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May 27, 2016

ental Surgery Centers 15 Valleygate Drive ayetteville, NC 28304

Ms. Martha Frisone, Assistant Chief Mr. Greg Yakabowski, Project Analyst Healthcare Planning and Certificate of Need Section Division of Health Service Regulation 2704 Mail Service Center Raleigh, North Carolina 27699-2704

Re:

Comments on Competing Application for a Certificate of Need for a Demonstration Dental Ambulatory Surgical Facility in Cumberland County, Health Service Area V and VI; CON Project ID Numbers:

Q011176-16: Valleygate Dental Surgery Center of Fayetteville Q-011171-16, Surgical Center for Dental Professionals of Greenville

Dear Mr. Yakabowski and Ms. Frisone:

On behalf of Valleygate Dental Surgery Center of Fayetteville, LLC, Project ID M-011176-16, thank you for the opportunity to comment on the above referenced applications for the development of a dental ambulatory surgical facility in the Dental Demonstration Project Region 3.

CONTEXT

Two applications were submitted for the need identified in the 2016 State Medical Facilities Plan for one demonstration single specialty dental surgery facility in Region 3. Because the Plan and statute permit only one award, the decision will have a significant impact on access for all of eastern and southeastern North Carolina. The quality of dental services, cost of services, need for proposed services, accessibility to underserved populations, and location are critical selection elements. The Dental Single Specialty Ambulatory Surgical Facility Demonstration Project was created in response to petitions from Knowles, Smith, and Associates and Triangle Implant Center that documented the need for accessible operating rooms for dentists and oral surgeons. We believe that the application submitted by Valleygate Dental Surgery Center of Fayetteville more closely matches the spirit and intent of the demonstration project. Moreover, the application submitted by Valleygate is the only application that meets CON review criteria as an approvable application.

We appreciate the complexity of reviewing competitive applications, and the careful thought it requires on the part of Agency staff. We request that the CON Section give careful consideration to not only the standard competitive criteria that have been used in past competitive reviews of operating room applications, but also to other critical factors that we believe affect quality, value and access in this important project.

Critical Differences between Surgical Center for Dental Professionals and Valleygate Dental Surgery Center Proposals

To properly compare the two applications, it is important to understand the fundamental differences that separate Valleygate Dental Surgical Center of Fayetteville's (Valleygate) proposal from the Surgical Center for Dental Professionals of Greenville's (SCDPG). Valleygate is proposing to credential *only* dentists who possess the required training to operate on sedated and anesthetized patients. Valleygate identifies having a NC sedation permit or having completed a postgraduate residency as evidence of meeting this criterion. SCDPG proposes to credential dentists interested in performing surgical cases in its proposed facility based on its own credentialing system, regardless of their formal training.

Furthermore, the proposed patient mix for Valleygate is quite different from the patient mix proposed for SCDPG. Valleygate is proposing to care for patients with more complex needs, and potentially higher anesthesia levels. As indicated in its application, SCDPG proposes to serve approximately 1,000 patients whose treatment needs are identical to those who were treated efficiently and safety in Triangle Implant Surgery's Wilson dental offices. Valleygate proposes to treat only cases that truly warrant the services of a surgical center. To make the distinction, Valleygate relies on criteria set by external agencies like Medicaid and Blue Cross.

Another noteworthy difference between the two is facility size relative to the number of operating and procedure rooms. For two operating rooms and two procedure rooms, SCDPG is proposing to build 9,868 square feet. Valleygate is proposing 10,708 square feet. Valleygate's plans include 840 more square feet for patient support, particularly for recovery.

Another major difference is anesthesia coverage. Though the narrative suggests the facility will have general anesthesia or sedation coverage for each procedure, the SCDPG application provides funding for just over one FTE anesthesiologist and includes no anesthesia equipment. Valleygate proposes funding for more than four FTE anesthesia professionals, sufficient to have either an anesthesiologist or a Certified Registered Nurse Anesthetist present for all operating and procedure room cases. Valleygate capital costs include anesthesia machines for both operating rooms and procedure rooms.

¹ SCDP proposes to restrict patients to American Society of Anesthesia (ASA) level I and II; Valleygate will accommodate ASA Levels, I, II, III and, in rare cases, ASA IV. The higher level is more complex.

WHY APPROVE VALLEYGATE DENTAL SURGERY CENTER OF FAYETTEVILLE, LLC

Competitive Overview

Based on competitive criteria alone, the application from Valleygate is easily preferable to SCDPG. Historically, the Agency has compared competitive operating rooms on five issues:

- Geographic Accessibility
- Access to Underserved Groups
- Demonstration of Need
- Revenues
- Operating Expenses

The application from Valleygate is preferable in each of these metrics. Moreover, in other comparison metrics, which are important to this review, Valleygate is also preferable. Table 1 below includes three additional metrics:

- 1. Number of Pediatric Cases: As demonstrated in both the 2015 KSA petition and the Valleygate CON application, and noted in many of the letters in both applications, the needs of pediatric dental surgical patients were a major factor in the Agency's recognition of need for the demonstration projects. Therefore, applications proposing to serve a greater number of pediatric cases served should be preferred.
- 2. <u>Management Fee as a Percent of Total Net Revenue</u>: The proposed management services companies for both applicants share ownership with the proposed dental surgery centers. Each applicant includes a management fee, which is represented as a percent of total net revenue. Regardless of ownership, lower management fees increase the value of the proposed project by reducing its operating expenses. Thus, lower management fee percentages are preferred.
- 3. Percent Military/Tricare: Applicants that provide access to a diverse group of patients should be preferable. In addition to Medicare, Charity, Medicaid, and commercial payer beneficiaries, military and military families represent an important group in Eastern North Carolina. North Carolina has more than 114,000 active duty military, one of the largest concentrations in the country. All of the state's major military bases are in Eastern North Carolina, Demonstration Region 3. As such, applicants who project to see a larger percentage of military patients should be preferred.

We believe that the following summary presents a strong and reasonable comparison of the two applicants with regard to value elements. It the gives the applicant with the preferable metric a score of "1," and gives the other a zero, unless the scores are identical, then both score a "1."

² Governing the States and Localities, Military Active-Duty Personnel, Civilians by state, data for August 30, 2013, provided by Defense Manpower Data Center, accessed on line May 2016. http://www.governing.com/gov-data/military-civilian-active-duty-employee-workforce-numbers-by-state.html

Table 1 - Comparison Scores of Two Applications

Measure	Valleygate Dental Surgery Center of Fayetteville	Surgical Center for Dental Professionals of Greenville
Geographic Accessibility	1	0
Medicare, Medicaid, Charity Percent of Gross	1	0
Demonstration of Need	1	0
Gross Revenue per Case	1	0
Net Patient Revenue per Case	1	. 0
Total Revenue per Case	1	0
Total Expense per Case	1	0 .
Number of Pediatric Cases (Under 21)	1	0
Mgmt Fee as Percent of Total Rev. (less Staffing)	1	.0
Percent Military	1	. 0
Total	10	0

Comparison Metric Details

Table 2 below shows the actual results for each metric. Notes below the table explain the ones that are not straightforward calculations.

Table 2 - Relative Score on Critical Value Measures

Notes	Measure	Valleygate Dental Surgery Center of Fayetteville	Surgical Center for Dental Professionals of Greenville
a.	Geographic Accessibility	16,173	6,988
	Medicare, Medicaid, Charity Percent of Gross	93.80%	68%
b.	Demonstration of Need	Yes	No
	Gross Revenue per Case Year 03	\$1,260	\$1,960
,	Net Patient Revenue per Case Year 03	\$505	\$1,018
c.	Total Revenue per Case Year 03	\$676	\$1,211
d.	Total Expense per Case Year 03	\$600	\$1098
	Number of Pediatric Cases (Under 21) Year 03	3,473	938
e.	Mgmt Fee as Percent of Total Rev. (less Staffing)	4%	6%
f.	Percent Military	1%	0%

Notes:

a. This measure represents the number of Medicaid eligible children under age nine who received dental services in the top two counties within applicant's proposed service area. Need among children who qualify for Medicaid exists throughout Region 3; however, more need exists in Cumberland and Robeson counties than anywhere else in Region 3. As a result, Valleygate's proposed location in Cumberland County is preferable. As demonstrated in Valleygate's application, pediatric Medicaid beneficiaries, especially those under age nine, are a major population who need the demonstration projects. Using data obtained from NC Division of Medical Assistance, Table 3 below compares the number of estimated Medicaid beneficiaries under nine receiving dental services in each applicant's top two counties of origin. Similar data in SCDPG application pages 96 and 97 tell the same story. Although Valleygate proposes to serve a geography that includes much more than Cumberland and Robeson counties, this metric shows clear differences in the impact of the two locations on access by children eligible for Medicaid.

Table 3 – Number of Medicaid Beneficiaries Under Age Nine Receiving Dental Treatment in the Two Counties With the Largest Number of Patients Served

Applicant	Top Two Origin Counties	Medicaid Beneficiaries Under Age 9 Receiving Dental Treatment Services
Valleygate	Cumberland and Robeson	16,173
SOOP	Pitt and Wilson	6,988

Source: DMA Data for 2014

b. The SCDPG application suggests that all oral surgery that is done under sedation is appropriate to be completed in an ambulatory surgical center (ASC). Yet the application presents only the owner's statements to support the case that all oral surgery under sedation should be done in an ASC. SCDPG also includes pediatric and general dentistry patients in its ASC utilization without describing the need of the population to be served for the service. In fact, the application states in Section III (p98) "Pediatric patients as a whole, particularly those treated by pediatric dentists, do not necessarily represent an underserved group with regard to access to operating rooms."

Yet the SCDPG application clearly proposes to serve pediatric patients. As a result, SCDPG's application does not adequately demonstrate the need of the population to be served for its proposed services. See detailed comments on Criterion 3 for SCDPG in Attachment A.

We are aware that granting of privileges may not be an issue (hospitals and ASC are not necessarily denying privileges to pediatric dentists) but pediatric dentists are having a great deal of difficulty obtaining block time in operating rooms and managing the logistics of H&P's in hospitals. This is the obstacle to patient care delivery.

- c. Both Valleygate and SCDPG included some revenue in "Other Revenue". Valleygate includes Anesthesia revenue in Other Revenue. SDCPG includes crowns, fixtures, and x-rays in its pro formas. The Agency has historically used the metric, Net Patient Revenue as a comparative metric. However, in this case, because of the unique role of "Other Revenue" in these applications, Total Revenue per Procedure would produce a better comparison. Regardless, Valleygate is lower on both metrics.
- d. The calculated Total Expense per Case for SCDPG is \$988. However, the amount is understated. SCDPG proforma expenses are inadequate for its proposed anesthesiologist coverage. The application either drastically understated costs or the applicant did not intend the statement that every case would have anesthesiologist coverage. If anesthesiologist coverage were increased to match the amount necessary to cover every procedure in SCDPG with an Anesthesiologist, the additional expense could be \$330,457 in Year 03 or \$110 per case (\$330,457 / 3,016 cases = \$110). This would increase the Total Expense per Case from \$988, as presented in the application, to \$1,098 (\$988 + \$110 = \$1,098). For detailed calculations, see comments on Criterion 5 in Attachment A.

- e. Per SCDPG's pro forma assumptions, management fees charged by Papillion Mgmt. will be the greater of \$950,000 or 22 percent of Net Revenue. SCDPG's pro formas also state that staffing is included in management fees. Thus to evaluate the true management cost, we used the staffing data provided in Table VII.2 and Exhibit C in Exhibit 2 of the SCDPG application to calculate SCDPG direct care staffing costs and deducted them from the total management expenses to obtain a number comparable to the Valleygate fee.
- f. TriCare benefits apply to military, dependents and retirees. Valleygate is proposing to serve these patients, while SCDPG is not proposing to serve any Tricare or military beneficiaries. Unfortunately many of the children of active military also fall into the low income group.

Cumberland, Hoke, Harnett and Moore Counties are home to Fort Bragg, one of the largest United States Army installations in the world. A 2015 article in the Fayetteville Observer quoted Roger Vickers, Fort Bragg's Army Stationing and Installation Plan Manager, saying the post's total population was just under 141,000 of whom just over 53,660 were military personnel.³

Non-Conforming SCDPG Application

The application submitted by SCDPG presents a service that does not stand up to numerous CON review criteria. In many cases, it contains misleading information. We encourage the CON Section to consider, not only these comments, but also letters submitted and statements made by members of the public, many of whom recognize that SCDPG's proposal has the potential to substantially, and unnecessarily, increase costs.

In addition to a lower comparative rating than Valleygate, SCDPG's application should be found non-conforming with Criterion 1, 3, 3a, 4, 5, 7, 12, 13c, and 18a. We believe the CON Section should pay particular attention to these review criteria and to SCDPG's pro forma assumptions. For example, its assumption that all dental and oral procedures under sedation would be reimbursed an ASC "facility fee" when the overwhelming majority of those procedures are presently completed safely in dental offices should warrant particular scrutiny.

Detailed discussions in the Attachments to this letter elaborate reasons why the dental surgery center certificate of need should not be awarded to the Surgical Center for Dental Professionals of Greenville, LLC.

³ http://www.fayobserver.com/news/local/fort-bragg-to-see-small-decline-in-population-over-next/article_f8b309b7-207d-5fa0-b017-070158f83e66.html

CONCLUSION

Based on all the facts presented in both applications, as well as other facts discussed in these comments and attachments, it is clear that the application filed by Valleygate Dental Surgery Centers of Fayetteville, LLC should be approved. Unlike the application filed by Surgical Center for Dental Professionals of Greenville, LLC, Valleygate's application:

- Conforms to all the statutory review criteria,
- Proposes to grant privileges to dentists who have undergone residency or other extensive training,
- Proposes delivery and maintenance of sedation and anesthesia by qualified professionals including supervised CRNAs,
- Provides reasonable assumptions regarding payer reimbursement,
- Demonstrates adequate capital and financial viability,
- Proposes to serve only those patients who need procedures in a licensed ambulatory surgery facility,
- Saves patients, payer, and taxpayer dollars by proposing to move surgical procedures from hospitals to a more cost effective ASC setting and by adding preventive care training aimed at reducing the incidence of severe dental caries in children,
- Does not propose unnecessary additional cost to patients, payers, taxpayers by moving procedures from offices to a more expensive ASC setting,
- Proposes to provide more services to Medicaid beneficiaries,
- Demonstrates a commitment to quality and patient safety,
- Proposes the most cost effective solution to improving access to operating rooms for dentists, oral surgeons, and their patients, and
- Demonstrates willingness to serve military beneficiaries

We have included additional letters of support in Attachments G and H of this document for the Agency's convenience. Thank you for your time and consideration. Please do not hesitate to call me if you have any questions.

Sincerely,

Virginia Jones

Chief Operating Officer

Knowles, Smith, and Associates, LLP

910-485-7070 ext. 2612

Attachment(s)

ATTACHMENTS

Competitive Review of Surgical Center for Dental Professional of Greenville, Application for Dental Ambulatory Surgery Center, Project ID# J-011171-16	
Letter of Support from Dr. Jose Cangas	В
Selected Ambulatory Surgery Center Coverage Policies	C
Sample Policy: Hospital Credentialing	D
CMS Claims Manual for Anesthesiology Services Ambulatory Surgery, Excerpt	Е
42CFR 415.110: Medically Directed Anesthesia Services	F
Additional Letters of Support: Patients	G
Additional Letters of Support: Community and Dentists	H
POMS and ADA Information on Anasthesia	т

Attachment A

Competitive Review of –
Surgical Center for Dental Professionals of Greenville,
Application for Dental Ambulatory Surgery Center
Project ID# J-011171-16

Competitive Review of – Surgical Center for Dental Professionals of Greenville, Application for Dental Ambulatory Surgery Center Project ID# J-011171-16

OVERVIEW

The Surgical Center for Dental Professionals of Greenville (SCDPG) application to open a dental ambulatory surgery center in Greenville, NC is non-conforming with GS 131E-183(a) CON statutory review criteria: 1, 3, 3a, 4, 5, 7, 12, 13c, and 18a. Additionally, the project does not comply with Criterion 1 of the Dental Single Specialty Ambulatory Surgical Facility Demonstration Project criteria as required by the 2016 State Medical Facilities Plan.

