craven	Chowan	Columbus	Columbus	Haywood	Avery
Hyde	Halifax	Cumberland	New Hanover	Henderson	Caldwell
Martin	Hertford	Pender	Pender	Madison	Catawba
Pamlico	Martin	Robeson		McDowell	Cleveland
Pitt	Northampton	Sampson		Rutherford	Lincoln
Washington	Washington			Yancey	McDowell
					Rutherford

CABARRUS	CALDWELL	CAMDEN	CARTERET	CASWELL	CATAWBA
Iredell	Alexander	Currituck	Craven	Alamance	Alexander
Mecklenburg	Avery	Gates	Jones	Orange	Burke
Rowan	Burke	Pasquotank	Onslow	Person	Caldwell
Stanly	Catawba			Rockingham	Cleveland
Union	Watauga				Iredell
	Wilkes				Lincoln

CHATHAM	CHEROKEE	CHOWAN	CLAY	CLEVELAND	COLUMBUS
Alamance	Clay	Bertie	Cherokee	Burke	Bladen
Durham	Graham	Gates	Macon	Catawba	Brunswick
Harnett	Macon	Hertford		Gaston	Pender
Lee		Perquimans		Lincoln	Robeson
Moore				Rutherford	
Orange					
Randolph					
Wake					

CRAVEN	CUMBERLAND	CURRITUCK	DARE	DAVIDSON	DAVIE
Beaufort	Bladen	Camden	Currituck	Davie	Davidson
Carteret	Harnett	Dare	Hyde	Forsyth	Forsyth
Jones	Hoke		Tyrrell	Guilford	Iredell
Lenoir	Moore			Montgomery	Rowan
Pamlico	Robeson			Randolph	Yadkin
Pitt	Sampson			Rowan	
				Stanly	

DUPLIN	DURHAM	EDGECOMBE	FORSYTH	FRANKLIN	GASTON
Jones	Chatham	Halifax	Davidson	Granville	Cleveland
Lenoir	Granville	Martin	Davie	Halifax	Lincoln
Onslow	Orange	Nash	Guilford	Johnston	Mecklenburg
Pender	Person	Pitt	Rockingham	Nash	
Sampson	Wake	Wilson	Stokes	Vance	
Wayne			Surry	Wake	
			Yadkin	Warren	

GATES	GRAHAM	GRANVILLE	GREENE	GUILFORD	HALIFAX
Camden	Cherokee	Durham	Lenoir	Alamance	Bertie
Chowan	Macon	Franklin	Pitt	Davidson	Edgecombe
Hertford	Swain	Person	Wayne	Forsyth	Franklin
Pasquotank		Vance	Wilson	Randolph	Martin
Perquimans		Wake		Rockingham	Nash
				Stokes	Northampton
					Warren

HARNETT	HAYWOOD	HENDERSON	HERTFORD	HOKE	HYDE
Chatham	Buncombe	Buncombe	Bertie	Cumberland	Beaufort
Cumberland	Henderson	Haywood	Chowan	Moore	Dare
Johnston	Jackson	Polk	Gates	Richmond	Tyrrell
Lee	Madison	Rutherford	Northampton	Robeson	Washington
Moore	Swain	Transylvania		Scotland	
Sampson	Transylvania				
Wake					

IREDELL	JACKSON	JOHNSTON	JONES	LEE	LENOIR
Alexander	Haywood	Franklin	Carteret	Chatham	Craven
Cabarrus	Macon	Harnett	Craven	Harnett	Duplin
Catawba	Swain	Nash	Duplin	Moore	Greene
Davie	Transylvania	Sampson	Lenoir		Jones
Lincoln		Wake	Onslow		Pitt
Mecklenburg		Wayne			Wayne
Rowan		Wilson			
Wilkes					
Yadkin					

LINCOLN	MACON	MADISON	MARTIN	McDOWELL	MECKLENBURG
Burke	Cherokee	Buncombe	Beaufort	Avery	Cabarrus
Catawba	Clay	Haywood	Bertie	Buncombe	Gaston
Cleveland	Graham	Yancey	Edgecombe	Burke	Lincoln
Gaston	Jackson		Halifax	Mitchell	Iredell
Iredell	Swain		Pitt	Rutherford	Union
Mecklenburg			Washington	Yancey	

MITCHELL	MONTGOMERY	MOORE	NASH	NEW HANOVER	NORTHAMPTON
Avery	Anson	Chatham	Edgecombe	Brunswick	Bertie
McDowell	Davidson	Cumberland	Franklin	Pender	Halifax
Yancey	Moore	Harnett	Halifax		Hertford
	Randolph	Hoke	Johnston		Warren
	Richmond	Lee	Wake		
	Rowan	Montgomery	Warren		
	Stanly	Randolph	Wilson		
		Richmond			
		Scotland			

ONslow	ORANGE	PAMLICO	PASQUOTANK	PENDER	PERQUIMANS
Carteret	Alamance	Beaufort	Camden	Bladen	Chowan
Duplin	Caswell	Craven	Gates	Brunswick	Gates
Jones	Chatham		Perquimans	Columbus	Pasquotank
Pender	Durham			Duplin	
	Person			New Hanover	
				Onslow	
				Sampson	

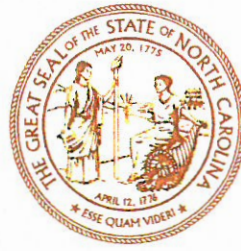
PERSON	PITT	POLK	RANDOLPH	RICHMOND	ROBESON
Caswell	Beaufort	Henderson	Alamance	Anson	Bladen
Durham	Craven	Rutherford	Chatham	Hoke	Columbus
Granville	Edgecombe		Davidson	Montgomery	Cumberland
Orange	Greene		Guilford	Moore	Hoke
	Lenoir		Montgomery	Scotland	Scotland
	Martin		Moore	Stanly	
	Wilson				

ROCKINGHAM	ROWAN	RUTHERFORD	SAMPSON	SCOTLAND	STANLY
Alamance	Cabarrus	Buncombe	Bladen	Hoke	Anson
Caswell	Davidson	Burke	Cumberland	Moore	Cabarrus
Forsyth	Davie	Cleveland	Duplin	Richmond	Davidson
Guilford	Iredell	Henderson	Harnett	Robeson	Montgomery
Stokes	Montgomery	McDowell	Johnston		Richmond
	Stanly	Polk	Pender		Rowan
			Wayne		Union

STOKES	SURRY	SWAIN	TRANSYLVANIA	TYRRELL	UNION
Forsyth	Alleghany	Graham	Haywood	Dare	Anson
Guilford	Forsyth	Haywood	Henderson	Hyde	Cabarrus
Rockingham	Stokes	Jackson	Jackson	Washington	Mecklenburg
Surry	Wilkes	Macon			Stanly
Yadkin	Yadkin				

VANCE	WAKE	WARREN	WASHINGTON	WATAUGA	WAYNE
Franklin	Chatham	Franklin	Beaufort	Ashe	Duplin
Granville	Durham	Halifax	Bertie	Avery	Greene
Warren	Franklin	Nash	Hyde	Caldwell	Johnston
	Granville	Northampton	Martin	Wilkes	Lenoir
	Harnett	Vance	Tyrrell		Sampson
	Johnston				Wilson
	Nash				

WILKES	WILSON	YADKIN	YANCEY
Alexander	Edgecombe	Davie	Buncombe
Alleghany	Greene	Forsyth	Madison
Ashe	Johnston	Iredell	McDowell
Caldwell	Nash	Stokes	Mitchell
Iredell	Pitt	Surry	
Surry	Wayne	Wilkes	
Watauga			
Yadkin			



State of North Carolina

PAT McCRORY
GOVERNOR

March 4, 2014

EXECUTIVE ORDER NO. 46

REAUTHORIZING THE STATE HEALTH COORDINATING COUNCIL

WHEREAS, the State Health Coordinating Council is a public advisory body established by Executive Order No. 139 on March 3, 2008; and

WHEREAS, the State Health Coordinating Council plays an important role in working with the Department of Health and Human Services to prepare the State Medical Facilities Plan approved annually by the Governor; and

WHEREAS, the success of the State Health Coordinating Council depends on the membership of persons knowledgeable about healthcare services, facilities, and technology including physicians, representatives of business and industry, medical educators and members of professional associations; and

WHEREAS, the State Health Coordinating Council has only advisory authority and therefore is not a covered board under the State Ethics Act; and

WHEREAS, it is important that the State Health Coordinating Council exercise its advisory authority in a transparent manner so that the Governor and citizens have full knowledge of the professional and economic interests of members of the State Health Coordinating Council represent; and

By the power vested in me as Governor by the Constitution and laws of the State of North Carolina, **IT IS ORDERED:**

Section 1. Establishment

The North Carolina State Health Coordinating Council (hereinafter "NCSHCC") is hereby reestablished.

Section 2. Membership

The NCSHCC shall have the following duties and functions:

- a) Serve as a forum for hearing regional concerns and recommendations related to health planning;
- b) Compile a list of state health needs and advise the Department of Health and Human Services;
- c) Advise the Department of Human Resources on issues related to state health needs, giving attention to local, regional, and statewide needs;

- d) Review and comment on contents of documents related to health planning and make recommendations concerning them to the Secretary of Human and Human Services and the Governor;
- e) Advise the Department of Health and Human Services on cost-effective mechanisms for achieving health needs;
- f) Prepare the Annual State Medical Facilities Plan and present the plan to the Governor.

Section 3. Membership

The NCSHCC shall consist of 25 members who shall be appointed by the Governor as follows:

- a) One member from an academic medical center;
- b) Two members from business and industry (at least one individual representing small business and one representing large business);
- c) One member from the health insurance industry;
- d) Two members from county government (one representing a rural county and one representing an urban county);
- e) One member representing nursing homes;
- f) One members representing hospitals;
- g) One member representing home care facilities;
- h) One member representing hospice;
- i) One local health director;
- j) One licensed physician;
- k) One member from the North Carolina House of Representatives;
- l) One member from the North Carolina Senate;
- m) Eleven at-large members to represent other health professionals, business, industry and to ensure regional representation.

Section 4. Terms of Membership

The terms of membership of the NCSHCC shall be staggered so that the terms of approximately one-third of the members shall expire in a single calendar year. All members shall be appointed for a term of three years. Terms shall expire on December 31, and new terms shall begin on January 1. Members of the NCSHCC shall serve at the pleasure of the Governor.

Members currently serving on February 28, 2014 shall continue to serve at the pleasure of the Governor until their successors are appointed or otherwise noticed by the Office of the Governor.

Section 5. Vacancies

A vacancy occurring during a term of appointment is filled in the same manner as the original appointment and for the balance of the unexpired terms.

Section 6. Travel Expenses

Members of the NCSHCC shall receive necessary travel and subsistence expenses in accordance with the provision of G.S. § 138-5.

Section 7. Chairman

The Chairman and Vice Chairman of the NCSHCC shall be appointed by the Governor. The Chairman and Vice Chairman shall serve at the pleasure of the Governor. The NCSHCC may elect other such officers as it deems necessary.

Section 8. Meetings

The NCSHCC shall meet quarterly and at other times at the call of the Chairman or upon written request of at least ten (10) of its members. All business meetings of the NCSHCC, its committees and subcommittees, or special task forces shall be open to the public.

Section 9. Staff Assistance

The Department of Health and Human Services shall provide clerical support and other services required by the NCSHCC.

Section 10. Ethical Standards

1. The members of the NCSHCC shall always act in the best interests of the public and shall bring their particular knowledge and experience to the NCSHCC to serve the public interest as identified in the Certificate of Needs Law, Chapter 131E, Article 9 of the General Statutes.
2. The following process shall be observed for all meetings of the NCSHCC and NCSHCC subcommittees at which the NCSHCC or NCSHCC subcommittee takes any action:
 - a. At the beginning of each meeting, the Chair shall remind all members of their duty to act always in the best interest of the public without regard for their own professional, institutional or financial interests and that members should recuse themselves from voting on any matter on which they cannot meet this standard.
 - b. Prior to conducting any business, each member shall disclose any professional or institutional interest he or she may have in any matter coming before the NCSHCC or NCSHCC subcommittee for action at that meeting. The Chair will determine if the member needs to recuse himself or herself from voting on the matter in order to ensure the integrity of the actions of the NCSHCC or NCSHCC subcommittee.
 - c. Prior to conducting any business, each member shall also disclose any financial benefit he or she may derive from any matter coming before the NCSHCC or NCSHCC subcommittee for action at that meeting. A member derives a financial benefit from a matter under consideration if the person or his/her spouse (i) has an ownership interest in an entity that is a party to the matter under consideration; (ii) will derive any income or commission as a direct result of action on the matter under consideration; or (iii) will acquire property as a direct result of action on the matter under consideration. When any member indicates that he or she will derive a financial benefit from a matter coming before the NCSHCC or any subcommittee, the member shall recuse himself or herself from voting on the matter.
 - d. A member who has recused himself or herself from voting is not prohibited from deliberating on the matter unless the Chair determines, after review, that participation by the member in deliberations would impair the integrity of the actions of the NCSHCC or NCSHCC subcommittee.
 - e. The minutes of the NCSHCC and its subcommittees will reflect all disclosures and recusals made pursuant to this section, and such minutes will be provided to the Governor for review with the SMFP.
 - f. A challenge to a member's participation in a vote on issues under this Executive Order may be raised only by a member of the NCSHCC or an employee of the

Division of Health Services Regulation of DHHS. In such case where a challenge is made, the Chair, in consultation with the DHHS legal counsel, shall determine whether the challenge is valid and the action that should be taken.

- g. For the purposes of this Executive Order, the term "Chair" means the Chair of the NCSHCC or the Chair of any NCSHCC subcommittee. In the absence of the Chair or if the professional, institutional, or financial interests of the Chair must be reviewed pursuant to this section, then the Vice-Chair of the NCSHCC or NCSHCC subcommittee shall make the determinations required by this section.
3. Members of the NCSHCC are expected to and should confer with DHHS on any matters that come before them in the development of the SMFP. No member of the NCSHCC, however, may confer with any DHHS employee regarding any proposed provision of the SMFP or any proposed or pending certificate of need application in which the member has a direct, conflicting professional, institutional or financial interest, except in public meetings conducted by DHHS or the NCSHCC.
4. This Executive Order is for the Governor's purposes in reviewing and approving or amending the proposed SMFP submitted by the NCSHCC and DHHS. This Order does not and shall not be construed to create any rights, nor create claims, under the Certificate of Need Law, State Government Ethics Act, or otherwise.

This Executive Order is retroactive to March 1, 2014 and shall remain in effect until December 31, 2016, pursuant to N.C. Gen. Stat. § 147-16.2(b), or until earlier rescinded. This order supersedes and replaces all other executive orders on this subject and specifically rescinds Executive Order No. 139 issued on March 3, 2008, Executive Order No. 10 issued on March 3, 2009, Executive Order No. 52 issued on March 2, 2010, and Executive Order No. 67 issued on October 4, 2010.

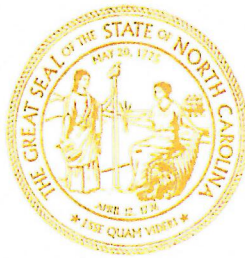
IN WITNESS WHEREOF, I have hereunto signed my name and affixed the Great Seal of the State of North Carolina at the Capitol in the City of Raleigh, this 4th day of March in the year of our Lord two thousand fourteen, and of the Independence of the United States of America the two hundred and thirty-eight.


Pat McCrory
Governor

ATTEST:


Elaine F. Marshall
Secretary of State





State of North Carolina

ROY COOPER
GOVERNOR

December 31, 2020

EXECUTIVE ORDER NO. 187

EXTENDING THE STATE HEALTH COORDINATING COUNCIL

WHEREAS, the State Health Coordinating Council ("NCSHCC") is a public body reestablished by Executive Order No. 46 entitled *Reauthorizing The State Health Coordinating Council* on March 4, 2014; and

WHEREAS, Executive Order No. 122 entitled *Extending The State Health Coordinating Council*, on December 29, 2016 extended the State Health Coordinating Council; and

WHEREAS, the Executive Order extending the State Health Coordinating Council expires on December 31, 2020; and

WHEREAS, the State Health Coordinating Council plays an important role in working with the North Carolina Department of Health and Human Services to prepare the State Medical Facilities Plan approved annually by the undersigned; and

WHEREAS, it is appropriate to update the schedule for meetings of the State Health Coordinating Council.

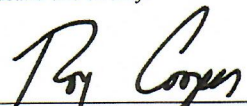
NOW THEREFORE, by the power vested in me as Governor by the Constitution and laws of the State of North Carolina, **IT IS ORDERED**:

Section 8. Meetings in Executive Order No. 46, *Reauthorizing The State Health Coordinating Council*, signed on March 4, 2014, is hereby amended and restated to read:

The NCSHCC shall meet at least three (3) times each calendar year and at other times at the call of the Chairperson or upon written request of at least ten (10) of its members. All business meetings of the NCSHCC, its committees and subcommittees, or special task forces shall be open to the public.

Executive Order No. 122, *Extending The State Health Coordinating Council*, signed on December 29, 2016, reestablished pursuant to Executive Order No. 46, *Reauthorizing The State Health Coordinating Council*, signed on March 4, 2014, is hereby extended except as amended above to December 31, 2024 pursuant to N.C. Gen. Stat. § 147-16.2(b), or until earlier rescinded.

