



Medical Facilities Planning Branch

Long-Term and Behavioral Health Committee

Draft Minutes

September 16, 2014

Brown Bldg. Room 104

MEMBERS PRESENT: Dr. T.J. Pulliam – Chair; Donald Beaver, Peter Brunnick, Douglas Cody, Stephen DeBiasi, Kurt Jakusz, Denise Michaud, Dr. Parikh, Gloria Whisenhunt
MEMBERS ABSENT:
STAFF PRESENT: Paige Bennett, Elizabeth Brown, Amy Craddock, Nadine Pfeiffer, Kelli Fisk, Tom Dickson
DHSR STAFF PRESENT: Drexdal Pratt; Martha Frisone, Lisa Pittman
AG’s Office: Bethany Burgon

Agenda Items	Discussion/Action	Motion/ Seconded	Recommendations/ Actions
Welcome & Announcements	Dr. Pulliam welcomed members and guests. He stated the meeting was open to the public, but deliberations and recommendations were limited to the members of the Long-Term and Behavioral Health (LTBH) Committee and staff, in order to respect the process of the State Health Coordinating Council (SHCC).		
Review of Executive Order No. 46: Reauthorizing the State Health Coordinating Council	Dr. Pulliam reviewed Executive Orders No.46 “Reauthorizing the State Health Coordinating Council” Guide, and asked members and staff to introduce themselves; all members stated their name and their profession/employer and SHCC appointment type followed by staff. 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. Mr. Brunnick asked to be recused from the Demonstration Projection in Wake County. There were no other recusals.		
Approval of May 6, 2014 Minutes	A motion was made and seconded to accept the May 6, 2014 minutes.	Mr. Brunnick Dr. Parikh	Motion approved
Nursing Care Facilities – Chapter 10	Dr. Craddock stated one petition was submitted for 12 nursing care beds in Davie County.		

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	<p><u>Petitioner: Bermuda Village Retirement Community</u> The petition requested a special need adjustment to the 2015 State Medical Facilities Plan (SMFP) to add 12 nursing home beds in Davie County.</p> <p><u>Committee Recommendation</u> A motion was made and seconded to approve the petition.</p> <p><u>Committee Recommendation</u> A motion was made and seconded to forward Chapter 10, Nursing Care Facilities, to the SHCC.</p>	<p>Ms. Michaud Dr. Parikh</p> <p>Mr. Beaver Mr. Brunnick</p>	<p>Motion approved</p> <p>Motion approved</p>
Adult Care Homes - Chapter 11	<p>Since the Proposed 2015 SMFP, there were no changes in the determination of no need for additional adult care home beds anywhere in the state. Over the summer, the committee received no petitions or comments for Chapter 11.</p> <p><u>Committee Recommendation</u> A motion was made and seconded to forward Chapter 11, Acute Care Homes, to the SHCC.</p>	<p>Mr. Brunnick Ms. Michaud</p>	<p>Motion approved</p>
Home Health Services - Chapter 12	<p>Ms. Brown stated two petitions were received for Chapter 12, Home Health Services.</p> <p><u>Petitioner: Myriad Homecare Agency, LLC</u> The petitioner requested an adjusted need determination for one Medicare-certified home health agency or office in Wake County to address the special needs of the Hispanic-Latino population in the 2015 SMFP.</p> <p><u>Committee Recommendation</u> A motion was made and seconded to deny the petition.</p> <p><u>Petitioner: Triangle Orthopaedic Associates, PA (TOA)</u> The petitioner requested an adjusted need determination for one Medicare-certified home health agency or office located in either Wake, Durham or Orange County, to coordinate post-acute care with an orthopaedic surgery program as part of a demonstration project in the 2015 SMFP.</p> <p><u>Committee Recommendation:</u> A motion was made and seconded to deny the petition.</p>	<p>Dr. Parikh Mr. Beaver</p> <p>Mr. Brunnick Mr. Beaver</p>	<p>Motion approved</p> <p>Motion approved</p>

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	<p><u>Policy HH-3 Revision</u> Ms. Brown reviewed the revision for Policy HH-3. The revision is the addition of the footnote (highlighted in yellow).</p> <p>POLICY HH-3: NEED DETERMINATION FOR MEDICARE-CERTIFIED HOME HEALTH AGENCY IN A COUNTY When a county¹ has no Medicare-certified home health agency office physically located within the county’s borders, and the county has a population of more than 20,000 people; or, if the county has a population of less than 20,000 people and there is not an existing Medicare-certified home health agency office located in a North Carolina county within 20 miles, need for a new Medicare-certified home health agency office in the county is thereby established through this policy. The “need determination” shall be reflected in the <i>next</i> annual North Carolina State Medical Facilities Plan that is published following determination that a county meets the criteria indicated above. (Population is based on population estimates/projections from the North Carolina Office of State Budget and Management for the plan year in which the need determination would be made excluding active duty military for any county with more than 500 active duty military personnel. The measurement of 20 miles will be in a straight line from the closest point on the county line of the county in which an existing agency office is located to the county seat of the county in which there is no agency</p> <p>¹ Except Granville County that has been served by Granville Vance District Health Department and recognized by DHSR as a single geographic entity for purposes of location of a home health agency office.</p> <p><u>Committee Recommendation</u> A motion was made and seconded to approve the Policy HH-3 revision.</p> <p>Dr. Pulliam stated he also need a motion to remove the need determination for the one Medicare-certified home health agency or office in Granville County that is in the 2015 SMFP.</p>	<p>Ms. Michaud Dr. Parikh</p>	<p>Ms. Whisenhunt opposed; Mr. Brunnick and Mr. DeBiasi recused from voting.</p> <p>Motion approved</p>

