



Medical Facilities Planning

Long-Term Care Nursing Home Beds Work Group

November 16, 2010
 10:00 am – 12:46 pm
 Council Bldg. Room 201

MEMBERS PRESENT: Jerry Parks, Donald Beaver, Connie Bonebrake, Dr. Gordon DeFriese, Johnnie Farmer, Senator Anthony Foriest, Dr. Brenda Latham-Sadler, Travis Tomlinson, Jr.
MEMBERS ABSENT:
Medical Facilities Planning Section Staff Present: Patrick Baker, Dr. Carol Potter, Kelli Fisk
DHSR Staff Present: Craig Smith

Standing Agenda	Discussion	Motions	Recommendations/ Actions
Welcome & Announcements	Mr. Parks welcomed members, staff and visitors to the meeting. Mr. Parks stated this meeting is open to the public, but that the meeting did not include a Public Hearing; therefore, discussion would be limited to members of the Work Group and staff, but, asked members to feel free to call on anyone in the audience that could give insight and expertise to the Work Group.		
Review of Executive Orders No. 10 & 67	Mr. Parks gave an overview of Executive Orders 10 and 67 procedures to observe before taking action at the meeting. Mr. Parks inquired if anyone had a conflict or needed to declare that they would derive a benefit from any matter on the agenda or intended to recuse themselves from voting on the matter. Mr. Parks asked members to declare conflicts as agenda items come up. None of the members indicated having a financial benefit that would be derived from any matter coming before the Council for action. Therefore, no member recused from voting on any matter coming before the Council at the meeting.		
Introductions	At this time, Mr. Parks asked all members to introduce themselves and give some background information regarding their experience and current position.		
Approval of Minutes	A motion was made and seconded for the September 10, 2010 minutes.	Dr. DeFriese Dr. Sadler	Motion approved
Review of Exhibit 1, Updated Inventory of Nursing Care Beds & Requested County Review Examples (Table 10A)	Mr. Baker reviewed the updated inventory of Nursing Care Beds. Mr. Baker then explained the Methodology in how all Chapter spreadsheets work by reviewing Alamance, Caswell, Currituck, Granville, Pasquotank, Vance and Wake Counties as specific review examples to display how Planning Inventory is determined.		
Review of Exhibit 2, Exclusion Inventory of Nursing Care Beds & Cty. Examples (Table 10A-1)	Mr. Baker reviewed the updated exclusion inventory of Nursing Care Beds. Mr. Baker explained exclusions concerning CCRC Issues & Patient Days, Vent Beds, Head Injury Beds, State Facility Transfers, County-to-County historical bed transfers, and non-profit religious/fraternal out of area admits.		

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Review of Exhibit 3, State Facility Nursing Care Beds Excluded From Inventory (Table 10A-2)	Mr. Baker reviewed State Facility Nursing Care Beds excluded from Inventory. Mr. Baker explained these are not part of the Planning Inventory and listed for record keeping purposes. Mr. Baker noted this number could fluctuate as displayed by Cherry Hospital reducing beds from 154 to 0.		
Review of Exhibit 4, Nursing Care Beds Average Occupancy Per County	Mr. Baker reviewed nursing care beds average occupancy per county with displayed statewide average being 85.3 percent. Mr. Baker referred the Work Group to current exclusions of State Facility & CCRC patient days per the current Methodology. Mr. Baker reviewed the formulae(s) utilized in determining average occupancy per county and used Alamance County as an example. Mr. Baker referenced the Methodology regarding all CCRC's are excluded concerning patient days. Mr. Baker stated all CCRC beds comprise approximately 5% of inventory.		
Review of Exhibit 5, United States Summary of Nursing Care Bed Utilization	Mr. Baker reviewed the United States Summary of Nursing Care Bed Utilization, per 1,000 for Age 65+ years Age Group. Mr. Baker referenced the National Directory of American Health Planning is the source of this information and that North Carolina ranked number 36 in the country in this Age Group utilizing Nursing Care Beds.		
Review of Exhibit 6, NC Nursing Care Bed Paid Days, 2000-2009	Mr. Baker reviewed NC nursing care bed paid pays as provided by the North Carolina Division of Medical Assistance. Mr. Baker explained Medicaid Nursing Care Beds paid days of care had decreased 8% from year 2000 to 2009, Medicare Nursing Care Beds paid days of care had increased 54% from year 2000-2009, and Medicaid payments generally reflect longer stays/utilization, whereas Medicare days generally reflect shorter stays/utilization.		
Review of Exhibit 7, Statewide Utilization by Age Group Nursing Care Beds, Historical to Present, as of 11-09-10	Mr. Baker stated the utilization chart was updated from the first Work Group meeting. Information now displays from 2000 SMFP-Current an 18 percent increase of the under 65 Age Group, 22 percent decrease of the 65-75 Age Group, 33 percent decrease of the 75-84 Age Group and 38 percent decrease in the 85 and over Age Group concerning utilization of Nursing Care Beds throughout North Carolina.		
Review of Exhibit 8, Statewide Utilization by Age Group, Adult Care Home Beds, Historical to Present, as of 11-09-10	Mr. Baker stated the utilization chart was updated from the first Work Group meeting and now displays from 2003 SMFP-Current a 15 percent increase of the under 35 Age Group, 4 percent increase of the 35-64 Age Group, 14 percent decrease of the 65-75 Age Group, 13 percent decrease of the 75-84 Age Group and 8 percent decrease in the 85 and over Age Group concerning utilization of Adult Care Home Beds throughout North Carolina.		
Review of Exhibit 9, Present Nursing Care Beds Utilization Rate Worksheet, as of 11-09-10	Mr. Baker provided updated utilization rates and stated types of facilities, number of beds and inpatient day's updates or provider errors, along with updates in number of Long Term Care Patients per Age Group and updates in 2009 population from OSBM, were the reasons for the updates in utilization rates and inventory. Mr. Baker referred Work Group to the highlighted Age Group of 85+, which would be discussed in the following Exhibit 10, as this Age Group, which is most utilized Age Group for Nursing Care Beds, would be a good example to discuss.		
Review of Exhibit 10, Nursing Care Beds Utilization Worksheet Formulae(s) Description	Mr. Baker discussed the Utilization Rate for Exhibit 9 Age Group of 85+. Mr. Baker defined the steps of what comprises each Age Group Utilization Rate, and then provided as an example, a systematic (step-by-step) formulae(s) description for determining Exhibit 9 Age Group 85+ Utilization Rate. Mr. Baker noted all utilization rates are statewide rates applied to each county.		
Review of Exhibit 11, Current Methodology, Nursing Care Bed Need Projections, as of 11-09-10	Mr. Baker reviewed the current methodology for Table 10B Projection of Nursing Care Bed Need and stated the current DRAFT need is for 60 beds in 3 counties, (Camden, Pasquotank, and Perquimans).		

