



Hospice Methodologies Task Force
Draft Report – Friday, February 20, 2009
10:00am – 12:30 pm
 Council Building, 701 Barbour Drive, Raleigh, NC

MEMBERS PRESENT: Dr. T.J. Pulliam, Chair, Peter Brunnick, Rita Burch, Lynn Hardy, David Lee, Stephen Nuckolls, Jerry Parks, Sandy Roberson, Timothy Rogers, John Thoma, and David Work. RESOURCE PEOPLE PRESENT: Helen Alexander, Judy Brunger and Dawn Carter
MEMBERS AND RESOURCE PEOPLE ABSENT: Azzie Conley and Teresa Piezzo
STAFF PRESENT: Floyd Cogley, Elizabeth Brown and Kelli Fisk

Standing Agenda	Discussion
Welcome & Introductions	Dr. Pulliam, Task Force Chair, welcomed members and guests. At Dr. Pulliam's request, Task Force members, resource people, Division staff and guests introduced themselves.
Brief Overview of First Meeting	Dr. Pulliam referred to the Draft Report of the January 23, 2009 Task Force meeting that had been distributed. Mr. Nuckolls moved that the report be accepted as written. The motion was seconded by Mr. Roberson and was unanimously passed.
Identification/ Discussion of Issues/Questions to Date	The letter from Hospice of Davidson County that had been distributed was discussed. Dr. Pulliam referred to the list of issues and questions related to hospice home care and hospice inpatient need determination methodologies that had been distributed. The list included items that had been identified at the January 23 Task Force meeting. The 300% outlier adjustment that is used in the current inpatient methodology was added to the list. Various items were discussed.
Prioritize Issues	<p>Dr. Pulliam asked each member to individually identify top priority issues in each of the three issue/question categories; namely, Home Care and Inpatient, Home Care, and Inpatient. A letter from Health Planning Source was distributed and discussed. The goals of the methodologies were discussed. Issues and questions related to the home care and inpatient methodologies were identified for further consideration.</p> <p>With respect to use of non-age adjusted death rates in calculating projected deaths, it was determined that the death rates used are not age adjusted. Items addressed that were not directly related to the need determination methodologies include: informing the public of the availability of hospice services/inpatient hospice beds through such avenues as public service announcements; making a statement in the State Medical Facilities Plan encouraging certificate of need applicants to avail themselves of pre-application conferences with the Division's Certificate of Need Section; and, access to beds.</p> <p>Jo Ann Davis, a meeting guest noted the possible opening of hospice facilities by the Veteran's Administration. Mr. Rogers suggested that he and Ms. Brunger look into this. An overview of hospice inpatient bed development in Wake County and contiguous counties was provided in response to a question.</p>
Next Step	The issues and questions related to the home care and inpatient methodologies identified for further consideration will be included in a list compiled by Mr. Cogley. The list will be distributed prior to the next meeting. Dr. Pulliam asked the members to be prepared to address the issues at the meeting on March 27. He indicated that a fourth meeting had been scheduled for 10:00 AM on May 1. Dr. Pulliam referred members to an article on palliative care.
Adjournment	Dr. Pulliam thanked everyone present and adjourned the meeting.