

PUBLIC COMMENT TO SUPPORT REMOVAL OF THE NEED DETERMINATION FOR HOSPICE HOME CARE OFFICE NEED FOR DAVIDSON COUNTY

Public Commenter:

Hospice of the Piedmont, Inc.
1801 Westchester Drive
High Point, NC 27262

Leslie O. Kalinowski, President and CEO
(336) 889-8446
lkalinowski@hospice-careconnection.org

DFS Health Planning
RECEIVED

JUL 25 2008

Medical Facilities
PLANNING SECTION

Public Comment:

Hospice of the Piedmont, Inc. is making a public comment in opposition to the need determination for a hospice home care office need for Davidson County. The reason for our comment is three-fold. The Davidson County Need determination is the result of a one-time data anomaly; there are ten offices or agencies already serving Davidson County; and the hospice home care methodology task force has yet to convene and study the methodology.

1. The Davidson County Need is the result of a one time Data Anomaly

The need determination in the 2009 SMFP is the result of a one-year data trend. This may indicate either a data anomaly or a problem with the data reporting for one of the providers. Because the need methodology relies on self-reported deaths served by hospice, if in a given year the number of deaths is underreported, it has the effect of stimulating the need for additional hospice home care offices. In the past four years worth of SMFPs, the number of total deaths in Davidson County has increased as have the total deaths served by hospice. It is only in the 2009 SMFP that the total deaths served have decreased. The magnitude of the decrease is 10% despite a continued increase in number of deaths. It is highly unlikely the decrease for one year reflects the long-term trend. The SHCC should study the trend in Davidson County for another year to avoid creating an additional home care office based on one years worth of data.

The following table depicts the number of deaths, total deaths served by hospice and the deficit for each of the past four SMFPs.

Selected Data Point	2006 SMFP	2007 SMFP	2008 SMFP	Proposed 2009 SMFP
Number of Deaths	1456	1376	1500	1511
Total Deaths Served	303	373	406	361

Deficit	(65)	(56)	(50)	(86)
Need Determination	No	No	No	1 Office

2. Davidson County is well served by existing providers

There are hospice home care offices or agencies that are serving residents of Davidson County according to the proposed 2009 SMFP. All are in Davidson or within a contiguous county. New programs (Liberty Hospice and Hospice Home at High Point) had just begun operating in the data collection period (October 1, 2006 to September 30, 2007) and new programs will become available to residents in Davidson County in 2009 (Hospice of Davidson inpatient facility and additional beds at the Kate B Reynolds Facility). It is difficult to imagine with this many service providers and new programs that an eleventh hospice home agency is necessary.

The following table lists the agencies or offices serving residents of Davidson County.

Agencies or Offices Serving Residents of Davidson County

Agency or Office	County
Continuum Home Care and Hospice	Onslow
Gordon Hospice House	Iredell
Hospice & Palliative Care Center	Rowan
Hospice & Palliative Care Center	Forsyth
Hospice and Palliative Care of Greensboro	Guilford
Hospice of Davidson County, Inc	Davidson
Hospice of Randolph County, Inc	Randolph
Hospice of the Piedmont, Inc	Guilford
Liberty Home Care and Hospice	Davidson
Rowan Regional Home Health & Hospice	Rowan
Total	

Source: Proposed 2009 SMFP

3. The Task Force to study the hospice home care methodology should have appropriate time to review

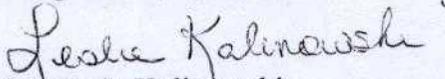
Finally, the Carolinas Center for Hospice and End of Life Care petitioned the SHCC to appoint a task force to study the hospice home care methodology for the 2010 SMFP and included recommendations for changes in the methodology for the 2009 SMFP. To my knowledge, the task force has not yet been named. Given the challenges with the existing methodology highlighted in the Carolinas Center petition, it would be prudent to suspend

need methodologies in the 2009 SMFP for counties that have just incrementally triggered a need until the task force can conduct further study.

In closing, we do not agree with the need determination in the 2009 SMFP for a hospice home care office in Davidson County and recommend that the SHCC remove the need from the final 2009 SMFP. We are concerned that the need is the result of a one year data anomaly, the county is already served by 10 home care offices or agencies and that the task force for hospice home care methodology has not met or had time to review the need determination. If there is truly a need, the data in the 2010 SMFP will support the need once again and there will be an opportunity next year to evaluate the need after the task force has had appropriate time to review the methodology.

Thank you for your time and attention to this matter. Please do not hesitate to contact me with any questions or concerns.

Respectfully submitted,



Leslie O. Kalinowski
President and CEO

need methodology in the 2009 SAMP for counties that have just tentatively triggered
a need until the task force can conduct further study.

In addition, we do not agree with the need determination in the 2009 SAMP for a hospice
home care office in Davidson County and recommend that the FHC remove the need
from the final 2009 SAMP. We are concerned that the need is the result of a one-on-one
data analysis; the county is already served by 10 home care offices or agencies and that
the task force for hospice home care methodology has not yet had time to review the
need determination. If there is truly a need, inclusion in the 2010 SAMP will support the
need one year and there will be an opportunity next year to evaluate the need after the
task force has had appropriate time to review the methodology.

I thank you for your time and attention to this matter. Please do not hesitate to contact me
with any questions or concerns.

Respectfully submitted,


Leslie O. Kishore
President and CEO