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	<p><u>Committee Recommendation</u> A motion was made and seconded to approve the motion to remove the one Medicare certified home health agency or office in Granville County that is in the 2015 Proposed State Medical Facilities Plan.</p> <p><u>Committee Recommendation</u> A motion was made and seconded to forward Chapter 12, Home Health Services, to the SHCC.</p>	<p>Mr. Brunnick Mr. Beaver</p> <p>Mr. Beaver Mr. Brunnick</p>	<p>Motion approved</p> <p>Motion approved</p>
<p>Hospices Services – Chapter 13</p>	<p>Ms. Brown stated three petitions were received for Chapter 13, Hospice Services.</p> <p><u>Petitioner: Burke Hospice and Palliative Care, Inc. (BHPC)</u> The petitioner requested an adjusted need determination for three hospice inpatient beds in Burke County in the 2015 SMFP.</p> <p><u>Committee Recommendation</u> A motion was made and seconded to approve the petition</p> <p><u>Petitioner: Caldwell Hospice and Palliative Care</u> The petitioner requested an adjusted need determination for three hospice inpatient beds for Caldwell County in the 2015 SMFP.</p> <p><u>Committee Recommendation:</u> A motion was made and seconded to approve the petition.</p> <p><u>Petitioner: Richmond County Hospice, Inc.</u> The petitioner requested an adjusted need determination for three hospice inpatient beds in Richmond County in the 2015 SMFP.</p> <p><u>Committee Recommendation</u> A motion was made and seconded to deny the petition.</p>	<p>Mr. Brunnick Dr. Parikh</p> <p>Mr. Beaver Mr. Brunnick</p> <p>Mr. Brunnick Dr. Parikh</p>	<p>Motion approved</p> <p>Motion approved</p> <p>Motion approved</p>

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	<p>Ms. Brown noted in Table 13B in the 2016 Hospice Home Health Office need projection for Granville County a placeholder was missing in the data that was published in the Proposed Plan; this removed a need determination. There was only one need determination now showing in Table 13G and that need determination is for Cumberland County.</p> <p>Table 13D(1), Hospice Inpatient Facilities a provider (Novant Health-Matthews) was missing from this table when published earlier this year. Novant Health Matthews was licensed last fall and they now have three inpatient hospice beds. The number of licensed hospice inpatient beds increases to 448 and the number of beds CON approved/pending licensure is 68.</p> <p style="text-align: center;"><u>Committee Recommendation</u> A motion was made and seconded to forward Chapter 13, Hospice Services, to the SHCC.</p>	Ms. Michaud Dr. Parikh	Motion approved
ESRD Dialysis Services – Chapter 14	<p>Ms. Brown reported there were no petitions received for Chapter 14, ESRD Dialysis Services.</p> <p>Ms. Brown stated there were two tables from the Semi-annual Dialysis Report (SDR) for which staff were recommending revisions. In Table A, a few columns were removed from the table to make it less confusing and easier to read and understand. In Table B the word “Projected” was added over the total available stations. The Committee did review and adopt the revised format for Table A and Table B to be incorporated in the next Semiannual Dialysis Report.</p> <p style="text-align: center;"><u>Committee Recommendation</u> A motion was made and seconded to approve the revised tables.</p> <p style="text-align: center;"><u>Committee Recommendation:</u> A motion was made and seconded to forward Chapter 14, ESRD Dialysis Services, to the SHCC.</p>	Dr. Parikh Ms. Michaud Mr. Beaver Dr. Parikh	Motion approved Motion approved
Psychiatric Inpatient Services – Chapter 15	Dr. Craddock reported there were no petitions or comments received for Chapter 15, Psychiatric Inpatient Services.		

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	<p>Dr. Craddock noted in Table 15C (1) Child/Adolescent Psychiatric Inpatient that Bed Need Determinations increased from 2 beds to 3 beds in the Smoky Mountain Center. In Table 15C(2) Adult Psychiatric Inpatient Bed Need Determination increased from 42 beds to 43 beds for Alliance Behavioral Healthcare; CoastalCare remained the same.</p> <p style="text-align: center;"><u>Committee Recommendation</u> A motion was made and seconded to forward Chapter 15, Psychiatric Inpatient Services, to the SHCC.</p>	Ms. Michaud Dr. Parikh	Motion approved
Substance Abuse Inpatient and Residential Services – Chapter 16	<p>Dr. Craddock reported that there were no petitions or comments regarding Chapter 16, Substance Abuse Inpatient and Residential Services.</p> <p>Dr. Craddock noted that Medical Facilities Planning received updated Truven Data and a few LRAs for Chapter 16, and Table 16B was updated.</p> <p style="text-align: center;"><u>Committee Recommendation</u> A motion was made and seconded to forward Chapter 16, Substance Abuse Inpatient and Residential Services, to the SHCC.</p>	Dr. Parikh Mr. Beaver	Motion approved
Intermediate Care Facilities for Individuals with Intellectual Disabilities – Chapter 17	<p>Dr. Craddock reported Chapter 17 had no petitions or comments.</p> <p style="text-align: center;"><u>Committee Recommendation</u> A motion was made and seconded to forward Chapter 17, Intermediate Care Facilities for Individuals with Intellectual Disabilities, to the SHCC.</p>	Mr. Beaver Mr. Brunnick	Motion approved
Other Business	<p>Dr. Pulliam reminded members the last full SHCC meeting for 2014 will be held on October 1st beginning at 10:00 am.</p> <p>Dr. Pulliam asked for a motion to adjourn the meeting.</p> <p style="text-align: center;"><u>Committee Recommendation</u> A motion was made and seconded to adjourn the meeting.</p>	Mr. Beaver Ms. Apperson	Motion approved