

May 6, 2020

Ms. Valerie Jarvis, RN/BSN, Chair
Long-Term and Behavioral Health Committee
North Carolina State Health Coordinating Council
DHSR.SMFP.Petitions-Comments@dhhs.nc.gov

Re: **NCHA Comment/Behavioral Health Need Methodologies**

Dear Ms. Jarvis and members of the Committee:

NCHA represents hospitals and health systems across North Carolina, and we thank you for the opportunity to comment on the need methodologies affecting Psychiatric and Substance Use Services in the Proposed 2021 North Carolina State Medical Facilities Plan (SMFP).

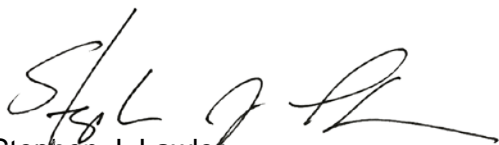
In its slide show review of the need methodologies, The Planning Section states that “many mental health professionals and others are certain that more beds are needed” than have been made available in the SMFP. It has identified potential alternatives to the existing methodology, including modifying the basis to use facility (rather than patient) locations, re-configuring the service areas (from the current LME/MCOs), and foregoing the mathematical need methodology. NCHA agrees that more beds to serve behavioral health patients are needed, but is concerned that these modifications to the need methodology alone may not result in a significant addition to the number of new beds in service. **NCHA supports posted option #3, elimination of the mathematically-based need methodology for both psychiatric and substance use disorder beds.**

NCHA believes that this change could mitigate some of the concerns with the need methodologies such as small and regionalized bed need allocations, undeveloped and non-operational beds, and problematic geographical service area configurations. However, they are not likely to address the contributing factors of low reimbursement rates and payment parity issues, LME/MCO payment restrictions, and the costly and continually changing regulatory requirements faced by providers.

Finally, NCHA considers access to behavioral healthcare to be of primary importance. It is essential that any CON applicant demonstrate accessibility by government (including Medicaid and Medicare) sponsored and medically underserved patients, and document a financial assistance policy that enables access to care for uninsured patients.

We thank you for your consideration of our comments and ask that you please contact Mike Vicario (mvicario@ncha.org) if you have questions or concerns.

Sincerely,



Stephen J. Lawler
President
North Carolina Healthcare Association

