

TEMPORARY RULE-MAKING FINDINGS OF NEED

[Authority G.S. 150B-21.1]

OAH USE ONLY	
VOLUME:	
ISSUE:	

1. Rule-Making Agency: N.C. Department of Health and Human Services/Director, DHSR
2. Rule citation & name: 10A NCAC 14C .2203 Performance Standards
3. Action: Adoption Amendment Repeal
4. Was this an Emergency Rule: Yes Effective date:
5. Provide dates for the following actions as applicable:
a. Proposed Temporary Rule submitted to OAH: 11/07/19
b. Proposed Temporary Rule published on the OAH website: 11/14/19
c. Public Hearing date: 12/05/19
d. Comment Period: 11/18/19 – 12/11/19
e. Notice pursuant to G.S. 150B-21.1(a3)(2): 11/07/19
f. Adoption by agency on: 01/07/20
g. Proposed effective date of temporary rule [if other than effective date established by G.S. 150B- 21.1(b) and G.S. 150B-21.3]: 02/01/20
h. Rule approved by RRC as a permanent rule [See G.S. 150B-21.3(b2)]: n/a
6. Reason for Temporary Action. Attach a copy of any cited law, regulation, or document necessary for the review.
□ A serious and unforeseen threat to the public health, safety or welfare. □ The effective date of a recent act of the General Assembly or of the U.S. Congress. Cite: Effective date: □ A recent change in federal or state budgetary policy. Effective date of change: □ A recent federal regulation. Cite: Effective date: □ A recent court order. Cite order: State Medical Facilities Plan. □ Other: Explain: Several subject matters are addressed in the State Medical Facilities Plan (SMEP). Changes were made to the
Explain: Several subject matters are addressed in the State Medical Facilities Plan (SMFP). Changes were made to the chapter in the 2020 SMFP addressing the End-Stage Renal Disease Dialysis Facilities need methodology. Revisions to an existing Certificate of Need rule are required to compliment or to be made consistent with the SMFP signed by the governor on December 4, 2019. The effective date of the 2020 SMFP is January 1, 2020.

rule is required? The change to the existing Certificate of Need (CON) perf stage renal disease services is required to compliment or to (SMFP) that will become effective January 1, 2020. The emethodology underwent substantial changes by means of i Coordinating Council (SHCC) and held by the agency. As ceased following the July 2019 issue. In addition, approved renal disease dialysis facilities need determinations and means of the SMFP that was subsequently signed for approval methodology changes in the SMFP and is being adopted unstandards reflective of the need methodology changes shall	a result, the development of the Semiannual Dialysis Report of for inclusion in the 2020 SMFP by the SHCC, the end-stage ethodologies were relocated from Chapter 14 to a revised Chapter by the governor on December 4, 2019. This rule reflects the inder temporary procedures so that correct performance I be used by 2020 CON applicants for end-stage renal disease for an applicant's compliance with a CON application submission
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8. Rule establishes or increases a fee? (See G.S. 12-3.1)	
Yes Agency submitted request for consultation on: Consultation not required. Cite authority:	
⊠ No	
9. Rule-making Coordinator: Nadine Pfeiffer	10. Signature of Agency Head*:
Phone: 919-855-3811	or ale tourse
E-Mail: Nadine.pfeiffer@dhhs.nc.gov	* If this function has been detegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form.
Agency contact, if any: Martha Frisone, Chief	Typed Name: Mark Payne
Phone: 919-855-3879	Title: Director, Division of Health Service Regulation
E-Mail: martha.frisone@dhhs.nc.gov	E-Mail: mark.payne@dhhs.nc.gov
RULES REVIEW COMMISSION USE ONLY	
Action taken:	submitted for RRC Review:
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Date returned to agency:	Litropieras de antiques de la companya de la compan
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TEMPORARY RULE REQUEST FOR TECHNICAL CHANGE

AGENCY: DHHS/Division of Health Service Regulation

RULE CITATION: 10A NCAC 14C .2203

DEADLINE FOR RECEIPT: January 10, 2020

<u>PLEASE NOTE:</u> This request may extend to several pages. Please be sure you have reached the end of the document.

The Rules Review Commission staff has completed its review of this Rule prior to the Commission's next meeting. The Commission has not yet reviewed this Rule and therefore there has not been a determination as to whether the Rule will be approved. You may call our office to inquire concerning the staff recommendation.

In reviewing this Rule, the staff recommends the following technical changes be made:

Does this Rule apply to kidney disease treatment centers or dialysis facilities at academic medical center teaching hospitals? See G.S. 131E-183(b).

Please retype the rule accordingly and resubmit it to our office at 1711 New Hope Church Road, Raleigh, North Carolina 27609.

1	10A NCAC 140	2203 is amended under temp	orary procedures as follows:		
2					
3	10A NCAC 14	.2203 PERFORMANCE	STANDARDS		
4	(a) An application	proposing to establish a new	End Stage Renal Disease facility shall document the need for at least		
5	10 stations base	on utilization of 3.2 patient	s per station per week as of the end of the first operating year of the		
6	facility, with the exception that the performance standard shall be waived for a need in the State Medical Facilitie				
7	Plan that is based on an adjusted need determination. An applicant proposing to establish a new kidney disease				
8	treatment center or dialysis facility shall document the need for at least 10 dialysis stations based on utilization of 2.5				
9	in-center patien	per station per week as of th	e end of the first 12 months of operation following certification of the		
10	facility. An app	eant may document the need	for less than 10 stations if the application is submitted in response to an		
11	adjusted need d	ermination in the State Medic	cal Facilities Plan for less than 10 stations.		
12	(b) An applicar	proposing to increase the nur	nber of dialysis stations in an existing End Stage Renal Disease facility		
13	or one that was	ot operational prior to the beg	ginning of the review period but which had been issued a certificate of		
14	need shall docu	ent the need for the additiona	l stations based on utilization of 3.2 patients per station per week as of		
15	the end of the fi	t operating year of the addition	onal stations. An applicant proposing to increase the number of dialysis		
16	stations in:				
17	<u>(1)</u>	an existing dialysis facility;	<u>or</u>		
18	<u>(2)</u>	a dialysis facility that is not o	operational as of the date the certificate of need application is submitted		
19		but has been issued a certific	eate of need;		
20	shall document the need for the total number of dialysis stations in the facility based on 2.8 in-center patients per				
21	station per weel	as of the end of the first 12 m	onths of operation following certification of the additional stations.		
22	(c) An applicar	shall provide all assumptions	, including the methodology by which patient utilization is projected.		
23					
24	History Note:	Authority G.S. 131E-177(1);	131E-183(b);		
25		Temporary Adoption Eff. Jan	nuary 1, 2003; January 1, 2002;		
26	6 Eff. April 1, 2003;				
27		Amended Eff. August 1, 2004	<i>1</i> ;		
28	Temporary Amendment Eff. January 1, 2005;				
29	Amended Eff. November 1, 2005;				
30		Temporary Amendment Eff.	February 1, 2006;		
31		Amended Eff. November 1, 2	006;		
32		Temporary Amendment Eff.	February 1, 2010;		
33		Amended Eff. November 1, 2	010. <u>2010:</u>		
34		Temporary Amendment Eff.	<u>February 1, 2020.</u>		

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