



Long-Term and Behavioral Health Committee Minutes - *DRAFT*

September 6, 2018

10:00 a.m. – 12 Noon

Brown Bldg. Room 104, Raleigh, N.C.

Healthcare Planning and Certificate of Need Section

Members Present: Dr. Jaylan Parikh, Acting Chair; Dr. Christopher Ullrich (<i>ex officio</i> , non-voting); Mr. James Martin, Ms. Glendora Brothers, Mr. Timothy Rogers, Ms. Quintana Stewart
Members Absent: Ms. Valarie Jarvis; Ms. Denise Michaud, Dr. T.J. Pulliam
Healthcare Planning Staff: Ms. Elizabeth Brown, Amy Craddock PhD, Andrea Emanuel PhD, Tom Dickson PhD, Ms. Kim Ruppel, Ms. Melinda Boyette
DHSR Staff Present: Ms. Martha Frisone
Attorney General’s Office: Mr. Derek Hunter

Agenda Items	Discussion/Action	Motions	Recommendations/ Actions
Welcome & Introductions	<p>Dr. Parikh welcomed members, staff and guests to the Long-Term and Behavioral Health (LTBH) Committee meeting.</p> <p>Dr. Parikh stated that the purpose of this meeting was to review petitions and comments received in response to the <i>Proposed 2019 State Medical Facilities Plan (SMFP)</i>. He stated the Committee would also review updated tables, reflecting changes since the <i>Proposed Plan</i> was published, in order to make the Committee’s recommendation to the State Health Coordinating Council for the <i>2019 SMFP</i>. Dr. Parikh noted the meeting as open to the public. However, discussions, deliberations and recommendations were to be limited to the members of the Long-Term & Behavioral Health Committee and staff, unless questions were specifically directed to someone in the audience.</p> <p>Dr. Parikh stated this was the third and final Long-Term & Behavioral Health Committee meeting scheduled for this year.</p> <p>Dr. Parikh asked the committee members and staff to introduce themselves.</p>		
Review of Executive Order No. 122: Extending the State Health Coordinating	<p>Dr. Parikh gave an overview of the procedures to observe before taking action at the meeting. Dr. Parikh inquired if anyone had a conflict, needed to declare that they would derive a benefit from any matter on the agenda, or intended to recuse</p>		

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Council & Executive Order No. 46: Ethical Standards for the State Health Coordinating Council	<p>themselves from voting on the matter. Dr. Parikh asked members to review the agenda and declare any conflicts on today’s agenda.</p> <ul style="list-style-type: none"> • Mr. James Martin recused himself from the Wake Forest Baptist Health Petition. 		
Approval of May 3, 2018 Minutes	A motion was made and seconded to accept the May 3, 2018 minutes.	Mr. Rogers Mr. Martin	Motion approved
Nursing Care Facilities – Chapter 10	<p>Dr. Parikh stated there was one petition submitted for Chapter 10, Nursing Care Facilities.</p> <p>Petitioner: Wake Forest Baptist Health The petitioner requested an adjusted need determination for 15 additional nursing facility beds in Davidson County in the <i>2019 SMFP</i>. The agency received three letters of support for this petition.</p> <p>Discussion: Mr. Martin asked if the adjusted bed need would be for clinically complex patients without a payer source. He noted that there is ample bed inventory in Davidson County for the “traditional” Medicare/ Medicaid nursing home patient as beds in that area are not full. Dr. Emanuel noted that in the Davidson County nursing facilities with a CMS rating of 3-stars or higher, the occupancy rates are at levels considered high according to the current methodology.</p> <p>Mr. Rogers asked if the petitioner planned on only serving medically complex patients. The chair directed the question to the Petitioner. The Petitioner indicated it was not their intent to only serve medically complex patients, but that these individuals are having a harder time getting beds so they are their focus. They did not, however, want to limit the beds to the medically complex, which is why it was not included in the petition.</p> <p>A motion was made to amend the language in the recommendation to indicate the 15 beds are to emphasize service to medically complex patients, and to define “medically complex patients” as stated in the 2016 CON that approved the</p>		

