



Healthcare Planning & Certificate of Need Section

Acute Care Services Committee Minutes
May 5, 2015
10:00 AM-12:00 PM
Brown Building Room 104

MotionMembers Present: Dr. Sandra Greene, Christina Apperson, Dr. Mark Ellis, Representative Donny Lambeth, Kenneth Lewis, Robert McBride
Members Absent: Stephen Lawler
Healthcare Planning Staff: Amy, Craddock, Greg Yakaboski, Paige Bennett, Tom Dickson, Kelli Fisk
DHSR Staff: Drexdal Pratt, Martha Frisone, Lisa Pittman, Fatimah Wilson
Attorney General’s Office: Bethany Burgon

Agenda Items	Discussion/Action	Motions	Recommendations/ Actions
Welcome & Announcements	<p>Dr. Greene welcomed members, staff and visitors to the meeting. She stated that the purpose of the meeting was to review preliminary drafts of need projections generated by the standard methodologies in the acute care services chapters; consider recommendations for clarifying language in the operating room methodology; review the comparison of licensure and Truven Health Analytics acute care days of care data.</p> <p>Dr. Greene stated that following this meeting, the Acute Care Services Committee’s recommendations would be forwarded to all members of the State Health Coordinating Council (SHCC) for their consideration at the June 3, 2015 SHCC meeting. She acknowledged that the meeting was open to the public; however, discussions, deliberations and recommendations would be limited to the members of the Acute Care Services Committee.</p>		
Review of Executive Order No. 46 Reauthorizing the State Health Coordinating Council	<p>Dr. Greene reviewed Executive Order 46 Reauthorizing the State Health Coordinating Council with committee members and explained procedures to observe before taking action at the meeting. She explained the procedures to observe before taking action at the meeting. Each member of the Committee commented on his or her professional and institutional interests.</p>		
Recusals	<p>There were no recusals.</p>		

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Approval of minutes from the April 7, 2015	A motion was made and seconded to approve the April 7, 2015 minutes.	Dr. Ellis Mr. McBride	Minutes approved
Acute Care Hospital Beds – Chapter 5	<p>Dr. Greene stated the Licensure/Truven is a data process that the agency goes through each year to check the accuracy of submitted data. The data that drives the hospital bed need is the hospital discharge data. She stated hospitals send a copy of the UB-04 claim form to Truven for every person who is discharged from the hospital. Another data source used is the License Renewal Applications. Dr. Greene noted the hospitals self- report the number of days of care they have and staff check the discharge data against the data reported to Truven to make sure the two forms match. If there is a difference of greater than 5% between the two forms, additional reviews are required from the hospitals with the 5% or greater difference.</p> <p>Licensure/Truven Data Comparison Dr. Craddock provided a comparison between the License Renewal Application and the Truven Health Analytics Acute Care Days of Care data. Dr.Craddock stated there were 23 facilities that had a greater than 5% difference in the licensure reports. The agency worked with the NC Hospital Association to contact all hospitals with a greater than 5% discrepancy to have them review the information that was submitted and request that they make corrections. Dr. Craddock stated last year there were 28 hospitals that had a discrepancy of greater than 5% that were not corrected. Dr. Craddock stated at the September meeting she will provide the Committee with a final list of hospitals that have not submitted corrected data to either Truven or to the agency.</p> <p>Need Projections Dr. Craddock reviewed the Acute Care Bed Need draft Table 5A and need projections for Chapter 5. Table 5A shows the inventory, along with the bed surplus and deficit numbers for Acute Care Beds.</p> <p>Dr. Craddock stated there was no calculation for County Growth Rate Multiplier or a bed surplus or deficit for Davie County, because acute care days of care data were not provided. Dr. Craddock stated the agency was working with the facility to resolve this issue before preparation of the Proposed Plan.</p>		

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	<p>Dr. Craddock stated for 2016, one county has a bed need determination at this point (Table 5B): Orange County has a need for 84 beds. Dr. Craddock noted once Truven data is refreshed and updated later in the year, the need determinations may change.</p> <p>Dr. Craddock reviewed Table 5C noting this was an inventory of beds in Long-Term Care Hospitals. Dr. Craddock stated there was a total of 421 beds. As of 2005, there is no longer a need determination associated with Long-Term Care Hospitals.</p>		
Operating Rooms – Chapter 6	<p>Need Projections</p> <p>Dr. Craddock reviewed the draft tables and need projections for Chapter 6, Operating Rooms. Table 6A combines hospital and ambulatory surgical facilities in the state and Table 6A feeds into Table 6B shows the Projected OR need for 2018.</p> <p>Dr. Craddock stated in Table 6C there are currently 6 need determinations for ORs.</p> <p style="padding-left: 40px;"> Brunswick: 1 Columbus: 1 New Hanover: 3 Rowan: 1 </p> <p>Dr. Craddock stated when the data is updated later in the year, the needs may change.</p> <p>Dr. Craddock stated Table 6D was provided for information purposes only. It lists the three facilities in the Single Ambulatory Surgery Demonstration Project.</p> <p>Dr. Craddock stated Table 6E was provided for information purposes only, as it is an inventory of endoscopy rooms.</p>		

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	Dr. Craddock noted that the Single Specialty Ambulatory Surgery demonstration project annual reports would be presented at the next Acute Care Committee meeting.		
Other Acute Care Services - Chapter 7	<p>Other Acute Care Services – Chapter 7 Need Projections Dr. Craddock reviewed the draft Table 7A stating this table was an inventory table rather than a need table. Draft Table 7C indicated burn cases in the state. There are two burn intensive units in the state, located at UNC and Baptist Hospitals. Dr. Craddock noted in Table 7C the 110.5% utilization of Burn ICU services at UNC Hospitals. The agency verified the utilization rate with the hospital and stated that this is accurate.</p> <p>Dr. Craddock noted Table 7E indicated Bone Marrow Transplants and Table 7G indicated Solid Organ Transplants.</p> <p>Dr. Craddock stated there were no needs in this chapter.</p>		
Inpatient Rehabilitation Services – Chapter 8	<p>Need Projections Dr. Craddock reviewed the draft table and need projections for Chapter 8, Inpatient Rehabilitation Services. Utilization was at 58% this utilization is unchanged from last year.</p> <p>There are no needs for Inpatient Rehabilitation in the state.</p> <p><u>Committee Recommendation</u> A motion was made and seconded to accept the data and need projections for Chapters 5, 6, 7, and 8, with the understanding that staff will make necessary corrections and changes, and to authorize staff to make updates to all tables and narratives as needed.</p>	Mr. Lewis Dr. McBride	Motion approved
Other Business	There was no other business.		
Adjournment	Dr. Greene adjourned the meeting.		