



DFS Health Planning
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SHCC Public Hearing Comments

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The Association for Home and Hospice Care of North Carolina wants to emphasize the importance of having the most accurate and complete data possible in preparing the need projections in the State Medical Facilities Plan. The Association represents 99% of the home health agencies and 95% of the hospice programs in North Carolina. We are very concerned that over the past two years, there have been many errors and omissions in the data used in preliminary projections of need for additional home health agencies and hospice home care programs and hospice inpatient beds. Most or all of these mistakes could be avoided if the Association were allowed to see the data used in the need projections well in advance of the publication of the projections.

There are several examples of omitted and wrong information in the published draft 2012 Plan that could have been avoided. We brought many of these mistakes to the attention of Medical Facilities Planning after the projections were published and we were able to see the data and projections.

Recently our association and the Carolinas Center for Hospice Care met with Drexdal Pratt, the Director of the Division of Health Service Regulation, and key members of the Medical Facilities Planning staff to express our commitment to working with Medical Facilities Planning to ensure more reliable data used in these important need projections. We are hopeful that the DHSR staff will follow through on their commitment to work closer with the Association and the Carolinas Center and share information with us before it is published.

Last year it was most unfortunate that errors in the methodology were not discovered until after the Plan had been recommended by the full State Health Coordinating Council and adopted by the Governor. As a result of these errors, four allocated home health agencies had to be removed from the final 2011 State Medical Facilities Plan only days before applications were due to be submitted. Hundreds of thousands of dollars were wasted by home health providers who had hired consultants and expended resources in reliance upon need projections that disappeared because errors in the methodology were discovered after the Plan had become final.

We appreciate the opportunity to provide these comments on an extremely important topic --- the necessity for ensuring that the collection efforts and data compiled for use in home health and hospice methodologies be as accurate as possible. To reach this goal, however, it is imperative that DHSR follow through on its recent commitment to work closer with the Association for Home and Hospice Care and the Carolinas Center for Hospice Care to restore integrity to the health care planning process in North Carolina.