SINGLE SPECIALTY DENTAL AMBULATORY SURGERY CENTER DEMONSTRATION PROJECT CRITERIA

SCDPG DOES NOT CONTAIN A DESCRIPTION OF OWNERSHIP INTEREST IN THE FACILITY BY EACH ORAL SURGEON OR DENTIST

Chapter 6 of the 2016 State Medical Facilities Plan (SMFP) established the Dental Single Specialty Ambulatory Surgical Facility Demonstration Project and states that each applicant shall demonstrate that the proposal meets certain criteria in its certificate of need application.

Criterion 1 states: "The application shall contain a description of the percentage ownership interest in the facility by each oral surgeon and dentist."

Exhibit 4 provides percentage ownership for eight doctors, and "Initial Facility Dental Directors." It does not identify which of the doctors are dentists or oral surgeons. This clearly does not state the percentage ownership in the facility by each oral surgeon and dentists. While some oral surgeons and dentists' ownership interests are described, others cannot be discerned. It includes another category of "Dental Prof, Anest, Other Clinical & Non Clinical Investors" who own 77.35 percent of the LLC. It is not possible to determine *each oral surgeon and dentist in this group*.

The applicant does not meet Demonstration Project Criterion 1.

CON REVIEW CRITERIA

1. The proposed project shall be consistent with applicable policies and need determinations in the State Medical Facilities Plan, the need determination of which constitutes a determinative limitation on the provision of any health service, health service facility, health service facility beds, dialysis stations, ambulatory surgery operating rooms, or home health offices that may be approved.

THE PROPOSAL DOES NOT MIET SM FP POLICY GEN-3

Policy GEN-3 of the 2016 SMFP states:

"A certificate of need applicant applying to develop or offer a new institutional health service for which there is a need determination in the North Carolina State Medical Facilities Plan shall demonstrate how the project will promote safety and quality in the delivery of health care services while promoting equitable access and maximizing healthcare value for resources expended."

In its proposal, SCDPG proposes to provide access to all licensed dentists, regardless of whether they have a completed a hospital-based residency program or hold sedation or anesthesia permits from the North Carolina State Board of Dental Examiners. The SCDPG application states on page 21: "The proposed project will overcome these barriers by allowing all licensed dental professionals, regardless of specialty, access to operating rooms within a licensed, regulated ambulatory surgery center in which to perform dental procedures and surgeries requiring sedation or anesthesia with anesthesia services provided by licensed anesthesiologists."

Not every dentist who submitted a letter of interest in the facility intended to do so. Of the 23 dentists who showed intent to use the facility, 13 do not currently have NC Dental Board credentials to provide sedation or anesthesia and are not pediatric dentists or oral surgeons. These dentists, by NC Regulation, 21 NCAC 16Q .0201(a), are not permitted to provide anesthesia or sedation without an anesthesiologist or a dentist who is certified to provide the type of sedation/anesthesia being present.

Moreover, these 13 dentists have not completed a post-graduate surgical residency program, such as those required by Oral Surgeons and Pediatric Dentists. In all postgraduate programs that teach treatment of patients under general anesthesia, training includes experience of the surgery environment, and an extensive knowledge of the multitude of possible medical and physical problems that are associated with the use of this modality. In addition, all of these training programs recognize not only the process of general anesthesia, but the programs also place significant emphasis on medical diagnosis and the importance of patient selection when determining if a patient is fit to undergo such a procedure.

¹ Exhibit 29 contains a list of 24 dentists who expressed interest in using the proposed facility. One of those dentists, Jose Cangas, submitted his letter to SCDPG in error, thinking it was Valleygate. Attachment B of these comments contains a letter from Dr. Cangas rescinding his support and intent to use SCDPG.

Table 1 - Dental Board Sedation Permit Status of Dentists Interested in Doing Procedures at SCDPG

Name	Permit Status	Name	Permit Status
Bradley Neil Adkins	lley Neil Adkins Mod Sedation Christin John Gauquie		Lim Sedation
Tanya Elizabeth Ashe	None	Toni Tennille Goins	Min Sedation
Graylon Bailey	None	Horace Harris	None
Whitley Bartholomew	None	Hunter Joh	None
Janier Patrice Barton	None	William Lee Lewis	None
Mark Bowman	Mod Sedation	Robert E. McArthur	Mod Sedation
Robert Capps	Mod Sedation	John Overton	None
Richard Todd Carlyle	None	Jamison Padgett	Mod Sedation
Jay Collie	None	Ranjini Rajendran Pillai	None
Rob Doherty	None	Veronica Taylor- Williams	None
Johnathan Earp	Min Sedation	Brian Vinson	Lim Sedation
		Daniel Whitley	Lim Sedation

Source NC Dental Board May 2016

SCDPG's proposal appears to create an environment with potential for a dangerous clinical situation. The application proposes to recruit dentists who have no previous experience in selecting patients for treatment under general anesthesia or sedation, or experience/training in treating patients under anesthesia, and encourages them to do so. Valleygate believes that, at minimum, patients treated under sedation or dentists who hold sedation permits with the NC Dental Board or have completed a post-graduate residency program that included operating room training should treat general anesthesia. The NC Dental Board requires minimum levels of clinical training in order to hold a sedation or anesthesia permit. Further, the Board recognizes that these treatment modalities encompass not only the operative care but also the pre and post-operative care these patients require.

Aside from the training difference, additional evidence that dentists without proper training should not treat sedated or anesthetized patients is as follows:

1. Hospital Credentialing Policies. SCDPG states several times throughout its application that hospital bylaws prevent general dentists and other dentists who are not oral surgeons or pediatric dentists from obtaining privileges at hospitals. SCDPG suggests hospital bylaws discriminate against general dentists by specifically denying them hospital privileges. This is a misrepresentation of the facts. The application provided no evidence that hospital bylaws discriminate against any particular type of dentist. By-laws often require that any dentist who seeks to perform surgery in hospital operating rooms have the required postgraduate training. Oral Surgeons and Pediatric Dentists, by definition, have the required training. Some general dentists may also have been through postgraduate residency programs that meet the typical hospital credentialing standards. For example, Cape Fear Valley Health System requires that dentists meet the following criterion: "Successful completion of an approved one-year general practice residency (general dentists) or specialty training program (specialists)."

Central Carolina Hospital's requires the following minimum training:

"Applicants must have completed a hospital based residency in general dentistry, a pediatric dental residency training program, or have equivalent experience as a dentist member of a hospital medical staff. Central Carolina Hospital may grant privileges to general practice dentists for routine dental treatments or for performing surgical or emergency procedures when applicants can demonstrate appropriate training and experience." By providing these training requirements, hospitals ensure that providers allowed to do surgery in their operating rooms have the required training.

In this respect, because general anesthesia and surgery are involved, a dental ASC should be no different.

Attachment D contains a these two hospital policies.

2. North Carolina Regulations. Current North Carolina regulations do not prohibit dentists from treating patients under sedation or anesthesia provided a qualified professional is also present to administer the sedation/anesthesia and manage the patient's sedation during the procedure. However, North Carolina regulations do not allow even dentists to treat patients while a CRNA provides sedation unless the dentist has a permit to provide the type of sedation being provided by the CRNA. 21 NCAC 16Q .0301 states:

"For a dentist to employ a certified registered nurse anesthetist to administer moderate conscious sedation, moderate conscious sedation limited to oral routes and nitrous oxide or moderate pediatric conscious sedation, the dentist must demonstrate through the permitting process that he or she is capable of performing all duties and procedures to be delegated to the CRNA. The dentist must not delegate said CRNA to perform procedures outside of the scope of the technique and purpose of moderate

conscious sedation, moderate pediatric conscious sedation or moderate conscious sedation limited to oral routes and nitrous oxide as defined in Rule .0101 of this Subchapter."

This suggests the North Carolina Dental Board is very conscious of the need for a well-qualified team in the safe conduct of sedation (and by extrapolation) general anesthesia. This is why sedation and anesthesia experience are major components in pediatric and hospital dentistry residencies.

3. No Precedent Exists for SCDPG's Proposal. If the SCDPG proposal is approved and implemented as proposed in the application, it will become the first facility in North Carolina in which performing dentists or other dental subspecialists without formal supervised experience treating patients under general anesthesia will be allowed to do so. This is a lower standard than is applied in the offices of Triangle Implant Center. Those Oral Surgeons have the appropriate hospital and operating room based training to perform surgery on anesthetized patients. According to the SCDPG application on page 77, TIC does not allow general dentists into its own practices to perform procedures under general anesthesia or sedation. The application states that other dentists seeking to perform any procedures at TIC "cannot be accommodated". The SCDPG proposal does not have the same clinical rigor.

SCDPG's solution for overcoming the possible lack of training on anesthetized patients is to provide a minimal amount of training as part of the provider orientation process. Exhibit 18 of the application contains the proposed credentialing policy. The orientation course includes three items:

- 1. An "Introduction to Facility Video"
- 2. A requirement to "Observe Dental Professional in Operating Room with a live Patient via Video or at pre-scheduled appointment times"
- 3. A requirement to "Complete 15-20 minute Check List that every Dental Professional must pass to see first patient."

Under #2, the policy states that the prospective surgery center provider will observe "Proper ways to operate around intubated anesthetized patient," "Importance of maintain intubation, IV and monitoring equipment placement," "Sealing of the oropharynx with a throat pack and removal of throat pack," "Proper draping and securing of the head for protection," "Taking x-rays with patient in supine position," and "Focus on efficiency to minimize sedation time." Apparently, prospective dentists who have no prior experience in operating rooms or with anesthetized patients will be able to observe these items via *video*, *only once*, and meet the requirements for credentialing at SCDPG. The applicant suggests that a video is an adequate replacement for months, or even years of clinical training with anesthetized patients, as is current practice in pediatric dentistry/oral surgery residency programs.

Attachment I contains excerpts from the Pennsylvania Oral and Maxillofacial Society, and the American Dental Association, both of which emphasize the importance of extensive training on the part of the dentist who cares for patients under general anesthesia. This applies regardless of whether an anesthesia professional is also present.

Moreover, generally speaking, general dentists throughout the State of North Carolina annually treat hundreds of thousands of cases safely in offices.

4. Anesthesia Issues with Medicare Conditions of Coverage It appears that SCDPG will not be operated in a manner that fosters quality and safety. The Medicare conditions for coverage (which the ASC is required to meet) require that surgical procedures "be performed in a safe manner." 42 C.F.R. § 416.42(a). SCDP's plans for anesthesia services do not appear to meet this requirement.

The ASC will have two operating rooms and two procedure rooms, which will be dedicated to providing only dental procedures that require sedation. Assuming a 52-week operations schedule, SCDP projects that in the third year, the ASC will perform 3.2 cases per day in each of the two operating rooms and 1.6 cases per day in each of the two procedure rooms. (Application page 136) This volume is certain to frequently result in four to five concurrent cases being performed. However, the applicant proposes to have only a single anesthesiologist at the ASC and to have that anesthesiologists be the only individual administering anesthesia. (p22) Such a demand upon the anesthesiologist appears to place patient safety and quality at risk, as the Medicare billing requirements show.

Medicare permits an anesthesiologist to provide "medically directed" anesthesiology for a maximum of four concurrent cases. 42 CFR § 415.110; CMS Internet-Only Manual 100-04 (Medicare Claims Processing Manual), Chapter 12, Section 50 (the "Manual"). In "medically directed" cases, the anesthesiologist personally performs seven elements of the anesthesia service (the "7 Elements") and medically directs qualified individuals who perform the remainder of the services.²

Critically important, Medicare states that an anesthesiologist may medically direct "no more than four anesthesia services concurrently." 42 C.F.R. 415.110. In this regard, the Manual states that an anesthesiologist who is concurrently directing the administration of anesthesia in four cases cannot ordinarily be involved in furnishing additional services to other patients.

² The 7 Elements that the anesthesiologist must perform are: (i) perform the pre-anesthesia examination and evaluation; (ii) prescribe the anesthesia plan; (iii) personally participate in the most demanding aspects of the anesthesia plan procedures; (iv) ensure that all plan procedures that he/she does not perform are performed by a qualified individual; (v) monitor the course of anesthesia administration at frequent intervals; (vi) remain physically present and available for immediate diagnosis and treatment of emergencies; and (vii) provide indicated post-anesthesia care.

If Medicare will not permit an anesthesiologist to "medically direct" more than four concurrent cases—which means the anesthesiologist is personally performing the 7 Elements and directing qualified personnel who perform the rest of the anesthesia service for the four concurrent cases—then it necessarily follows that is not safe or consistent with high quality for an anesthesiologist to personally perform the entirety of the anesthesia services for four or more concurrent cases, which is what the SCDP proposes.

These rules are included in Attachments E and F of these comments.

5. Medical Board Issues. The application states (page 55) that the manager "will employ" the required pediatrician. The Management Agreement confirms this. Section 4(c)(ii) and Exhibit C. It is legally impermissible the manager to employ the pediatrician in North Carolina—such would violate the requirements of the North Carolina Medical Board. See additional discussion in Criterion 7.

The SMFP policy GEN-3 (as well as Criterion 18a) promotes implementation of projects enhance safety and quality. A proposal for a new surgery center model that is less restrictive than the North Carolina Board of Dental Examiners with regard to sedation and that appears to conflicts with federal rules governing anesthesia does not "promote safety." As a result, SCDPG does not conform to CON Review Criterion 1.

3. The applicant shall identify the population to be served by the proposed project, and shall demonstrate the need that this population has for the services proposed, and the extent to which all residents of the area, and, in particular, low income persons, racial and ethnic minorities, women, handicapped persons, the elderly, and other underserved groups are likely to have access to the services proposed.

INTRODUCTION.

Criterion 3 requires that the application (i) identify the population to be served by the project and (ii) demonstrate the need this population has for the proposed services. As a result, Section III.1.(a) of the application form requires that the applicant "describe the need for each of the services proposed to be provided."

SCDPG proposes and projects to perform three types of services at its facility: (A) general dentistry, (B) pediatric dentistry, and (C) oral surgery. However, SCDPG's projections and need methodology for each service fails to meet the requirements of Criterion 3.

SCOPG FAILED TO DEMONSTRATE ANY NEED FOR GENERAL DENTISTRY SERVICES AT THE FACILITY

SCDPG's application utterly fails to demonstrate a need for *general dentistry* services at the proposed facility. In fact, an overwhelming flaw in the application is SCDPG's projection that 65 percent of all cases will be performed by *general dentists*. This is serious flaw because—in contrast to oral surgeons and pediatric dentists—*general dentists*, as a rule, do

not typically require access to surgery centers or operating rooms for their practices, as is confirmed by KSA's thirty-year experience of operating a large multi-specialty (which currently has approximately [40] dentists). Moreover, SCDPG failed to properly demonstrate a need for general dentistry services at the facility.

SCDPG's utilization projections are based entirely on cases to be performed by (i) 22 general dentists, (ii) 1 pediatric dentist (William Lewis, DDS), and (iii) the oral surgeons of Triangle Implant Center, including Dr. Uday Reebye. (Exhibit 29.)³ Consistent with this large number of *general dentists*, the application contains numerous references providing general dentistry services at the facility. Moreover, SCDPG's own data in Exhibit 29 shows that 65 **percent** of all cases at the facility will be performed by general dentists—not oral surgeons or pediatric dentists—as the chart below demonstrates.