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Review of Exhibit 12, Nursing Care Bed Need Projections by Health Service Area	Mr. Baker reviewed the current methodology as applied to each Health Service Area Scenario for Table 10B Projection of Nursing Care Bed Need and stated the current DRAFT need is 20 beds for Pasquotank County. Mr. Baker noted this scenario changed the utilization rate from being a statewide rate to a utilization rate for each Health Service Area County.		
Review of Exhibit 13, Nursing Care Bed Need Projections by Council of Government Areas	Mr. Baker reviewed the current methodology as applied to each Council of Government Area Scenario for Table 10B Projection of Nursing Care Bed Need and stated the current DRAFT need is 20 beds for Polk County. Mr. Baker noted this scenario changed the utilization rate from being a statewide rate to a utilization rate for each Council of Government Area County.		
Review of Exhibit 14, Nursing Care Bed Need Projections by Metropolitan & Micropolitan Areas	Mr. Baker reviewed the current methodology as applied to each Metropolitan & Micropolitan Area Scenario for Table 10B Projection of Nursing Care Bed Need and stated the current DRAFT need is 110 beds for Alamance County. Mr. Baker noted this scenario changed the utilization rate from being a statewide rate to a utilization rate for each Metropolitan & Micropolitan Area County, and 29 counties were not part of either type of area in this scenario.		
Review of Exhibit 15, Nursing Care Bed Need Projections by Individual County	Mr. Baker reviewed the current methodology as applied to each Individual County Area Scenario for Table 10B Projection of Nursing Care Bed Need and stated the current DRAFT need is for 280 beds in 6 counties, (Alamance, Camden, Edgecombe, Pasquotank, Polk, and Washington). Mr. Baker noted this scenario changed the utilization rate from being a statewide rate to a utilization rate for each Individual Area County, (minus Camden and Tyrrell where the rates configured were from current Methodology due to lack of data available & being transferred bed counties due to lack of # of LTC Patients by Age Group per each county—no beds in County).		
Discussion	There were several discussions between public attendees and Work Group members as approved by the Chair regarding License Renewal Applications, history of chapter, data sources, exclusions and scenarios of determining utilization. Work Group discussed continued review of need projections defined by current Methodology, Health Service Area, Council of Government Area or Individual County; with possible other regional configurations to be determined in future meetings since Metropolitan/Micropolitan Areas Scenario did not include 29/100 counties. Mr. Baker requested all Work Group members to review the materials provided to them for the first two meetings of this Work Group in preparation for future meetings.		
Next Steps	The Chair cancelled the December 17, 2010 Work Group meeting in lieu of the approaching Holidays and 2011 Final SMFP requirements Planning Staff needed to complete. Future meeting dates would be scheduled after the Holidays.		
Adjournment	Mr. Parks adjourned the meeting.		