IN WITNESS WHEREOF, I have hereunto signed my name and affixed the Great Seal of the State of North Carolina at the Capitol in the City of Raleigh, this 31st day of December in the year of our Lord two thousand and twenty.



Roy Cooper
Governor

ATTEST:



Elaine F. Marshall
Secretary of State



APPENDIX D

NORTH CAROLINA CERTIFICATE OF NEED STATUTE

Article 9 Certificate of Need

§ 131E-175. Findings of fact.

The General Assembly of North Carolina makes the following findings:

- (1) That the financing of health care, particularly the reimbursement of health services rendered by health service facilities, limits the effect of free market competition and government regulation is therefore necessary to control costs, utilization, and distribution of new health service facilities and the bed complements of these health service facilities.
- (2) That the increasing cost of health care services offered through health service facilities threatens the health and welfare of the citizens of this State in that citizens need assurance of economical and readily available health care.
- (3) That, if left to the market place to allocate health service facilities and health care services, geographical maldistribution of these facilities and services would occur and, further, less than equal access to all population groups, especially those that have traditionally been medically underserved, would result.
- (3a) That access to health care services and health care facilities is critical to the welfare of rural North Carolinians, and to the continued viability of rural communities, and that the needs of rural North Carolinians should be considered in the certificate of need review process.
- (4) That the proliferation of unnecessary health service facilities results in costly duplication and underuse of facilities, with the availability of excess capacity leading to unnecessary use of expensive resources and overutilization of health care services.
- (5) Repealed.
- (6) That excess capacity of health service facilities places an enormous economic burden on the public who pay for the construction and operation of these facilities as patients, health insurance subscribers, health plan contributors, and taxpayers.
- (7) That the general welfare and protection of lives, health, and property of the people of this State require that new institutional health services to be offered within this State be subject to review and evaluation as to need, cost of service, accessibility to services, quality of care, feasibility, and other criteria as determined by provisions of this Article or by the North Carolina Department of Health and Human Services pursuant to provisions of this Article prior to such services being offered or developed in order that only appropriate and needed institutional health services are made available in the area to be served.
- (8) That because persons who have received exemptions under Section 11.9(a) of S.L. 2000-67, as amended, and under Section 11.69(b) of S.L. 1997-443, as amended by Section 12.16C(a) of S.L. 1998-212, and as amended by Section 1 of S.L. 1999-135, have had sufficient time to complete development plans and initiate construction of beds in adult care homes.
- (9) That because with the enactment of this legislation, beds allowed under the exemptions noted above and pending development will count in the inventory of adult care home beds available to provide care to residents in the State Medical Facilities Plan.
- (10) That because State and county expenditures provide support for nearly three-quarters of the residents in adult care homes through the State County Special Assistance program, and excess bed capacity increases costs per resident day, it is in the public interest to promote efficiencies in

- delivering care in those facilities by controlling and directing their growth in an effort to prevent underutilization and higher costs and provide appropriate geographical distribution.
- (11) That physicians providing gastrointestinal endoscopy services in unlicensed settings should be given an opportunity to obtain a license to provide those services to ensure the safety of patients and the provision of quality care.
 - (12) That demand for gastrointestinal endoscopy services is increasing at a substantially faster rate than the general population given the procedure is recognized as a highly effective means to diagnose and prevent cancer.

§ 131E-176. Definitions.

The following definitions apply in this Article:

- (1) Adult care home. – A facility with seven or more beds licensed under Part 1 of Article 1 of Chapter 131D of the General Statutes or under this Chapter that provides residential care for aged individuals or individuals with disabilities whose principal need is a home which provides the supervision and personal care appropriate to their age and disability and for whom medical care is only occasional or incidental.
- (1a) Air ambulance. – Aircraft used to provide air transport of sick or injured persons between destinations within the State.
- (1b) Ambulatory surgical facility. – A facility designed for the provision of a specialty ambulatory surgical program or a multispecialty ambulatory surgical program. An ambulatory surgical facility serves patients who require local, regional, or general anesthesia and a period of post-operative observation. An ambulatory surgical facility may only admit patients for a period of less than 24 hours and must provide at least one designated operating room or gastrointestinal endoscopy room and at least one designated recovery room, have available the necessary equipment and trained personnel to handle emergencies, provide adequate quality assurance and assessment by an evaluation and review committee, and maintain adequate medical records for each patient. An ambulatory surgical facility may be operated as a part of a physician or dentist's office, provided the facility is licensed under Part 4 of Article 6 of this Chapter, but the performance of incidental, limited ambulatory surgical procedures which do not constitute an ambulatory surgical program and which are performed in a physician's or dentist's office does not make that office an ambulatory surgical facility.
- (1c) Ambulatory surgical program. – A formal program for providing on a same-day basis those surgical procedures which require local, regional, or general anesthesia and a period of post-operative observation to patients whose admission for more than 24 hours is determined, prior to surgery or gastrointestinal endoscopy, to be medically unnecessary.
- (2) Bed capacity. – Space used exclusively for inpatient care, including space designed or remodeled for licensed inpatient beds even though temporarily not used for such purposes. The number of beds to be counted in any patient room shall be the maximum number for which adequate square footage is provided as established by rules of the Department except that single beds in single rooms are counted even if the room contains inadequate square footage. The term "bed capacity" also refers to the number of dialysis stations in kidney disease treatment centers, including freestanding dialysis units.
- (2a) Bone marrow transplantation services. – The process of infusing bone marrow into persons with diseases to stimulate the production of blood cells.
- (2b) Burn intensive care services. – Services provided in a unit designed to care for patients who have been severely burned.
- (2c) Campus. – The adjacent grounds and buildings, or grounds and buildings not separated by more than a public right-of-way, of a health service facility and related health care entities.
- (2d) Capital expenditure. – An expenditure for a project, including but not limited to the cost of construction, engineering, and equipment which under generally accepted accounting principles is

- not properly chargeable as an expense of operation and maintenance. Capital expenditure includes, in addition, the fair market value of an acquisition made by donation, lease, or comparable arrangement by which a person obtains equipment, the expenditure for which would have been considered a capital expenditure under this Article if the person had acquired it by purchase.
- (2e) Repealed by Session Laws 2005-325, s. 1, effective for hospices and hospice offices December 31, 2005.
 - (2f) Cardiac catheterization equipment. – The equipment used to provide cardiac catheterization services.
 - (2g) Cardiac catheterization services. – Those procedures, excluding pulmonary angiography procedures, in which a catheter is introduced into a vein or artery and threaded through the circulatory system into the heart specifically to diagnose abnormalities in the motion, contraction, and blood flow of the moving heart or to perform surgical therapeutic interventions to restore, repair, or reconstruct the coronary blood vessels of the heart.
 - (3) Certificate of need. – A written order which affords the person so designated as the legal proponent of the proposed project the opportunity to proceed with the development of such project.
 - (4) Repealed by Session Laws 1993, c. 7, s. 2.
 - (5) Change in bed capacity. – Any of the following:
 - a. Any relocation of health service facility beds, or dialysis stations from one licensed facility or campus to another.
 - b. Any redistribution of health service facility bed capacity among the categories of health service facility bed.
 - c. Any increase in the number of health service facility beds, or dialysis stations in kidney disease treatment centers, including freestanding dialysis units.
 - (5a) Chemical dependency treatment facility. – A public or private facility, or unit in a facility, which is engaged in providing 24-hour a day treatment for chemical dependency or a substance use disorder. This treatment may include detoxification, administration of a therapeutic regimen for the treatment of individuals with chemical dependence or substance use disorders, and related services. The facility or unit may be any of the following:
 - a. A unit within a general hospital or an attached or freestanding unit of a general hospital licensed under Article 5 of this Chapter.
 - b. A unit within a psychiatric hospital or an attached or freestanding unit of a psychiatric hospital licensed under Article 1A of former Chapter 122 of the General Statutes or Article 2 of Chapter 122C of the General Statutes.
 - c. A freestanding facility specializing in treatment of individuals with chemical dependence or substance use disorders that is licensed under Article 1A of former Chapter 122 of the General Statutes or Article 2 of Chapter 122C of the General Statutes. The facility may be identified as "chemical dependency, substance abuse, alcoholism, or drug abuse treatment units," "residential chemical dependency, substance use disorder, alcoholism or drug abuse facilities," or by other names if the purpose is to provide treatment of individuals with chemical dependence or substance use disorders. The term, however, does not include social setting detoxification facilities, medical detoxification facilities, halfway houses, or recovery farms.
 - (5b) Chemical dependency treatment beds. – Beds that are licensed for the inpatient treatment of chemical dependency. Residential treatment beds for the treatment of chemical dependency or substance use disorder are chemical dependency treatment beds. Chemical dependency treatment beds do not include beds licensed for detoxification.
 - (6) Department. – The North Carolina Department of Health and Human Services.
 - (7) Develop. – When used in connection with health services, means to undertake those activities which will result in the offering of institutional health service or the incurring of a financial obligation in relation to the offering of such a service.

- (7a) Diagnostic center. – A freestanding facility, program, or provider, including but not limited to, physicians' offices, clinical laboratories, radiology centers, and mobile diagnostic programs, in which the total cost of all the medical diagnostic equipment utilized by the facility which cost ten thousand dollars (\$10,000) or more exceeds one million five hundred thousand dollars (\$1,500,000). In determining whether the medical diagnostic equipment in a diagnostic center costs more than one million five hundred thousand dollars (\$1,500,000), the costs of the equipment, studies, surveys, designs, plans, working drawings, specifications, construction, installation, and other activities essential to acquiring and making operational the equipment shall be included. The capital expenditure for the equipment shall be deemed to be the fair market value of the equipment or the cost of the equipment, whichever is greater. Beginning September 30, 2022, and on September 30 each year thereafter, the cost threshold amount in this subdivision shall be adjusted using the Medical Care Index component of the Consumer Price Index published by the U.S. Department of Labor for the 12-month period preceding the previous September 1.
- (7b) Expedited review. – The status given to an application's review process when the applicant petitions for the review and the Department approves the request based on findings that all of the following are met:
- a. The review is not competitive.
 - b. The proposed capital expenditure is less than five million dollars (\$5,000,000).
 - c. A request for a public hearing is not received within the time frame defined in G.S. 131E-185.
 - d. The agency has not determined that a public hearing is in the public interest.
- (7c) Gamma knife. – Equipment which emits photon beams from a stationary radioactive cobalt source to treat lesions deep within the brain and is one type of stereotactic radiosurgery.
- (7d) Gastrointestinal endoscopy room. – A room used for the performance of procedures that require the insertion of a flexible endoscope into a gastrointestinal orifice to visualize the gastrointestinal lining and adjacent organs for diagnostic or therapeutic purposes.
- (8),(9) Repealed by Session Laws 1987, c. 511, s. 1.
- (9a) Health service. – An organized, interrelated activity that is medical, diagnostic, therapeutic, rehabilitative, or a combination thereof and that is integral to the prevention of disease or the clinical management of an individual who is sick or injured or who has a disability. "Health service" does not include administrative and other activities that are not integral to clinical management.
- (9b) Health service facility. – A hospital; long-term care hospital; psychiatric facility; rehabilitation facility; nursing home facility; adult care home; kidney disease treatment center, including freestanding hemodialysis units; intermediate care facility for individuals with intellectual disabilities; home health agency office; chemical dependency treatment facility; diagnostic center; hospice office, hospice inpatient facility, hospice residential care facility; and ambulatory surgical facility.
- (9c) Health service facility bed. – A bed licensed for use in a health service facility in the categories of (i) acute care beds; (ii) psychiatric beds; (iii) rehabilitation beds; (iv) nursing home beds; (v) intermediate care beds for individuals with intellectual disabilities; (vi) chemical dependency treatment beds; (vii) hospice inpatient facility beds; (viii) hospice residential care facility beds; (ix) adult care home beds; and (x) long-term care hospital beds.
- (10) Health maintenance organization (HMO). – A public or private organization which has received its certificate of authority under Article 67 of Chapter 58 of the General Statutes and which either is a qualified health maintenance organization under Section 1310(d) of the Public Health Service Act or satisfies all of the following:
- a. Provides or otherwise makes available to enrolled participants health care services, including at least the following basic health care services: usual physician services, hospitalization, laboratory, X ray, emergency and preventive services, and out-of-area coverage.

- b. Is compensated, except for copayments, for the provision of the basic health care services listed in sub-subdivision a. of this subdivision to enrolled participants by a payment which is paid on a periodic basis without regard to the date the health care services are provided and which is fixed without regard to the frequency, extent, or kind of health service actually provided.
 - c. Provides physicians' services primarily (i) directly through physicians who are either employees or partners of such organizations, or (ii) through arrangements with individual physicians or one or more groups of physicians organized on a group practice or individual practice basis.
- (10a) Heart-lung bypass machine. – The equipment used to perform extra-corporeal circulation and oxygenation during surgical procedures.
- (11) Repealed by Session Laws 1991, c. 692, s. 1.
- (12) Home health agency. – A private organization or public agency, whether owned or operated by one or more persons or legal entities, which furnishes or offers to furnish home health services.
- (12a) Home health services. – Items and services furnished to an individual by a home health agency, or by others under arrangements with such others made by the agency, on a visiting basis, and except for sub-subdivision e. of this subdivision, in a place of temporary or permanent residence used as the individual's home as follows:
 - a. Part-time or intermittent nursing care provided by or under the supervision of a registered nurse.
 - b. Physical, occupational, or speech therapy.
 - c. Medical social services, home health aid [sic] services, and other therapeutic services.
 - d. Medical supplies, other than drugs and biologicals and the use of medical appliances.
 - e. Any of the items and services listed in this subdivision which are provided on an outpatient basis under arrangements made by the home health agency at a hospital or nursing home facility or rehabilitation center and the furnishing of which involves the use of equipment of such a nature that the items and services cannot readily be made available to the individual at home, or which are furnished at the facility while the individual is there to receive any such item or service, but not including transportation of the individual in connection with any such item or service.
- (13) Hospital. – A public or private institution which is primarily engaged in providing to inpatients, by or under supervision of physicians, diagnostic services and therapeutic services for medical diagnosis, treatment, and care of injured, disabled, or sick persons, or rehabilitation services for the rehabilitation of injured, disabled, or sick persons. The term includes all facilities licensed pursuant to G.S. 131E-77, except long-term care hospitals.
- (13a) Hospice. – Any coordinated program of home care with provision for inpatient care for terminally ill patients and their families. This care is provided by a medically directed interdisciplinary team, directly or through an agreement under the direction of an identifiable hospice administration. A hospice program of care provides palliative and supportive medical and other health services to meet the physical, psychological, social, spiritual, and special needs of patients and their families, which are experienced during the final stages of terminal illness and during dying and bereavement.
- (13b) Hospice inpatient facility. – A freestanding licensed hospice facility or a designated inpatient unit in an existing health service facility which provides palliative and supportive medical and other health services to meet the physical, psychological, social, spiritual, and special needs of terminally ill patients and their families in an inpatient setting. For purposes of this Article only, a hospital which has a contractual agreement with a licensed hospice to provide inpatient services to a hospice patient as defined in G.S. 131E-201(4) and provides those services in a licensed acute care bed is not a hospice inpatient facility and is not subject to the requirements in sub-subdivision (5)b. of this section for hospice inpatient beds.
- (13c) Hospice residential care facility. – A freestanding licensed hospice facility which provides palliative and supportive medical and other health services to meet the physical, psychological,

- social, spiritual, and special needs of terminally ill patients and their families in a group residential setting.
- (14) Repealed by Session Laws 1987, c. 511, s. 1.
 - (14a) Intermediate care facility for individuals with intellectual disabilities. – Facilities licensed pursuant to Article 2 of Chapter 122C of the General Statutes for the purpose of providing health and habilitative services based on the developmental model and principles of normalization for individuals with intellectual disabilities, autism, cerebral palsy, epilepsy or related conditions.
 - (14b) Repealed by Session Laws 1991, c. 692, s. 1.
 - (14c) Reserved for future codification.
 - (14d) Repealed by Session Laws 2001-234, s. 2, effective January 1, 2002.
 - (14e) Kidney disease treatment center. – A facility that is certified as an end-stage renal disease facility by the Centers for Medicare and Medicaid Services, Department of Health and Human Services, pursuant to 42 C.F.R. § 405.
 - (14f) “Legacy Medical Care Facility” means a facility that meets all of the following requirements:
 - a. Is not presently operating.
 - b. Has not continuously operated for at least the past six months.
 - c. Within the last 24 months:
 - 1. Was operated by a person holding a license under G.S. 131E-77; and
 - 2. Was primarily engaged in providing to inpatients or outpatients, by or under supervision of physicians, (i) diagnostic services and therapeutic services for medical diagnosis, treatment, and care of injured, disabled, or sick persons or (ii) rehabilitation services for the rehabilitation of injured, disabled, or sick persons.
 - (14g) Linear accelerator. – A machine used to produce ionizing radiation in excess of 1,000,000 electron volts in the form of a beam of electrons or photons to treat cancer patients.
 - (14h) Reserved for future codification.
 - (14i) Lithotripter. – Extra-corporeal shock wave technology used to treat persons with kidney stones and gallstones.
 - (14j) Reserved for future codification.
 - (14k) Long-term care hospital. – A hospital that has been classified and designated as a long-term care hospital by the Centers for Medicare and Medicaid Services, Department of Health and Human Services, pursuant to 42 C.F.R. § 412.
 - (14l) Reserved for future codification.
 - (14m) Magnetic resonance imaging scanner. – Medical imaging equipment that uses nuclear magnetic resonance.
 - (14n) Main campus. – All of the following for the purposes of G.S. 131E-184(f) and (g) only:
 - a. The site of the main building from which a licensed health service facility provides clinical patient services and exercises financial and administrative control over the entire facility, including the buildings and grounds adjacent to that main building.
 - b. Other areas and structures that are not strictly contiguous to the main building but are located within 250 yards of the main building.
 - (14o) Major medical equipment. – A single unit or single system of components with related functions which is used to provide medical and other health services and which costs more than two million dollars (\$2,000,000). In determining whether the major medical equipment costs more than two million dollars (\$2,000,000), the costs of the equipment, studies, surveys, designs, plans, working drawings, specifications, construction, installation, and other activities essential to acquiring and making operational the major medical equipment shall be included. The capital expenditure for the equipment shall be deemed to be the fair market value of the equipment or the cost of the equipment, whichever is greater. Major medical equipment does not include replacement equipment. Beginning September 30, 2022, and on September 30 each year thereafter, the cost threshold amount in this subdivision shall be adjusted using the Medical Care Index component of

the Consumer Price Index published by the U.S. Department of Labor for the 12-month period preceding the previous September 1.