Percent Procedures Projected by SCDPG

Notes	Category	Low	High
а	Monthly Subtotal General Dentists	155	178
b	Monthly Subtotal Pediatric Dentists	5	10
С	Monthly Subtotal Triangle Implant Center (Oral Surgery)	83.3	83.3
d	Monthly Total	243.3	271.3
е	Percent General Dentistry	63.71%	65.61%
f	Percent Pediatric Dentistry	2.06%	3.69%
g	Percent Oral Surgery	34.2%	30.7%

Notes: a: Totals from SCDPG Application, Exhibit 29

b: Totals from SCDPG Application, Exhibit 29 (minus data from Jose Cangas)

c: From SCDPG Application, Exhibit 29

d: a + b + c

e: a / d

f: b / d

g: c / d

Despite contending that 65 percent of all procedures will be performed by *general dentists*, SCDPG fails to provide quantitative information in Section III demonstrating need for general dentistry services to be performed in an ambulatory surgical facility. This is not surprising at all because, as a rule, there is limited need for general dentistry services to be performed in a facility, as KSA's thirty-year experience confirms. Moreover, as discussed under Criterion 5, SCDPG fails to demonstrate that these "general dentistry" services would be reimbursed by third-party payers in the context of a surgical facility. Given the magnitude of the number of general dentistry cases that SCDPG projects and the fundamental flaw upon which those projections are based, it is clear that the application fails to conform with

³ Exhibit 29 lists 24 dentist who expressed intent to use the facility. Of the 24, 22 are licensed as general dentists. Dr. William Lewis is licensed as a pediatric dentist. Dr. Jose Cangas is also licensed as a pediatric dentist, but he submitted his letter of support in error, believing it was for Valleygate. *See* letter from Dr. Cangas in Attachment B rescinding his support of SCDPG.

Criterion 3, and as a result, the application necessarily fails to conform with numerous of the other review Criteria, including without limitation Criterion 5.

SCDPG FAILED TO DEMONSTRATE ANY NEED FOR PEDIATRIC DENTISTRY SERVICES AT THE FACILITY

SCDPG's utilization projections are based upon having only 1 pediatric dentist (after correcting for Dr. Cangas). Based on upon SCDPG's data in Exhibit 29, the sole pediatric dentist will perform at most 120 cases or 3.69 percent of the facility's cases. Section II.1 of the application (Page 24) clearly notes that pediatric dentistry is a component of SCDPG. This is a critically important point since SCDPG projects that, in the third year, the facility will perform 1,042 cases for patients under 21, which is projected to be 34.5% of the facility's cases. Further, SCDPG fails to discuss or provide any information in Section III that specifically and expressly demonstrates any quantified need for pediatric dentistry services to be performed in an ambulatory surgical facility. Because the application completely fails to provide any specific demonstration of need for pediatric dentistry services at the facility, the application is non-conforming with Criterion 3

THE NEED METHODOLOGY IS UNREASONABLE BECAUSE IT IS LIMITED TO ORAL SURGERY

SCDPG's need methodology is based entirely upon oral surgery. Oral surgery is, by definition, a distinct subset of dentistry and/or medicine. As described in SCDPG's application, oral surgeons perform procedures such as wisdom teeth removal, dental implants, and orthognathic surgery. These procedures and other oral surgery procedures are described in detail on Triangle Implant Center's website: http://www.triangleimplantcenter.com. SCDPG bases the need methodology presented in Section III.1.b on two sets of data, (1) data for oral surgery cases provided under sedation at Triangle Implant Center's (TIC) offices in Wilson, Durham, and Mebane and (2) oral surgery data reported on hospital and ASC license renewal applications. As illustrated in the table below, oral surgery cases under sedation specifically from TIC form the basis for two-thirds of the total need projected by SCDPG.

2015 Conservative Estimate of Potential Need: Office and Licensed Facility Combined

	TIC Based Estimates	Hospitals and ASC Based Estimates	Total	% TIC Based (Calculated)
Notes	а	· b	C	d
Low	7,768	3,912	11,680	66.5%
High	15,092	5,692	20,784	72.6%

Notes:

a: SCDPG Application, Page 110

b: SCDPG Application, Page 110

c: SCDPG Application, Page 110

d: a / a

Nowhere in its application does SCDPG quantify the need for general dentistry and pediatric dentistry procedures in operating rooms, despite clearly projecting the performance of such procedures in the facility. Moreover, an argument that general dentists will treat pediatric cases would only support the need if those persons had training in care of anesthetized

patients. The application provides no such information. Thus, SCDPG's need methodology is unreasonable because it is based entirely on the need for oral surgery services and hence fails to include a need methodology demonstrating need for general dentistry services and pediatric dentistry services at the facility.

The application further contends (page 98) that "relevant" need for pediatric patients is the need for access to a pediatrician. This "need" is not relevant to the application because the application is for an ASC, not for a pediatrician office. Further, to the extent the ASC will have a pediatrician on-site, the pediatrician will provide only the limited services of an H&P for dental surgery, and will not meet any general need for pediatric care for children. The application makes no attempt to quantify the need for a full time pediatrician.

As a result, the applicant does not conform with Criterion 3.

SCOPG FAILED TO SHOW THAT THE ORAL SURGERIES IT PROJECTS WILL BE APPROPRIATE FOR A SURGERY CENTER

As noted above, SCDPG's need methodology in Section III.1.b of its application is based entirely upon "use rates" for oral surgery at (i) Triangle Implant Center, an oral surgery practice and (ii) hospitals and ASCs—with 66% to 72% of the cases based on Triangle Implant Center's use rates. However, the application fails to demonstrate that all of these Triangle cases would be appropriate for an ambulatory surgical facility, and as a result, the projections are unreasonable.

The facility design appears to support the application's intent to serve patients otherwise suited for a dental office is the facility design itself. SCDPG only includes three recovery rooms in its model, despite having four rooms (two operating room and two procedure rooms) which can have patients under general anesthesia at any given time. SCDPG explains this by noting that patients will be recovered inside the operating rooms or procedure rooms. Page 121 of SCDPG's application states, "However, based on the dental cases proposed for the proposed facility, and the experience of Triangle Implant Center, SCDP of Greenville expects that most of the prep and recovery will be done in the operating room or procedure room." SCDPG's plans also include a lab and a CERAC machine with which to make crowns. These items are typically found in dental offices and are not necessary for a surgery center. SCDPG's model is much more like a dental office than an ASC.

Perhaps the best evidence that oral surgeons don't need an ASC to perform all of their procedures is that of the 23 non-TIC dentists who have expressed an interest in using SCDPG, not one of them is an oral surgeon. According to the North Carolina dental board, there are 15 oral surgeons located in Pitt, Lenoir, Wilson, Craven, and Jones counties, all counties within a reasonable distance of the proposed SCDPG location. The only oral surgeons committed to using SCDPG are those of Triangle Implant Center, including Uday Reebye, who also practices in Durham.

Pennsylvania Oral and Maxillofacial Society website provides clear distinctions about appropriate locations for oral surgery. ⁴ The section on Anesthesia, which is included in

⁴ http://www.psomsweb.org/anesthesia.aspx

Attachment I to these comments, describes a <u>very narrow group of oral surgery patients</u> as appropriate for care in a surgery center or hospital.

Valleygate agrees that some oral surgery cases can and should be completed in licensed operating room environment. In fact, Valleygate proposes to serve oral surgery cases in Valleygate Dental Surgery Center of Fayetteville. However, this need is limited. According to SCDPG's need methodology, <u>all</u> office based oral surgery cases under sedation should be done in a licensed ASC and should be reimbursed an additional "facility fee," which would not otherwise be charged if the procedure were done in an office setting.

Finally, some third party payers will only reimburse for specific types of patients in ASCs (see Payer ASC Criteria in Attachment C). An otherwise healthy patient undergoing a procedure for wisdom teeth removal or dental implant, a major component of TIC's business, will not qualify for ASC "facility fee" reimbursement under some payer policies. Yet, the SCDPG application includes these procedures (page 26). Clearly, payers recognize that oral surgery belongs in licensed ASCs only in certain circumstances.

Oral surgery patients represent a large portion of proposed patients at SCDPG. SCDPG's need methodology presumes that all in-office oral surgery sedation patients need licensed operating rooms. Clearly, *all* oral surgery sedation patients do not need licensed operating rooms. Therefore, SCDPG does not adequately demonstrate the need this population has for the services it proposes.

The application is confusing in another respect. Among the procedures listed as candidates for the ASC are Reconstructive Surgery and TMJ surgery. These long and complex cases require specialized equipment and are done primarily in hospitals.

Lacking a demonstration of need of the population to be served for the services proposed, the application does not conform to Criterion 3.

3a. In the case of a reduction or elimination of a service, including the relocation of a facility or a service, the applicant shall demonstrate that the needs of the population presently served will be met adequately by the proposed relocation or by alternative arrangements, and the effect of the reduction, elimination or relocation of the service on the ability of low income persons, racial and ethnic minorities, women, handicapped persons, and other underserved groups and the elderly to obtain needed health care.

The application suggests that SCDPG utilization would include relocation of oral surgery services from the Wilson office of Triangle Implant Center to the proposed SCDPG. It does not demonstrate how the needs of the population currently served in an oral surgery office will be adequately met by relocation to an ambulatory surgery center that is located an hour away in Greenville. See additional comments under Criterion 4.

For these reasons, the application appears non-conforming to Criterion 3a.

4. Where alternative methods of meeting the needs for the proposed project exist, the applicant shall demonstrate that the least costly or most effective alternative has been proposed.

SCOPG PROPOSES TO SIGNIFICANTLY INCREASE THE COST PER PROCEDURE FOR PROCEDURES ITS ORAL SURGEONS ALREADY PROVIDE AT TRIANGLE IMPLANT CENTER

The application indicates that SCDPG cases would include cases that would otherwise be served at the Triangle Implant Center Wilson office. Page 112 of the SCDPG application states:

"Triangle Implant Center has provided letters of support for SCDP of Greenville documenting that it has historically performed 1,077 procedures at its Wilson offices, all of which would be appropriate to be performed at SCDP of Greenville."

Page 115 refers to Exhibit 29, which includes these same procedures for Wilson on a monthly basis, but 83.3 procedures per month is 999.6 annual procedures, very close to the referenced 1,077 Wilson cases.

Moreover, as part of the use rate analysis presented in Section III.1(b), SCDPG demonstrated that, in 2015 a total of 378 TIC-Wilson cases requiring sedation originated from Wilson County. SCDPG uses these 378 surgical cases as a basis for calculating a use rate for the proposed service area, in essence recommending these in-office oral surgery cases as appropriate for the proposed facility.

In Section II.1, SCDPG describes in great detail the innovative model currently in use by TIC. At the time of this application, TIC contracts with Duke Anesthesia to provide dental procedures to sedated or anesthetized patients, within the TLC dental office. The application clearly indicates that this is both a sufficient and an appropriate model for TIC's current patient population. On page 92 of the application, SCDPG admits to the quality of the delivery care model involving a licensed anesthesiologist, "Patient safety is better ensured when surgical and sedation/anesthesiology tasks are performed by experts in each field, respectively."

By proposing to relocate these services to an ambulatory surgical center, the SCDPG application proposes to increase the cost per procedure for patients presently served in an office. It proposes to charge patients an additional ASC "facility fee." The table below calculates the additional expense created by performing these procedures in the proposed dental single specialty ambulatory surgical facility⁵.

Table 2 - Estimated Year 3 Cost of Moving Oral Surgery Cases from Triangle Implant Wilson to SCDPG

а	Net Patient Revenue	\$3,070,821
b	Total Number of Cases	3,016
С	Net Revenue per Case	\$1,018
đ	Estimated Anesthesia Net Revenue per Case	\$346
e	Estimated Average ASC "Facility Fee"	\$672
f	Total Relocated Cases (per CON)	1,000
g	Annual Expense for All Relocated Cases	\$671,908

Notes:

- a. SCDPG Application, FORM B/C
- b. SCDPG Application, FORM D
- c. a/b
- d. Valleygate Dental Surgery Center of Fayetteville CON Application, average anesthesia revenue per case * 2 (Multiplied by two to be conservative)
- e. c-a
- f. SCDPG Application, Page 112, 115 plus Exhibit 29 line for Triangle Implant Center Wilson cases (83.3 * 12)
- g. e*g

⁵ Note that in order to calculate the average "facility fee," anesthesia fees (which are charged regardless of location) must be backed out. SCDPG's application does not provide sufficient information to calculate anesthesia fees. To estimate, the table below includes the average anesthesia new revenues multiplied by two (to be conservative and recognizing that SCDPG proposes to serve less Medicaid than Valleygate).

In this example, for the 1,000 cases the SCDPG application proposes to relocate to SCDPG from TIC's Wilson office, SCDPG would bill each patient an additional \$672. The cost to the health care delivery system would exceed \$670,000. The application does not explain why this is necessary.

The application contains no evidence that the population that would be relocated from Wilson to Greenville needs the alternative setting. It certainly does not *need* to incur additional costs for the oral surgery procedures that TIC oral surgeons currently provide safely in an office setting.

In light of this information, SCDPG does not appear to conform to Criterion 3a.

Furthermore, because the application indicates that a high-quality option already exists for the estimated 1,077 patients who could be seen at existing TIC offices at significantly lower cost, the applicant does not conform to Criterion 4.

5. Financial and operational projections for the project shall demonstrate the availability of funds for capital and operating needs, as well as the immediate and long-term financial feasibility of the proposal, based upon reasonable projections of the costs of and charges for providing health services by the person proposing the service.

SCOPG DOES NOT SHOW ADEQUATE EVIDENCE OF FUNDS NEEDED FOR CAPITAL INVESTMENT

In Section VIII.3 the SCDPG application, states:

"SCDP of NC expects to fund the proposed project with cash reserves acquired through the sale of ownership shares as described above.

However, as not all of these transactions have taken place as of the date of submission of this CON application, for the purpose of documenting the availability of funds for the proposed project, SCDP of Greenville has provided a letter from PNC Bank indicating its willingness to finance the entirety of the project with a loan (Exhibit 25)."

As the applicant notes many times, only 22.65 percent of SCDP's capital requirements have been committed. Exhibit 4 shows which individuals have "proposed membership interests." Of the 22.65 percent, two percent is called "initial facility dental directors," which suggests that this portion is allotted to a yet-to-be named individual or individuals. The only named dental director on page 179 is Uday Reebye, MD, DMD. Therefore, only 20.65 percent of the total capital need has been "proposed" to be provided by named individuals. There is no evidence of any transaction showing that SCDP, the parent organization of SCDPG, has actually received any capital investment. There are no letters from the individuals with "proposed membership interests" in Exhibit 4 committing to providing capital. There are no letters from CPAs showing availability of reserves from any of the proposed owners, including Uday Reebye.

Thus if the applicant truly intends to use cash reserves to fund the project, there is no evidence that any cash reserves exist.

In response to this, SCDPG states that a letter provided by PNC bank (Exhibit 25) show evidence of available funding. Exhibit 25 contains a letter and preliminary term sheet from PNC Bank which together "merely constitute a statement of suggested terms for the Credit Facility [for \$5M] and....do not constitute a binding commitment to offer to lend with respect to these transactions [emphasis added]."

The letter goes on state: "PNC hereby consents to your providing a copy of this letter and Preliminary Term Sheet to DHHS in connection with your CON application for the Project, provided that DHHS may not rely on this letter or the Preliminary Term Sheet for any purpose other than as evidence that we have provided this proposal to the Company for preliminary discussion purposes." By including this language, PNC eliminates the letter as a possible source for demonstrating availability of funds..

Without a demonstration of available funds the application does not conform to Criterion 5.

SCOPG OVERSTATES REVENUES

SCDPG's pro formas presented in the application appears to overstate revenues. Some payers will not reimburse the proposed SCDPG "facility fees' for many of the cases which SCDPG's proposes to serve. The application pro formas assume reimbursement for all cases, either by third party payers or by individuals. It also assumes that in year three, more than 400 cases classified as self-pay or charity care will pay, out-of-pocket, between \$784 and \$1,960 per case (see discussion under Criterion 13a).

For procedures deemed medically necessary for an ASC, payers, including Medicaid, reimburse ASCs "facility fees" in addition to reimbursement paid to the performing physician/dentist and anesthesiologist/CRNA. All payers have policies for which types of procedures qualify as medically necessary and therefore qualify for a "facility fee" payment under a medical plan. Attachment C contains three such policies, one from NC Medicaid, one from Blue Cross Blue Shield of North Carolina, and one from Cigna. All provide specific limitations regarding the kinds of dental and oral surgery procedures for which they will cover a "facility fee" for procedures completed in ASCs.