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	<p>would show a 30-bed need determination for Hyde County and no need determination for Tyrrell County in the 2019 SMFP.</p> <p>Data Updates Ms. Ruppel noted the data for adult care home beds has been updated since the proposed plan was published, resulting in changes to tables in Chapter 11. Pending SHCC approval of the petition described above, Hyde and Tyrrell Counties would be listed as separate service areas in all tables.</p> <p>Table 11A: For Table 11A, there are 162 additional beds with a total planning increase of 30 beds. The total planning inventory has increased to 42,263 adult care home beds.</p> <p>Table 11B: Table 11B is a new table for the 2019 SMFP based on the new methodology. It shows the calculation of bed use rates for each service area according to the new methodology. Either the county rate or the county rate plus one-half a standard deviation has been applied in the calculations for bed need for each service area. The resulting bed need is shown in the last column of Table 11C.</p> <p>Table 11C: Based on the recommendation to amend the 2019 SMFP to make Hyde and Tyrrell Counties two separate service area, there has been a change in need for Hyde County. Table 11C now shows a need for 30 beds in Hyde County. There are no additional changes in need.</p> <p>Table 11D: Table 11D has been updated to show need determinations for adult care home beds in Hyde, Macon, Mitchell, Pamlico, Polk and Warren Counties.</p> <p><i>Additional Changes to Chapter 11 for Committee Review</i></p> <ul style="list-style-type: none"> • In previous plans in Table 11A, there has been a column for pipeline beds. Beds listed in this column might have been settlement beds or beds that were licensed and undergoing development before the Agency began 		

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	<p>regulating adult care home beds. There are none of these pipeline beds left in the state. The pipeline column has been empty since the 2014 SMFP. The Agency would like to remove the column from Table 11A and remove text associated with the pipeline beds from the chapter narrative.</p> <ul style="list-style-type: none"> • Pending SHCC approval, the chapter narrative section describing changes from the previous plan will be updated to indicate Hyde and Tyrrell Counties as separate service areas. <p><u>Committee Recommendation:</u> A motion made and seconded to forward Chapter 11, Adult Care Homes, with approved changes to the SHCC.</p>	<p>Ms. Stewart Mr. Rogers</p>	<p>Motion approved</p>
<p>Home Health Services - Chapter 12</p>	<p>Dr. Parikh stated that there was one petition pertaining to a Medicare-certified home health office submitted for consideration.</p> <p><i>Petitioner: Touched by Caring Hands of North Carolina, LLC</i> The petitioner requests an adjusted need determination for one Medicare-certified home health agency or office in Randolph County.</p> <p><u>Recommendation:</u> The agency recommends denial of this Petition. The Committee voted to accept the Agency’s recommendation to deny the petition.</p> <p><i>Data Updates</i> Ms. Brown noted there were no updates to data. However, at the request of Mr. Rogers, staff revised Table 12A – Home Health Data by County of Patient Origin to create a table that is less confusing. Data in the newly revised Table 12A uses the same 4 age groups used in the Home Health standard methodology that are also used in Tables 12B and 12C.</p> <p><u>Committee Recommendation:</u> A motion was made and seconded to forward Chapter 12, Home Health Services, with approved changes to the SHCC.</p>	<p>Mr. Martin Mr. Rogers</p> <p>Mr. Rogers Mr. Martin</p>	<p>Motion approved</p> <p>Motion approved</p>
<p>Hospice Services - Chapter 13</p>	<p>Dr. Parikh stated there were no petitions pertaining to Hospice Services submitted for consideration.</p>		

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	<p>Dr. Parikh asked Ms. Brown if there were any updates related to Chapter 13.</p> <p>Data Updates Ms. Brown presented and reviewed a revised Table 13C: Hospice Inpatient Bed Need Projection. Columns M and O were renamed for clarity. A new formula was added to simplify need determinations. When there is no need a zero appears, and when there is a need the numeric value will appear bolded in Column M and Column O.</p> <p>Updated Table 13C shows a need determination for 9 hospice inpatient beds for Cumberland County. Also, a placeholder for 6 hospice inpatient beds that are CON Approved/License pending for Transitions Life Care in Wake County has been added.</p> <p>Updated Table 13D (1) reflects 24 licensed and 6 CON Approved/License Pending inpatient beds for Transitions LifeCare in Wake County</p> <p>Updated Table 13E shows 6 licensed and 6 CON Approved/License Pending hospice residential beds for Transitions LifeCare Hospitals in Wake County.</p> <p>Updated Table 13F now reflects 6 CON awarded and 6 operational hospice residential beds in Wake County.</p> <p>Committee Recommendation: A motion was made and seconded to forward Chapter 13, Hospice Home Care, with approved changes to the SHCC.</p>	<p>Ms. Brothers Mr. Martin</p>	<p>Motion approved</p>
<p>ESRD Dialysis Services – Chapter 14</p>	<p>Dr. Parikh stated there were no petitions related to ESRD Dialysis services.</p> <p>Ms. Brown stated that there were no other updates related to Chapter 14.</p> <p>Committee Recommendation: A motion made and seconded to forward Chapter 14, ESRD Dialysis Services, with approved changes to the SHCC.</p>	<p>Ms. Stewart Mr. Martin</p>	<p>Motion approved</p>
<p>Psychiatric Inpatient Services – Chapter 15</p>	<p>Dr. Parikh stated there were no petitions or comments received for Chapter 15, Psychiatric Inpatient Services.</p>		