(15) Repealed by Session Laws 1987, c. 511, s. 1.

(15a) Multispecialty ambulatory surgical program. – A formal program for providing on a same-day basis surgical procedures for at least three of the following specialty areas: gynecology, otolaryngology, plastic surgery, general surgery, ophthalmology, orthopedic, or oral surgery.

(15b) Neonatal intensive care services. – Those services provided by a health service facility to high-risk newborn infants who require constant nursing care, including but not limited to continuous cardiopulmonary and other supportive care.

(16) New institutional health services. – Any of the following:

a. The construction, development, or other establishment of a new health service facility.

b. Except as otherwise provided in G.S. 131E-184(e), the obligation by any person of a capital expenditure exceeding four million dollars (\$4,000,000) to develop or expand a health service or a health service facility, or which relates to the provision of a health service. The cost of any studies, surveys, designs, plans, working drawings, specifications, and other activities, including staff effort and consulting and other services, essential to the acquisition, improvement, expansion, or replacement of any plant or equipment with respect to which an expenditure is made shall be included in determining if the expenditure exceeds four million dollars (\$4,000,000). Beginning September 30, 2022, and on September 30 each year thereafter, the cost threshold amount in this subdivision shall be adjusted using the Medical Care Index component of the Consumer Price Index published by the U.S. Department of Labor for the 12-month period preceding the previous September 1.

c. Any change in bed capacity.

d. The offering of dialysis services or home health services by or on behalf of a health service facility if those services were not offered within the previous 12 months by or on behalf of the facility.

e. A change in a project that was subject to certificate of need review and for which a certificate of need was issued, if the change is proposed during the development of the project or within one year after the project was completed. For purposes of this subdivision, a change in a project is a change of more than fifteen percent (15%) of the approved capital expenditure amount or the addition of a health service that is to be located in the facility, or portion thereof, that was constructed or developed in the project.

f. The development or offering of a health service as listed in this subdivision by or on behalf of any person:

1. Bone marrow transplantation services.

2. Burn intensive care services.

2a. Cardiac catheterization services, except cardiac catheterization services provided on equipment furnished by a person authorized to operate the equipment in North Carolina pursuant to either a certificate of need issued for mobile cardiac catheterization equipment or a settlement agreement executed by the Department for provision of cardiac catheterization services.

3. Neonatal intensive care services.

4. Open-heart surgery services.

5. Solid organ transplantation services.

fl. The acquisition by purchase, donation, lease, transfer, or comparable arrangement of any of the following equipment by or on behalf of any person:

1. Air ambulance.¹
 2. Repealed.
 3. Cardiac catheterization equipment.
 4. Gamma knife.
 5. Heart-lung bypass machine.
 - 5a. Linear accelerator.
 6. Lithotripter.
 7. Magnetic resonance imaging scanner.
 8. Positron emission tomography scanner.
 9. Simulator.
- g.to k. Repealed.
- l. The purchase, lease, or acquisition of any health service facility, or portion thereof, or a controlling interest in the health service facility or portion thereof, if the health service facility was developed under a certificate of need issued pursuant to G.S. 131E-180.
 - m. Any conversion of nonhealth service facility beds to health service facility beds.
 - n. The construction, development or other establishment of a hospice, hospice inpatient facility, or hospice residential care facility.
 - o. The opening of an additional office by an existing home health agency **or** hospice within its service area as defined by rules adopted by the Department; or the opening of any office by an existing home health agency or hospice outside its service area as defined by rules adopted by the Department.
 - p. The acquisition by purchase, donation, lease, transfer, or comparable arrangement by any person of major medical equipment.
 - q. The relocation of a health service facility from one service area to another.
 - r. The conversion of a specialty ambulatory surgical program to a multispecialty ambulatory surgical program or the addition of a specialty to a specialty ambulatory surgical program.
 - s. The furnishing of mobile medical equipment to any person to provide health services in North Carolina, which was not in use in North Carolina prior to the adoption of this provision, if the equipment would otherwise be subject to review in accordance with sub-subdivision fl. of this subdivision or sub-subdivision p. of this subdivision if it had been acquired in North Carolina.
 - t. Repealed.
 - u. The construction, development, establishment, increase in the number, or relocation of an operating room or gastrointestinal endoscopy room in a licensed health service facility, other than the relocation of an operating room or gastrointestinal endoscopy room within the same building or on the same grounds or to grounds not separated by more than a public right-of-way adjacent to the grounds where the operating room is or gastrointestinal endoscopy room is currently located.
 - v. The change in designation, in a licensed health service facility, of an operating room to a gastrointestinal endoscopy room or change in designation of a gastrointestinal endoscopy room to an operating room that results in a different number of each type of room than is reflected on the health service facility's license in effect as of January 1, 2005.
- (17) North Carolina State Health Coordinating Council. – The Council that prepares, with the Department of Health and Human Services, the State Medical Facilities Plan.
- (17a) Nursing care. – Any of the following:
- a. Skilled nursing care and related services for residents who require medical or nursing care.

¹ Pursuant to an Order of Permanent Injunction issued by the United States District Court for the Eastern District of North Carolina Western Division on October 15, 2008, the North Carolina Department of Health and Human Services is prohibited from requiring that any person obtain a certificate of need before acquiring an air ambulance.

- b. Rehabilitation services for the rehabilitation of individuals who are injured or sick or who have disabilities.
 - c. Health-related care and services provided on a regular basis to individuals who because of their mental or physical condition require care and services above the level of room and board, which can be made available to them only through institutional facilities.
- These are services which are not primarily for the care and treatment of mental diseases.
- (17b) Nursing home facility. – A health service facility whose bed complement of health service facility beds is composed principally of nursing home facility beds.
 - (18) Offer. – In connection with health services, the act by a person of holding out as capable of providing, or as having the means to provide, specified health services.
 - (18a) Repealed by Session Laws 2005-325, s. 1, effective for hospices and hospice offices December 31, 2005.
 - (18b) Open-heart surgery services. – The provision of surgical procedures that utilize a heart-lung bypass machine during surgery to correct cardiac and coronary artery disease or defects.
 - (18c) Operating room. – A room used for the performance of surgical procedures requiring one or more incisions and that is required to comply with all applicable licensure codes and standards for an operating room.
 - (19) Person. – An individual; a trust or estate; a partnership; a corporation, including associations, joint stock companies, and insurance companies; the State; or a political subdivision or agency or instrumentality of the State.
 - (19a) Positron emission tomography scanner. – Equipment that utilizes a computerized radiographic technique that employs radioactive substances to examine the metabolic activity of various body structures.
 - (20) Project or capital expenditure project. – A proposal to undertake a capital expenditure that results in the offering of a new institutional health service. A project, or capital expenditure project, or proposed project may refer to the project from its earliest planning stages up through the point at which the specified new institutional health service may be offered. In the case of facility construction, the point at which the new institutional health service may be offered must take place after the facility is capable of being fully licensed and operated for its intended use, and at that time it shall be considered a health service facility.
 - (21) Psychiatric facility. – A public or private facility licensed pursuant to Article 2 of Chapter 122C of the General Statutes and which is primarily engaged in providing to inpatients, by or under the supervision of a physician, psychiatric services for the diagnosis and treatment of individuals with mental illness.
 - (22) Rehabilitation facility. – A public or private inpatient facility which is operated for the primary purpose of assisting in the rehabilitation of individuals with disabilities through an integrated program of medical and other services which are provided under competent, professional supervision.
 - (22a) Replacement equipment. – Equipment that costs less than two million dollars (\$2,000,000) and is purchased for the sole purpose of replacing comparable medical equipment currently in use which will be sold or otherwise disposed of when replaced. In determining whether the replacement equipment costs less than two million dollars (\$2,000,000), the costs of equipment, studies, surveys, designs, plans, working drawings, specifications, construction, installation, and other activities essential to acquiring and making operational the replacement equipment shall be included. The capital expenditure for the equipment shall be deemed to be the fair market value of the equipment or the cost of the equipment, whichever is greater.
 - (23) Repealed by Session Laws 1991, c. 692, s. 1.
 - (24) Repealed by Session Laws 1993, c. 7, s. 2.
 - (24a) Service area. – The area of the State, as defined in the State Medical Facilities Plan or in rules adopted by the Department, which receives services from a health service facility.

- (24b) Simulator. – A machine that produces high quality diagnostic radiographs and precisely reproduces the geometric relationships of megavoltage radiation therapy equipment to the patient.
- (24c) Reserved for future codification.
- (24d) Solid organ transplantation services. – The provision of surgical procedures and the interrelated medical services that accompany the surgery to remove an organ from a patient and surgically implant an organ from a donor.
- (24e) Reserved for future codification.
- (24f) Specialty ambulatory surgical program. – A formal program for providing on a same-day basis surgical procedures for only the specialty areas identified on the ambulatory surgical facility's 1993 Application for Licensure as an Ambulatory Surgical Center and authorized by its certificate of need.
- (25) State Medical Facilities Plan. – The plan prepared by the Department of Health and Human Services and the North Carolina State Health Coordinating Council, and approved by the Governor. In preparing the Plan, the Department and the State Health Coordinating Council shall maintain a mailing list of persons who have requested notice of public hearings regarding the Plan. Not less than 15 days prior to a scheduled public hearing, the Department shall notify persons on its mailing list of the date, time, and location of the hearing. The Department shall hold at least one public hearing prior to the adoption of the proposed Plan and at least six public hearings after the adoption of the proposed Plan by the State Health Coordinating Council. The Council shall accept oral and written comments from the public concerning the Plan.
- (26) Repealed by Session Laws 1983 (Regular Session, 1984), c. 1002, s. 9.
- (27) Repealed by Session Laws 1987, c. 511, s.1.

§ 131E-177. Department of Health and Human Services is designated State Health Planning and Development Agency; powers and duties.

The Department of Health and Human Services is designated as the State Health Planning and Development Agency for the State of North Carolina, and is empowered to exercise the following powers and duties:

- (1) To establish standards and criteria or plans required to carry out the provisions and purposes of this Article and to adopt rules pursuant to Chapter 150B of the General Statutes, to carry out the purposes and provisions of this Article;
- (2) Adopt, amend, and repeal such rules and regulations, consistent with the laws of this State, as may be required by the federal government for grants-in-aid for health service facilities and health planning which may be made available by the federal government. This section shall be liberally construed in order that the State and its citizens may benefit from such grants-in-aid;
- (3) Define, by rule, procedures for submission of periodic reports by persons or health service facilities subject to agency review under this Article;
- (4) Develop policy, criteria, and standards for health service facilities planning; shall conduct statewide registration and inventories of and make determinations of need for health service facilities, health services as specified in G.S. 131E-176(16)f., and equipment as specified in G.S. 131E-176(16)f1., which shall include consideration of adequate geographic location of equipment and services; and develop a State Medical Facilities Plan;
- (5) Implement, by rule, criteria for project review;
- (6) Have the power to grant, deny, or withdraw a certificate of need and to impose such sanctions as are provided for by this Article;
- (7) Solicit, accept, hold and administer on behalf of the State any grants or bequests of money, securities or property to the Department for use by the Department in the administration of this Article; and
- (8) Repealed.
- (9) Collect fees for submitting applications for certificates of need.

- (10) The authority to review all records in any recording medium of any person or health service facility subject to agency review under this Article which pertain to construction and acquisition activities, staffing or costs and charges for patient care, including but not limited to, construction contracts, architectural contracts, consultant contracts, purchase orders, cancelled checks, accounting and financial records, debt instruments, loan and security agreements, staffing records, utilization statistics and any other records the Department deems to be reasonably necessary to determine compliance with this Article.

The Secretary of Health and Human Services shall have final decision-making authority with regard to all functions described in this section.

§ 131E-178. Activities requiring certificate of need.

- (a) No person shall offer or develop a new institutional health service without first obtaining a certificate of need from the Department; provided, however, no person who provides gastrointestinal endoscopy procedures in one or more gastrointestinal endoscopy rooms located in a nonlicensed setting, shall be required to obtain a certificate of need to license that setting as an ambulatory surgical facility with the existing number of gastrointestinal endoscopy rooms, provided that:

- (1) The license application is postmarked for delivery to the Division of Health Service Regulation by December 31, 2006;
- (2) The applicant verifies, by affidavit submitted to the Division of Health Service Regulation within 60 days of the effective date of this act, that the facility is in operation as of the effective date of this act or that the completed application for the building permit for the facility was submitted by the effective date of this act;
- (3) The facility has been accredited by The Accreditation Association for Ambulatory Health Care, The Joint Commission on Accreditation of Healthcare Organizations, or The American Association for Accreditation of Ambulatory Surgical Facilities by the time the license application is postmarked for delivery to the Division of Health Service Regulation of the Department; and
- (4) The license application includes a commitment and plan for serving indigent and medically underserved populations.

All other persons proposing to obtain a license to establish an ambulatory surgical facility for the provision of gastrointestinal endoscopy procedures shall be required to obtain a certificate of need. The annual State Medical Facilities Plan shall not include policies or need determinations that limit the number of gastrointestinal endoscopy rooms that may be approved.

- (b) No person shall make an acquisition by donation, lease, transfer, or comparable arrangement without first obtaining a certificate of need from the Department, if the acquisition would have been a new institutional health service if it had been made by purchase. In determining whether an acquisition would have been a new institutional health service, the capital expenditure for the asset shall be deemed to be the fair market value of the asset or the cost of the asset, whichever is greater.
- (c) No person shall incur an obligation for a capital expenditure which is a new institutional health service without first obtaining a certificate of need from the Department. An obligation for a capital expenditure is incurred when:
 - (1) An enforceable contract, excepting contracts which are expressly contingent upon issuance of a certificate of need, is entered into by a person for the construction, acquisition, lease or financing of a capital asset;
 - (2) A person takes formal action to commit funds for a construction project undertaken as his own contractor; or
 - (3) In the case of donated property, the date on which the gift is completed.
- (d) Where the estimated cost of a proposed capital expenditure, including the fair market value of equipment acquired by purchase, lease, transfer, or other comparable arrangement, is certified by a

licensed architect or engineer to be equal to or less than the expenditure minimum for capital expenditure for new institutional health services, such expenditure shall be deemed not to exceed the amount for new institutional health services regardless of the actual amount expended, provided that the following conditions are met:

- (1) The certified estimated cost is prepared in writing 60 days or more before the obligation for the capital expenditure is incurred. Certified cost estimates shall be available for inspection at the facility and sent to the Department upon its request.
 - (2) The facility on whose behalf the expenditure was made notifies the Department in writing within 30 days of the date on which such expenditure is made if the expenditure exceeds the expenditure minimum for capital expenditures. The notice shall include a copy of the certified cost estimate.
- (e) The Department may grant certificates of need which permit capital expenditures only for predevelopment activities. Predevelopment activities include the preparation of architectural designs, plans, working drawings, or specifications, the preparation of studies and surveys, and the acquisition of a potential site.

§ 131E-179. Research activities.

- (a) Notwithstanding any other provisions of this Article, a health service facility may offer new institutional health services to be used solely for research, or incur the obligation of a capital expenditure solely for research, without a certificate of need, if the Department grants an exemption. The Department shall grant an exemption if the health service facility files a notice of intent with the Department in accordance with rules promulgated by the Department and if the Department finds that the offering or obligation will not:
- (1) Affect the charges of the health service facility for the provision of medical or other patient care services other than services which are included in the research;
 - (2) Substantially change the bed capacity of the facility; or
 - (3) Substantially change the medical or other patient care services of the facility.
- (b) After a health service facility has received an exemption pursuant to subsection (a) of this section, it shall not offer the new institutional health services, or use a facility acquired through the capital expenditure, in a manner which affects the charges of the facility for the provision of medical or other patient care services, other than the services which are included in the research and shall not charge patients for the use of the service for which an exemption has been granted, without first obtaining a certificate of need from the Department; provided, however, that any facility or service acquired or developed under the exemption provided by this section shall not be subject to the foregoing restrictions on its use if the facility or service could otherwise be offered or developed without a certificate of need.
- (c) Any of the activities described in subsection (a) of this section shall be deemed to be solely for research even if they include patient care provided on an occasional and irregular basis and not as a part of the research program.