For example, Blue Cross covers only the following situations in ASCs when dental care or oral surgery is concerned:

- Complex oral surgical procedures for which a high probability of complications due to the nature of the surgery; or
- Concomitant systemic disease for which the patient is under current medical management and which increases the probability of complications; or
- When anesthesia is required for the safe and effective administration of dental procedures for young children (below the age of nine years old), persons with serious mental or physical conditions or persons with significant behavioral problems.

Cigna requires that patients be seven years or younger, have severe psychological impairments, is classified as ASAIII or above, has significant medical comorbidities, or when conscious sedation is otherwise inappropriate or contraindicated.

North Carolina Medicaid's Policy (which includes Health Choice) states, "if a Medicaid or NCHC beneficiary is physically unmanageable, medically compromised, or severely developmentally delayed and will not cooperate for treatment in the dental office, treatment may be completed in an ambulatory surgical center (ASC)."

According to all of these policies, payers will not reimburse ASCs facility fees for the following procedures:

- Wisdom teeth removal for otherwise healthy adults
- Dental implants for otherwise healthy adults
- Bone grafting on otherwise healthy adults
- General dentistry procedures on otherwise healthy adults

In Section III (Page 112) of its application, SCDPG states that all cases currently performed at Triangle Implant Wilson will be candidates for the proposed ambulatory surgery center:

"Triangle Implant Center has provided [sic] letters of support for SCDP of Greenville documenting that it has historically performed 1,077 procedures at its Wilson offices, all of which would be appropriate to be performed at SCDP of Greenville."

Although the application does not break down the types of oral surgery procedures and patients treated at TIC-Wilson, assuming that *ALL* sedation cases at TIC qualify for an ASC "facility fee" is highly dubious. Valleygate has not found other oral surgeons who would corroborate such an assumption. It is hard to envision that "charity cases" in particular will be able to cover this fee out of pocket.

With facility fees overstated, SCDPG's financials show more revenues than it will actually receive. The table below shows what would happen if half of the oral surgery cases currently performed at TIC-Wilson were not eligible for a "facility fee," In this illustration, the SCDPG application would have overstated its revenues by \$512,000 annually. This does not consider whether the promised general dentistry cases will meet payer criteria. It also does not consider whether SCDPG will actually collect the \$784 per person it expects from charity patients and the \$1,960 it expects to collect from self-pay patients.

Table 3 - Possible Revenue Overstatement If Half of Oral Surgery Cases Shifted from TIC-Wilson to SCDPG Do Not Meet Payer ASC Reimbursement Requirements

Note	Measure	Amount
а	2222322 22 222 222222	212 371212
b	2222222222224 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	2139(212)
с	2 20002121212222 21221212020 d 21212 2100 21	<u> 21212129</u>
d	Revenue Overstatement	\$511,795

Notes: a: SCDPG Application, FORM E (Does not deduct bad debt)
b: SCDPG Application, Page 112, 115 and Exhibit 29
c: b/2
d: b*c

Regardless, it is clear that SCDPG created its procedure projections and its pro forma revenue projections without consideration for whether or not the procedures it projects to do in its facility actually meet payer criteria.

As a result, SCDPG does not adequately demonstrate its financial projections are reasonable and does not conform to Criterion 5.

SCDPG UNDERSTATES COSTS

Throughout, the SCDPG application states that it will provide anesthesiologists for all sedation cases. The application maintains that anesthesiologists provide the highest quality of care, even going so far as to state that SCDPG will not include CRNAs in the anesthesia service. Page 22 of the application states:

"SCDP of Greenville intends to utilize only licensed anesthesiologists in the ASC rather than certified registered nurse anesthetists [CRNAs], again in order to ensure the highest level of quality, safety, and patient-centric care possible."

This is in conflict with the many landmark studies that confirm that CRNAs achieve the same level of safety and quality as their physician counterparts⁶. In fact, researchers consistently find anesthesia care is equally safe whether provided by a CRNA working alone, an anesthesiologist working alone or a CRNA working with an anesthesiologist. There are few facilities providing anesthesia for medical/surgical cases that do not rely on CRNA's for the delivery of high quality patient care

⁶ CRNA's, The Tuture of Anesthesia Care Today, American Association of Nurse Anesthetists, 2016 http://www.future-of-anesthesia-care-today.com/research.php

SCDPG pro forma assumptions indicate that charges represent average bundled fees, which include both facility fees and anesthesia fees. As a result, SCDPG must account for the cost of the anesthesiologists in the application. FORM B provides a line item for professional fees, for which the application notes:

"Professional fees expense includes fees for anesthesiologists and other professional fees, based on the experience of SCDP of Greenville's management company and discussions with Regional Anesthesia, inflated 2% per year."

The application notes, throughout, that East Carolina Anesthesia Associates (ECAA) will provide anesthesia in the facility. It provides no information about costs from this vendor. However, the pro forma assumptions are apparently based on information obtained from Regional Anesthesia. Valleygate also obtained information from the same provider- to form the basis of its anesthesia cost assumptions. This information included an estimate of \$450,000 annually for full-time coverage of one anesthesiologist⁷. The estimate provided to Valleygate is likely to be very similar to that provided to SCDPG. Valleygate is confident the anesthesia contract estimate provided to them is reasonable. For comparison, Medscape.com, a reliable source for average provider salaries, states the average annual anesthesia contract to be approximately \$420,000 in 2015⁴.

Even if SCDPG Anesthesiologists maximize efficiency by floating among rooms and being willing to work less than a full FTE, SCDPG's cost presented in its pro formas on FORM B/C are significantly understated. The following table recalculates cost to a more reasonable amount. These calculations include very conservative assumptions, such as average procedure lengths of one hour and that anesthesiologists will not work a full FTE.

⁷ Of note, Valleygate also included the cost of CRNAs because a single Anesthesiologist cannot cover all cases in the facility.

⁴ Source: http://www.medscape.com/features/slideshow/compensation/2015/anesthesiology#page=5

Table 4 - Estimated SCDPG Anesthesia Cost Understatement

Notes	Metric	FFY2018	FFY2019	FFY2020
а	Professional Fees in Expense in SCDPG's pro formas (which include Anesthesiologist)	\$ 498,000	\$507,960	\$ 518,119
b	Growth		2.00%	2.00%
С	Cost of One, Full-Time Anesthesiologist: KSA Proposal	\$ 450,000	\$459,000	\$468,180
d	Projected Procedures	2,413	2,714	3,016
е	Hours per Procedure	1.0	1.0	1.0
f	Total Anesthesia Hours Needed	2,413	2,714	3,016
g	Percent Anesthesia Charting/ Admin time	20%	20%	20%
h	Minimum Anesthesiologist Hours Needed	3,016	3,393	3,770
i	Minimum Anesthesiologist FTEs Needed	1.45	1.63	1.81
j	Minimum Anesthesiologist Cost	\$652,554	\$748,633	\$848,576
k :	Cost Understatement	\$154,554	\$240,673	\$330,457

Notes:

a: SCDPG Application, FORM B/C

b: Year over year growth in a

c: Valleygate Dental Surgery Centers of Fayetteville CON Application, Pro forma assumptions, grown by percent in b

d: SCDPG Application, FORM D

e: Conservative assumption of one hour per procedure (data not available in SCDPG application), Valleygate assumes longer case lengths

f: d * e

g: Conservative assumption

h: f/(1-g)

i: h / 2080

j: i *c

k: j-a

As noted, this is a conservative estimate. If SCDPG truly needs all four rooms running all the time, then it would presumably require more than 1.81 FTE anesthesiologists. Even if it staffed only 3 FTE anesthesiologist, it would incur a cost exceeding \$1.4M annually, a significantly higher cost than projected in SCDPG pro formas.

SCOPG OVERSTATES PROFITABILITY

SCDPG's pro forma income statement in FORM B/C shows healthy operating margins in years two and three. However, in light of the substantial revenue overstatement and cost understatement described above, those margins appear unrealistic. Of note, these sample adjustments do not take into account other likely revenue overstatements, such as "facility fees" that are not likely reimbursable for many general dentistry procedures, and the application's ambitious estimate of net revenues from charity and self-pay (see discussion below under Criterion 13c).

In light of apparent problems with revenue and cost assumptions, the model scope of services proposed in SCDPG's application would not be feasible. The table below incorporates the revenue overstatement and the cost understatement noted above and adjusts new income for each of the first three operating years.

Table 5 - Adjusted Net Income for SCDP of Greenville: First Three Operating Years

Notes	Metric	FFY2018	FFY2019	FFY2020
	Total Procedures	2,413	2,714	3,016
а	Projected Net Income	(19,342)	\$322,959	\$671,565
	less			
b	Revenue Overstatement	\$512,000	\$512,000	\$512,000
	less			
С	Cost Understatement	154,554	\$240,673	\$330,457
	equals			
d	Adjusted Net Income	\$(85,896)	\$(429,714)	\$(170,892)

Notes:

a: SCDPG Application, FORM B/C

b: Revenue overstatement calculated above

c: Cost understatement calculated above

d: a-b-c

SCDPG's faulty assumptions for both revenue and cost demonstrate that the SCDPG model is not financially viable, even with the large increase in projected procedures between Years 02 and 03. As a result, its applicant does not conform with Criterion 5.

SCOPG DOES NOT PROVIDE REASONABLE ASSUMPTIONS REGARDING ITS BALANCE SHEET

Pro forma assumptions for FORM A provide only the following sentence: "Surgery Center for Dental Professionals of Greenville's projected balance sheet is based on forecasted financial performance through the third project year."

This single sentence provides inadequate evidence that the applicant's pro forma assumptions are reasonable. Without additional information explaining why SCDPG the mix of assets and liabilities it presents in FORM A, it is impossible to determine if these projections are reasonable.

With all of the problems supporting its financial projections the application fails to confirm with Criterion 5.

7. The applicant shall show evidence of the availability of resources, including health manpower and management personnel, for the provision of the services proposed to be provided.

SCOPG FAILS TO SHOW SUFFICIENT STAFFING AND EQUIPMENT TO MANAGE ANESTHESIA

Throughout the application, SCDPG describes how all dental surgeries performed in the proposed facility will be conducted by trained dentists and licensed anesthesiologists. In Section II.1, the applicant states, "The driving force behind the proposed project is Dr. Uday Reebye's vision to create access for dental professionals to state-of-the-art, patient-centric facilities in which they can perform dental procedures and surgeries on their patients requiring sedation in the safest possible setting with sedation or anesthesia services provided by licensed anesthesiologist."

The SCDPG application indicates that an anesthesiologist will staff all procedures. As described above under Criterion 5, the application does not provide documentation to account for enough anesthesiologist expense to provide coverage for all of the proposed procedures.

Considering that many of the dentists using the facility are likely to have no experience of treating patients under general anesthesia (other than the video training provided by SCDPG), it would appear that having one anesthesiologist covering more than one room (if there is no CRNA in that room) is grossly inadequate to ensure patient safety

Moreover, the equipment list and quote (Exhibit 24) in SCDPG's application, includes no anesthesia machines, which are required to provide anesthesia. The application makes no mention of anesthesia machines and includes no expense for them in the financial information.

The shortage of anesthesia coverage funding and absence of necessary equipment to anesthetize a patient, means that the application does not provide evidence of available manpower or equipment required to provide the proposed services and does not conform to Criterion 7.

Moreover, as demonstrated above, if SCDPG were to provide enough anesthesiologist coverage and necessary equipment, it would drastically increase both its operating costs and its proposed capital costs.

THE APPLICATION FAILS TO SHOW SUFFICIENT EVIDENCE THAT PEDIATRIC DENTISTS WILL BE AVAILABLE TO TREAT PEDIATRIC PATIENTS.

As noted above under Criterion 3, SCDPG proposes that 34.5 percent of its patients will be under age 21. It also states that it will provide pediatric dentistry services in Section II.1. Not all patients under age 21 need to be treated by a trained pediatric dentist. General dentists see many children. However, as noted under Criterion 1 above, all Pediatric Dentists have had postgraduate training specific to performing dental surgery on children under anesthesia in hospital or surgery center environments. This is not true of all General Dentists. Pediatric Dentists, receive an extra two years of training after Dental School that includes this skill and training in management of an anesthetized patient in a hospital/ACS setting and in the special treatments and considerations that are in inherent to the management of young patients..

Because of this difference in training, they and a very select group of General Dentists are a better option to perform procedures on children in operating rooms.

The SCDPG application indicates that 22 general dentists have agreed to use the facility; as noted in the discussion of Criterion 1, only seven have sedation permits and only one is a Pediatric Dentist. One Pediatric Dentist cannot cover 34.5 percent of the procedures at SCDPG, which would be over 1,000 procedures annually. The application does not demonstrate that the seven with sedation permits will do pediatric surgery.

Because of its inability to provide adequate resources to cover pediatric procedures, SCDPG does not conform to Criterion 7.

PAPILLION MANAGEMENT SERVICES, LLC CANNOT LEGALLY EMPLOY PHYSICIANS

The SCDPG application states (page 55) that Papillion Management, LLC⁸ "will employ" a "required" pediatrician. The Management Agreement (Exhibit 2) confirms this. It is legally impermissible for Papillion Management Services, LLC, a Limited Liability Corporation, to employ a pediatrician in North Carolina. Only professional corporations, PLLCs (N. C. Gen. Stat. § 55B-1 to 15), Hospitals (33 N.C. Att'y Gen. Rep. 43 (1955)), and HMOs (N. C. Gen. Stat. § 58-67-35(a)(3); 58-67-170(c)) are permitted to employ physicians under NC law.

Under these assumptions, the applicant cannot legally provide the necessary resources for the services it proposes to provide. Therefore, it fails to meet Criterion 7.

In summary, for all of these reasons, the application, it fails to conform to Criterion 7.

⁸ The SCDPG application refers to the management company as Papillion Management, LLC. However, according to the NC Secretary of State, Papillion Management, LLC does not exist. However, Papillion Management Services, LLC exists and the registered agent for this company is Laura Reebye. We assume Papillion Management Services, LLC is the correct entity to reference.

12. Applications involving construction shall demonstrate that the cost, design, and means of construction proposed represent the most reasonable alternative, and that the construction project will not unduly increase the costs of providing health services by the person proposing the construction project or the costs and charges to the public of providing health services by other persons, and that applicable energy saving features have been incorporated into the construction plans.

NO JUSTIFICATION FOR CAPITAL EXPENSE FOR PROCEDURE ROOMS

SCDPG proposes to include two procedure rooms and in the proposed facility. Exhibit 10 in SCDPG's application provides a line drawing of the proposed facility. In Section IV, the application indicates that capacity of the procedure rooms is like the operating rooms. The application does It does not provide the required licensure distinction between the operating rooms and the procedure rooms. It does not provide separate income statement in its pro formas for the procedure rooms. The application suggests that it could not estimate the capacity of the procedure rooms, hence treats them as operating rooms. The application arbitrarily reduces the capacity of operating rooms from 900 cases to 75 percent of 900, with no justification. Therefore the capital expense associated with the procedure rooms may unduly increase the cost of providing health services.

As a result, the applicant should be found non-conforming to Criterion 12.

- 13. The applicant shall demonstrate the contribution of the proposed service in meeting the health-related needs of the elderly and of members of medically underserved groups, such as medically indigent or low income persons, Medicaid and Medicare recipients, racial and ethnic minorities, women, and handicapped persons, which have traditionally experienced difficulties in obtaining equal access to the proposed services, particularly those needs identified in the State Health Plan as deserving of priority. For the purpose of determining the extent to which the proposed service will be accessible, the applicant shall show:
 - (c) That the elderly and the medically underserved groups identified in this subdivision will be served by the applicant's proposed services and the extent to which each of these groups is expected to utilize the proposed services; and

SCOPG IS PROPOSING TO LIMIT ACCESS FOR LOW-INCOME PATIENTS

As demonstrated in the pro forma provided with SCDPG's CON application, the applicant expects \$89,360 of charity care net revenue in project Year 2. This is an average projected reimbursement rate of \$784 per charity patient. Furthermore, SCDPG projects to receive an average reimbursement of \$1,960 for the care of self-pay patients. Because these patients, by definition, are uninsured, the \$784 and \$1,960 average net revenue per patient for each category represent *out-of-pocket* payments.

