



## Technology & Equipment Committee – **DRAFT** Minutes

Healthcare Planning and Certificate of Need Section

September 13, 2017

10:00 am – 12 Noon

Brown Building, Room 104, Raleigh, N.C.

<b>Members Present:</b> Dr. Lyndon Jordan III, Trey Adams, Stephen DeBiasi, Valerie Jarvis, Dr. Prashant Patel
<b>Members Absent:</b> Senator Ralph Hise, Brian Lucas, Dr. Christopher Ullrich
<b>Other SHCC Members Present:</b> Dr. Sandra Greene
<b>Healthcare Planning Staff:</b> Paige Bennett, Sharetta Blackwell, Elizabeth Brown, Amy Craddock, Tom Dickson, Andrea Emanuel
<b>DHSR Staff Present:</b> Martha Frisone, Fatimah Wilson, Lisa Pittman, Julie Halatek, Celia Inman, Mike McKillip, Tanya Rupp
<b>Attorney General's Office:</b> Derek Hunter

Agenda Items	Discussion/Action	Motions	Recommendations/ Actions
<b>Welcome &amp; Introductions</b>	Dr. Jordan presided at the meeting. He welcomed members, staff and guests to the final Technology and Equipment Committee meeting scheduled for this year. He noted the meeting was open to the public, but that the meeting was not a public hearing. Therefore, discussion would be limited to members of the committee and staff. He stated that following the meeting, the Committee will forward its recommendations to the State Health Coordinating Council for consideration at the October 4, 2017 meeting.		
<b>Review of Executive Order No. 46 Reauthorizing the State Health Coordinating Council and Executive Order No. 122 Extending the State Health Coordinating Council</b>	Dr. Jordan reviewed Executive Order No. 46: Reauthorizing the State Health Coordinating Council and Executive Order 122: Extending the State Health Coordinating Council. He inquired whether 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. Dr. Jordan asked members to declare conflicts as agenda items came up. Dr. Jordan disclosed that his organization owns and operates a fixed PET scanner facility, he has an affiliation with UNC, and he performs diagnostic radiology procedures in his practice; he stated that he will recuse himself should any issues arise that involves areas of conflict.		
<b>Approval of minutes from May 10, 2017</b>	A motion was made and seconded to approve the minutes.	Mr. Adams Ms. Jarvis	Motion approved

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<b>Cardiac Catheterization Equipment</b>	<p>The Agency received one petition regarding the Cardiac Catheterization section of Chapter 9. Dr. Andrea Emanuel presented the Agency Report.</p> <p><b>Petitioner: Caldwell Memorial Hospital</b> The petition requests an adjusted need determination for one additional unit of cardiac catheterization equipment. The Agency received four letters of support.</p> <p><b>Recommendation:</b> The Agency recommends to the Committee approving this petition. The Committee voted to accept the Agency’s recommendation.</p> <p><b>Data Updates</b> Ms. Bennett provided an update to Table 9X. Caldwell Memorial Hospital’s petition contained a correction to the number of procedures. Once weighted, the procedures increased from 600 to 684. No need determinations changed as a result of this correction. The only need determination for this section is for one fixed unit in the Buncombe/Graham/Madison/Yancey service area.</p> <p><b>Committee Recommendation:</b> The Agency recommends to the Committee forwarding the Cardiac Catheterization section to the SHCC for the final 2018 SMFP.</p>	<p>Mr. Adams Mr. DeBiasi</p> <p>Mr. DeBiasi Ms. Jarvis</p>	<p>Motion approved</p> <p>Motion approved</p>
<b>Magnetic Resonance Imaging</b>	<p>The Agency received one petition regarding the Magnetic Resonance Imaging section of Chapter 9. Dr. Andrea Emanuel presented the Agency Report.</p> <p><b>Petitioner: Sentara Albemarle Medical Center</b> The Petition requests the removal of the need determination for one fixed MRI scanner in the Pasquotank/Camden/Currituck/Perquimans (Pasquotank) service area. The Agency received no comments.</p> <p><b>Recommendation:</b> The Agency recommends to the Committee approval of the petition. The Committee voted to accept the Agency’s recommendation.</p> <p><b>Data Updates</b> Since the Proposed Plan, data updates to Table 9P were received for Brunswick, Carteret, Dare, and Pasquotank Counties. None of the updated data changed the</p>	<p>Mr. DeBiasi Mr. Adams</p>	<p>Motion approved</p>

