Hospice of Alexander CON Application Denied

The NC Division of Health Services has denied approval of the Certificate of Need (CON) application for three (3) inpatient hospice beds for Alexander County filed by Hospice & Home Care of Alexander County, Inc. on May 17, 2010. Hospice of Alexander County has provided quality hospice care in the home since its inception in 1985, and filed the CON application, which would have allowed expansion of local hospice services by providing an inpatient hospice facility.

REASONS STATED FOR DENIAL
The predominant rationale cited in the state’s decision for denial was the large percentage of county residents utilizing hospice services in Catawba and Iredell counties. The application considered utilization statistics from The Carolinas Center for Hospice & End of Life Care for 2004 to 2009, which showed a sharp decline in use of local hospice services during that time period. The findings report from the NC Division of Health Services stated that “the days of care provided by Hospice & Home Care of Alexander County, Inc. to Alexander County residents in 2009 were fewer than the days of care provided to Alexander County residents in 2004. However, the compound annual growth rates (CAGR) for days of care provided to Alexander County residents by Hospice of Iredell for 2004-2009 was 87.5%. In 2009, Hospice of Iredell served more hospice deaths and admitted more hospice patients from Alexander County patients than did Hospice of Alexander County. Similarly, the CAGR for days of care served to Alexander County residents by Hospice of Catawba County showed an increasing trend in utilization with a CAGR of 60.35% from 2004-2009. In 2008 and 2009, Hospice of Catawba County served more deaths and provided more admissions to Alexander County residents than Hospice of Alexander County. In fact, in 2008 and 2009, days of care provided to Alexander County residents by Hospice of Catawba County exceeded the days of care provided by Hospice of Alexander County by 24% and 25% respectively.”

The alarming decline in use of local hospice services has become a concern for the county. Many patients assume that they are automatically referred to the hospice in their home county...or that all hospice organizations are “connected”. Often, when making a referral for hospice care, physicians refer patients to the hospice of the county in which they practice. Since the closing of Alexander County’s only hospital, residents must go to neighboring counties for inpatient medical care. All of these issues, along with increasingly aggressive recruitment of patients by neighboring hospice organizations, combine to lead to a loss of many of Alexander County’s potential hospice patients. Statistics show that of Alexander County residents admitted to hospice care in 2006 through 2009, the percentage served by Hospice of Alexander County fell from 58% in 2006 to 27% in 2009. However, current data shows promise as more residents seem to be turning to their local hospice provider. Statistics compiled by The Carolinas Center for Hospice & End of Life Care consider information from October 1 to September 30. Their 2009 report showed 47 admissions...
(with 33 deaths) to Hospice of Alexander County, while admissions for this year as of September 8, 2010 are 62 (with 48 deaths). “The increase of local utilization is very encouraging,” says Tonya Roland-RN, CHPN, Executive Director of Hospice of Alexander County. “We believe that residents of Alexander County receive a higher quantity, as well as quality, of end of life care when they utilize their local hospice. Nurses and social workers are closer…allowing more time with patients…and a faster response time.”

CON PROCESS
The state’s CON process is designed to contain health care costs by limiting unnecessary duplication of health care services. The number of inpatient hospice beds available to each county in North Carolina is regulated by the State Medical Facilities Plan, an annual study that projects what medical care facilities will be needed in the coming years. When Hospice of Alexander County was established 25 years ago, state planners identified a need for only one hospice inpatient bed for the county. At that time, due to the financial infeasibility of operating a one-bed facility, Hospice of Alexander County contracted the bed to Caldwell County Hospice with a provision for use when needed. Hospice of Alexander County also established contractual relationships with other facilities to provide inpatient care when needed.

The State’s current need determination methodology is based on a six-bed deficit threshold for single counties to trigger a need for inpatient hospice beds. However, the State Health Coordinating Council “will consider petitions for adjusted needs determinations” in specific circumstances. In late 2009, the proposed 2010 State Medical Facilities Plan still showed no need determination for hospice inpatient beds for Alexander County. At that time, a petition was submitted by Palliative CareCenter & Hospice of Catawba Valley, Inc. (PCHCV) for an adjusted need determination in Alexander County. The petition requested a special needs consideration providing three (3) inpatient beds for Alexander County under the control of PCHCV.

