



**State Health Coordinating Council Minutes - *DRAFT***  
**September 7, 2016**  
**10:00 a.m. – 12 Noon**  
**Brown Building Room 104, Raleigh, North Carolina**

**Healthcare Planning & Certificate of Need Section**

<b>Members Present:</b> Dr. Christopher Ullrich - Chair; Trey Adams; Christina Apperson; Peter Brunnick; Stephen DeBiasi; Dr. Sandra Greene; Kelly Hollis; Kurt Jakusz; Valerie Jarvis, Dr. Lyndon Jordan; Stephen Lawler; Kenneth Lewis; Brian Lucas; James Martin; Dr. Robert McBride; Denise Michaud; Dr. Jeffrey Moore; Dr. Jaylan Parikh
<b>Members Absent:</b> James Burgin; Dr. Mark Ellis; Senator Ralph Hise; Representative Donny Lambeth; Dr. Prashant Patel; Dr. T.J. Pulliam
<b>Healthcare Planning Staff Present:</b> Paige Bennett; Elizabeth Brown; Amy Craddock; Tom Dickson; Andrea Emanuel
<b>DHSR Staff Present:</b> Mark Payne; Martha Frisone; Lisa Pittman; Fatima Wilson; Celia Inman; Michael McKillip; Bernetta Thorne-Williams; Jane Rhoe-Jones
<b>Attorney General’s Office:</b> Bethany Burgon

Agenda Items	Discussion/Action	Motions	Recommendations / Actions
<b>Welcome &amp; Announcements</b>	Dr. Ullrich welcomed council members, staff and visitors to the third meeting of the planning cycle for the <i>NC 2017 State Medical Facilities Plan</i> . He acknowledged this meeting was open to the public but was not a public hearing. Dr. Ullrich stated that the focus of the meeting was an overview of the public hearings and statements from each committee chair on petitions and comments received during the public hearings.		
<b>Introductions</b>	Dr. Ullrich asked the council members and staff for a brief introduction.		
<b>Review of Executive Order No. 46 Reauthorizing the State Health Coordinating Council</b>	Dr. Ullrich gave an overview of the procedures to observe before taking action at the meeting, as outlined in Executive Order 46. Dr. Ullrich inquired if any member had a conflict of interest, needed to declare if they were deriving a financial benefit from any agenda matter, or if any members intended to recuse themselves from voting on any agenda item. Dr. Ullrich asked members to declare conflicts as agenda items came up.  There were no recusals.		
<b>Approval of Minutes from May 25, 2016</b>	A motion made and seconded to approve the minutes of May 25, 2016.		Motion approved

Agenda Items	Discussion/Action	Motions	Recommendations / Actions
<b>Overview of Public Hearings</b>	<p>Ms. Bennett gave a brief overview of the public hearings that took place in July. There were six public hearings across the state. Each were attended by Ms. Bennett and various staff of the Healthcare Planning and Certificate of Need Section.</p> <p>July 12, 2016: Greensboro, Greensboro Area Health Education Center</p> <ul style="list-style-type: none"> <li>• 4 SHCC members attended; Ms. Michaud presided</li> <li>• 10 members of the public attended; 3 speakers</li> </ul> <p>July 15, 2016: Asheville, Mountain Area Health Education Center</p> <ul style="list-style-type: none"> <li>• 3 SHCC members attended; Ms. Michaud presided</li> <li>• 2 members of the public attended; no speakers</li> </ul> <p>July 19, 2016: Greenville, Pitt County Office Building</p> <ul style="list-style-type: none"> <li>• 2 SHCC members attended; Dr. Parikh presided</li> <li>• 6 members of the public attended; 3 speakers</li> </ul> <p>July 22, 2016: Wilmington, New Hanover County Public Library</p> <ul style="list-style-type: none"> <li>• 3 SHCC members attended; Mr. Lewis presided</li> <li>• 8 members of the public attended; 3 speakers</li> </ul> <p>July 25, 2016: Concord, Carolinas HealthCare System Northeast</p> <ul style="list-style-type: none"> <li>• 5 SHCC members attended; Dr. Ullrich presided</li> <li>• 8 members of the public attended; 3 speakers</li> </ul> <p>July 28, 2016: Raleigh, Brown Building – Dorothea Dix Campus</p> <ul style="list-style-type: none"> <li>• 7 SHCC members attended; Dr. Greene presided</li> <li>• 32 members of the public attended; 11 speakers</li> </ul>		
<b>Acute Care Services Committee Statement of Petitions and Comments</b>	<p>Dr. Greene provided a brief summary of the petitions and comments the Acute Care Committee received.</p> <p>The following was a brief rundown of the petitions and comments received during the public hearings in July 2016, and the comments received by the August 12 deadline.</p>		