§ 131E-180. Repealed. 8-26-05

§ 131E-181. Nature of certificate of need.

- (a) A certificate of need shall be valid only for the defined scope, physical location, and person named in the application. A certificate of need shall not be transferred or assigned except as provided in G.S. 131E-189(c).
- (b) A recipient of a certificate of need, or any person who may subsequently acquire, in any manner whatsoever permitted by law, the service for which that certificate of need was issued, is required to materially comply with the representations made in its application for that certificate of need.

The Department shall require any recipient of a certificate of need, or its successor, whose service is in operation to submit to the Department evidence that the recipient, or its successor, is in material compliance with the representations made in its application for the certificate of need which granted the recipient the right to operate that service. In determining whether the recipient of a certificate of need, or its successor, is operating a service which materially differs from the representations made in its application for that certificate of need, the Department shall consider cost increases to the recipient, or its successor, including, but not limited to, the following:

- (1) Any increase in the consumer price index;
 - (2) Any increased cost incurred because of Government requirements, including federal, State, or any political subdivision thereof; and
 - (3) Any increase in cost due to professional fees or the purchase of services and supplies.
- (c) Whenever a certificate of need is issued more than 12 months after the application for the certificate of need began review, the Department shall adjust the capital expenditure amount proposed by increasing it to reflect any inflation in the Department of Commerce's Construction Cost Index that has occurred since the date when the application began review; and the Department shall use this recalculated capital expenditure amount in the certificate of need issued for the project.
- (d) A project authorized by a certificate of need is complete when the health service or the health service facility for which the certificate of need was issued is licensed and certified and is in material compliance with the representations made in the certificate of need application.

§ 131E-182. Application.

- (a) The Department in its rules shall establish schedules for submission and review of completed applications. The schedules shall provide that applications for similar proposals in the same service area will be reviewed together. However, there shall not be a review schedule prior to February 1, 2006, for submission and review of certificate of need applications that propose an increase in the number of licensed gastrointestinal endoscopy rooms. An applicant for a certificate of need to establish a licensed gastrointestinal endoscopy room shall show that it is performing or reasonably projects to perform at least 1,500 gastrointestinal endoscopy procedures per gastrointestinal endoscopy room per year.
- (b) An application for a certificate of need shall be made on forms provided by the Department. The application forms, which may vary according to the type of proposal, shall require such information as the Department, by its rules deems necessary to conduct the review. An applicant shall be required to furnish only that information necessary to determine whether the proposed new institutional health service is consistent with the review criteria implemented under G.S. 131E-183 and with duly adopted standards, plans and criteria.
- (c) An application fee is imposed on an applicant for a certificate of need. An applicant must submit the fee with the application. The fee is not refundable, regardless of whether a certificate of need is issued. Fees collected under this section shall be credited to the General Fund as nontax revenue. The application fee is five thousand dollars (\$5,000) plus an amount equal to three-tenths of one percent (.3%) of the amount of the capital expenditure proposed in the application that exceeds one million dollars (\$1,000,000). In no event may the fee exceed fifty thousand dollars (\$50,000).

§ 131E-183. Review criteria.

- (a) The Department shall review all applications utilizing the criteria outlined in this subsection and shall determine that an application is either consistent with or not in conflict with these criteria before a certificate of need for the proposed project shall be issued.
- (1) The proposed project shall be consistent with applicable policies and need determinations in the State Medical Facilities Plan, the need determination of which constitutes a determinative limitation on the provision of any health service, health service facility,

- health service facility beds, dialysis stations, operating rooms, or home health offices that may be approved.
- (2) Repealed.
 - (3) The applicant shall identify the population to be served by the proposed project, and shall demonstrate the need that this population has for the services proposed, and the extent to which all residents of the area, and, in particular, low income persons, racial and ethnic minorities, women, handicapped persons, the elderly, and other underserved groups are likely to have access to the services proposed.
 - (3a) In the case of a reduction or elimination of a service, including the relocation of a facility or a service, the applicant shall demonstrate that the needs of the population presently served will be met adequately by the proposed relocation or by alternative arrangements, and the effect of the reduction, elimination or relocation of the service on the ability of low income persons, racial and ethnic minorities, women, handicapped persons, and other underserved groups and the elderly to obtain needed health care.
 - (4) Where alternative methods of meeting the needs for the proposed project exist, the applicant shall demonstrate that the least costly or most effective alternative has been proposed.
 - (5) Financial and operational projections for the project shall demonstrate the availability of funds for capital and operating needs as well as the immediate and long-term financial feasibility of the proposal, based upon reasonable projections of the costs of and charges for providing health services by the person proposing the service.
 - (6) The applicant shall demonstrate that the proposed project will not result in unnecessary duplication of existing or approved health service capabilities or facilities.
 - (7) The applicant shall show evidence of the availability of resources, including health manpower and management personnel, for the provision of the services proposed to be provided.
 - (8) The applicant shall demonstrate that the provider of the proposed services will make available, or otherwise make arrangements for, the provision of the necessary ancillary and support services. The applicant shall also demonstrate that the proposed service will be coordinated with the existing health care system.
 - (9) An applicant proposing to provide a substantial portion of the project's services to individuals not residing in the health service area in which the project is located, or in adjacent health service areas, shall document the special needs and circumstances that warrant service to these individuals.
 - (10) When applicable, the applicant shall show that the special needs of health maintenance organizations will be fulfilled by the project. Specifically, the applicant shall show that the project accommodates:
 - a. The needs of enrolled members and reasonably anticipated new members of the HMO for the health service to be provided by the organization; and
 - b. The availability of new health services from non-HMO providers or other HMOs in a reasonable and cost-effective manner which is consistent with the basic method of operation of the HMO. In assessing the availability of these health services from these providers, the applicant shall consider only whether the services from these providers:
 - 1. Would be available under a contract of at least five years' duration;
 - 2. Would be available and conveniently accessible through physicians and other health professionals associated with the HMO;
 - 3. Would cost no more than if the services were provided by the HMO; and
 - 4. Would be available in a manner which is administratively feasible to the HMO.
 - (11) Repealed

- (12) Applications involving construction shall demonstrate that the cost, design, and means of construction proposed represent the most reasonable alternative, and that the construction project will not unduly increase the costs of providing health services by the person proposing the construction project or the costs and charges to the public of providing health services by other persons, and that applicable energy saving features have been incorporated into the construction plans.
- (13) The applicant shall demonstrate the contribution of the proposed service in meeting the health-related needs of the elderly and of members of medically underserved groups, such as medically indigent or low income persons, Medicaid and Medicare recipients, racial and ethnic minorities, women, and handicapped persons, which have traditionally experienced difficulties in obtaining equal access to the proposed services, particularly those needs identified in the State Health Plan as deserving of priority. For the purpose of determining the extent to which the proposed service will be accessible, the applicant shall show:
 - a. The extent to which medically underserved populations currently use the applicant's existing services in comparison to the percentage of the population in the applicant's service area which is medically underserved;
 - b. Its past performance in meeting its obligation, if any, under any applicable regulations requiring provision of uncompensated care, community service, or access by minorities and handicapped persons to programs receiving federal assistance, including the existence of any civil rights access complaints against the applicant;
 - c. That the elderly and the medically underserved groups identified in this subdivision will be served by the applicant's proposed services and the extent to which each of these groups is expected to utilize the proposed services; and
 - d. That the applicant offers a range of means by which a person will have access to its services. Examples of a range of means are outpatient services, admission by house staff, and admission by personal physicians.
- (14) The applicant shall demonstrate that the proposed health services accommodate the clinical needs of health professional training programs in the area, as applicable.
- (15) through (18) Repealed.
- (18a) The applicant shall demonstrate the expected effects of the proposed services on competition in the proposed service area, including how any enhanced competition will have a positive impact upon the cost effectiveness, quality, and access to the services proposed; and in the case of applications for services where competition between providers will not have a favorable impact on cost effectiveness, quality, and access to the services proposed, the applicant shall demonstrate that its application is for a service on which competition will not have a favorable impact.
- (19) Repealed.
- (20) An applicant already involved in the provision of health services shall provide evidence that quality care has been provided in the past.
- (21) Repealed.
- (b) The Department is authorized to adopt rules for the review of particular types of applications that will be used in addition to those criteria outlined in subsection (a) of this section and may vary according to the purpose for which a particular review is being conducted or the type of health service reviewed. No such rule adopted by the Department shall require an academic medical center teaching hospital, as defined by the State Medical Facilities Plan, to demonstrate that any facility or service at another hospital is being appropriately utilized in order for that academic medical center teaching hospital to be approved for the issuance of a certificate of need to develop any similar facility or service.
- (c) Repealed.

§ 131E-184. Exemptions from review.

- (a) Except as provided in subsection (b) of this section, the Department shall exempt from certificate of need review a new institutional health service if it receives prior written notice from the entity proposing the new institutional health service, which notice includes an explanation of why the new institutional health service is required, for any of the following:
 - (1) To eliminate or prevent imminent safety hazards as defined in federal, State, or local fire, building, or life safety codes or regulations.
 - (1a) To comply with State licensure standards.
 - (1b) To comply with accreditation or certification standards which must be met to receive reimbursement under Title XVIII of the Social Security Act or payments under a State plan for medical assistance approved under Title XIX of that act.
 - (2) Repealed.
 - (3) To provide data processing equipment.
 - (4) To provide parking, heating or cooling systems, elevators, or other basic plant or mechanical improvements, unless these activities are integral portions of a project that involves the construction of a new health service facility or portion thereof and that is subject to certificate of need review.
 - (5) To replace or repair facilities destroyed or damaged by accident or natural disaster.
 - (6) To provide any nonhealth service facility or service.
 - (7) To provide replacement equipment.
 - (8) To acquire an existing health service facility, including equipment owned by the health service facility at the time of acquisition. A facility not currently licensed as an adult care home that was licensed as an adult care home within the preceding 12 months is considered an existing health service facility for the purposes of this subdivision.
 - (9) To develop or acquire a physician office building regardless of cost, unless a new institutional health service other than defined in G.S. 131E-176(16)b. is offered or developed in the building.
- (b) Those portions of a proposed project which are not proposed for one or more of the purposes under subsection (a) of this section are subject to certificate of need review, if these non-exempt portions of the project are new institutional health services under G.S. 131E-176(16).
- (c) The Department shall exempt from certificate of need review any conversion of existing acute care beds to psychiatric beds provided all of the following are true:
 - (1) The hospital proposing the conversion has executed a contract with the Department's Division of Mental Health, Developmental Disabilities, and Substance Abuse Services, one or more of the area mental health, developmental disabilities, and substance abuse authorities, or a combination thereof to provide psychiatric beds to patients referred by the contracting agency or agencies.
 - (2) The total number of beds to be converted shall not be more than twice the number of beds for which the contract pursuant to subdivision (1) of this subsection shall provide.
- (d) In accordance with, and subject to the limitations of G.S. 148-19.1, the Department shall exempt from certificate of need review the construction and operation of a new chemical dependency or substance abuse facility for the purpose of providing inpatient chemical dependency or substance abuse services solely to inmates of the Department of Correction. If an inpatient chemical dependency or substance abuse facility provides services both to inmates of the Department of Correction and to members of the general public, only the portion of the facility that serves inmates shall be exempt from certificate of need review.
- (e) The Department shall exempt from certificate of need review a capital expenditure that exceeds the two million dollar (\$2,000,000) threshold set forth in G.S. 131E-176(16)b. if all of the following conditions are met:
 - (1) The proposed capital expenditure would meet all of the following requirements:

- a. Be used solely for the purpose of renovating, replacing on the same site, or expanding any of the following existing facilities:
 - 1. Nursing home facility.
 - 2. Adult care home facility.
 - 3. Intermediate care facility for individuals with intellectual disabilities.
 - b. Not result in a change in bed capacity, as defined in G.S. 131E-176(5), or the addition of a health service facility or any other new institutional health service other than that allowed in G.S. 131E-176(16)b.
 - (2) The entity proposing to incur the capital expenditure provides prior written notice to the Department, which notice includes documentation that demonstrates that the proposed capital expenditure would be used for one or more of the following purposes:
 - a. Conversion of semiprivate resident rooms to private rooms.
 - b. Providing innovative, homelike residential dining spaces, such as cafes, kitchenettes, or private dining areas to accommodate residents and their families or visitors.
 - c. Renovating, replacing, or expanding residential living or common areas to improve the quality of life of residents.
- (f) The Department shall exempt from certificate of need review the purchase of any replacement equipment that exceeds the two million dollar (\$2,000,000) threshold set forth in G.S. 131E-176(22a) if all of the following conditions are met:
 - (1) The equipment being replaced is located on the main campus.
 - (2) The Department has previously issued a certificate of need for the equipment being replaced. This subdivision does not apply if a certificate of need was not required at the time the equipment being replaced was initially purchased by the licensed health service facility.
 - (3) The licensed health service facility proposing to purchase the replacement equipment shall provide prior written notice to the Department, along with supporting documentation to demonstrate that it meets the exemption criteria of this subsection.
- (g) The Department shall exempt from certificate of need review any capital expenditure that exceeds the two million dollar (\$2,000,000) threshold set forth in G.S. 131E-176(16)b. if all of the following conditions are met:
 - (1) The sole purpose of the capital expenditure is to renovate, replace on the same site, or expand the entirety or a portion of an existing health service facility that is located on the main campus.
 - (2) The capital expenditure does not result in (i) a change in bed capacity as defined in G.S. 131E-176(5) or (ii) the addition of a health service facility or any other new institutional health service other than that allowed in G.S. 131E-176(16)b.
 - (3) The licensed health service facility proposing to incur the capital expenditure shall provide prior written notice to the Department, along with supporting documentation to demonstrate that it meets the exemption criteria of this subsection.
- (h) The Department must exempt from certificate of need review the acquisition or reopening of a Legacy Medical Care Facility. The person seeking to operate a Legacy Medical Care Facility shall give the Department written notice of all of the following:
 - (1) Its intention to acquire or reopen a Legacy Medical Care Facility within the same county and the same service area as the facility that ceased continuous operations. If the Legacy Medical Care Facility will become operational in a new location within the same county and the same service area as the facility that ceased continuous operations, then the person responsible for giving the written notice required by this section shall notify the Department, as soon as reasonably practicable and prior to becoming operational, of the new location of the Legacy Medical Care Facility. For purposes of this subdivision, "service area" means the service area identified in the North Carolina State Medical

Facilities Plan in effect at the time the written notice required by this section is given to the Department.

(2) That the facility will be operational within 36 months of the notice.

The Department shall extend the time by which a facility must be operational in order to be exempt from certificate of need review under this subsection by one additional 36-month period if the person seeking to reopen or acquire the Legacy Medical Care Facility gives the Department written notice of extension within 36 months of the original notice of intent to acquire or reopen the Legacy Medical Care Facility. The written notice of extension must notify the Department

- (i) that the person has undertaken all reasonable efforts to make the facility operational within 36 months of the notice of intent,
- (ii) that, despite these reasonable efforts, the person does not anticipate the facility will be operational within that time, and
- (iii) of its intention that the facility will be operational within 36 months of the notice of extension.

§ 131E-185. Review process.

(a) Repealed.

(a1) Except as provided in subsection (c) of this section, there shall be a time limit of 90 days for review of the applications, beginning on the day established by rule as the day on which applications for the particular service in the service area shall begin review.

(1) Any person may file written comments and exhibits concerning a proposal under review with the Department, not later than 30 days after the date on which the application begins review. These written comments may include:

- a. Facts relating to the service area proposed in the application;
- b. Facts relating to the representations made by the applicant in its application, and its ability to perform or fulfill the representations made;
- c. Discussion and argument regarding whether, in light of the material contained in the application and other relevant factual material, the application complies with relevant review criteria, plans, and standards.

(2) No more than 20 days from the conclusion of the written comment period, the Department shall ensure that a public hearing is conducted at a place within the appropriate service area if one or more of the following circumstances apply; the review to be conducted is competitive; the proponent proposes to spend five million dollars (\$5,000,000) or more; a written request for a public hearing is received before the end of the written comment period from an affected party as defined in G.S. 131E-188(c); or the agency determines that a hearing is in the public interest. At such public hearing oral arguments may be made regarding the application or applications under review; and this public hearing shall include the following:

- a. An opportunity for the proponent of each application under review to respond to the written comments submitted to the Department about its application;
- b. An opportunity for any person, except one of the proponents, to comment on the applications under review;
- c. An opportunity for a representative of the Department, or such other person or persons who are designated by the Department to conduct the hearing, to question each proponent of applications under review with regard to the contents of the application;

The Department shall maintain a recording of any required public hearing on an application until such time as the Department's final decision is issued, or until a final agency decision is issued pursuant to a contested case hearing, whichever is later; and any person may

submit a written synopsis or verbatim statement that contains the oral presentation made at the hearing.

