

Table 5B: Acute Care Bed Need Determination*

Service Area	Acute Care Bed Need Determination	Certificate of Need Application Deadline**	Certificate of Need Beginning Review Date
Anson	4	To be determined	To be determined
Brunswick	18	To be determined	To be determined
Buncombe/Graham/Madison/Yancey/Clay	92	To be determined	To be determined
Cabarrus	95	To be determined	To be determined
Cleveland	86	To be determined	To be determined
Durham	196	To be determined	To be determined
Forsyth/Yadkin	103	To be determined	To be determined
Henderson	19	To be determined	To be determined
Johnston	63	To be determined	To be determined
Lincoln	24	To be determined	To be determined
Mecklenburg	389	To be determined	To be determined
New Hanover	225	To be determined	To be determined
Orange	37	To be determined	To be determined
Union	93	To be determined	To be determined
Wake	239	To be determined	To be determined
It is determined that there is no need anywhere else in the state and no other reviews are scheduled.			

* Any person can apply for a CON to meet the need, not just the health service facility or facilities that generated the need.

** Application deadlines are absolute, pursuant to 10A NCAC 14C.0202(2). The filing deadline is 5:00 p.m. on the application deadline date.