The \$784 average collections from charity patients and the \$1,960 average collections from self-pay patients does not include the fees associated with the services rendered by the dentist, which can be substantial. The table below summarizes these data.

Table 6 - SCDPG Net Revenue Worksheet, Second Full Fiscal Year

Payment Source	% of Cases	# of Cases	Projected Avg. Reimbursement. Rate	Net Revenue	% of Total Net Revenue
Charity Care	4.20%	114	\$784	\$89,360	3%
Self-Pay	10.10%	274	\$1,960	\$537,222	19%
Medicaid	63.90%	1,734	\$736	\$1,277,151	46%
Commercial and other Insurance	21.80%	592	\$1,480	\$875,556	32%
Total	100%	5,908	\$1,024	\$2,779,289	100%

Source: SCDPG Application, FORM B/C

Charity care patients are by definition low-income; the average charity collection implies an access barrier to the lowest of the low income. Many moderate income "Self-Pay" patients may also find find that the \$1,960 out-of-pocket is also prohibitively expensive. SCDPG's "Sliding Fee Discount Program" classifies those with household incomes of at or under 200 percent of the federal poverty level as Charity. For a family of four, 200 percent of the Federal Poverty Level is \$48,600. This means that SCDPG will ask that a family of four with a household income of \$50,000 pay \$1,960 out-of-pocket for the facility fee for a dental procedure in SCDPG. This will be a substantial burden for some families. When they discover that the same service is available in offices and does not include a facility fee, the patients are likely to look elsewhere, for cost reasons. The medical literature is replete with studies showing that patients shop medical costs.

SCDPG's assumption that charity patients will pay an average of \$784 out-of-pocket, before dentist fees, is unreasonable and unsupported. Its assumption that self-pay patients will pay \$1,980 out-of-pocket, before dentist fees, is also unreasonable. Low-income individuals, and for that matter many other individuals, will not be able to afford these services at these prices. As a result, the application fails to demonstrate that low-income patients will be able to access the facility as assumed by SCDPG.

As a result, SCDPG is limiting access to medically underserved, specifically low-income, patients and therefore does not conform to Criterion 13c.

18. a. The applicant shall demonstrate the expected effects of the proposed services on competition in the proposed service area, including how any enhanced competition will have a positive impact upon the cost effectiveness, quality, and access to the services proposed; and in the case of applications for services where competition between providers will not have a favorable impact on cost effectiveness, quality, and access to the services proposed, the applicant shall demonstrate that its application is for the service for which competition will not have a favorable impact.

SCDPG'S PROPOSAL DOES NOT INCLUDE ANESTHESIOLOGIST COVERAGE FOR ALL PROCEDURES, DESPITE ITS OWN STATEMENTS THAT ALL PROCEDURES WILL BE COVERED BY AN ANESTHESIOLOGIST

The program proposed in this application, does not demonstrate a positive impact on quality or safety. The application states numerous times that anesthesiologists will provide sedation and anesthesia staff the facility. The application states repeatedly that providing anesthesiologists to manage sedation and anesthesia for dental and oral surgery procedures increases the quality and safety of the service. For example:

- In Section II.1 (Page 18), the application states: "The driving force behind the proposed project is Dr. Uday Reebye's vision to create access for dental professionals to state-of-the-art, patient-centric facilities in which they can perform dental procedures and surgeries on their patients requiring sedation in the safest possible setting with sedation or anesthesia services provided by licensed anesthesiologists."
- In response to demonstration project criterion #3 (page 50-51), the application states: "As previously discussed, the guiding vision behind the proposed project is to provide access to operating rooms and anesthesia services provided by board certified anesthesiologists for any credentialed dental professional who has patients requiring dental procedures under sedation or anesthesia. Only procedures requiring sedation or anesthesia will be provided at the proposed facility."
- In Section IV (Page 141), the application states that SCDPG will be "the first dental-only ambulatory surgical facility to be developed in the state, particularly one that proposes the scope and quality of services included in this project, such as the use of anesthesiologists for sedation"

Despite the application's claim to provide anesthesiologists for sedation and anesthesia, which apparently was central to the motivation to create the surgery center, the proposed expense statement appears to provide for no more than 1.11 FTEs of anesthesiologist (See row d in table below). This is not even enough to cover one room for six days a week. SCDPG proposes to operate Monday through Saturday. SCDPG proposes to have two operating rooms and two procedure rooms. It proposes to support 3,016 procedures, all under sedation, in these four rooms. One anesthesiologist can only provide sedation or anesthesia for one patient in one room at time. Therefore, the reviewer must assume that SCDPG will not provide anesthesiologists for all sedation procedures. This conflicts other statements in the application that anesthesiologists will staff all sedation procedures.

Table 7 - Estimated Number of Anesthesiologists at SCDPG

Notes	Metric	FFY2018	FFY2019	FFY2020
а	SCOP Anesthesiologist Expense	\$498,000	\$ 507,960	\$ 518,119
b	Growth		2.00%	2.00%
С	Cost of One, Full-Time Anesthesiologist: KSA Proposal From Regional Anesthesia	\$450,000	\$459,000	\$468,180
d	Estimated Number of Anesthesiologists at SODP	1.11	1.11	1.11

Notes:

a: SCDPG Application, FORM B/C

b: Year over year growth in a

c: Cost of Valleygate Anesthesia service contract, which is supported

by: http://www.medscape.com/features/slideshow/compensation/2015/anesthesiology

#page=5 d: a / c

Perhaps most importantly, the shortage of anesthesiologists will lead to situations that could jeopardize quality and patient safety. It is unlawful for a dentist without a sedation permit to treat a patient under sedation without an anesthesiologist or other professional licensed to provide anesthesia present.

Of the 22 dentists who showed intent to use the facility, 13 do not have current North Carolina Board of Dental Examiners permits to provide sedation or anesthesia. Together, these 13 general dentists pledged 1,140 of the total 3,016 projected procedures for FY 2020 (38 percent). These dentists, by NC regulation, are not permitted to provide anesthesia or sedation without an anesthesiologist present. The application thus indicates that more than one in three patients treated at the SCDPG will be treated by a dentist who has no training in these modalities.

The number of procedures requires more anesthesiologists, even if the treating oral surgeon managed all the oral surgery cases brought by Dr Reebye and associates. The anesthesiologist could not be present in more than one room at any one time. Who delivers anesthesia and monitors the patient when the anesthesiologist is not present in the room with the untrained dentist is not explained. This situation does not conform to Dr Reebey's described standards for anesthesia in SCDPG that is presented in Section II and III.

SCDPG's application confirms this on page 20:

"They (dentists) can complete requisite training and obtain oral sedation or anesthesia permits through approval by the North Carolina State Board of Dental Examiners and provide sedation or anesthesia themselves in their office without the supervision of a licensed anesthesiologist, or they can partner with licensed anesthesiologists for the provision of sedation or anesthesia services in their offices."

Therefore, 38 percent of the projected procedures at SCDPG require another practitioner permitted to provide sedation present for those procedures, yet only one anesthesiologist will be present in the building at any given time. The application indicates that four rooms in the facility will exclusively serve sedated patients.

Notwithstanding the obvious misrepresentations made in the application, there is no feasible way that enough anesthesia coverage exists in SCDPG's proposal to lawfully sedate and anesthetize the patients it proposes to serve.

With regard to impact on quality, the application suggests that presence of an anesthesiologist can compensate for a dentist's lack of formal training in anesthesia. As discussed in Criterion 1, caring for a patient who is under general anesthesia requires team participation and understanding of airway maintenance on the part of both anesthesiologist and dentist or surgeon, Attachment I also describes the external peer review required to license an oral surgeon in Pennsylvania to perform general anesthesia. This indicates that other states besides North Carolina take very seriously the importance of formal training to assure quality and safety of care.

The proposal has shortcomings associated with anesthesia coverage and credentialing. SCDPG, as proposed in the application, does not have a positive impact on quality and may have a negative impact on quality. As a result, the applicant does not conform to Criterion 18a.

Attachment B

Letter of Support from Dr. Jose Cangas

Ms. Martha Friscone Assistant Chief, CON Healthcare Planning and Certificate of Need Section Division of Health Service Regulation 2714 Mail Service Center Raleigh, NC 27699-2714

Dear Ms. Friscone,

Please accept this letter as notice of my desire to rescind the letter of support for Surgery Center for Dental Professionals in Greenville included in their certificate of need application on April 15th, 2016. The electronic document format used by Surgical Center, though helpful for some, is too easy to sign unintentionally. I signed it before realizing this was not the same group or proposal that I intended to support.

On April 13, 2016, I provided my letter of support to Valleygate Dental Surgery Centers of Fayetteville, who will provide a center in my area. As previously noted, my patients come from Cumberland, Scotland, Robeson, and Moore Counties. My support remains strong for this proposal.

Please contact me at (910) 693-3729 if you would like to discuss this memo further.

Sincerely,

Jose Cangas

Jose Cangas, DDS

Dental Derby

Attachment C

Selected Ambulatory Surgery Center Coverage Policies

Medicaid and Health Choice Clinical Coverage Policy No.: 4A Amended Date: October 1, 2015

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Medicaid and Health Choice Clinical Coverage Policy No.: 4A Amended Date: October 1, 2015

1.0 Description of the Procedure, Product, or Service

Dental services are defined as diagnostic, preventive, or corrective procedures provided by or under the supervision of a dentist. This includes services to treat disease, maintain oral health, and treat injuries or impairments that may affect a beneficiary's oral or general health. Such services shall maintain a high standard of quality and shall be within the reasonable limits of services customarily available and provided to most persons in the community with the limitations hereinafter specified. Only the procedure codes listed in this policy are covered under the North Carolina Medicaid and Health Choice Dental Programs.

The Division of Medical Assistance (DMA) has adopted procedure codes and descriptions as defined in the most recent edition of *Current Dental Terminology* (CDT 2015).

1.1 Definitions

None Apply.

2.0 Eligibility Requirements

2.1 Provisions

2.1.1 General

(The term "General" found throughout this policy applies to all Medicaid and NCHC policies)

- a. An eligible beneficiary shall be enrolled in either:
 - 1. the NC Medicaid Program (Medicaid is NC Medicaid program, unless context clearly indicates otherwise); or
 - 2. the NC Health Choice (NCHC is NC Health Choice program, unless context clearly indicates otherwise) Program on the date of service and shall meet the criteria in Section 3.0 of this policy.
- Provider(s) shall verify each Medicaid or NCHC beneficiary's eligibility each time a service is rendered.
- c. The Medicaid beneficiary may have service restrictions due to their eligibility category that would make them ineligible for this service.
- d. Following is only one of the eligibility and other requirements for participation in the NCHC Program under GS 108A-70.21(a): Children must be between the ages of 6 through 18.

2.1.2 Specific

(The term "Specific" found throughout this policy only applies to this policy)

- a. Medicaid
 None Apply.
- b. NCHC None Apply.

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Applicable FARS/DFARS apply.

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Medicaid and Health Choice Clinical Coverage Policy No.: 4A Amended Date: October 1, 2015

A.19 Billing for Dental Treatment in an Ambulatory Surgical Center

If a Medicaid or NCHC beneficiary is physically unmanageable, medically compromised, or severely developmentally delayed and will not cooperate for treatment in the dental office, treatment may be completed in an ambulatory surgical center (ASC). Dental providers enter "24" under place of treatment in field 38 on the 2006 ADA claim form. Services that normally require prior approval are handled in the usual manner.

A.20 Billing for Anesthesia Services in an Ambulatory Surgical Center

Anesthesiologists and certified registered nurse anesthetists (CRNAs) bill for anesthesia services rendered in ambulatory surgical centers using a CMS-1500 claim form. Claims are paid based on total anesthesia time. Anesthesia time begins when the anesthesiology provider prepares the beneficiary for induction of anesthesia and ends when the beneficiary can be placed under postoperative supervision and the anesthesiology provider is no longer in personal attendance.

Providers must complete the CMS-1500 claim form as follows:

- a. Enter a dental ICD-10-CM diagnosis codes in block 21.
- b. Enter place of service code "24" for the ambulatory surgical center in block 24B.
- c. Enter CPT anesthesia code "00170" (anesthesia for intraoral procedures, including biopsy; not otherwise specified) in block 24D.
- d. Enter one of the following modifiers in block 24D:
 - QX—Services performed by CRNA with medical direction by a physician
 - QZ—Services performed by CRNA without medical direction by a physician
 - QY—Medical direction of one CRNA by an anesthesiologist
 - QK—Medical direction of 2, 3, or 4 concurrent anesthesia procedures involving qualified individuals
 - AA—Anesthesia services performed personally by anesthesiologist
 - QS—Monitored anesthesia care service (must be billed along with one of the modifiers listed above)
- e. Enter total anesthesia time in minutes in block 24G on the claim form.

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A.21 Billing for Facility Charges by an Ambulatory Surgical Center

The Ambulatory Surgical Center (ASC) must submit claims for dental facility use with an **electronic claim** in NCTracks. Paper claims are no longer accepted. These claims are priced based on total time for the case using one of the following groups:

ASC Group	Total Time	Reimbursement
1	Up to 30 minutes	\$307.50
2	31–60 minutes	\$411.85
3	61–90 minutes	\$470.95
4	Over 90 minutes	\$581.76

Providers must complete the claim as instructed below:

- a. Enter the place of service code as "24" for the Ambulatory Surgical Center.
- b. Enter the dental procedure codes (*Code on Dental Procedures and Nomenclature* CDT-2015) for the services provided by the dentist.

Note: All dental codes begin with the "D" prefix. Only the dental procedure codes (CDT-2015) listed in the Clinical Coverage Policy 4A Dental Services **Subsection 5.3**, **Limitations or Requirements** are valid for billing in ASC cases.

- c. Enter modifier SG for each procedure code.
- d. Enter all charges on detail line 1 of the claim.
- e. Enter the total operating room time on detail line 1 of the claim (1 unit = 1 minute).
- f. For all remaining detail lines, enter the number of times (units) each dental procedure was provided with zero charges.
- g. Submit all dental procedure codes on one electronic claim for the surgery date.

A.22 Billing for Services Covered by Medicare and Medicaid

Federal law mandates that Medicaid be the payer of last resort when beneficiaries are covered by both Medicare and Medicaid. According to the *Medicare Benefit Policy Manual* published by CMS, Medicare *does not cover* "services in connection with the care, treatment, filling, removal or replacement of teeth or structures directly supporting the teeth.... 'Structures directly supporting the teeth' means periodontium, which includes the gingivae, dentogingival junction, periodontal membrane, cementum of the teeth, and alveolar process."

Medicare Part B *does* cover certain oral surgical services performed by dentists or oral surgeons as long as they are not provided primarily for the care, treatment, filling, removal, or replacement of teeth or structures directly supporting the teeth. Examples of Medicare-covered services include extractions in preparation for radiation therapy, reduction of jaw fractures, and removal of tumors of the jaw.

Services that are *not covered* by Medicare but *are covered* by Medicaid shall be filed directly with Medicaid on the 2006 ADA claim form. Services *covered* by Medicare and performed either in the emergency room or in the office must first be filed with the Medicare Part B carrier using the CMS-1500 claim form.

Note: For dually eligible Medicare and Medicaid beneficiaries, dental services covered by Medicare *do not* require Medicaid prior approval.

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The dental services listed below must be filed first with the beneficiary's Medicare Part B carrier on a CMS-1500 claim form. Typically, it is necessary to file such Medicare claims using *Current Procedural Terminology* (CPT) codes, published by the American Medical Association; therefore, convert the CDT codes shown here to CPT codes.