- (3) The Department may contract or make arrangements with a person or persons located within each service area for the conduct of such public hearings as may be necessary. The Department shall publish, in each service area, notice of the contracts that it executes for the conduct of those hearings.
 - (4) Within 15 days from the beginning of the review of an application or applications proposing the same service within the same service area, the Department shall publish notice of the deadline for receipt of written comments, of the time and place scheduled for the public hearing regarding the application or applications under review, and of the name and address of the person or agency that will preside.
 - (5) The Department shall maintain all written comments submitted to it during the written comment stage and any written submissions received at the public hearing as part of the Department's file respecting each application or group of applications under review by it. The application, written comments, and public hearing comments, together with all documents that the Department used in arriving at its decision, from whatever source, and any documents that reflect or set out the Department's final analysis of the application or applications under review, shall constitute the Department's record for the application or applications under review.
- (a2) When an expedited review has been approved by the Department, no public hearing shall be held. The Department may contact the applicant and request additional or clarifying information, amendments to, or substitutions for portions of the application. The Department may negotiate conditions to be imposed on the certificate of need with the applicant.
 - (b) Repealed.
 - (c) The Department may extend the review period for a period not to exceed 60 days and provide notice of such extension to all applicants. For expedited reviews, the Department may extend the review period only if it has requested additional substantive information from the applicant.

§ 131E-186. Decision.

- (a) Within the prescribed time limits in G.S. 131E-185, the Department shall issue a decision to "approve," "approve with conditions," or "deny," an application for a new institutional health service. Approvals involving new or expanded bed capacity for nursing care or intermediate care for individuals with intellectual disabilities shall include a condition that specifies the earliest possible date the new institutional health service may be certified for participation in the Medicaid program. The date shall be set far enough in advance to allow the Department to identify funds to pay for care in the new or expanded facility in its existing Medicaid budget or to include these funds in its State Medicaid budget request for the year in which Medicaid certification is expected.
- (b) Within five business days after it makes a decision on an application, the Department shall provide written notice of all the findings and conclusions upon which it based its decision, including the criteria used by the Department in making its decision, to the applicant.

§ 131E-187. Issuance of a certificate of need.

- (a) Deleted. See Session Law 2009-373; SB 804.
- (b) Deleted. See Session Law 2009-373; SB 804.
- (c) The Department shall issue a certificate of need in accordance with the time line requirements of this section but only after all applicable conditions of approval that can be satisfied before issuance of the certificate of need have been met. The Department shall issue a certificate of need within:
 - (1) Thirty-five days of the date of the decision referenced in G.S. 131E-186, when no request for a contested case hearing has been filed in accordance with G.S. 131E-188.

- (2) Five business days after it receives a file-stamped copy of the notice of voluntary dismissal, unless the voluntary dismissal is a stipulation of dismissal without prejudice.
- (3) Thirty-five days of the date of the written notice of the final agency decision affirming or approving the issuance, unless a notice of appeal to the North Carolina Court of Appeals is timely filed.
- (4) Twenty days after a mandate is issued by the North Carolina Court of Appeals affirming the issuance of a certificate of need, unless a notice of appeal or petition for discretionary review to the North Carolina Supreme Court is timely filed.
- (5) Five business days after the North Carolina Supreme Court issues a mandate affirming the issuance of a certificate of need or an order declining to certify the case for discretionary review if the order declining to certify the case disposes of the appeal in its entirety.

§ 131E-188. Administrative and judicial review.

- (a) After a decision of the Department to issue, deny or withdraw a certificate of need or exemption or to issue a certificate of need pursuant to a settlement agreement with an applicant to the extent permitted by law, any affected person, as defined in subsection (c) of this section, shall be entitled to a contested case hearing under Article 3 of Chapter 150B of the General Statutes. A petition for a contested case shall be filed within 30 days after the Department makes its decision. When a petition is filed, the Department shall send notification of the petition to the proponent of each application that was reviewed with the application for a certificate of need that is the subject of the petition. Any affected person shall be entitled to intervene in a contested case.

A contested case shall be conducted in accordance with the following timetable:

- (1) An administrative law judge or a hearing officer, as appropriate, shall be assigned within 15 days after a petition is filed.
- (2) The parties shall complete discovery within 90 days after the assignment of the administrative law judge or hearing officer.
- (3) The hearing at which sworn testimony is taken and evidence is presented shall be held within 45 days after the end of the discovery period.
- (4) The administrative law judge or hearing officer shall make a final decision within 75 days after the hearing.

The administrative law judge or hearing officer assigned to a case may extend the deadlines in subdivisions (2) through (4) so long as the administrative law judge or hearing officer makes a final decision in the case within 270 days after the petition is filed.

- (a1) On or before the date of filing a petition for a contested case hearing on the approval of an applicant for a certificate of need, the petitioner shall deposit a bond with the clerk of superior court where the new institutional health service that is the subject of the petition is proposed to be located. The bond shall be secured by cash or its equivalent in an amount equal to five percent (5%) of the cost of the proposed new institutional health service that is the subject of the petition, but may not be less than five thousand dollars (\$5,000) and may not exceed fifty thousand dollars (\$50,000). A petitioner who received approval for a certificate of need and is contesting only a condition in the certificate is not required to file a bond under this subsection.

The applicant who received approval for the new institutional health service that is the subject of the petition may bring an action against a bond filed under this subsection in the superior court of the county where the bond was filed. Upon finding that the petition for a contested case was frivolous or filed to delay the applicant, the court may award the applicant part or all of the bond filed under this subsection. At the conclusion of the contested case, if the court does not find that the petition for a contested case was frivolous or filed to delay the applicant, the petitioner shall be entitled to the return of the bond deposited with the superior court upon demonstrating to the clerk of superior court where the bond was filed that the contested case hearing is concluded.

- (b) Any affected person who was a party in a contested case hearing shall be entitled to judicial review of all or any portion of any final decision in the following manner. The appeal shall be to the Court of Appeals as provided in G.S. 7A-29(a). The procedure for the appeal shall be as provided by the rules of appellate procedure. The appeal of the final decision shall be taken within 30 days of the receipt of the written notice of final decision, and notice of appeal shall be filed with Office of Administrative Hearings and served on the Department and all other affected persons who were parties to the contested hearing.
- (b1) Before filing an appeal of a final decision granting a certificate of need, the affected person shall deposit a bond with the Clerk of the Court of Appeals. The bond requirements of this subsection shall not apply to any appeal filed by the Department.
 - (1) The bond shall be secured by cash or its equivalent in an amount equal to five percent (5%) of the cost of the proposed new institutional health service that is the subject of the appeal, but may not be less than five thousand dollars (\$5,000) and may not exceed fifty thousand dollars (\$50,000); provided that the applicant who received approval of the certificate of need may petition the Court of Appeals for a higher bond amount for the payment of such costs and damages as may be awarded pursuant to subdivision (2) of this subsection. This amount shall be determined by the Court in its discretion, not to exceed three hundred thousand dollars (\$300,000). A holder of a certificate of need who is appealing only a condition in the certificate is not required to file a bond under this subsection.
 - (2) If the Court of Appeals finds that the appeal was frivolous or filed to delay the applicant, the court shall remand the case to the superior court of the county where a bond was filed for the contested case hearing on the certificate of need. The superior court may award the holder of the certificate of need part or all of the bond. The court shall award the holder of the certificate of need reasonable attorney fees and costs incurred in the appeal to the Court of Appeals. If the Court of Appeals does not find that the appeal was frivolous or filed to delay the applicant and does not remand the case to superior court for a possible award of all or part of the bond to the holder of the certificate of need, the person originally filing the bond shall be entitled to a return of the bond.
- (c) The term "affected persons" includes: the applicant; any individual residing within the service area or the geographic area served or to be served by the applicant; any individual who regularly uses health service facilities within that geographic area or the service area; any person who provides services, similar to the services under review, to individuals residing within the service area or the geographic area proposed to be served by the applicant; any person who, prior to receipt by the agency of the proposal being reviewed, has provided written notice to the agency of an intention to provide similar services in the future to individuals residing within the service area or the geographic area to be served by the applicant; third party payers who reimburse health service facilities for services in the service area in which the project is proposed to be located; and any agency which establishes rates for health service facilities or HMOs located in the service area in which the project is proposed to be located.

§ 131E-189. Withdrawal of a certificate of need.

- (a) The Department shall specify in each certificate of need the time the holder has to make the service or equipment available or to complete the project and the timetable to be followed. The timetable shall be the one proposed by the holder of the certificate of need unless the Department specifies a different timetable in its decision letter. The holder of the certificate shall submit such periodic reports on his progress in meeting the timetable as may be required by the Department. If no progress report is provided or, after reviewing the progress, the Department determines that the holder of the certificate is not meeting the timetable and the holder cannot demonstrate that it is making good faith efforts to meet the timetable, the Department may withdraw the certificate. If the Department determines that the holder of the certificate is making a good faith effort to meet

- the timetable, the Department may, at the request of the holder, extend the timetable for a specified period.
- (b) The Department may withdraw any certificate of need, if the holder of the certificate fails to develop the service in a manner consistent with the representations made in the application or with any condition or conditions the Department placed on the certificate of need.
 - (c) The Department may immediately withdraw any certificate of need if the holder of the certificate, before completion of the project or operation of the facility, transfers ownership or control of the facility, the project, or the certificate of need. Any transfer after that time will be subject to the requirement that the service be provided consistent with the representations made in the application and any applicable conditions the Department placed on the certificate of need. Transfers resulting from death or personal illness or other good cause, as determined by the Department, shall not result in withdrawal if the Department receives prior written notice of the transfer and finds good cause. Transfers resulting from death shall not result in withdrawal.
 - (d) Notwithstanding subsections (a), (b), or (c) of this section, a certificate of need issued by the Department for the construction of a health service facility on or after October 1, 2021, expires if the holder of the certificate of need fails to execute or commit to a contract for design services for the project authorized by the certificate of need within the following time frames:
 - (1) For a project that costs over fifty million dollars (\$50,000,000), the holder of the certificate of need shall execute or commit to a contract for design services for the project authorized by the certificate of need within four years after the date the Department's decision to approve the certificate of need for that project becomes final.
 - (2) For a project that costs fifty million dollars (\$50,000,000) or less, the holder of the certificate of need shall execute or commit to a contract for design services for the project authorized by the certificate of need within two years after the date the Department's decision to approve the certificate of need for that project becomes final.
 - (e) Notwithstanding subsections (a), (b), or (c) of this section, a certificate of need issued by the Department for the construction of a health service facility prior to October 1, 2021, expires if the holder of the certificate of need fails to execute or commit to a contract for design services for the project authorized by the certificate of need within the following time frames:
 - (1) For a project that costs over fifty million dollars (\$50,000,000), the holder of the certificate of need shall execute or commit to a contract for design services for the project authorized by the certificate of need by October 1, 2025.
 - (2) For a project that costs fifty million dollars (\$50,000,000) or less, the holder of the certificate of need shall execute or commit to a contract for design services for the project authorized by the certificate of need by October 1, 2023.
 - (f) Notwithstanding subsections (d) and (e) of this section, certificates of need that (i) are issued for the construction of a health service facility prior to October 1, 2021, and (ii) have a specific deadline to execute or commit to a contract for design services for the project authorized by the certificate of need will not expire unless the holder fails to execute or commit to a contract for design services by the deadline specified in the certificate of need.
 - (g) In the event the holder of a certificate of need is unable to execute or commit to a contract for design services for the project due to developments beyond the control of the holder of the certificate of need or for other good cause, the time for performance shall be extended by a period equal to the period during which performance of the obligation has been delayed or failed to be performed.

§ 131E-190. Enforcement and sanctions.

- (a) Only those new institutional health services which are found by the Department to be needed as provided in this Article and granted certificates of need shall be offered or developed within the State.

- (b) No formal commitments made for financing, construction, or acquisition regarding the offering or development of a new institutional health service shall be made by any person unless a certificate of need for such service or activities has been granted.
- (c) Repealed.
- (d) If any person proceeds to offer or develop a new institutional health service without having first obtained a certificate of need for such services, the penalty for such violation of this Article and rules hereunder may include the withholding of federal and State funds under Titles V, XVIII, and XIX of the Social Security Act for reimbursement of capital and operating expenses related to the provision of the new institutional health service.
- (e) The Department may revoke or suspend the license of any person who proceeds to offer or develop a new institutional health service without having first obtained a certificate of need for such services.
- (f) The Department may assess a civil penalty of not more than twenty thousand dollars (\$20,000) against any person who knowingly offers or develops any new institutional health service within the meaning of this Article without a certificate of need issued under this Article and the rules pertaining thereto, or in violation of the terms or conditions of such a certificate, whenever it determines a violation has occurred and each time the service is provided in violation of this provision. In determining the amount of the penalty the Department shall consider the degree and extent of harm caused by the violation and the cost of rectifying the damage. A person who is assessed a penalty shall be notified of the penalty by registered or certified mail. The notice shall state the reasons for the penalty. If a person fails to pay a penalty, the Department shall refer the matter to the Attorney General for collection. For the purpose of this subsection, the word "person" shall not include an individual in his capacity as an officer, director, or employee of a person as otherwise defined in this Article. The clear proceeds of penalties provided for in this subsection shall be remitted to the Civil Penalty and Forfeiture Fund in accordance with G.S. 115C-457.2.
- (g) No agency of the State or any of its political subdivisions may appropriate or grant funds or financially assist in any way a person, applicant, or facility which is or whose project is in violation of this Article.
- (h) If any person proceeds to offer or develop a new institutional health service without having first obtained a certificate of need for such services, the Secretary of Health and Human Services or any person aggrieved, as defined by G.S. 150B-2(6), may bring a civil action for injunctive relief, temporary or permanent, against the person offering, developing or operating any new institutional health service. The action may be brought in the superior court of any county in which the health service facility is located or in the superior court of Wake County.
- (i) If the Department determines that the recipient of a certificate of need, or its successor, is operating a service which materially differs from the representations made in its application for that certificate of need, the Department may bring an action in Wake County Superior Court or the superior court of any county in which the certificate of need is to be utilized for injunctive relief, temporary or permanent, requiring the recipient, or its successor, to materially comply with the representations in its application. The Department may also bring an action in Wake County Superior Court or the superior court of any county in which the certificate of need is to be utilized to enforce the provisions of this subsection and G.S. 131E-181(b) and the rules adopted in accordance with this subsection and G.S. 131E-181(b).

APPENDIX E

CERTIFICATE OF NEED REGULATIONS

10A NCAC 14C .0102 LOCATION OF THE AGENCY

As used in this Subchapter, the agency is the Certificate of Need Section in the Division of Health Service Regulation, North Carolina Department of Health and Human Services. The location of the agency is 809 Ruggles Drive, Raleigh, North Carolina, 27603. The mailing address of the agency is Certificate of Need Section, Division of Health Service Regulation, 2704 Mail Service Center, Raleigh, NC 27699-2704. The telephone number of the agency is 919-855-3873.

10A NCAC 14C .0202 DEFINITIONS

The following definitions shall apply throughout this Subchapter:

- (1) “Applicant” means each person identified in Section A of the application forms listed in 10A NCAC 14C .0203(a).
- (2) “Application deadline” means no later than 5:00 p.m. on the 15th day of the month preceding the month that the review period begins. If the 15th day of the month falls on a weekend or a State holiday as set forth in 25 NCAC 01E .0901, which is hereby incorporated by reference including subsequent amendments, the application deadline is the next business day.
- (3) “Competitive review” means two or more applications submitted to begin review in the same review period proposing the same new institutional health service in the same service area and the CON Section determines that approval of one application may require denial of another application included in the same review period.
- (4) “CON Section” means the Healthcare Planning and Certificate of Need Section of the Division of Health Service Regulation.
- (5) “Full fiscal year” means the 12-month period used by the applicant to track and report revenues and operating expenses for the services proposed in the application.
- (6) “Health service” shall have the same meaning as defined in G.S. 131E-176(9a).
- (7) “New institutional health service” shall have same meaning as defined in G.S. 131E-176(16).
- (8) “Person” shall have the same meaning as defined in G.S. 131E-176(19).
- (9) “Proposal” means a new institutional health service that requires a certificate of need.
- (10) “Related entity” means a person that:
 - (a) shares the same parent corporation or holding company with the applicant;
 - (b) is a subsidiary of the same parent corporation or holding company as the applicant;
 - or
 - (c) participates with the applicant in a joint venture that provides the same type of health services proposed in the application.
- (11) “Review category” means the categories described in Chapter 3 of the annual State Medical Facilities Plan.
- (12) “Review period” means the 90 to 150 days that the CON Section has to review a certificate of need application and issue a decision pursuant to G.S. 131E-185 and G.S. 131E-186. There are eleven review periods each calendar year. Each review period starts on the first

day of the month and the first review period starts on February 1. There is no review period beginning January 1.

- (13) “State Medical Facilities Plan” shall have the same meaning as defined in G.S. 131E-176(25). For purposes of this Subchapter, the annual State Medical Facilities Plan is hereby incorporated by reference, including subsequent amendments and editions. This document is available at no cost at <https://info.ncdhhs.gov/dhsr/ncsmfp/index.html>.
- (14) “USB flash drive” means a device used for data storage that includes a flash memory and an integrated universal serial bus interface.