Approval of this petition provided the opportunity to submit a Certificate of Need (CON) application during 2010 to develop three (3) hospice inpatient beds in Alexander County. Both PCHCV and Hospice of Alexander County began the CON application process in early 2010 to obtain these beds. PCHCV began the CON process with intentions of utilizing these three beds, if awarded, at Valley Nursing Center in Taylorsville, NC. Hospice of Alexander County began the CON process with the intentions of establishing a freestanding 3-bed inpatient facility if awarded the CON. Although they initiated the application process, PCHCV did not file a CON application by the May 17, 2010 deadline. It has been stated that “construction issues” with Valley Nursing Center were the reason behind PCHCV’s suspension of their application.

Hospice of Alexander County filed their CON application with overwhelming community support, including almost 3,000 Letters of Support from individuals, families, churches, businesses, civic organizations, government agencies and officials. In addition to Letters of Support, evidence was presented showing financial viability. While Medicare provides benefits for hospice services, including inpatient care, these benefits do not cover the full cost of providing these beds. Also included with the application were financial donor pledges from individuals and organizations to offset the remaining deficit. “We are extremely grateful to the residents, organizations, and businesses of Alexander County for their outpouring of support to bring this resource to our county,” says Tonya Roland-RN, CHPN, Executive Director. Hospice of Alexander County received approximately $161,000 in one-time donations and $83,000 in scheduled pledges. Financial donations designated for an inpatient facility are available for reimbursement. Hospice of Alexander County will contact these donors regarding this matter. Since fulfillment of donor pledges was contingent upon approval of the CON application, pledges are no longer binding. If you would like more information, contact Hospice & Home Care of Alexander County at 828-632-5026.
WHAT DOES THIS MEAN NOW?
Since Hospice of Alexander County was the only applicant for the three (3) inpatient hospice beds for Alexander County, and their application has been denied, no one will be awarded inpatient hospice beds in the county this year. Another special needs petition and CON application process would have to be initiated in the State Medical Facilities Plan (SMFP). At this time there is no indication of such an inclusion in the 2011 SMFP.

Hospice & Home Care of Alexander County, Inc. will continue to provide the highest caliber of end of life care and services from a foundation of loving and educated medical professionals and volunteers dedicated to quality hospice care to the residents of our county. Given the choice, most people facing a terminal illness prefer to receive end of life care in the comfort of their own home. While the Hospice team does everything possible to make that happen, there are times when a patient needs more care than can be managed at home, or symptoms require more intense management than family caregivers can provide. For these instances, Hospice of Alexander County provides several options for inpatient care through contracted relationships with other facilities. If the inpatient options available through Hospice of Alexander County are occupied, or are not the best option for the patient, patients may be transferred to a facility with the resources needed. Transferring a patient is a simple process, and the continuity of care will not be compromised.

While Hospice of Alexander County met numerous criteria in the application process, the declining utilization of local services was cited as a major issue. “This is kind of a ‘catch-22’…many residents say they choose neighboring hospice organizations due to the absence of an inpatient facility in Alexander, but would prefer to stay in Alexander County,” says Brook Biddy, Hospice Board President. “Continuing to choose our local hospice is one of the best ways to increase our prospects of any future possibilities for an inpatient facility in our county.”

AGAIN...THANK YOU, ALEXANDER COUNTY!
“Hospice & Home Care of Alexander County, Inc., along with our Board of Directors, would like to extend our most sincere gratitude to the residents, organizations and businesses of Alexander County for your overwhelming support in this effort!” says Lisa Caviness, Public Relations/Marketing Coordinator for Hospice of Alexander County. “We are proud to be a part of Alexander County.”

Receive updates and discuss the issues by joining the Hospice & Home Care of Alexander County FaceBook group. For more information about hospice, transitions care, and advance care planning in Alexander County, contact us as 828.632.5026 or visit www.hospiceandhomecarealexander.org.