D7285 D7286 D7288 D7410 D7411 D7412 D7413 D7414 D7415 D7440 D7441	D7465 D7490 D7540 D7610 D7620 D7630 D7640 D7650 D7660 D7680 D7710	D7740 D7750 D7760 D7780 D7810 D7820 D7830 D7840 D7850 D7858	D7872 D7873 D7910 D7911 D7912 D7920 D7940 D7941 D7943 D7944 D7945	D7948 D7949 D7950 D7955 D7980 D7981 D7982 D7983 D7990 D7991
D7460 D7461	D7710 D7720 D7730	D7860 D7865 D7870	D7945 D7946 D7947	

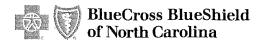
Professional claims filed to Medicare as the primary payer should be crossed over automatically to Medicaid. In order for the crossover claim to process, the NPI on the Medicare claim must be on file for a North Carolina Medicaid Provider Number (MPN). It is the provider's responsibility to check the Medicaid Remittance and Status Report to verify that the claim was crossed over from Medicare.

Claims that do not crossover and have been paid by Medicare can be filed as an 837 professional transaction by completing the Coordination of Benefits (COB) loop. Refer to the implementation guide at http://wpc-edi.com and the NC Medicaid HIPAA Companion Guide on DMA's website at http://www.ncdhhs.gov/dma/hipaa/compguides.htm for instructions on completing the 837 professional transaction.

Claims that do not cross over, have been paid by Medicare, and are included on the electronic submission exceptions list at http://www.ncdhhs.gov/dma/provider/ECSExceptions.htm can be filed on a CMS-1500 claim form. The paper claim form must be submitted with the Medicare voucher attached. If claims do not cross over, have been paid by Medicare, and are not included on the electronic submission exceptions list, the claims must be submitted electronically.

When the procedure(s) is denied by Medicare, the provider shall submit the comparable 2015 CDT code(s) directly to Medicaid on a paper 2006 ADA claim form with the Medicare voucher and Medicaid Resolution Inquiry form attached. This will allow the claim to process appropriately according to DMA policy.

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An independent licensee of the Blue Cross and Blue Shield Association

Corporate Medical Policy

Dental Criteria for use of Hospital Inpatient or Outpatient Facility Services or Ambulatory Surgery Center Facility Services

File Name:

dental_inpatient_and_outpatient_services

Origination:

5/1987

Last CAP Review:

10/2015

Next CAP Review:

10/2016

Last Review:

10/2015

Description of Procedure or Service

Dental treatment and/or oral surgery can usually be provided in an office setting. However, hospital inpatient, hospital outpatient or ambulatory surgery facilities may be indicated in some situations. When it is medically necessary that the services be provided in a setting other than an office, the facilities may be hospital based or free-standing.

***Note: This Medical Policy is complex and technical. For questions concerning the technical language and/or specific clinical indications for its use, please consult your physician.

Policy

BCBSNC will provide coverage for Hospital Inpatient or Outpatient Facility Services or Ambulatory Surgery Center Facility services used to provide dental services when it is determined to be medically necessary because the medical criteria and guidelines shown below are met.

Benefits Application

<u>Note:</u> This policy addresses the Hospital Inpatient or Outpatient Facility services and Ambulatory Surgery Center Facility services, not the provision of dental care or oral surgery. Professional dental services are covered only to the extent that the member has dental benefits.

This medical policy relates only to the services or supplies described herein. Please refer to the Member's Benefit Booklet for availability of benefits. Member's benefits may vary according to benefit design; therefore member benefit language should be reviewed before applying the terms of this medical policy.

See Dental Treatment Covered Under Your Medical Benefit.

When Use of Hospital Inpatient or Outpatient Facility Services or Ambulatory Surgery Center Facility Services for Dental is covered

- 1) The use of an Ambulatory Surgery Center or Hospital Outpatient facility services may be medically necessary when providing dental care or oral surgery in the following situations:
 - a) Complex oral surgical procedures with a high probability of complications due to the nature of the surgery;
 - b) Concomitant systemic disease for which the patient is under current medical management and which increases the probability of complications; or

Dental Criteria for use of Hospital Inpatient or Outpatient Facility Services or Ambulatory Surgery Center Facility Services

- c) When anesthesia is required for the safe and effective administration of dental procedures for young children (below the age of 9 years), persons with serious mental or physical conditions or persons with significant behavioral problems.
- 2) The use of Hospital Inpatient facility services may be medically necessary when providing dental care or oral surgery in the following situations:
 - a) Complex oral surgical procedures with a greater than average incidence of life threatening complications, such as excessive bleeding or airway obstruction;
 - b) Concomitant, non-dental systemic conditions for which the patient is under current medical management and which currently are not in optimal control and, therefore, may increase the risk of serious complications.
 - c) Postoperative complications following outpatient dental/oral surgery.
 - d) When anesthesia is required for the safe and effective administration of dental procedures for young children (below the age of 9 years), persons with serious mental or physical conditions or persons with significant behavioral problems.

When Use of Hospital Inpatient or Outpatient Facility Services or Ambulatory Surgery Center Facility Services for Dental is not covered

In the absence of the medical criteria shown above.

For the dentist's or patient's convenience.

Policy Guidelines

Claims should be reviewed for documentation of medical necessity.

Prior review and certification are required for inpatient admission for dental/oral surgery.

Billing/Coding/Physician Documentation Information

This policy may apply to the following codes. Inclusion of a code in this section does not guarantee that it will be reimbursed. For further information on reimbursement guidelines, please see Administrative Policies on the Blue Cross Blue Shield of North Carolina web site at www.bcbsnc.com. They are listed in the Category Search on the Medical Policy search page.

Applicable codes: There is no specific code for these services.

BCBSNC may request medical records for determination of medical necessity. When medical records are requested, letters of support and/or explanation are often useful, but are not sufficient documentation unless all specific information needed to make a medical necessity determination is included.

Scientific Background and Reference Sources

BCBSA Medical Policy Reference Manual

Medical Policy Advisory Group Review - 3/99

Dental Criteria for use of Hospital Inpatient or Outpatient Facility Services or Ambulatory Surgery Center Facility Services

General Assembly of North Carolina, House Bill 1119, General Statues '58-3-122.

MEDLINE and MD Consult literature search from 1995 to present.

Specialty Matched Consultant Advisory Panel - 5/2001

Specialty Matched Consultant Advisory Panel - 5/2003

Specialty Matched Consultant Advisory Panel - 5/2005

Specialty Matched Consultant Advisory Panel - 5/2007

Specialty Matched Consultant Advisory Panel- 11/2009

Senior Medical Director Review- 8/2010

Specialty Matched Consultant Advisory Panel- 10/2011

Specialty Matched Consultant Advisory Panel- 9/2012

Specialty Matched Consultant Advisory Panel- 10/2013

Specialty Matched Consultant Advisory Panel- 10/2014

Medical Director Review- 10/2014

Specialty Matched Consultant Advisory Panel 10/2015

Medical Director Review 10/2015

Policy Implementation/Update Information

99/99	Revised: Coding revisions - ImplementInfo
5/87	Original Policy
1/97	Reaffirmed
3/99	Reviewed by MPAG. Reaffirmed
9/99	Reformatted, Medical Term Definitions added, Combined Inpatient and Outpatient Policies
10/00	System coding changes.
2/01	Reaffirm. No change in criteria.
5/01	Specialty Matched Consultant Advisory Panel review (5/2001). No change to policy. Coding format change.
5/02	Policy clarified to indicate that the services addressed are the inpatient, outpatient, or ambulatory services, not the dental care or oral surgery services.
6/03	Specialty Matched Consultant Advisory Panel review (5/30/2003). No changes to criteria. Revised Benefits Application section. Typos corrected.
3/04	Billing/Coding section updated for consistency.
5/05	Specialty Matched Consultant Advisory Panel review. No changes to criteria.

Dental Criteria for use of Hospital Inpatient or Outpatient Facility Services or Ambulatory Surgery Center Facility Services

- 8/28/06 Medical Policy changed to Evidence Based Guideline. (pmo)
- 10/2/06 Evidence Based Guideline changed to Medical Policy. (pmo)
- 6/18/07 Under "When Covered" section 1.c. and 2.d. changed "and" to "or persons with significant behavioral problems." Reference source added. (pmo)
- 9/28/10: Under "When Covered" section 1.c. and 2.d. changed from 9 years and under to below the age of 9 years. Under Policy Guidelines added "Prior review and certification are required for inpatient admission for dental/oral surgery." Under Policy Guidelines, changed statement "Claims should be reviewed by individual consideration for documentation of medical necessity to "Claims should be reviewed for documentation of medical necessity." Specialty Matched Consultant Advisory Panel review 1/2010. Reviewed by Senior Medical Director. (lpr)
- 11/8/11 Specialty Matched Consultant Advisory Panel review 10/26/2011. No changes to policy statement. (lpr)
- 10/30/12 Specialty Matched Consultant Advisory Panel review 10/17/2012. No changes to policy statement. (lpr)
- 11/12/13 Specialty Matched Consultant Advisory Panel review 10/21/2013. No changes to policy statement. (lpr)
- 11/11/14 Specialty Matched Consultant Advisory Panel review 10/2014. Medical Director Review 10/2014. No changes to policy statement. (td)
- 12/30/15 Specialty Matched Consultant Advisory Panel review 10/29/2015. Medical Director Review 10/2015. (td)

Medical policy is not an authorization, certification, explanation of benefits or a contract. Benefits and eligibility are determined before medical guidelines and payment guidelines are applied. Benefits are determined by the group contract and subscriber certificate that is in effect at the time services are rendered. This document is solely provided for informational purposes only and is based on research of current medical literature and review of common medical practices in the treatment and diagnosis of disease. Medical practices and knowledge are constantly changing and BCBSNC reserves the right to review and revise its medical policies periodically.





Subject Anesthesia and Facility Services for Dental Treatment

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Hyperlink to Related Coverage Policies

Orthognathic Surgery

INSTRUCTIONS FOR USE

The following Coverage Policy applies to health benefit plans administered by Cigna companies. Coverage Policies are intended to provide guidance in interpreting certain standard Cigna benefit plans. Please note, the terms of a customer's particular benefit plan document [Group Service Agreement, Evidence of Coverage, Certificate of Coverage, Summary Plan Description (SPD) or similar plan document] may differ significantly from the standard benefit plans upon which these Coverage Policies are based. For example, a customer's benefit plan document may contain a specific exclusion related to a topic addressed in a Coverage Policy. In the event of a conflict, a customer's benefit plan document always supersedes the information in the Coverage Policies. In the absence of a controlling federal or state coverage mandate, benefits are ultimately determined by the terms of the applicable benefit plan document. Coverage determinations in each specific instance require consideration of 1) the terms of the applicable benefit plan document in effect on the date of service; 2) any applicable laws/regulations; 3) any relevant collateral source materials including Coverage Policies and; 4) the specific facts of the particular situation. Coverage Policies relate exclusively to the administration of health benefit plans. Coverage Policies are not recommendations for treatment and should never be used as treatment guidelines. In certain markets, delegated vendor guidelines may be used to support medical necessity and other coverage determinations. Proprietary information of Cigna. Copyright ©2015 Cigna

Coverage Policy

Facility and/or monitored anesthesia care (MAC)/general anesthesia services provided in conjunction with dental treatment may be impacted by benefit plan language and governed by state mandates. Please refer to the applicable benefit plan document to determine benefit availability and the terms and conditions of coverage.

Cigna covers MAC/general anesthesia and associated facility charges in conjunction with dental surgery or procedures performed by a dentist, oral surgeon or oral maxillofacial surgeon normally excluded under the medical plan as medically necessary when there is an appropriately trained and licensed professional to both administer and monitor MAC/general anesthesia in EITHER of the following locations:

- a properly-equipped and staffed office
- · a hospital or outpatient surgery center

for ANY of the following:

- individual age seven years or younger
- individual who is severely psychologically impaired or developmentally disabled
- individual with American Society of Anesthesiologists (ASA) Physical Status Classification * of P3 or greater
- individual who has one or more significant medical comorbidities which:
 - > preclude the use of either local anesthesia or conscious sedation OR

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- > for which careful monitoring is required during and immediately following the planned procedure
- individuals in whom conscious sedation would be inadequate or contraindicated for any of the following procedures:
 - > removal of two or more impacted third molars
 - > removal or surgical exposure of one impacted maxillary canine
 - > surgical removal of two or more teeth involving more than one quadrant
 - > routine removal of six or more teeth
 - > full arch alveoplasty
 - > periodontal flap surgery involving more than one quadrant
 - radical excision of tooth-related lesion greater than 1.25 cm or ½ inch
 - > tooth-related radical resection or ostectomy with or without grafting
 - > placement or removal of two or more dental implants
 - > tooth transplantation or removal from maxillary sinus
 - > extraction with bulbous root and/or unusual difficulty or complications noted
 - removal of exostosis involving two areas
 - > removal of torus mandibularis involving two areas

Cigna does not cover anesthesia and/or associated facility charges for dental and oral surgery services which are of a cosmetic nature.

*See page four in the General Background for definitions of American Society of Anesthesiologists (ASA) Physical Status Classification

General Background

Deep sedation, or general anesthesia services, may be required to receive comprehensive dental care for some patients who have special challenges related to their age, behavior, developmental disabilities, medical status, intellectual limitations, or special needs. Oral conditions, such as caries and periodontal diseases, if left untreated, can result in loss of function, infection, and pain (American Academy of Pediatric Dentistry [AAPD], 2005).

Sedation and anesthesia procedures performed on dental patients in nontraditional settings have increased over the past several years. These services could be provided in an office, outpatient facility, or hospital. This care should be provided by qualified and appropriately trained individuals and in facilities accredited in accordance with state regulations and professional society guidelines (AAPD, 2012b; American Society of Anesthesiologists [ASA], 2014b; ASA, 2013; American Dental Association [ADA], 2012a; Nick, et al., 2003).

A carefully obtained and reviewed preoperative medical history, physical examination, and laboratory tests (as necessary), designed to identify high-risk patients with potential medical contraindications to office-based anesthesia, is recommended to prevent anesthetic emergencies by applying strict inclusion criteria (AAPD, 2006; Perrott, et al., 2003; D'eramo, et al., 2003; Iverson, 2002; Hoeffllin, et al., 2001). Office-based facilities must ensure timely access to the healthcare system for complications that may occur during, or days after, the surgery (AAPD, 2012b; ASA, 2014b; Fleisher, et al., 2004).

It is recommended that facilities that administer general anesthesia be equipped with anesthesia emergency drugs, appropriate resuscitation equipment, and properly trained staff to quickly and skillfully respond to anesthetic medical emergencies (Doyle and Colletti, 2006; ASA, 2013). Outpatient surgery studies have generally reported a low incidence of surgery-related morbidity with proper patient selection. However, studies of adverse events following outpatient surgery suffer from limitations associated with selection bias, incomplete reporting and limited follow-up. For example, a recent study from Florida, one of few states that requires the central reporting of adverse events, observed a 10-fold increase of adverse events with surgeries performed in doctors' offices when compared to ambulatory surgical centers (Vila, et al., 2004). Factors known to be associated with adverse events include patient age (with high risk among the very young and very old), the

length of the procedure, health status, the type of procedure, provider qualifications and facility accreditation (Fleisher, et al., 2004).

Literature Review

Perrott et al. (2003) conducted a prospective cohort study to provide an overview of current anesthetic practices of oral and maxillofacial surgeons in the office-based ambulatory setting. The patients received local anesthesia, conscious sedation, or deep sedation/general anesthesia. The predictor variables were categorized as demographic, anesthetic technique, staffing, adverse events, and patient-oriented outcomes. The sample comprised 34,191 patients, 71.9% of whom received deep sedation/general anesthesia. A total of 14,912 patient satisfaction forms were completed by patients who had deep sedation/general anesthesia. The overall complication rate was 1.3 per 100 cases, and the complications were minor and self-limiting. The lowest complication rate (0.4%) was associated with the use of local anesthesia, and the highest complication rate was with deep sedation/general anesthesia (1.5%). The conscious sedation complication rate was (0.9%) (p<0.001). Two patients who both received deep sedation/general anesthesia experienced complications requiring hospitalization. The patients receiving deep sedation/general anesthesia were overwhelmingly satisfied, with 95.8% reporting extreme or moderate satisfaction.