10A NCAC 14C .0203 FILING APPLICATIONS

- (a) “Application form” refers to one of the following:
 - (1) the Certificate of Need Application form; or
 - (2) the Dialysis or End Stage Renal Disease Services Application form.
- (b) An application form may be obtained from the CON Section by:
 - (1) sending an email to DHSR.CON.Applications@dhhs.nc.gov; or
 - (2) calling (919) 855-3873.
- (c) An email request for an application form shall:
 - (1) describe the proposal;
 - (2) identify the city or county where the proposal would be located; and
 - (3) include the estimated capital cost for the proposal.
- (d) For each proposal, the CON Section shall determine based on Chapter 3 of the annual State Medical Facilities Plan in effect at the time the review begins the:
 - (1) review category; and
 - (2) review period.
- (e) An application is complete for inclusion in the review period if the CON Section determines that all of the following are true:
 - (1) the original application is printed, placed between a front and back cover, and bound using metal paper fasteners;
 - (2) the original and one copy of the application were received by the CON Section on or before the application deadline for the review period;
 - (3) the entire application fee required by G.S. 131E-182(c) was received by the CON Section; and
 - (4) each applicant identified in Section A of the application form signed the certification page that asks the applicant to certify that the information in the application is correct and they intend to develop and offer the project as described in the application.
- (f) The copy of the application shall be printed and bound consistent with Subparagraph (e)(1) of this Rule or in an electronic format saved on a USB flash drive. The files on the USB flash drive shall not be encrypted or password protected.
- (g) No later than the fifth business day following the application deadline, the CON Section shall notify the contact individual identified in Section A of the application if the application is complete.
- (h) If the application is not complete pursuant to Paragraph (e) of this Rule, the CON Section shall notify the contact individual identified in Section A of the application of what is missing or incorrect. The applicant shall only provide the items listed below in order to complete the application after the application deadline:
 - (1) a signed certification page; or
 - (2) the copy of the application.
- (i) Signed certification pages or the copy of the application shall be received by the CON Section no later than 5:00 p.m. on the last business day of the month preceding the first day of the review period.

- (j) The CON Section shall not include the application in the review period if it is not complete pursuant to Paragraph (e) of this Rule by 5:00 p.m. on the last business day of the month preceding the first day of the review period.

10A NCAC 14C .0204 AMENDMENTS TO APPLICATIONS

An applicant may not amend an application. Responding to a request for additional information made by the agency after the review has commenced is not an amendment.

10A NCAC 14C .0205 EXTENSION OF REVIEW PERIOD

- (a) If the review is not expedited, the review may be extended for the following reasons:
 - (1) the total number of applications, including those in other review periods, prevents the CON Section from completing the review in 90 days;
 - (2) the applicant has not submitted a response to a request from the CON Section for clarifying information; or
 - (3) the CON Section received clarifying information from the applicant but is not able to complete the review in 90 days.
- (b) The CON Section shall notify the contact individual identified in Section A of the application if the review period is extended. Failure to receive such notice prior to the last day of the review period does not entitle the applicant to a certificate of need nor authorize the applicant to proceed with the proposal in the application without a certificate of need.

10A NCAC 14C .0303 REPLACEMENT EQUIPMENT

- (a) This Rule defines the terms used in the definition of “replacement equipment” set forth in G.S. 131E-176(22a).
- (b) “Currently in use” means that the equipment to be replaced has been used by the person requesting the exemption at least 10 times to provide a health service during the 12 months prior to the date the written notice required by G.S. 131E-184(a) is submitted to the CON Section.
- (c) Replacement equipment is not “comparable” if:
 - (1) the replacement equipment to be acquired is capable of providing a health service that the equipment to be replaced cannot provide; or
 - (2) the equipment to be replaced was acquired less than 12 months prior to the date the written notice required by G.S. 131E-184(a) is submitted to the CON Section and it was refurbished or reconditioned when it was acquired by the person requesting the exemption.

10A NCAC 14C .0402 ISSUES

The correctness, adequacy, or appropriateness of criteria, plans, and standards shall not be an issue in a contested case hearing.

SECTION .1100 – CRITERIA AND STANDARDS FOR NURSING FACILITY OR ADULT CARE HOME SERVICES

10A NCAC 14C .1102 PERFORMANCE STANDARDS

- (a) An applicant proposing to add nursing facility beds to an existing facility, except an applicant proposing to transfer existing certified nursing facility beds from a State Psychiatric Hospital to a community facility, shall not be approved unless the average occupancy, over the nine months immediately preceding the submittal of the application, of the total number of licensed nursing facility beds within the facility in which the new beds are to be operated was at least 90 percent.
- (b) An applicant proposing to establish a new nursing facility or add nursing facility beds to an existing facility, except an applicant proposing to transfer existing certified nursing facility beds from a State Psychiatric Hospital to a community facility, shall not be approved unless occupancy is

- projected to be at least 90 percent for the total number of nursing facility beds proposed to be operated, no later than two years following the completion of the proposed project. All assumptions, including the specific methodologies by which occupancies are projected, shall be clearly stated.
- (c) An applicant proposing to add adult care home beds to an existing facility shall not be approved unless the average occupancy, over the nine months immediately preceding the submittal of the application, of the total number of licensed adult care home beds within the facility in which the new beds are to be operated was at least 85 percent.
 - (d) An applicant proposing to establish a new adult care home facility or add adult care home beds to an existing facility shall not be approved unless occupancy is projected to be at least 85 percent for the total number of adult care home beds proposed to be operated, no later than two years following the completion of the proposed project. All assumptions, including the specific methodologies by which occupancies are projected, shall be stated.

SECTION .1400 – CRITERIA AND STANDARDS FOR NEONATAL SERVICES

10A NCAC 14C .1401 DEFINITIONS

The definitions in this Rule shall apply to all rules in this Section:

- (1) "Approved neonatal service" means a neonatal service that was not operational prior to the beginning of the review period.
- (2) "Existing neonatal service" means a neonatal service in operation prior to the beginning of the review period.
- (3) "High-risk obstetric patients" means those patients requiring specialized services provided by an acute care hospital to the mother and fetus during pregnancy, labor, delivery and to the mother after delivery. The services are characterized by specialized facilities and staff for the intensive care and management of high-risk maternal and fetal patients before, during, and after delivery.
- (4) "Level I neonatal services" means services provided by an acute care hospital to full term and pre-term neonates that are stable, without complications, and may include neonates that are small for gestational age or large for gestational age.
- (5) "Level II neonatal service" means services provided by an acute care hospital in a licensed acute care bed to neonates and infants that are stable without complications but require special care and frequent feedings; infants of any weight who no longer require Level III or Level IV neonatal services, but still require more nursing hours than normal infants; and infants who require close observation in a licensed acute care bed.
- (6) "Level III neonatal service" means services provided by an acute care hospital in a licensed acute care bed to neonates or infants that are high-risk, small (approximately 32 and less than 36 completed weeks of gestational age) but otherwise healthy, or sick with a moderate degree of illness that are admitted from within the hospital or transferred from another facility requiring intermediate care services for sick infants, but not intensive care. Level III neonates or infants require less constant nursing care than Level IV services, but care does not exclude respiratory support.
- (7) "Level IV neonatal service" means neonatal intensive care services provided by an acute care hospital in a licensed acute care bed to high-risk medically unstable or critically ill neonates (approximately under 32 weeks of gestational age) or infants requiring constant nursing care or supervision not limited to continuous cardiopulmonary or respiratory support, complicated surgical procedures, or other intensive supportive interventions.
- (8) "Neonatal bed" means a licensed acute care bed used to provide Level II, III or IV neonatal services.
- (9) "Neonatal intensive care services" shall have the same meaning as defined in G.S. 131E-176(15b).

- (10) "Neonatal service area" means a geographic area defined by the applicant from which the patients to be admitted to the service will originate.
- (11) "Neonatal services" means any of the Level I, Level II, Level III or Level IV services defined in this Rule.
- (12) "Obstetric services" means any normal or high-risk services provided by an acute care hospital to the mother and fetus during pregnancy, labor, delivery and to the mother after delivery.
- (13) "Perinatal services" means services provided during the period shortly before and after birth.

10A NCAC 14C .1403 PERFORMANCE STANDARDS

- (a) An applicant shall demonstrate that the proposed project is capable of meeting the following standards:
 - (1) if an applicant is proposing to increase the total number of neonatal beds (i.e., the sum of Level II, Level III and Level IV beds), the overall average annual occupancy of the combined number of existing Level II, Level III and Level IV beds in the facility is at least 75 percent, over the 12 months immediately preceding the submittal of the proposal;
 - (2) if an applicant is proposing to increase the total number of neonatal beds (i.e., the sum of Level II, Level III and Level IV beds), the projected overall average annual occupancy of the combined number of Level II, Level III and Level IV beds proposed to be operated during the third year of operation of the proposed project shall be at least 75 percent; and
 - (3) The applicant shall document the assumptions and provide data supporting the methodology used for each projection in this rule.
- (b) If an applicant proposes to develop a new Level III or Level IV service, the applicant shall document that an unmet need exists in the applicant's defined neonatal service area, unless the State Medical Facilities Plan includes a need determination for neonatal beds in the service area. The need for Level III and Level IV beds shall be computed for the applicant's neonatal service area by:
 - (1) identifying the annual number of live births occurring at all hospitals within the proposed neonatal service area, using the latest available data compiled by the State Center for Health Statistics;
 - (2) identifying the low birth weight rate (percent of live births below 2,500 grams) for the births identified in (1) of this Paragraph, using the latest available data compiled by the State Center for Health Statistics;
 - (3) dividing the low birth weight rate identified in (2) of this Paragraph by .08 and subsequently multiplying the resulting quotient by four; and
 - (4) determining the need for Level III and Level IV beds in the proposed neonatal service area as the product of:
 - (A) the product derived in (3) of this Paragraph, and
 - (B) the quotient resulting from the division of the number of live births in the initial year of the determination identified in (1) of this Paragraph by the number 1000.

SECTION .1600 – CRITERIA AND STANDARDS FOR CARDIAC CATHETERIZATION EQUIPMENT AND CARDIAC ANGIOPLASTY EQUIPMENT

10A NCAC 14C .1601 DEFINITIONS

The following definitions shall apply to all rules in this Section:

- (1) "Angiography procedures" means procedures performed using cardiac catheterization equipment that are not cardiac catheterization services.

- (2) "Approved cardiac catheterization equipment" means cardiac catheterization equipment that was issued a certificate of need but is not being used to provide cardiac catheterization services as of the application deadline for the review period.
- (3) "Cardiac catheterization equipment" shall have the same meaning as defined in G.S. 131E-176(2f).
- (4) "Cardiac catheterization services" shall have the same meaning as defined in G.S. 131E-176(2g).
- (5) "Diagnostic-equivalent cardiac catheterization procedures" shall have the same meaning as defined in the annual State Medical Facilities Plan in effect as of the first day of the review period.
- (6) "Existing cardiac catheterization equipment" means cardiac catheterization equipment that is being used to offer cardiac catheterization services as of the application deadline for the review period.
- (7) "Fixed cardiac catheterization equipment" means cardiac catheterization equipment that is not mobile or shared fixed cardiac catheterization equipment.
- (8) "Fixed cardiac catheterization equipment service area" shall have the same meaning as defined in the annual State Medical Facilities Plan in effect as of the first day of the review period.
- (9) "Host site" means the location where the mobile cardiac catheterization equipment provides cardiac catheterization services.
- (10) "Mobile cardiac catheterization equipment" means cardiac catheterization equipment that is moved weekly to provide cardiac catheterization services at two or more host sites.
- (11) "Mobile cardiac catheterization equipment service area" shall have the same meaning as defined in the annual State Medical Facilities Plan in effect as of the first day of the review period.
- (12) "Proposed cardiac catheterization equipment" means the cardiac catheterization equipment proposed in the certificate of need application.
- (13) "Shared fixed cardiac catheterization equipment" means fixed cardiac catheterization equipment that is used to perform cardiac catheterization procedures and angiography procedures.

10A NCAC 14C .1603 PERFORMANCE STANDARDS

- (a) An applicant proposing to acquire fixed cardiac catheterization equipment pursuant to a need determination in the annual State Medical Facilities Plan in effect as of the first day of the review period shall:
 - (1) identify the existing fixed cardiac catheterization equipment owned or operated by the applicant or a related entity and located in the proposed fixed cardiac catheterization equipment service area;
 - (2) identify the approved fixed cardiac catheterization equipment owned or operated by the applicant or a related entity and located in the proposed fixed cardiac catheterization equipment service area;
 - (3) provide projected utilization of the cardiac catheterization equipment identified in Subparagraphs (1) and (2) of this Paragraph and the proposed fixed cardiac catheterization equipment during each of the first three full fiscal years of operation following completion of the project;
 - (4) provide the assumptions and methodology used to project the utilization required by Subparagraph (3) of this Paragraph; and
 - (5) project that the cardiac catheterization equipment identified in Subparagraphs (1) and (2) of this Paragraph and the proposed fixed cardiac catheterization equipment shall perform 900 or more diagnostic-equivalent cardiac catheterization procedures per unit of cardiac

- catheterization equipment during the third full fiscal year of operation following completion of the project.
- (b) An applicant proposing to acquire shared fixed cardiac catheterization equipment pursuant to a need determination in the annual State Medical Facilities Plan in effect as of the first day of the review period shall:
 - (1) provide projected utilization of the proposed shared fixed cardiac catheterization equipment during each of the first three full fiscal years of operation following completion of the project;
 - (2) provide the assumptions and methodology used to project the utilization required by Subparagraph (1) of this Paragraph; and
 - (3) project that the proposed shared fixed cardiac catheterization equipment shall perform 225 or more diagnostic-equivalent cardiac catheterization and angiography procedures during the third full fiscal year of operation following completion of the project.
 - (c) An applicant proposing to acquire mobile cardiac catheterization equipment pursuant to a need determination in the State Medical Facilities Plan in effect as of the first day of the review period shall:
 - (1) identify the existing mobile cardiac catheterization equipment owned or operated by the applicant or a related entity that provides cardiac catheterization services at host sites located in the proposed mobile cardiac catheterization equipment service area;
 - (2) identify the approved mobile cardiac catheterization equipment owned or operated by the applicant or a related entity that will provide cardiac catheterization services at host sites located in the proposed mobile cardiac catheterization equipment service area;
 - (3) provide projected utilization of the cardiac catheterization equipment identified in Subparagraphs (1) and (2) of this Paragraph and the proposed mobile cardiac catheterization equipment during each of the first three full fiscal years of operation following completion of the project;
 - (4) provide the assumptions and methodology used to project the utilization required by Subparagraph (3) of this Paragraph; and
 - (5) project that the cardiac catheterization equipment identified in Subparagraphs (1) and (2) of this Paragraph and the proposed mobile cardiac catheterization equipment shall perform 225 or more diagnostic-equivalent cardiac catheterization procedures per unit of cardiac catheterization equipment during the third full fiscal year of operation following completion of the project.

SECTION .1700 - CRITERIA AND STANDARDS FOR OPEN-HEART SURGERY SERVICES AND HEART-LUNG BYPASS MACHINES

10A NCAC 14C .1701 DEFINITIONS

The following definitions apply to all rules in this Section:

- (1) "Approved heart-lung bypass machine" means a heart-lung bypass machine that was issued a certificate of need but is not being used as of the application deadline for the review period.
- (2) "Existing heart-lung bypass machine" means a heart-lung bypass machine that is being used as of the application deadline for the review period.
- (3) "Health service facility" shall have the same meaning as defined in G.S. 131E-176(9b).
- (4) "Heart-lung bypass machine" shall have the same meaning as defined in G.S. 131E-176(10a).
- (5) "Open-heart surgical procedure" means one visit by a patient to an operating room for open heart surgery services.

- (6) "Open-heart surgery services" shall have the same meaning as defined in G.S. 131E-176(18b).
- (7) "Proposed heart-lung bypass machine" means the heart-lung bypass machine proposed in the application under review.

10A NCAC 14C .1703 PERFORMANCE STANDARDS

- (a) A health service facility that proposes to develop a new open-heart surgery service shall:
 - (1) provide the projected number of open-heart surgical procedures to be performed during each of the first three full fiscal years of operation following completion of the project;
 - (2) provide the assumptions and methodology used to project the utilization required by Subparagraph (a)(1) of this Paragraph; and
 - (3) project to perform 150 or more open-heart surgical procedures in the third full fiscal year of operation following completion of the project.
- (b) A health service facility that proposes to acquire a heart-lung bypass machine, excluding a heart-lung bypass machine proposed to be acquired pursuant to Policy AC-6 in the annual State Medical Facilities Plan in effect as of the first day of the review period, shall:
 - (1) provide the number of existing heart-lung bypass machines owned or operated by the health service facility;
 - (2) provide the number of approved heart-lung bypass machines that will be owned or operated by the health service facility;
 - (3) provide projected utilization of the existing and approved heart-lung bypass machines identified in Subparagraphs (b)(1) and (b)(2) of this Paragraph and the proposed heart-lung bypass machine during each of the first three full fiscal years of operation following completion of the project;
 - (4) provide the assumptions and methodology used to project the utilization required by Subparagraph (b)(3) of this Paragraph; and
 - (5) project that the existing and approved heart-lung bypass machines identified in Subparagraphs (b)(1) and (b)(2) of this Paragraph and the proposed heart-lung bypass machine will be used during the third full fiscal year of operation following completion of the project:
 - (A) to perform 200 or more open-heart surgical procedures per heart-lung bypass machine; or
 - (B) for 900 hours or more per heart-lung bypass machine, including time in use and time spent on standby, for all types of procedures.

