

MEETING MINUTES

Acute Care Services Committee Meeting

May 15, 2018

ATTENDEES

SHCC Members

Sandra Green (Committee Chair)
 Rep. Gale Adcock (NC House of Representatives)
 Christin Apperson (At-large)
 Allen Feezor (At-large)
 Ken Lewis (Health Insurance Industry)
 Robert McBride (At-large)
 Charul Haugan, MD (At-large)

Staff

Martha Frisone (CON)
 Elizabeth Brown (Planner)
 Tom Dixon (Database Manager)
 Amy Craddock (Planner)
 Bethany Burgeon (Attorney Gen Office)
 Andrea Emmanuel (Planner)
 Greg Yakoboski (CON)

PDA, Inc.

Jon Rodgers
 Kelly Ivey

Phone-Ins:

Christopher Ullrich (SHCC Chairman)

Absent:

William Floyd (Hospitals)

Issue	Discussion
Business Meeting Introduction	Dr. Greene opened the meeting, and reviewed Executive Orders related to ethical standards for the SHCC.
Recusals	None
Business Meeting – 2019 SMFP	A motion (G. Adcock) to accept the April 3, 2018 minutes was seconded (K. Lewis) and carried unopposed. Dr. Greene introduced Amy Craddock of Healthcare Planning; explained to committee that the tables provided for this section are not complete or accurate at this time; data is still being collected and scrubbed. Requested that the committee give planning staff flexibility to continue editing and making adjustments as needed.
Acute Care Hospital Beds, Chapter 5	Ms. Craddock reviewed data and methodology for Acute Care Hospital Beds. Current discrepancies in ACH bed data: <ul style="list-style-type: none"> • Truven data versus 2018 Hospital License Renewal Application data is review for differences of more / less than 5% • Swing bed data causes the most issue. To remedy difference, Ms., Craddock added a column to Table “Truven Health Analytics / Licensure Acute Care Days Comparison (2017 Data as of 04/18/2018)” that indicates the “Swing Beds Days of Care.” • The data discrepancies only become a real issue when a need is triggered unnecessarily, or when it prevents a need from being a triggered in an area of overutilization. <p>Hospitals with a significant discrepancy have been notified by NCHA and the Agency is working to remedy quickly.</p>

Issue	Discussion
	<p>Notes related to posted Table 5B: Need Determinations as of meeting date:</p> <ul style="list-style-type: none"> • Table 5A was corrected prior to the meeting based on data received 05/14/18. The updated data triggered a need in Forsyth County of 34 ACH beds not reflected on materials uploaded to the website prior to the meeting. • To-date, Mecklenburg County is showing a need for 152 ACH beds. The Agency is working with Truven and CHS to reconcile data discrepancy. Currently, both parties believe that some data has been double counted. It is expected that the actual need in the county is approximately 50-60 beds. <p>A motion (C. Apperson) to approve the chapter with the caveat that Agency staff can continue to update and correct data was seconded (C. Haugan) and carried unopposed.</p>
Operating Rooms, Chapter 6	<p>Ms. Craddock reviewed data and methodology for Operating Rooms.</p> <p>The Agency staff updated “Step 5b” in the methodology to reflect a more accurate language of how case times are utilized to determine need:</p> <p style="padding-left: 40px;"><i>b. For Groups 2 through 6, use the Adjusted Case Time (Step 3) to calculate the average (mean) inpatient and ambulatory case times for each group. If this average the Adjusted Case Time exceeds one standard deviation...</i></p> <p>Ms. Craddock again reiterated that the data in the provided tables was still changing and has errors. She asked those non-committee members in attendance that “look at this data closely and on a regular basis” to contact her immediately if any errors are found. Additionally the Agency is working with providers to ensure that data is captured and corrected.</p> <p>In 2017, a large number of ORs were triggered as need determinations for the 2018 SMFP. As a result, Martha Frisone, Chief, provided a cap on the needs to help smooth workload for the agency. A similar situation is projected for the 2019 SMFP. Ms. Frisone does not see a need to instate a cap this year.</p> <p>Ms. Craddock gave a brief update on the project status for the four Single Specialty Dental Only Ambulatory Surgical Facility Demonstration Projects underway in the state:</p> <ul style="list-style-type: none"> • Fayetteville is licensed and operational as of April 2018. • Raleigh is expected to be operational later this summer. • Charlotte has experienced a delay beyond the control of the applicant; City of Charlotte has been very “particular” about the building plans which has caused delay in construction. An expected date of operation was not available. • No update was given related to Greensboro. <p>A motion (C. Apperson) to approve the chapter with the caveat that Agency staff can continue to update and correct data was seconded (G. Adcock) and carried unopposed.</p>

Issue	Discussion
Other Acute Care Services, Chapter 7	<p>Ms. Craddock reviewed data tables for Acute Care Services. There is no need methodology for this chapter.</p> <p>A motion (K. Lewis) to approve the chapter with the caveat that Agency staff can continue to update and correct data was seconded (A. Freezor) and carried unopposed.</p>
Inpatient Rehabilitation Services, Chapter 8	<p>Ms. Craddock reviewed data tables for Inpatient Rehabilitation Services. The data is correct and no need has been triggered.</p> <p>A motion (C. Apperson) to approve the chapter with the caveat that Agency staff can continue to update and correct data was seconded (C. Haugan) and carried unopposed.</p>
Other Business	<p>A final motion (C. Apperson) to allow the Agency staff to continue correcting and updating all data in these chapters as needed for presentation to the Full SHCC was seconded (K. Lewis) and carried unopposed.</p>
Next Meetings	<p>The next Acute Care Services Committee meeting is scheduled for Tuesday, September 11, 2018 at 10:00 am.</p> <p>The next full SHCC meeting is scheduled for May 30, 2018 at 10 am.</p>

These minutes are believed to be an accurate account of the meeting held. If there is any understanding to the contrary, please contact the undersigned within seven (7) days of receipt of these minutes.

Submitted by:

Kelly Ivey
PDA, Inc.