Coté et al. (2000) developed a database consisting of descriptions of adverse sedation events in pediatric patients, derived from the Food and Drug Administration's adverse drug event reporting system, from the U.S. Pharmacopeia, and from a survey of pediatric specialists. A total of 95 cases were reviewed for factors that may have contributed to adverse sedation events, ranging from death to no harm. Thirty-two of the 95 cases involved sedation/anesthesia for dental procedures, most in a nonhospital-based venue. Twenty-nine cases resulted in death or permanent neurological injury. Three cases resulted in prolonged hospitalization without injury or no harm. The authors stated this may be a result of the fact that general dentists have little pediatric training, particularly in drugs used for sedation/analgesia. The training and skills of the dental specialists was not clear from the case reports, Inadequate resuscitation was often associated with a nonhospital-based setting. In all venues, inadequate and inconsistent physiologic monitoring contributed to poor outcomes. Other issues included: inadequate presedation medical evaluation, lack of an independent observer, medication errors, and inadequate recovery procedures. The authors recommended that uniform, specialty-independent guidelines for monitoring children during and after sedation are needed. Appropriate equipment and medications for resuscitation should be immediately available, regardless of where the child is sedated. Also, all healthcare providers who sedate children should have advanced airway assessment and management training with resuscitation skills to safely rescue patients if an adverse sedation event occurs.

Professional Organizations/Societies

American Society of Anesthesiologists (ASA): The ASA definition of levels of sedation/analgesia (ASA, 2014):

- Minimal sedation (i.e., anxiolysis) is a drug-induced state during which patients respond normally to verbal commands. Although cognitive function and coordination may be impaired, airway reflexes, and ventilatory and cardiovascular functions are unaffected.
- Moderate sedation/analgesia (i.e., conscious sedation) is a drug-induced depression of consciousness
 during which patients respond purposefully* to verbal commands, either alone or accompanied by light
 tactile stimulation. No interventions are required to maintain a patent airway and spontaneous
 ventilation is adequate. Cardiovascular function is usually maintained.
- Deep sedation/analgesia is a drug-induced depression of consciousness during which patients cannot be easily aroused but respond purposefully* following repeated or painful stimulation. The ability to independently maintain ventilatory function may be impaired. Patients may require assistance in maintaining a patent airway, and spontaneous ventilation may be inadequate. Cardiovascular function is usually maintained.
- General anesthesia is a drug-induced loss of consciousness during which patients are not arousable, even by painful stimulation. The ability to independently maintain ventilatory function is often impaired. Patients often require assistance in maintaining a patent airway, and positive pressure ventilation may be required because of depressed spontaneous ventilation, drug-induced depression, or neuromuscular function. Cardiovascular function may be impaired.

*Note: Reflex withdrawal from a painful stimulus is not considered a purposeful response.

Page 3 of 11 Coverage Policy Number: 0415 The ASA states that Monitored Anesthesia Care ("MAC") does not describe the continuum of depth of sedation, rather it describes "a specific anesthesia service in which an anesthesiologist has been requested to participate in the care of a patient undergoing a diagnostic or therapeutic procedure."

The ASA has developed a Physical Status Classification System. The ASA states that there is no additional information to further define these categories (ASA, 2014d):

- ASA 1: normally healthy patient
- ASA II: patient with mild systemic disease
- · ASA III: patient with severe systemic disease
- ASA IV: patient with severe systemic disease that is a constant threat to life
- ASA V: moribund patient who is not expected to survive without an operation
- ASA VI: A declared brain-dead patient whose organs are being removed for donor purposes

The ASA position on monitored anesthesia care states that, "Monitored anesthesia care is a specific anesthesia service for a diagnostic or therapeutic procedure. Indications for monitored anesthesia care include the nature of the procedure, the patient's clinical condition and/or the potential need to convert to a general or regional anesthetic. Monitored anesthesia care includes all aspects of anesthesia care — a preprocedure visit, intraprocedure care and postprocedure anesthesia management. During monitored anesthesia care, the anesthesiologist provides or medically directs a number of specific services, including but not limited to:

- diagnosis and treatment of clinical problems that occur during the procedure
- support of vital functions
- administration of sedatives, analgesics, hypnotics, anesthetic agents or other medications as necessary for patient safety
- psychological support and physical comfort
- provision of other medical services as needed to complete the procedure safely

Monitored anesthesia care may include varying levels of sedation, analgesia and anxiolysis as necessary. The provider of monitored anesthesia care must be prepared and qualified to convert to general anesthesia when necessary. If the patient loses consciousness and the ability to respond purposefully, the anesthesia care is a general anesthetic, irrespective of whether airway instrumentation is required" (ASA 2013c).

The ASA statement on distinguishing monitored anesthesia care (MAC) from moderate sedation/analgesia (conscious sedation) states that, "This physician service can be distinguished from Moderate Sedation in several ways. An essential component of MAC is the anesthesia assessment and management of a patient's actual or anticipated physiological derangements or medical problems that may occur during a diagnostic or therapeutic procedure. While Monitored Anesthesia Care may include the administration of sedatives and/or analgesics often used for Moderate Sedation, the provider of MAC must be prepared and qualified to convert to general anesthesia when necessary. Additionally, a provider's ability to intervene to rescue a patient's airway from any sedation-induced compromise is a prerequisite to the qualifications to provide Monitored Anesthesia Care. By contrast, Moderate Sedation is not expected to induce depths of sedation that would impair the patient's own ability to maintain the integrity of his or her airway. These components of Monitored Anesthesia Care are unique aspects of an anesthesia service that are not part of Moderate Sedation (ASA, 2013b).

The ASA guidelines for office-based anesthesia state that, compared with licensed ambulatory surgical facilities and acute-care hospitals, offices currently have little or no regulation, oversight, or control by federal, state, or local laws. Therefore, ASA members must investigate areas taken for granted in the hospital or ambulatory surgical facility, such as governance, organization, construction and equipment; and policies and procedures including: fire, safety, drugs, emergencies, staffing, training, and unanticipated patient transfers (ASA, 2014).

The ASA statement on qualifications of anesthesia providers in the office-based setting recommends that where anesthesiologist participation is not practicable, nonphysician anesthesia providers must, at a minimum, be supervised by the operating practitioner or other licensed physician. The supervising operating practitioner, or other licensed physician, should be specifically trained in sedation, anesthesia, and rescue techniques appropriate to the type of sedation or anesthesia being provided, and to the office-based surgery being

performed. The ASA recommends that these guidelines be read in conjunction with the ASA's guidelines for office-based anesthesia (ASA, 2014c).

The 2002 ASA evidence-based practice guideline for sedation and analgesia by non-anesthesiologists applies to procedures performed in a variety of settings (e.g., hospitals, freestanding clinics, dentist, and other offices) (Gross, et al., 2002). The guidelines allow clinicians to provide patients the benefits of sedation/analgesia while minimizing the associated risks. Numerous recommendations are included in the guideline. The following is a subset of the recommendations:

- A designated individual other than the practitioner performing the procedure should be present to
 monitor the patient throughout the procedures performed with sedation/analgesia. During deep
 sedation, this individual should have no other responsibilities.
- Whenever possible, appropriate medical specialists should be consulted prior to administration of sedation to patients with significant underlying conditions.

There have been no updates to the guideline since 2002.

American Academy of Pediatric Dentistry (AAPD): In 2006, the AAPD and the American Academy of Pediatric (AAP) published an updated guideline for monitoring and management of pediatric patients during and after sedation for diagnostic and therapeutic procedures. This updated statement unifies the guidelines for sedation used by medical and dental practitioners, adds clarification regarding monitoring modalities, provides new information from the medical and dental literature, and suggests methods for further improvement in safety and outcomes. With this guideline, the Joint Commission on Accreditation of Healthcare Organizations, the ASA, the AAP, and the AAPD will use similar language to define sedation categories and the expected physiologic responses. The AAPD and AAP recommend the following:

- Candidates for minimal, moderate, or deep sedation are patients who are in ASA Classes I and II.
 Children in ASA Classes III and IV, children with special needs, and those with anatomic airway abnormalities or extreme tonsillar hypertrophy present issues that require additional and individual consideration, particularly for moderate and deep sedation. Practitioners are encouraged to consult with appropriate subspecialists and/or an anesthesiologist for patients at increased risk of experiencing adverse sedation events because of their underlying medical/surgical conditions.
- The pediatric patient should be accompanied to and from the treatment facility by a responsible person (e.g., parent or legal guardian). It is recommended that two or more adults accompany children who are in car safety seats if transportation to and from a treatment facility is provided by one of the adults.
- The practitioner who uses sedation must have immediate available facilities, personnel, and equipment to manage emergency and rescue situations. The most common serious complications of sedation involve compromise of the airway or depressed respirations resulting in airway obstruction, hypoventilation, hypoxemia, and apnea. Hypotension and cardiopulmonary arrest may occur, usually from inadequate recognition and treatment of respiratory compromise. Rare complications may include seizures and allergic reactions.
- A protocol for access to back-up emergency services shall be identified, with an outline of the
 procedures necessary for immediate use. For nonhospital facilities, a protocol for ready access to
 ambulance service and immediate activation of the emergency medical system for life-threatening
 complications must be developed and maintained. The availability of emergency medical services does
 not replace the practitioner's responsibility to provide initial rescue in managing life-threatening
 complications.
- An emergency cart or kit must be immediately accessible and contain equipment to provide the necessary age- and size-appropriate drugs and equipment to resuscitate a nonbreathing and unconscious child. The contents of the kit must allow for the provision of continuous life support while the patient is being transported to a medical facility or to another area within a medical facility. All equipment and drugs must be checked and maintained on a scheduled basis. Monitoring devices must have a safety and function check on a regular basis as required by local or state regulation.

- The time and condition of the child at discharge from the treatment area or facility should be
 documented; this should include documentation that the child's level of consciousness and oxygen
 saturation in room air have returned to a state that is safe for discharge as recognized by the following
 criteria:
 - o cardiovascular function and airway patency are satisfactory and stable
 - o patient is easily arousable, and protective reflexes are intact
 - o patient can talk (if age-appropriate)
 - o patient can sit up unaided (if age-appropriate)
 - o for a very young or handicapped child incapable of the usually expected responses, the presedation level of responsiveness or a level as close as possible to the normal level for that child should be achieved
 - o state of hydration is adequate

There have been no updates to the guideline since 2006.

The AAPD policy statement on the use of deep sedation and general anesthesia in the pediatric dental office states that "The AAPD endorses the in-office use of deep sedation or general anesthesia on select pediatric dental patients administered in an appropriately-equipped and staffed facility as outlined in the Guideline for Monitoring and Management of Pediatric Patients During and After Sedation for Diagnostic and Therapeutic Procedures" (AAPD, 2012b).

The AAPD guideline on the use of anesthesia care personnel in the administration of in-office deep sedation/general anesthesia to the pediatric patient is to be used to assist the dental provider who elects to use an anesthesia care provider for the administration of deep sedation/general anesthesia for pediatric dental patients in a dental office or other facility outside of an accredited hospital or surgicenter. The guideline addresses personnel, facilities, documentation, and risk management and quality mechanisms required to provide responsible and optimal care to the pediatric dental patient. The guideline states that office-based deep sedation/general anesthesia techniques require at least three individuals and all personnel should be trained in emergency procedures (AAPD, 2012c).

The AAPD clinical guideline on management of dental patients with special healthcare needs addresses behavior guidance recommending that, "Because of dental anxiety or a lack of understanding of dental care, children with disabilities may exhibit resistant behaviors. These behaviors can interfere with the safe delivery of dental treatment. With the parent/caregiver's assistance, most patients with physical and mental disabilities can be managed in the dental office. Protective stabilization can be helpful in patients for whom traditional behavior guidance techniques are not adequate. When protective stabilization is not feasible or effective, sedation or general anesthesia is the behavioral guidance armamentarium of choice. When in-office sedation/general anesthesia is not feasible or effective, an out-patient surgical care facility might be necessary" (AAPD, 2012a).

American Dental Association (ADA): The 2012 ADA guideline for the use of sedation and general anesthesia by dentists recommends that to administer deep sedation or general anesthesia, the dentist must have completed:

- an advanced education program accredited by the ADA Commission on Dental Accreditation that
 affords comprehensive and appropriate training necessary to administer and manage deep sedation or
 general anesthesia, commensurate with the deep sedation or general anesthesia clinical guidelines in
 this ADA guideline
- a current certification in Basic Life Support for Healthcare Providers and either current certification in Advanced Cardiac Life Support (ACLS) or completion of an appropriate dental sedation/anesthesia emergency management course on the same re-certification cycle that is required for ACLS

The guideline states that administration of deep sedation or general anesthesia by another qualified dentist or independently practicing qualified anesthesia healthcare provider requires the operating dentist and his/her clinical staff to maintain current certification in BLS Course for the Healthcare Provider.

The ADA guideline recommends that patients must be evaluated prior to the start of any sedative/anesthetic procedure. Healthy or stable patients (i.e., ASA I or II) may require only a review of their medical history, including medication use. Patients who are medically unstable, or who have a significant health disability (i.e., ASA III or IV), may require consultation with their primary physician, or consulting medical specialist. The guidelines state that a minimum of three individuals must be present: a qualified dentist to administer and monitor the deep sedation/general anesthesia; two individuals who are competent in basic life support, or its equivalent; another individual trained in patient monitoring, if the same individual administering deep sedation/general anesthesia is performing the dental procedure. The guidelines recommend that suitable equipment must be on the premises to provide advanced airway maintenance and advanced life support along with in-line oxygen analyzers for intubated patients. Further recommendations address strict monitoring, documentation, recovery, and discharge criteria (ADA, 2012a).

American Association of Oral and Maxillofacial Surgeons (AAOMS): In the 2012 AAOMS Parameters of Care: Clinical Practice Guidelines for Oral and Maxillofacial Surgery section on Patient Assessment the authors state, "In all cases of ASA class II or greater patients, consideration should be given to consultation with a physician for medical clarification of the patient's physiologic condition clearance to assist the OMS in determining the appropriateness for outpatient OMS procedures that may include sedation or general anesthesia". The authors state that, "The practitioner's selection of a particular technique for controlling pain and anxiety during a specific procedure has to be individually determined for each patient, considering the risks and benefits for each case". The section addressing Anesthesia in Outpatient Facilities discusses three subpopulations of individuals (i.e., children, pregnant women and individuals with obesity) who are at higher risk of anesthesia complications due to anatomical and physiological variations. Additionally, numerous health conditions are identified that may be impacted by anesthesia. The authors identify specific factors affecting risk for deep sedation/general anesthesia including:

- loss of the ability to respond purposefully to physical stimulation or verbal command and/or loss of protective
- cardiopulmonary reflexes and the ability to maintain an airway independently
- factors compromising airway patency
- factors compromising cardiovascular function
- noncompliance with or conditions affecting NPO requirements
- psychological aversion to intravenous or intramuscular injections and/or anesthetic mask
- presence of intraoral abscess or cellulitis
- presence of facial anomalies and anatomical variations that might prevent or impede adequate airway management
- presence of a recent or active upper respiratory infection
- regulatory and/or third-party decisions concerning access to care, indicated therapy, drugs, devices, and/or materials
- · special needs patients

Use Outside of the US

No relevant information.

Summary

Dental treatment with monitored anesthesia care (MAC) or general anesthesia allows dentists and specialists to improve treatment conditions and provide higher quality of care to many patients with medical and physical disabilities and other special needs. Professional societies have published guidelines that address the use of, and requirements to administer, deep sedation or general anesthesia to the dental patient. The guidelines address personnel, facilities, documentation, and quality mechanisms required to provide responsible and optimal care to patients.