SECTION .1900 – CRITERIA AND STANDARDS FOR RADIATION THERAPY EQUIPMENT

10A NCAC 14C .1901 DEFINITIONS

The following definitions shall apply to all rules in this Section:

- (1) "Approved LINAC" means a linear accelerator (LINAC) that was issued a certificate of need but is not being used to provide services as of the application deadline for the review period.
- (2) "Equivalent Simple Treatment Visit (ESTV)" shall have the same meaning as defined in the annual State Medical Facilities Plan in effect as of the first day of the review period.
- (3) "Existing LINAC" means a LINAC that is being used to provide services as of the application deadline for the review period.
- (4) "LINAC service area" shall have the same meaning as defined in the annual State Medical Facilities Plan in effect as of the first day of the review period.
- (5) "Linear accelerator (LINAC)" shall have the same meaning as defined in G.S. 131E-176(14g).

- (6) "Proposed LINAC" means the LINAC proposed in the application under review.

10A NCAC 14C .1903 PERFORMANCE STANDARDS

An applicant proposing to acquire a LINAC pursuant to a need determination in the annual State Medical Facilities Plan in effect as of the first day of the review period shall:

- (1) identify the existing LINACs owned or operated by the applicant or a related entity and located in the proposed LINAC service area;
- (2) identify the approved LINACs owned or operated by the applicant or a related entity and located in the proposed LINAC service area;
- (3) provide projected utilization of the LINACs identified in Items (1) and (2) of this Rule and the proposed LINAC during each of the first three full fiscal years of operation following completion of the project;
- (4) provide the assumptions and methodology used for the projected utilization required by Item (3) of this Rule;
- (5) project that the LINACs identified in Items (1) and (2) of this Rule and the proposed LINAC shall perform during the third full fiscal year of operation following completion of the project either:
 - (a) 6,750 or more ESTVs per LINAC; or
 - (b) serve 250 or more patients per LINAC.

SECTION .2000 – CRITERIA AND STANDARDS FOR HOME HEALTH SERVICES

10A NCAC 14C .2001 DEFINITIONS

The following definitions in this Rule shall apply to all rules in this Section:

- (1) "Home Health Agency" shall have the same meaning as defined in G.S. 131E-176(12).
- (2) "Home Health Services" shall have the same meaning as defined in G.S. 131E-176(12).

10A NCAC 14C .2003 PERFORMANCE STANDARDS

An applicant shall project, in the third year of operation, an annual unduplicated patient caseload for the county in which the facility will be located that meets or exceeds the minimum need used in the applicable State Medical Facilities Plan to justify the establishment of a new home health agency office in that county. An applicant shall not be required to meet this performance standard if the home health agency office need determination in the applicable State Medical Facilities Plan was not based on application of the standard methodology for a Medicare-certified home health agency office.

SECTION .2100 – CRITERIA AND STANDARDS FOR SURGICAL SERVICES AND OPERATING ROOMS

10A NCAC 14C .2101 DEFINITIONS

The following definitions apply to all rules in this Section:

- (1) "Approved operating rooms" means those operating rooms that were approved for a certificate of need by the CON Section prior to the date on which the applicant's proposed project was submitted to the CON Section, but that have not been licensed.
- (2) "Dedicated C-section operating room" means an operating room as defined in Chapter 6 in the annual State Medical Facilities Plan.
- (3) "Existing operating rooms" means those operating rooms in ambulatory surgical facilities and hospitals that were reported in the Ambulatory Surgical Facility License Renewal Application Form or in the Hospital License Renewal Application Form submitted to the Acute and Home Care Licensure and Certification Section of the Division of Health Service Regulation, and that were licensed prior to the beginning of the review period.

- (4) "Health System" shall have the same meaning as defined in Chapter 6 in the annual State Medical Facilities Plan.
- (5) "Operating room" means a room as defined in G.S. 131E-176(18c).
- (6) "Operating Room Need Methodology" means the Methodology for Projecting Operating Room Need in Chapter 6 in the annual State Medical Facilities Plan.
- (7) "Service area" means the Operating Room Service Area as defined in Chapter 6 in the annual State Medical Facilities Plan.

10A NCAC 14C .2103 PERFORMANCE STANDARDS

- (a) An applicant proposing to increase the number of operating rooms, excluding dedicated C-section operating rooms, in a service area shall demonstrate the need for the number of proposed operating rooms in addition to the existing and approved operating rooms in the applicant's health system in the applicant's third full fiscal year following completion of the proposed project based on the Operating Room Need Methodology set forth in the annual State Medical Facilities Plan. The applicant is not required to use the population growth factor.
- (b) The applicant shall provide the assumptions and methodology used for the projected utilization required by this Rule.

SECTION .2200 – CRITERIA AND STANDARDS FOR END-STAGE RENAL DISEASE SERVICES

10A NCAC 14C .2201 DEFINITIONS

The following definitions shall apply to this Section:

- (1) "Dialysis" means the artificially aided process of transferring body wastes from a person's blood to a dialysis fluid to permit discharge of the wastes from the body.
- (2) "Dialysis facility" means a kidney disease treatment center as defined in G.S. 131E-176(14e).
- (3) "Dialysis station" means the treatment area in a dialysis facility used to accommodate the equipment and supplies needed to perform hemodialysis on a single patient.
- (4) "Hemodialysis" means the form of dialysis in which the blood is circulated outside the body through equipment that permits transfer of waste through synthetic membranes.
- (5) "Home hemodialysis" means hemodialysis performed in a location other than a dialysis facility by the patient after the patient is trained in a dialysis facility to perform the hemodialysis.
- (6) "In-center hemodialysis" means hemodialysis performed in a dialysis facility.
- (7) "Peritoneal dialysis" means the form of dialysis in which a dialysis fluid is introduced into the person's peritoneal cavity and is subsequently withdrawn. This form of dialysis is performed in a location other than a dialysis facility by the patient after the patient is trained in a dialysis facility to perform the peritoneal dialysis.

10A NCAC 14C .2203 PERFORMANCE STANDARDS

- (a) An applicant proposing to establish a new dialysis facility for in-center hemodialysis services shall document the need for at least 10 dialysis stations based on utilization of 2.8 in-center patients per station per week as of the end of the first full fiscal year of operation following certification of the facility. An applicant may document the need for fewer than 10 stations if the application is submitted in response to an adjusted need determination in the State Medical Facilities Plan for fewer than 10 stations.
- (b) An applicant proposing to increase the number of in-center dialysis stations in:
 - (1) an existing dialysis facility; or

- (2) a dialysis facility that is not operational as of the date the certificate of need application is submitted but has been issued a certificate of need shall document the need for the total number of dialysis stations in the facility based on 2.8 in-center patients per station per week as of the end of the first full fiscal year of operation following certification of the additional stations.
- (c) An applicant proposing to establish a new dialysis facility dedicated to home hemodialysis or peritoneal dialysis training shall document the need for the total number of home hemodialysis stations in the facility based on training six home hemodialysis patients per station per year as of the end of the first full fiscal year of operation following certification of the facility.
- (d) An applicant proposing to increase the number of home hemodialysis stations in a dialysis facility dedicated to home hemodialysis or peritoneal dialysis training shall document the need for the total number of home hemodialysis stations in the facility based on training six home hemodialysis patients per station per year as of the end of the first full fiscal year of operation following certification of the additional stations.
- (e) The applicant shall provide the assumptions and methodology used for the projected utilization required by this Rule.

SECTION .2400 – CRITERIA AND STANDARDS FOR INTERMEDIATE CARE FACILITIES FOR INDIVIDUALS WITH INTELLECTUAL DISABILITIES

10A NCAC 14C .2401 DEFINITIONS

The following definitions shall apply to all rules in this Section:

- (1) "Catchment area" means as defined in G.S. 122C-3(4).
- (2) "Intermediate care facility for individuals with intellectual disabilities" means as defined in G.S. 131E-176(14a).

10A NCAC 14C .2403 PERFORMANCE STANDARDS

- (a) An applicant proposing to add intermediate care facility for individuals with intellectual disabilities (ICF/IID) beds to an existing facility shall not be approved unless the average occupancy, over the six months immediately preceding the submittal of the application, of the total number of ICF/IID beds within the facility in which the new beds are to be operated was at least 90 percent.
- (b) An applicant proposing to establish new ICF/IID beds shall not be approved unless occupancy is projected to be at least 90 percent for the total number of ICF/IID beds proposed to be operated in the entire facility, no later than one year following the completion of the proposed project.
- (c) An applicant proposing to establish new ICF/IID beds shall comply with one of the following models:
 - (1) a residential community based freestanding facility with six beds or less, i.e., group home model; or
 - (2) a community-based facility with 7 to 15 beds if documentation is provided that a facility of this size is necessary because adequate residential community based freestanding facilities are not available in the Area Authority catchment area to meet the needs of the population to be served.
- (d) No more than three ICF/IID facilities housing a combined total of 18 persons shall be developed on contiguous pieces of property.

SECTION .2700 - CRITERIA AND STANDARDS FOR MAGNETIC RESONANCE IMAGING SCANNER

10A NCAC 14C .2701 DEFINITIONS

The following definitions shall apply to all rules in this Section:

- (1) "Adjusted MRI procedure" shall have the same meaning as defined in the annual State Medical Facilities Plan in effect as of the first day of the review period.
- (2) "Approved MRI scanner" means a magnetic resonance imaging (MRI) scanner that was issued a certificate of need but is not being used to provide services as of the application deadline for the review period.
- (3) "Existing MRI scanner" means an MRI scanner that is being used to provide services as of the application deadline for the review period.
- (4) "Fixed MRI scanner" means an MRI scanner that is not a mobile MRI scanner.
- (5) "Fixed MRI scanner service area" shall have the same meaning as defined in the annual State Medical Facilities Plan in effect as of the first day of the review period.
- (6) "Host site" means the location where the mobile MRI scanner provides services.
- (7) "Magnetic resonance imaging (MRI) scanner" shall have the same meaning as defined in G.S. 131E-176(14m).
- (8) "Mobile MRI scanner" means an MRI scanner that is moved weekly to provide services at two or more host sites.
- (9) "Mobile MRI scanner service area" shall have the same meaning as defined in the annual State Medical Facilities Plan in effect as of the first day of the review period.
- (10) "Proposed MRI scanner" means the MRI scanner proposed in the application under review.

10A NCAC 14C .2703 PERFORMANCE STANDARDS

- (a) An applicant proposing to acquire a fixed MRI scanner pursuant to a need determination in the annual State Medical Facilities Plan in effect as of the first day of the review period shall:
 - (1) identify the existing fixed MRI scanners owned or operated by the applicant or a related entity and located in the proposed fixed MRI scanner service area;
 - (2) identify the approved fixed MRI scanners owned or operated by the applicant or a related entity and located in the proposed fixed MRI scanner service area;
 - (3) identify the existing mobile MRI scanners owned or operated by the applicant or a related entity that provided mobile MRI services at host sites located in the proposed fixed MRI scanner service area during the 12 months before the application deadline for the review period;
 - (4) identify the approved mobile MRI scanners owned or operated by the applicant or a related entity that will provide mobile MRI services at host sites located in the proposed fixed MRI scanner service area;
 - (5) provide projected utilization of the MRI scanners identified in Subparagraphs (1) through (4) of this Paragraph and the proposed fixed MRI scanner during each of the first three full fiscal years of operation following completion of the project;
 - (6) provide the assumptions and methodology used to project the utilization required by Subparagraph (5) of this Paragraph;
 - (7) project that the fixed MRI scanners identified in Subparagraphs (1) and (2) of this Paragraph and the proposed fixed MRI scanner shall perform during the third full fiscal year of operation following completion of the project as follows:
 - (A) 3,364 or more adjusted MRI procedures per fixed MRI scanner if there are four or more fixed MRI scanners in the fixed MRI scanner service area;
 - (B) 3,123 or more adjusted MRI procedures per fixed MRI scanner if there are three fixed MRI scanners in the fixed MRI scanner service area;

- (C) 2,883 or more adjusted MRI procedures per fixed MRI scanner if there are two fixed MRI scanners in the fixed MRI scanner service area;
 - (D) 2,643 or more adjusted MRI procedures per fixed MRI scanner if there is one fixed MRI scanner in the fixed MRI scanner service area; or
 - (E) 1,201 or more adjusted MRI procedures per MRI scanner if there are no existing fixed MRI scanners in the fixed MRI scanner service area; and
- (8) project that the mobile MRI scanners identified in Subparagraphs (3) and (4) of this Paragraph shall perform 3,328 or more adjusted MRI procedures per mobile MRI scanner during the third full fiscal year of operation following completion of the project.
- (b) An applicant proposing to acquire a mobile MRI scanner pursuant to a need determination in the annual State Medical Facilities Plan in effect as of the first day of the review period shall:
 - (1) identify the existing mobile MRI scanners owned or operated by the applicant or a related entity that provided mobile MRI services at host sites located in the proposed mobile MRI scanner service area during the 12 months before the application deadline for the review period;
 - (2) identify the approved mobile MRI scanners owned or operated by the applicant or a related entity that will provide mobile MRI services at host sites located in the proposed mobile MRI scanner service area;
 - (3) identify the existing fixed MRI scanners owned or operated by the applicant or a related entity that are located in the proposed mobile MRI scanner service area;
 - (4) identify the approved fixed MRI scanners owned or operated by the applicant or a related entity that will be located in the proposed mobile MRI scanner service area;
 - (5) identify the existing and proposed host sites for each mobile MRI scanner identified in Subparagraphs (1) and (2) of this Paragraph and the proposed mobile MRI scanner;
 - (6) provide projected utilization of the MRI scanners identified in Subparagraphs (1) through (4) of this Paragraph and the proposed mobile MRI scanner during each of the first three full fiscal years of operation following completion of the project;
 - (7) provide the assumptions and methodology used to project the utilization required by Subparagraph (6) of this Paragraph;
 - (8) project that the mobile MRI scanners identified in Subparagraphs (1) and (2) of this Paragraph and the proposed mobile MRI scanner shall perform 3,328 or more adjusted MRI procedures per MRI scanner during the third full fiscal year of operation following completion of the project; and
 - (9) project that the fixed MRI scanners identified in Subparagraphs (3) and (4) of this Paragraph shall perform during the third full fiscal year of operation following completion of the project as follows:
 - (A) 3,364 or more adjusted MRI procedures per fixed MRI scanner if there are four or more fixed MRI scanners in the fixed MRI scanner service area;
 - (B) 3,123 or more adjusted MRI procedures per fixed MRI scanner if there are three fixed MRI scanners in the fixed MRI scanner service area;
 - (C) 2,883 or more adjusted MRI procedures per fixed MRI scanner if there are two fixed MRI scanners in the fixed MRI scanner service area;
 - (D) 2,643 or more adjusted MRI procedures per fixed MRI scanner if there is one fixed MRI scanner in the fixed MRI scanner service area; or
 - (E) 1,201 or more adjusted MRI procedures per MRI scanner if there are no fixed MRI scanners in the fixed MRI scanner service area.

SECTION .2800 - CRITERIA AND STANDARDS FOR REHABILITATION SERVICES

10A NCAC 14C .2801 DEFINITIONS

The definitions in this Rule will apply to all rules in this Section.

- (1) "Rehabilitation Facility" means a facility as defined in G.S. 131E-176.
- (2) "Rehabilitation" means the process to maintain, restore or increase the function of disabled individuals so that an individual can live in the least restrictive environment, consistent with his or her objective.
- (3) "Outpatient Rehabilitation Clinic" is defined as a program of coordinated and integrated outpatient services, evaluation, or treatment with emphasis on improving the functional level of the person in coordination with the patient's family.
- (4) "Rehabilitation Beds" means inpatient beds for which a need determination is set forth in the current State Medical Facilities Plan and which are located in a hospital licensed pursuant to G.S. 131E-77.
- (5) "Traumatic Brain Injury" is defined as an insult to the brain that may produce a diminished or altered state of consciousness which results in impairment of cognitive abilities or physical functioning. It can also result in the disturbance of behavioral or emotional functioning. These impairments may be either temporary or permanent and cause partial or total functional disability or psychological maladjustment.
- (6) "Stroke" (cerebral infarction, hemorrhage) is defined as the sudden onset of a focal neurologic deficit due to a local disturbance in the blood supply to the brain.
- (7) "Spinal Cord Injury" is defined as an injury to the spinal cord that results in the loss of motor or sensory function.
- (8) "Pediatric Rehabilitation" is defined as inpatient rehabilitation services provided to persons 14 years of age or younger.

10A NCAC 14C .2803 PERFORMANCE STANDARDS

- (a) An applicant proposing to establish new rehabilitation beds shall not be approved unless the average occupancy, over the nine months immediately preceding the submittal of the application, of the total number of licensed rehabilitation beds within the facility in which the new beds are to be operated was at least 80 percent.
- (b) An applicant proposing to establish new rehabilitation beds shall not be approved unless occupancy is projected to be 80 percent for the total number of rehabilitation beds to be operated in the facility no later than two years following completion of the proposed project.