Agenda Items	Discussion/Action	Motions	Recommendations / Actions
	<p><b>CHAPTER 5: ACUTE CARE HOSPITAL BEDS</b> No petitions or comments were received.</p> <p><b>CHAPTER 6: OPERATING ROOMS</b> Healthcare Planning received one petition. Graystone Ophthalmology Associates submitted a petition for an adjusted need determination for one operating room in Catawba County. Twenty-one (21) documents were submitted in support of this petition. Among these, 11 were either from the petitioner or physicians in the practice. One document was submitted in opposition to the petition.</p> <p><b>CHAPTER 7: OTHER ACUTE CARE SERVICES</b> No petitions or comments were received.</p> <p><b>CHAPTER 8: INPATIENT REHABILITATION SERVICES</b> No petitions or comments were received.</p> <p>The committee will provide recommendations to the SHCC in preparation for the <i>2017 SMFP</i> at the October 5, 2016 meeting.</p>		
<p><b>Long-Term &amp; Behavioral Health Committee Statement of Petitions and Comments</b></p>	<p>Mr. Ken Lewis provided a brief summary of the petitions and comments the Long-Term &amp; Behavioral Health Committee received.</p> <p>The Long-Term and Behavioral Health Committee will meet on September 9, 2016. The committee will review and discuss several petitions for adjusted need determinations at this meeting. Materials related to this report are posted online on the Healthcare Planning’s website.</p> <p>The following is a brief rundown of the petitions and comment. The committee will provide recommendations to the State Health Coordination Council in preparation for the <i>2017 State Medical Facilities Plan (SMFP)</i>.</p> <p><b>CHAPTER 10, NURSING CARE FACILITIES:</b> No petitions or comments were received.</p> <p><b>CHAPTER 11, ADULT CARE HOMES:</b> Three Petitions related to adult care homes were received. The first Petition from Artis Senior Living requests a special need adjustment to the <i>2017 SMFP</i> for Alzheimer’s Special Care Unit</p>		

Agenda Items	Discussion/Action	Motions	Recommendations / Actions
	<p>Beds in Stand-Alone facilities in Buncombe (331 Beds) and Cabarrus counties (79 beds). One document was received from the Petitioner.</p> <p>The second Petition is from Singh Development regarding a special need determination for transfer of up to 100 adult care home beds from Harnett County to Wake County. One document in support of the Petition was received.</p> <p>The final Petition is from Sandy Ridge Assisted Living requesting an adjusted need determination for 16 adult care home beds in Montgomery County. Fifty-five (55) documents in support of the Petition were received, including one from the Petitioner.</p> <p><b>CHAPTER 12, HOME HEALTH SERVICES:</b> One Petition related to home health services was received. Mother’s Helper Home Healthcare, Inc. of Wake County requests an adjusted need determination be included for one Medicare-certified home health agency or office in Wake County to address a special segment of the population. Four documents in support of the Petition were received, including two from Mother’s Helper. Four documents in opposition to the Petition were also received.</p> <p><b>CHAPTER 13, HOSPICE SERVICES:</b> One Petition related to hospice services was received. Transitions LifeCare requests the removal of the need determination for seven hospice inpatient beds in Wake County. One document in support of the Petition was received from the Petitioner.</p> <p><b>CHAPTER 14, END-STAGE RENAL DISEASE DIALYSIS FACILITIES:</b> One Petition related to End-Stage Renal Disease Dialysis was received. Graham County Commissioners requests an adjusted need determination for a new ESRD facility for Graham County. 1,243 documents in support of the Petition were received, including three from the Petitioner. One document received in support of the Petition indicated potential barriers to development. Two documents in opposition of the Petition were received.</p> <p>Also, there was one document regarding aligning certificate of need (CON) application language in Chapter 3 of the SMFP. Bio-Medical Applications of North Carolina, Inc., and Fresenius Kidney Care made the following observation in regards to the <i>2017 SMFP</i>:</p> <ul style="list-style-type: none"> <li>• It has modified the categories for CON applications (Chapter 3) and now includes all ESRD CON applications, except Cost Overrun CON applications, as Category D.</li> </ul>		