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	<p><i>Data Updates</i></p> <p>Tables 15A and 15B In Table 15A, the inventory has been undated based on all available information. Placeholders have been removed for the 7 child/adolescent bed need determination in the 2017 SMFP in Sandhills Center and for the 27 child/adolescent bed need determination in the 2018 SMFP in Eastpointe because CON received no applications for them.</p> <p>Table 15B1 and 15C1 At this time, as calculated in Table 15B1 and listed in Table 15C1, there is a new need for 22 child/adolescent beds in Eastpointe. All other needs for child and adult psychiatric remain unchanged since the Proposed Plan.</p> <p><u>Committee Recommendation:</u> A motion made and seconded to forward Chapter 15, Psychiatric Inpatient Services, with approved changes to the SHCC.</p>	Ms. Brothers Mr. Rogers	Motion approved
<p>Substance Use Disorder Inpatient & Residential Services (Chemical Dependency Treatment Beds)- Chapter 16:</p>	<p>Dr. Parikh stated there was one petition submitted in relation to substance use disorder beds. The Agency received five letters of support for this petition.</p> <p><i>Petitioner: Addition Recovery Care Association (ARCA)</i></p> <p>This petition requests an adjusted need determination for 32 additional residential substance use disorder treatment beds in the Central Planning Region, specifically Forsyth County, in the 2019 SMFP. Although not explicitly stated, the petitioner appears to be requesting adult beds.</p> <p><u>Recommendation:</u> The Agency recommends approval of the request for an adjusted need determination for 32 adult substance use disorder treatment beds in the Central Region. Further, the Agency recommends that the need determination stipulate that certificate of need applicants must commit to establishing a contract with an LME-MCO to treat underserved populations (indigent and/or uninsured). The Committee voted to approve the Agency’s recommendation.</p>	Ms. Brothers Ms. Stewart	Motion approved

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	<p>Data Updates Tables 16A and 16B were updated to reflect refreshed Truven data. Data updates removed the need in the Proposed Plan for 3 adult beds in the Eastern Region.</p> <p>Committee Recommendation: A motion was made and seconded to forward Chapter 16, Substance Use Disorder Inpatient & Residential Services with approved changes to the SHCC.</p>	Mr. Rogers Mr. Martin	Motion approved
<p>Intermediate Care Facilities for Individuals with Intellectual Disabilities - Chapter 17</p>	<p>Dr. Parikh stated there were no petitions or comments related to Chapter 17.</p> <p>Dr. Parikh asked Dr. Emanuel if there were updates related to Chapter 17.</p> <p>Dr. Emanuel noted that there were no changes made to this chapter since the proposed plan.</p> <p>Committee Recommendation: A motion was made and seconded to forward Chapter 17, Intermediate Care Facilities for Individuals with Intellectual Disabilities, with approved changes to the SHCC.</p>	Mr. Rogers Ms. Brothers	Motion approved
<p>Other Business</p>	<p>Ongoing Updates to Proposed 2019 SMFP: Dr. Parikh noted that in order to complete their work on the 2019 SMFP, staff will need to continue to update various portions of the Plan as new data is received.</p> <p>Committee Recommendation to Staff for Chapters 10- 17: A motion was made and seconded to allow staff to update narratives, tables and need determinations for the publication of the recommended 2019 SMFP as new and corrected data is received.</p> <p>Dr. Parikh reminded members the last full SHCC meeting for 2018 will be held on October 3 beginning at 10:00 am in this room.</p>	Mr. Martin Ms. Brothers	Motion approved
<p>Adjournment</p>	<p>Dr. Parikh asked for a motion to adjourn the meeting.</p>	Mr. Rogers Mr. Martin	Motion approved