SECTION .3700 - CRITERIA AND STANDARDS FOR POSITRON EMISSION TOMOGRAPHY SCANNER

10A NCAC 14C .3701 DEFINITIONS

The following definitions shall apply to all rules in this Section:

- (1) "Approved PET scanner" means a positron emission tomography (PET) scanner that was issued a certificate of need but is not being used to provide services as of the application deadline for the review period.
- (2) "Existing PET scanner" means a PET scanner that is being used to provide services as of the application deadline for the review period.
- (3) "Fixed PET scanner" means a PET scanner that is not mobile.
- (4) "Fixed PET scanner service area" shall have the same meaning as defined in the annual State Medical Facilities Plan in effect as of the first day of the review period.
- (5) "Host site" means the location where the mobile PET scanner provides services.

- (6) "Mobile PET scanner" means a PET scanner that is moved weekly to provide services at two or more host sites.
- (7) "Mobile PET scanner service area" shall have the same meaning as defined in the annual State Medical Facilities Plan in effect as of the first day of the review period.
- (8) "Positron emission tomography scanner" shall have the same meaning as defined in G.S. 131E-176(19a).
- (9) "Proposed PET scanner" means the PET scanner proposed in the application under review.

10A NCAC 14C .3703 PERFORMANCE STANDARDS

- (a) An applicant proposing to acquire a fixed PET scanner pursuant to a need determination in the annual State Medical Facilities Plan in effect as of the first day of the review period shall:
 - (1) identify the existing fixed PET scanners owned or operated by the applicant or a related entity and located in the proposed fixed PET scanner service area;
 - (2) identify the approved fixed PET scanners owned or operated by the applicant or a related entity and located in the proposed fixed PET scanner service area;
 - (3) identify the existing mobile PET scanners owned or operated by the applicant or a related entity that provided services at host sites located in the proposed fixed PET scanner service area during the 12 months before the application deadline for the review period;
 - (4) identify the approved mobile PET scanners owned or operated by the applicant or a related entity that will provide services at host sites located in the proposed fixed PET scanner service area;
 - (5) provide projected utilization of the PET scanners identified in Subparagraphs (1) through (4) of this Paragraph and the proposed fixed PET scanner during each of the first three full fiscal years of operation following completion of the project;
 - (6) provide the assumptions and methodology used to project the utilization required by Subparagraph (5) of this Paragraph; and
 - (7) project that the PET scanners identified in Subparagraphs (1) through (4) of this Paragraph and the proposed fixed PET scanner shall perform 2,080 or more procedures per PET scanner during the third full fiscal year of operation following completion of the project.
- (b) An applicant proposing to acquire a mobile PET scanner pursuant to a need determination in the annual State Medical Facilities Plan in effect as of the first day of the review period shall:
 - (1) identify the existing mobile PET scanners owned or operated by the applicant or a related entity that provided services at host sites located in the proposed mobile PET scanner service area during the 12 months before the application deadline for the review period;
 - (2) identify the approved mobile PET scanners owned or operated by the applicant or a related entity that will provide services at host sites located in the proposed mobile PET scanner service area during the first three full fiscal years following completion of the project;
 - (3) identify the existing fixed PET scanners owned or operated by the applicant or a related entity and located in the proposed mobile PET scanner service area;
 - (4) identify the approved fixed PET scanners owned and operated by the applicant or a related entity and located in the proposed mobile PET scanner service area;
 - (5) identify the existing and proposed host sites for each mobile PET scanner identified in Subparagraphs (1) and (2) of this Paragraph and the proposed mobile PET scanner;
 - (6) provide projected utilization of the PET scanners identified in Subparagraphs (1) through (4) of this Paragraph and the proposed mobile PET scanner during each of the first three full fiscal years of operation following completion of the project;
 - (7) provide the assumptions and methodology used to project the utilization required by Subparagraph (6) of this Paragraph; and
 - (8) project that the PET scanners identified in Subparagraphs (1) through (4) of this Paragraph and the proposed mobile PET scanner shall perform 2,080 or more procedures per PET scanner during the third full fiscal year of operation following completion of the project.

SECTION .3800 - CRITERIA AND STANDARDS FOR ACUTE CARE BEDS

10A NCAC 14C .3801 DEFINITIONS

The following definitions shall apply to all Rules in this Section:

- (1) "Acute care beds" means acute care beds licensed by the Division of Health Service Regulation in accordance with standards in 10A NCAC 13B .6200, and located in hospitals licensed pursuant to G.S. 131E-79.
- (2) "Average daily census" means the number of days of inpatient acute care provided in licensed acute care beds in a given year divided by 365 days.
- (3) "Campus" shall have the same meaning as defined in G.S. 131E-176(2c).
- (4) "Service Area" means the single or multi-county area as used in the development of the acute care bed need determination in the applicable State Medical Facilities Plan.

10A NCAC 14C .3803 PERFORMANCE STANDARDS

- (a) An applicant proposing to develop new acute care beds shall demonstrate that the projected average daily census (ADC) of the total number of licensed acute care beds proposed to be licensed within the service area, under common ownership with the applicant, divided by the total number of those licensed acute care beds is reasonably projected to be at least 66.7 percent when the projected ADC is less than 100 patients, 71.4 percent when the projected ADC is 100 to 200 patients, and 75.2 percent when the projected ADC is greater than 200 patients, in the third operating year following completion of the proposed project or in the year for which the need determination is identified in the State Medical Facilities Plan, whichever is later.
- (b) An applicant proposing to develop new acute care beds shall provide all assumptions and data used to develop the projections required in this rule and demonstrate that they support the projected inpatient utilization and average daily census.

SECTION .3900 - CRITERIA AND STANDARDS FOR GASTROINTESTINAL ENDOSCOPY PROCEDURE ROOMS IN LICENSED HEALTH SERVICE FACILITIES

10A NCAC 14C .3901 DEFINITIONS

The following definitions shall apply to all rules in this Section:

- (1) "Approved gastrointestinal (GI) endoscopy rooms" means GI endoscopy rooms that were approved for a certificate of need by the CON Section prior to the date the application was submitted but that are not licensed as of the date the application is submitted.
- (2) "Existing GI endoscopy rooms" means GI endoscopy rooms that were licensed prior to the beginning of the review period.
- (3) "GI endoscopy procedure" means each upper endoscopy, esophagoscopy, or colonoscopy procedure performed on a patient during a single visit to the licensed health service facility.
- (4) "Licensed health service facility" means either a hospital as defined in G.S. 131E-176(13) or an ambulatory surgical facility as defined in G.S. 131E-176(1b).
- (5) "New GI endoscopy room" means a GI endoscopy room that is not included in the inventory of GI endoscopy rooms in the State Medical Facilities Plan as of the date the application is submitted.
- (6) "Service area" means the county where the proposed GI endoscopy room will be developed.

10A NCAC 14C .3903 PERFORMANCE STANDARDS

An applicant proposing to develop a new GI endoscopy room in a licensed health service facility shall:

- (1) identify the proposed service area;
- (2) identify all existing and approved GI endoscopy rooms owned or operated by the applicant or a related entity located in the proposed service area;
- (3) provide projected utilization for each of the first three full fiscal years of operation following completion of the project for all GI endoscopy rooms identified in Item (2) of this Rule;
- (4) project to perform an average of at least 1,500 GI endoscopy procedures per GI endoscopy room during the third full fiscal year of operation following completion of the project in the GI endoscopy rooms identified in Item (2) of this Rule; and
- (5) provide the assumptions and methodology used to project the utilization required by this Rule.

SECTION .4000 - CRITERIA AND STANDARDS FOR HOSPICE INPATIENT FACILITIES AND HOSPICE RESIDENTIAL CARE FACILITIES

10A NCAC 14C .4001 DEFINITIONS

The following definitions shall apply to all rules in this Section:

- (1) "Bereavement counseling" means counseling provided to a hospice patient's family or significant others to assist them in dealing with issues of grief and loss.
- (2) "Caregiver" means the person whom the patient designates to provide the patient with emotional support, physical care, or both.
- (3) "Care plan" means a plan as defined in 10A NCAC 13K .0102 of the Hospice Licensing Rules.
- (4) "Home-like" means furnishings of a hospice inpatient facility or a hospice residential care facility as defined in 10A NCAC 13K .1110 or .1204 of the Hospice Licensing Rules.
- (5) "Hospice" means any coordinated program of home care as defined in G.S. 131E-176(13a).
- (6) "Hospice inpatient facility" means a facility as defined in G.S. 131E-176(13b).
- (7) "Hospice residential care facility" means a facility as defined in G.S. 131E-176(13c).
- (8) "Hospice service area" means for residential care facilities, the county in which the hospice residential care facility will be located and the contiguous counties for which the hospice residential care facility will provide services.
- (9) "Hospice services" means services as defined in G.S. 131E-201(5b).
- (10) "Hospice staff" means personnel as defined in 10A NCAC 13K .0102 of the Hospice Licensing Rules.

10A NCAC 14C .4003 PERFORMANCE STANDARDS

(a) An applicant proposing to develop hospice inpatient facility beds or hospice residential care facility beds shall demonstrate that:

- (1) the average occupancy rate of the licensed hospice beds, for each level of care, in the facility is projected to be at least 50 percent for the last six months of the first operating year following completion of the project;
- (2) the average occupancy rate for the licensed hospice beds, for each level of care, in the facility is projected to be at least 65 percent for the second operating year following completion of the project; and
- (3) if the application is submitted to address the need for hospice residential care beds, each existing hospice residential care facility which is located in the hospice service area operated at an occupancy rate of at least 65 percent for the 12 month period reported on that facility's most recent Licensure Renewal Application Form.

- (b) An applicant proposing to add hospice inpatient facility beds to an existing hospice inpatient facility shall document that the average occupancy of the licensed hospice inpatient facility beds in its existing facility was at least 65 percent for the nine months immediately preceding the submittal of the proposal.
- (c) An applicant proposing to add residential care beds to an existing hospice residential care facility shall document that the average occupancy of the licensed hospice residential care beds in its existing facility was at least 65 percent for the nine months immediately preceding the submittal of the proposal.

APPENDIX F

ACADEMIC MEDICAL CENTER TEACHING HOSPITALS

Academic Medical Center Teaching Hospital	Medical School Affiliation	Date Designated
North Carolina Baptist Hospital Medical Center Boulevard Winston-Salem, North Carolina 27157 Telephone: (336) 716-2011	Wake Forest University School of Medicine	February 16, 1983
Duke University Health System d/b/a Duke University Hospital 2301 Erwin Road Durham, North Carolina 27710 Telephone: (919) 684-8111	Duke University School of Medicine	July 21, 1983
University of North Carolina Hospitals 101 Manning Drive Chapel Hill, North Carolina 27514 Telephone: (984) 974-1000	University of North Carolina at Chapel Hill School of Medicine	August 8, 1983
Vidant Medical Center 2100 Stantonsburg Road Greenville, North Carolina 27834 Telephone: (252) 847-4100	Brody School of Medicine at East Carolina University	August 8, 1983
Carolinas Medical Center/Center for Mental Health 1000 Blythe Boulevard Charlotte, North Carolina 28203 Telephone: (704) 355-2000		After January 1, 1990

APPENDIX G

CRITICAL ACCESS HOSPITALS

County	Facility Name, Address and Telephone Number
Alexander	Alexander Hospital (closed) 326 Third Street, SW Taylorsville, North Carolina 28681
Alleghany	Alleghany Memorial Hospital 233 Doctors Street Sparta, North Carolina 28675 (336) 372-5511
Ashe	Ashe Memorial Hospital 200 Hospital Avenue Jefferson, North Carolina 28640 (336) 846-7101
Avery	Charles A. Cannon, Jr. Memorial Hospital 434 Hospital Drive Linville, North Carolina 28646 (828) 737-7000
Bertie	Vidant Bertie Hospital 1403 South King Street Windsor, North Carolina 27983 (252) 794-6600
Bladen	Cape Fear Valley-Bladen County Hospital 501 South Poplar Street Elizabethtown, North Carolina 28337 (910) 862-5179
Brunswick	J. Arthur Doshier Memorial Hospital 924 North Howe Street Southport, North Carolina 28461 (910) 457-3800
Chatham	Chatham Hospital 475 Progress Boulevard Siler City, North Carolina 27344 (919) 799-4000

County	Facility Name, Address and Telephone Number
Cherokee	Erlanger Murphy Medical Center 3990 East US Hwy 64 ALT Murphy, North Carolina 28906 (828) 837-8161
Chowan	Vidant Chowan Hospital 211 Virginia Road Edenton, North Carolina 27932 (252) 482-8451
Dare	The Outer Banks Hospital 4800 South Croatan Highway Nags Head, North Carolina 27959 (252) 449-4500
Macon	Angel Medical Center 120 Riverview Street Franklin, North Carolina 28734 (828) 524-8411
Macon	Highlands-Cashiers Hospital 190 Hospital Drive Highlands, North Carolina 28741 (828) 526-1200
Mitchell	Blue Ridge Regional Hospital 125 Hospital Drive Spruce Pine, North Carolina 28777 (828) 765-4201
Montgomery	FirstHealth Montgomery Memorial Hospital 520 Allen Street Troy, North Carolina 27371 (910) 571-5000
Pender	Pender Memorial Hospital. 507 E Fremont Street Burgaw, North Carolina 28425 (910) 259-5451
Polk	St. Luke's Hospital 101 Hospital Drive Columbus, North Carolina 28722 (828) 894-3311

County	Facility Name, Address and Telephone Number
Stokes	LifeBrite Community Hospital of Stokes 1570 NC 8 & 89 Hwy N Danbury, North Carolina 27016 (336) 593-2831
Swain	Swain Community Hospital 45 Plateau Street Bryson City, North Carolina 28713 (828) 488-2155
Transylvania	Transylvania Regional Hospital 260 Hospital Drive Brevard, North Carolina 28712 (828) 884-9111
Washington	Washington County Hospital 958 US Hwy 64 East Plymouth, North Carolina 27962 (252) 793-4135
Yadkin	Yadkin Valley Community Hospital (closed) 624 West Main Street Yadkinville, North Carolina 27055



APPENDIX H

**North Carolina Department of Health and Human Services
Division of Facility Services
Certificate of Need Section**

2704 Mail Service Center ■ Raleigh, North Carolina 27699-2704

Michael F. Easley, Governor
Carmen Hooker Odom., Secretary

<http://facility-services.state.nc.us>

Lee Hoffman, Section Chief
Phone: 919-855-3873
Fax: 919-733-8139

DFS ADVISORY

Title: Regulation of Detoxification Services Provided in Hospitals Licensed under Article 5, Chapter 131E, of the General Statutes

Date: October 22, 2003

Purpose

The purpose of this Advisory is to provide The Agency's interpretation of the certificate of need requirements for acute care hospitals to develop new or expanded detoxification services and interpretation of hospital licensing requirements for beds used for detoxification services.

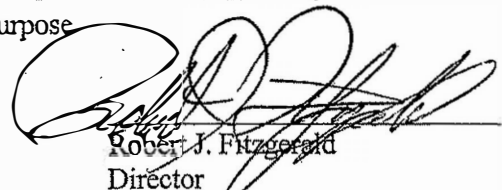
Background

House Bill 815, which revised Article 9, Chapter 131E, the Certificate of Need Law, was approved August 7, 2003, and excludes "social setting detoxification" and "medical detoxification" facilities from the definition of chemical treatment facilities licensed under Chapter 122C. Consequently, the Certificate of Need Law no longer regulates the development of facilities licensed as "non-hospital medical detoxification for individuals who are substance abusers" or "social setting detoxification for substance abuse."

Policy

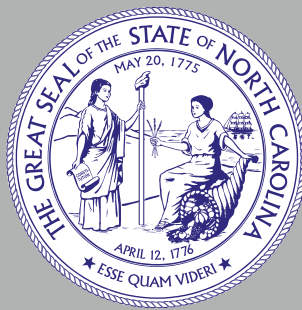
The change in the law did not revise the definition of a "chemical treatment facility" for detoxification units in an acute care hospital licensed under Article 5, Chapter 131E. Pursuant to enactment of House Bill 815, the Agency recently reviewed the licensure regulations for acute care hospitals and determined there is no licensure category for medical detoxification services that is separate from the licensure categories for psychiatric, substance abuse or acute care beds. In other words, medical detoxification services may be a component of licensed psychiatric, substance abuse and acute care services in acute care hospitals. Therefore, acute care hospitals may provide medical detoxification services in existing licensed psychiatric, substance abuse/chemical dependency treatment or acute care beds without a certificate of need. As a result of this interpretation, the Agency will revise current licenses for acute care hospitals to change the existing licensed medical detoxification beds to licensed chemical dependency/substance abuse treatment beds given that, to date, detoxification beds have been recognized by the Agency as one type of substance abuse bed.

In summary, if an acute care hospital wants to develop new or expanded detoxification services at this time, it may do so without a certificate of need, as long as the services are provided in an existing licensed acute care, psychiatric or substance abuse bed. However, if an acute care hospital wants to increase the bed capacity in its facility to develop or expand detoxification services, it must first obtain a certificate of need to add either licensed acute care, psychiatric or substance abuse beds for that purpose.


Robert J. Fitzgerald
Director



Location: 701 Barbour Drive ■ Dorothea Dix Hospital Campus ■ Raleigh, N.C. 27603
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NC DEPARTMENT OF
HEALTH AND HUMAN SERVICES

Division of Health
Service Regulation

Proposed State Medical Facilities Plan