Agenda Items	Discussion/Action	Motions	Recommendations / Actions
	<ul style="list-style-type: none"> <li>It further modifies the CON application schedule and batches all Category D applications into six reviews throughout the year.</li> </ul> <p><b>WITH REGARD TO CHAPTER 15, PSYCHIATRIC INPATIENT SERVICES:</b> No petitions or comments were received.</p> <p><b>FOR CHAPTER 16, SUBSTANCE ABUSE SERVICES</b> No petitions or comments were received.</p> <p><b>REGARDING CHAPTER 17, ICF/IID:</b> No petitions or comments were received.</p> <p>The committee will provide recommendations to the State Health Coordination Council in preparation for the <i>2017 SMFP</i> at the October 5, 2016 meeting.</p>		
<p><b>Technology and Equipment Committee Statement of Petitions and Comments</b></p>	<p>Dr. Ullrich provided a brief summary of the petitions and comments the Technology and Equipment Committee received.</p> <p>The Technology and Equipment Committee will meet next on Wednesday, September 14, 2016. The committee will review and discuss several petitions for adjusted need determinations at this meeting. Materials related to this report will be posted online on the Healthcare Planning and Certificate of Need Section's website.</p> <p>The following is a brief rundown of the petitions and comments received during the public hearings in July 2016.</p> <p><b>CHAPTER 9, POSITRON EMISSION TOMOGRAPHY SCANNER (PET):</b> One comment was received from Duke University Health system in support of the PET need determination in the <i>2017 SMFP</i>. A public hearing comment also in support was received from Duke Raleigh Hospital.</p> <p><b>CHAPTER 9, MAGNETIC RESONANCE IMAGING (MRI):</b> Two petitions were received on this section. One petition was received from Carolinas HealthCare System requesting the need determination for one fixed MRI Scanner in Lincoln County be removed from the <i>2017 SMFP</i>. One comment in opposition was received from Novant Health.</p>		

Agenda Items	Discussion/Action	Motions	Recommendations / Actions
	<p>The second petition received was regarding <i>Policy TE-3: Plan Exemption for Fixed Magnetic Resonance Imaging Scanners</i>. The petitioner, Cape Fear Valley Health System, requests the following two changes:</p> <ol style="list-style-type: none"> <li>1. <i>The policy should be amended to allow an individual community hospital with a 24-hour emergency department to apply for a CON for a fixed MRI.</i></li> <li>2. <i>The threshold in the policy should be changed to 500 weighted MRI procedures.</i></li> </ol> <p>Two documents were received regarding this petition, one in support by the petitioner, CFVHS, and one in opposition.</p> <p>In addition to the documents submitted for the petition two comments were received regarding <i>Policy TE-3</i>. The North Carolina Hospital Association submitted a comment in support of TE-3, but requested that the policy be used in a county where a fixed MRI has already been approved. Alliance Healthcare submitted a comment in opposition to <i>Policy TE-3</i> expressing concerns regarding limiting the type of qualified applicant, the potential for underutilized MRI scanners in community hospitals, and the level of the proposed threshold.</p> <p><b>CHAPTER 9, CARDIAC CATHETERIZATION:</b> Two petitions were received on this section. The first was from Rex Healthcare requesting an adjusted need determination in Wake County for two fixed cardiac catheterization machines. One letter of support and two letters of opposition were received. The petitioner, Rex Healthcare, also submitted two comments.</p> <p>The second petition was from Cape Fear Valley Health System for an adjusted need determination to remove the need for fixed cardiac catheterization equipment in Cumberland County. One document was received and that was from the petitioner, CFVHS.</p> <p><b>CHAPTER 9, LITHOTRIPSY:</b> We received one petition from Triangle Lithotripsy Corporation (TLC) for a special need for one additional mobile lithotripter statewide. One letter of support and one comment from TLC were received. Three documents of opposition were received.</p> <p><b>CHAPTER 9, GAMMA KNIFE:</b> No petitions or comments were received.</p>		

Agenda Items	Discussion/Action	Motions	Recommendations / Actions
	<p><b>CHAPTER 9, LINEAR ACCELERATORS:</b> No petitions or comments were received.</p>		
<p><b>Other Business</b></p>	<p>Ms. Frisone reviewed the updates to the certificate of need application schedule presented in Chapter 3. The Agency received one written and several verbal comments regarding the schedule. Certificate of Need clarified the application schedule in Chapter 3.</p> <p>Dr. Ullrich announced plans to form an Operating Room Workgroup with the goal of having recommendations in time to include in the <i>2018 SMFP</i>. Dr. Greene and Dr. Ullrich will co-chair the workgroup. Meetings will occur in Brown 104 at 10:00 AM on October 11, November 10, December 13, January 11, and February 15. Additional information will be available on the Healthcare Planning website. Volunteers and nominations will be accepted in writing to Paige Bennett. Dr. Ullrich indicated that he would like to receive nominations and volunteers by the end of September so that the membership can be announced at the next SHCC meeting.</p> <p>Dr. Ullrich reviewed the remaining meetings for 2016:</p> <ul style="list-style-type: none"> <li>• Long Term and Behavioral Health Committee, Friday, September 9, 2016</li> <li>• Acute Care Services Committee, Tuesday, September 13, 2016</li> <li>• Technology and Equipment Committee, Wednesday, September 14, 2016</li> </ul> <p>Dr. Ullrich reminded everyone these meeting will be held in the Brown Building in conference room 104, beginning at 10:00 am.</p> <p>The next full SHCC meeting is Wednesday, October 5 at 10:00 a.m.</p> <p>There was no other business.</p>		
<p><b>Adjournment</b></p>	<p>Dr. Ullrich asked for a motion to adjourn the meeting.</p>		<p>Motion Approved</p>