

Draft for Discussion

Chapter 5

Step 1

Counties that have at least one licensed acute care hospital are Single County Acute Care Bed Service Areas unless the county is grouped with a county lacking a licensed acute care hospital. When a county that has at least one licensed acute care hospital is grouped with a county lacking a licensed acute care hospital, a Multicounty Acute Care Bed Service Area is created.

All counties lacking a licensed acute care hospital are grouped with either one or two counties that each have at least one licensed acute care hospital. A Multicounty Acute Care Bed Service Area may consist of multiple counties lacking a licensed acute care hospital that are grouped with either one or two counties that each have at least one licensed acute care hospital.

The three most recent years of available acute care days patient origin data are combined and used to create the Multicounty Acute Care Bed Service Areas. These data are updated and reviewed every three years. The Multicounty Acute Care Bed Service Areas are then updated, as indicated by the data. The first update will occur in the 2011 Plan. The following decision rules are used to determine multicounty acute care bed service area groupings.

- 1) Counties lacking a licensed acute care hospital are grouped with the single county where the largest proportion of patients received inpatient acute care services, as measured by acute inpatient days, unless;
 - a) Two counties with licensed acute care hospitals each provided inpatient acute care services to at least 35% of the residents who received inpatient acute care services, as measured by acute inpatient days.
- 2) If 1)a) is true, then the county lacking a licensed acute care hospital is grouped with both the counties which provided inpatient acute care services to at least 35% of the residents who received inpatient acute care services, as measured by acute inpatient days.

Note: the following highlighted section needs review and discussion.

A county lacking a licensed acute care hospital becomes a Single County Acute Care Bed Service Area upon issuance of a certificate of need to develop acute care beds in that county effective with the next State Medical Facilities Plan or upon licensure or when the facility begins providing services.

An acute care bed's service area is the acute care bed planning area in which the bed is located. The acute care bed planning areas are the single and multicounty groupings shown in Figure 5.1.

Chapter 6

Step 1 – Delineation of Service Areas (Column A)

Definitions:

Single County Acute Care Bed Service Area: A county with at least one licensed facility with one or more operating rooms.

Multicounty Operating Room Service Area: A group of counties including:

- one or two counties with at least one licensed facility with at least one operating room **and**;
- one or more counties with no licensed facility with at least one operating room.

All counties are either Single County Operating Room Service Areas or are part of a Multicounty Operating Room Service Area. A Multicounty Operating Room Service Area may consist of multiple counties with no licensed facility with at least one operating room grouped with either one or two counties, each of which have at least one licensed facility that includes at least one operating room.

The three most recent years of available surgical patient origin data are combined and used to create the Multicounty Operating Room Service Areas. These data are updated and reviewed every three years. The Operating Room Service Areas are then updated, as indicated by the data. The first update will occur in the 2011 Plan. The following decision rules are used to determine multicounty operating room service area groupings:

- 1) Counties with no licensed facility with at least one operating room are grouped with the single county where the largest proportion of patients had surgery, as measured by number of surgical cases, unless;
 - a) Two counties with licensed facilities with at least one operating room, each provided surgical services to at least 35% of the residents who received surgical services, as measured by number of surgical cases.
- 2) If 1)a) is true, then the county with no licensed facility with at least one operating room is grouped with both the counties which provided surgical services to at least 35% of the residents who received surgical services, as measured by number of surgical cases.

Note: the following highlighted section needs review and discussion.

A county with no licensed facility with at least one operating room becomes a Single County Operating Room Service Area upon issuance of a certificate of need to develop one or more operating rooms in that county, effective with the next State Medical Facilities Plan, **or upon licensure or when the facility begins providing services.**

However, in 2006, in response to an adjusted need determination petition, the State Health Coordinating Council added Swain County to the Jackson-Graham Multicounty Operating Room Service Area. This created a Multicounty Operating Room Service

Area including two counties that have licensed facilities with at least one operating room and one county lacking a licensed facility with at least one operating room.

An operating room's service area is the operating room planning area in which the operating room is located. The operating room planning areas are the single and multicounty groupings shown in Figure 6.1.

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