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	<p>need determinations. In addition to the need determination in the Pasquotank service area, there was a need for one fixed MRI machine in Union County.</p> <p><b><u>Committee Recommendation:</u></b> The Agency recommends to the Committee forwarding the MRI section to the SHCC for the final 2018 SMFP.</p>	Ms. Jarvis Mr. DeBiasi	Motion approved
<b>Linear Accelerator</b>	<p>Ms. Bennett stated that the Agency received no petitions or comments.</p> <p><b><u>The Prostate Health Center Demonstration Project</u></b> Ms. Bennett provided an update on this project. In response to a petition, the 2009 SMFP included requirements for a linear accelerator demonstration project. It required the successful CON applicant to provide annual reports and an evaluation at the end of the fourth year. The evaluation concluded that a similar project in other settings might be helpful in areas with where there is evidence of racial disparities in access to health care. Dr. Jordan asked staff to add this topic to the agenda for 2018 for further evaluation and discussion.</p> <p><b><u>Committee Recommendation:</u></b> The Agency recommends to the Committee forwarding the Linear Accelerator section to the SHCC for the final 2018 SMFP.</p>	Mr. Adams Ms. Jarvis	Motion approved
<b>Lithotripsy</b>	<p>The Agency received no petitions or comments for lithotripsy.</p> <p><b><u>Committee Recommendation:</u></b> The Agency recommends to the Committee forwarding the Lithotripsy section to the SHCC for the final 2018 SMFP.</p>	Ms. Jarvis Mr. Adams	Motion approved
<b>Positron Emission Tomography (PET) Scanner</b>	<p>Ms. Bennett stated that the Agency received no petitions, but received two comments; one comment supported the statewide need determination in the Proposed 2018 SMFP and the other addressed the first commenter.</p> <p><b><u>Committee Recommendation:</u></b> The Agency recommends to the Committee forwarding the Positron Emission Tomography (PET) section to the SHCC for the final 2018 SMFP.</p>	Mr. Adams Mr. DeBiasi	Motion approved
<b>Gamma Knife</b>	<p>Ms. Bennett stated that the Agency received no petitions or comments regarding the Gamma Knife section.</p>		

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	<b><u>Committee Recommendation:</u></b> The Agency recommends to the Committee forwarding the Gamma Knife section to the SHCC for the final <i>2018 SMFP</i> .	Ms. Jarvis Mr. DeBiasi	Motion approved
<b>Chapter 9</b>	<b><u>Committee Recommendation:</u></b> Authorize staff the make updates and changes as necessary to complete the <i>2018 SMFP</i> , including changes to preambles. Forward Chapter 9 to the SHCC.  Mr. Adams requested adding to the March 2018 meeting agenda a discussion regarding whether formal need methodologies are necessary for all sections of Chapter 9. He noted that, as technology has changed, formal methodologies for equipment such as Gamma Knife and Lithotripsy, and perhaps others, may no longer be necessary.	Ms. Jarvis Mr. Adams	Motion approved
<b>Other Business</b>	Dr. Jordan asked if there was any other business that the committee needs to address. He noted that at the September 6, 2017 SHCC meeting, Representative Lambeth requested that the T&E Committee review the upcoming DHHS telemedicine report being developed as a result of House Bill 283 (An Act to Require the Department of Health And Human Services to Study and Recommend a Telemedicine Policy). The policy may affect more than just the T&E Committee. Therefore, once the report has been released, the staff will work with the Council and all of the Committees to determine the impact and identify areas where the SMFP can be aligned with this new policy. Members may expect to learn more about this in 2018 Planning cycle.  Dr. Jordan asked if there was any old business the committee needed to address. Dr. Patel asked whether the change in the ratio of diagnostic to interventional cardiac catheterization procedures signaled a patient access issue and/or an issue with standard of care. Dr. Greene mentioned the statewide data on county-level cardiac catheterization rates, noting that medical practices vary greatly across counties. Dr. Patel offered to share his data with Dr. Greene, and perhaps there could be additional discussion early next year.  There was no other business to discuss. Dr. Jordan reminded that the next full SHCC meeting is Wednesday, October 4 at 10:00 AM in this room.		
<b>Adjournment</b>	Dr. Jordan requested a motion to adjourn.	Mr. DeBiasi Mr. Adams	Motion approved