Coding/Billing Information

Note: 1) This list of codes may not be all-inclusive.

2) Deleted codes and codes which are not effective at the time the service is rendered may not be eligible for reimbursement.

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The scope of this policy is limited to medical plan coverage of the facility and/or monitored anesthesia care (MAC)/general anesthesia services provided in conjunction with dental treatment, and not the dental or oral surgery services. The professional dental procedure codes listed are for reference only and do not imply coverage of dental procedures.

Covered when medically necessary when used to report facility charges for dental procedures performed outpatient:

CPT [®] * Codes	Description	
01999	Unlisted anesthesia procedure(s)	
41899	Unlisted procedure, dentoalveolar structures	

CDT®**	Description
Codes	
D7140	Extraction, erupted tooth or exposed root (elevation and/or forceps removal)
D7230	Surgical extraction of partially bony impacted tooth
D7240	Surgical extraction of completely bony impacted tooth
D7241	Surgical extraction of completely bony impacted tooth, with unusual surgical complications
D7250	Surgical removal of residual tooth roots (cutting procedure)
D7272	Tooth transplantation (includes transplantation from one site to another and splinting and/or stabilization)
D7310	Alveoplasty in conjunction with extractions – four or more teeth or tooth spaces per quadrant
D7321	Alveoplasty not in conjunction with extractions – one to three teeth or tooth spaces, per quadrant.
D7471	Removal of lateral exostosis (maxilla or mandible)
D7473	Removal of torus mandibularis
D9220	Deep sedation/general anesthesia, first 30 minutes
D9221	Deep sedation/general anesthesia; each additional 15 minutes

^{*}Current Procedural Terminology (CPT®) [©]2014 American Medical Association: Chicago, IL. ["]Current Dental Terminology (CDT®) [©]2011—2012 American Dental Association, Chicago, IL.

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Attachment D

Sample Policy: Hospital Credentialing

CAPE FEAR VALLEY HEALTH SYSTEM
(Cape Fear Valley Medical Center/Highsmith Rainey Specialty Hospital/Hoke Healthcare)
DELINEATION OF PRIVILEGES – Dentistry

APPLICANT:	DATE:	
PLEASE INDICATE F	FACILITY(ies) WHERE PRIVILEGES ARE BEING REQUESTED: HRSH Hoke Healthcare	·
	G EMERGENCY: At the time of a clinical emergency, a member of the medical staff who whatever care he/she believes to be indicated.	holds clinical
EDUCATION/TRAINI	IING/EXPERIENCE	
To be eligible to request EDUCATION: TRAINING: EXPERIENCE:	t privileges in Dentistry all applicants must meet the following minimal guidelines: DDS/DMD Successful completion of an approved one-year general practice residency (general denspecialty training program (specialists). The applicant must demonstrate that he or she has provided full-time dental services for of the past 18 months. Recent residency training satisfies this request.	
D	Documentation of Experience should be attached to this Request for Privileges.	
SPECIAL REQUIREM	MENT:	
staff assumes responsibil recording the medical his	ed to admit in conjunction with a physician member of the medical staff. The physician member oility for the overall aspects of the patient's care throughout the hospital stay, including perforministory and physical examination and recording a medical discharge summary. Patients admitted given the same appraisal as patients admitted for other services. The physician supervision cont.	ng and to the hospital
during the hospitalization	The medical staff is responsible for the care of any medical problem that may be present or that is on of dental patients. The dentist is responsible for dental care of the patient, including the dental appropriate elements of the patient's record.	
CORE PRIVILEGES		
health care to patients of	istry include the ability to admit, consult, work up, and provide diagnostic, preventive and therap of all ages to correct or treat various routine conditions of the oral cavity. Core privileges include These core privileges do not include the following special requests.	
SPECIAL REQUESTS	<u>'S</u>	
	alified for "core privileges" in Dentistry may request privileges to perform the following provide e credentialling guidelines noted for each procedure.	d the applicant
	ns Below the Gumline ALLING GUIDELINES: Documentation of training and satisfactory performance of the proceed onth period.	dure during the
CREDENTIAL	on of Existing Jaw Bone for Oral Prosthesis ALLING GUIDELINES: Documentation of training and documentation of satisfactory performing the previous 12 month period.	nance of the
CREDENTIAL and document training within individuals wis	ation/Analgesia (conscious sedation) ALLING GUIDELINES: Applicant must have completed residency within the previous twat training during residency OR must provide documentation of appropriate post-residence in the previous two years (on-site program is available). (NOTE: At the time of reappoint rishing to continue privileges in moderate sedation/analgesia will be required to document of the during the reappointment period).	cy CME ment

DENTI	STRY	
Page 2		APPLICANT:
Applicatraining eligible	program and can document full-tin to request subspecialty dental privi rivileges requested:	leges in dentistry and who have satisfactorily completed a formal dental subspecialty ne practice in the subspecialty area for at least 12 months out the previous 18 months are ileges concurrent with their training and practice experience. Indicate below subspecialty
	Endodontics	Orthodontics
	Pedodontics	Periodontics
	Prosthodontics	
I reques	t core privileges in the practice of I am requesting privileges and have	Dentistry. If appropriate, I have indicated special procedures or subspecialty area(s) for attached documentation of compliance with the credentialling guidelines as outlined.
Signatu	···	Date ************************************
		•

Approved 7/7/97; Revised 5/99; 7/03; January 2015

Attachment E

CMS Claims Manual for Anesthesiology Services Ambulatory
Surgery, Excerpt

Payment is not generally allowed for an assistant surgeon when payment for either two surgeons (modifier "-62") or team surgeons (modifier "-66") is appropriate. If A/B MACs (B) receive a bill for an assistant surgeon following payment for co-surgeons or team surgeons, they pay for the assistant only if a review of the claim verifies medical necessity.

50 - Payment for Anesthesiology Services

(Rev. 1859; Issued: 11-20-09; Effective Date: For services furnished on or after 01-01-10; Implementation Date: 01-04-10)

A. General Payment Rule

The fee schedule amount for physician anesthesia services furnished on or after January 1, 1992 is, with the exceptions noted, based on allowable base and time units multiplied by an anesthesia conversion factor specific to that locality. The base unit for each anesthesia procedure is communicated to the A/B MACs (B) by means of the HCPCS file released annually. The public can access the base units on the CMS homepage through the anesthesiologist's center. The way in which time units are calculated is described in §50.G. CMS releases the conversion factor annually.

B. Payment at Personally Performed Rate

The A/B MAC (B) must determine the fee schedule payment, recognizing the base unit for the anesthesia code and one time unit per 15 minutes of anesthesia time if:

- The physician personally performed the entire anesthesia service alone;
- The physician is involved with one anesthesia case with a resident, the physician is a teaching physician as defined in §100, and the service is furnished on or after January 1, 1996;
- The physician is involved in the training of physician residents in a single anesthesia case, two concurrent anesthesia cases involving residents or a single anesthesia case involving a resident that is concurrent to another case paid under the medical direction rules. The physician meets the teaching physician criteria in §100.1.4 and the service is furnished on or after January 1, 2010;
- The physician is continuously involved in a single case involving a student nurse anesthetist;
- The physician is continuously involved in one anesthesia case involving a CRNA (or AA) and the service was furnished prior to January 1, 1998. If the physician is involved with a single case with a CRNA (or AA) and the service was furnished on or after January 1, 1998, A/B MACs (B) may pay the physician service and the CRNA (or AA) service in accordance with the medical direction payment policy; or

• The physician and the CRNA (or AA) are involved in one anesthesia case and the services of each are found to be medically necessary. Documentation must be submitted by both the CRNA and the physician to support payment of the full fee for each of the two providers. The physician reports the "AA" modifier and the CRNA reports the "QZ" modifier for a nonmedically directed case.

C. Payment at the Medically Directed Rate

The A/B MAC (B) determines payment for the physician's medical direction service furnished on or after January 1, 1998, on the basis of 50 percent of the allowance for the service performed by the physician alone. Medical direction occurs if the physician medically directs qualified individuals in two, three, or four concurrent cases and the physician performs the following activities.

- Performs a pre-anesthetic examination and evaluation;
- Prescribes the anesthesia plan;
- Personally participates in the most demanding procedures in the anesthesia plan, including induction and emergence;
- Ensures that any procedures in the anesthesia plan that he or she does not perform are performed by a qualified anesthetist;
- Monitors the course of anesthesia administration at frequent intervals;
- Remains physically present and available for immediate diagnosis and treatment of emergencies; and
- Provides indicated-post-anesthesia care.

Prior to January 1, 1999, the physician was required to participate in the most demanding procedures of the anesthesia plan, including induction and emergence.

For medical direction services furnished on or after January 1, 1999, the physician must participate only in the most demanding procedures of the anesthesia plan, including, if applicable, induction and emergence. Also for medical direction services furnished on or after January 1, 1999, the physician must document in the medical record that he or she performed the pre-anesthetic examination and evaluation. Physicians must also document that they provided indicated post-anesthesia care, were present during some portion of the anesthesia monitoring, and were present during the most demanding procedures, including induction and emergence, where indicated.

For services furnished on or after January 1, 1994, the physician can medically direct two, three, or four concurrent procedures involving qualified individuals, all of whom could be CRNAs, AAs, interns, residents or combinations of these individuals. The

medical direction rules apply to cases involving student nurse anesthetists if the physician directs two concurrent cases, each of which involves a student nurse anesthetist, or the physician directs one case involving a student nurse anesthetist and another involving a CRNA, AA, intern or resident.

For services furnished on or after January 1, 2010, the medical direction rules do not apply to a single resident case that is concurrent to another anesthesia case paid under the medical direction rules or to two concurrent anesthesia cases involving residents.

If anesthesiologists are in a group practice, one physician member may provide the preanesthesia examination and evaluation while another fulfills the other criteria. Similarly, one physician member of the group may provide post-anesthesia care while another member of the group furnishes the other component parts of the anesthesia service. However, the medical record must indicate that the services were furnished by physicians and identify the physicians who furnished them.

A physician who is concurrently directing the administration of anesthesia to not more than four surgical patients cannot ordinarily be involved in furnishing additional services to other patients. However, addressing an emergency of short duration in the immediate area, administering an epidural or caudal anesthetic to ease labor pain, or periodic, rather than continuous, monitoring of an obstetrical patient does not substantially diminish the scope of control exercised by the physician in directing the administration of anesthesia to surgical patients. It does not constitute a separate service for the purpose of determining whether the medical direction criteria are met. Further, while directing concurrent anesthesia procedures, a physician may receive patients entering the operating suite for the next surgery, check or discharge patients in the recovery room, or handle scheduling matters without affecting fee schedule payment.

However, if the physician leaves the immediate area of the operating suite for other than short durations or devotes extensive time to an emergency case or is otherwise not available to respond to the immediate needs of the surgical patients, the physician's services to the surgical patients are supervisory in nature. A/B MACs (B) may not make payment under the fee schedule.

See §50.1 for a definition of concurrent anesthesia procedures.

D. Payment at Medically Supervised Rate

The A/B MAC (B) may allow only three base units per procedure when the anesthesiologist is involved in furnishing more than four procedures concurrently or is performing other services while directing the concurrent procedures. An additional time unit may be recognized if the physician can document he or she was present at induction.

E. Billing and Payment for Multiple Anesthesia Procedures

Physicians bill for the anesthesia services associated with multiple bilateral surgeries by reporting the anesthesia procedure with the highest base unit value with the multiple procedure modifier "-51." They report the total time for all procedures in the line item with the highest base unit value.

If the same anesthesia CPT code applies to two or more of the surgical procedures, billers enter the anesthesia code with the "-51" modifier and the number of surgeries to which the modified CPT code applies.

Payment can be made under the fee schedule for anesthesia services associated with multiple surgical procedures or multiple bilateral procedures. Payment is determined based on the base unit of the anesthesia procedure with the highest base unit value and time units based on the actual anesthesia time of the multiple procedures. See §§40.6-40.7 for a definition and appropriate billing and claims processing instructions for multiple and bilateral surgeries.

F. Payment for Medical and Surgical Services Furnished in Addition to Anesthesia Procedure

Payment may be made under the fee schedule for specific medical and surgical services furnished by the anesthesiologist as long as these services are reasonable and medically necessary or provided that other rebundling provisions (see §30 and Chapter 23) do not preclude separate payment. These services may be furnished in conjunction with the anesthesia procedure to the patient or may be furnished as single services, e.g., during the day of or the day before the anesthesia service. These services include the insertion of a Swan Ganz catheter, the insertion of central venous pressure lines, emergency intubation, and critical care visits.

G. Anesthesia Time and Calculation of Anesthesia Time Units

Anesthesia time is defined as the period during which an anesthesia practitioner is present with the patient. It starts when the anesthesia practitioner begins to prepare the patient for anesthesia services in the operating room or an equivalent area and ends when the anesthesia practitioner is no longer furnishing anesthesia services to the patient, that is, when the patient may be placed safely under postoperative care. Anesthesia time is a continuous time period from the start of anesthesia to the end of an anesthesia service. In counting anesthesia time for services furnished on or after January 1, 2000, the anesthesia practitioner can add blocks of time around an interruption in anesthesia time as long as the anesthesia practitioner is furnishing continuous anesthesia care within the time periods around the interruption.

Actual anesthesia time in minutes is reported on the claim. For anesthesia services furnished on or after January 1, 1994, the A/B MAC computes time units by dividing reported anesthesia time by 15 minutes. Round the time unit to one decimal place. The A/B MAC does not recognize time units for CPT codes 01995 or 01996.

For purposes of this section, anesthesia practitioner means a physician who performs the anesthesia service alone, a CRNA who is not medically directed, or a CRNA or AA, who is medically directed. The physician who medically directs the CRNA or AA would ordinarily report the same time as the CRNA or AA reports for the CRNA service.

H. Base Unit Reduction for Concurrent Medically Directed Procedures

If the physician medically directs concurrent medically directed procedures prior to January 1, 1994, reduce the number of base units for each concurrent procedure as follows.

- For two concurrent procedures, the base unit on each procedure is reduced 10 percent.
- For three concurrent procedures, the base unit on each procedure is reduced 25 percent.
- For four concurrent procedures, the base on each concurrent procedure is reduced 40 percent.
- If the physician medically directs concurrent procedures prior to January 1, 1994, and any of the concurrent procedures are cataract or iridectomy anesthesia, reduce the base units for each cataract or iridectomy procedure by 10 percent.

I. Monitored Anesthesia Care

The A/B MAC (B) pays for reasonable and medically necessary monitored anesthesia care services on the same basis as other anesthesia services. Anesthesiologists use modifier QS to report monitored anesthesia care cases. Monitored anesthesia care involves the intra-operative monitoring by a physician or qualified individual under the medical direction of a physician or of the patient's vital physiological signs in anticipation of the need for administration of general anesthesia or of the development of adverse physiological patient reaction to the surgical procedure. It also includes the performance of a pre-anesthetic examination and evaluation, prescription of the anesthesia care required, administration of any necessary oral or parenteral medications (e.g., atropine, demerol, valium) and provision of indicated postoperative anesthesia care.

Payment is made under the fee schedule using the payment rules in <u>subsection B</u> if the physician personally performs the monitored anesthesia care case or under the rules in <u>subsection C</u> if the physician medically directs four or fewer concurrent cases and monitored anesthesia care represents one or more of these concurrent cases.

J. Definition of Concurrent Medically Directed Anesthesia Procedures

Concurrency is defined with regard to the maximum number of procedures that the physician is medically directing within the context of a single procedure and whether

these other procedures overlap each other. Concurrency is not dependent on each of the cases involving a Medicare patient. For example, if an anesthesiologist directs three concurrent procedures, two of which involve non-Medicare patients and the remaining a Medicare patient, this represents three concurrent cases. The following example illustrates this concept and guides physicians in determining how many procedures they are directing.

EXAMPLE

Procedures A through E are medically directed procedures involving CRNAs and furnished between January 1, 1992 and December 31, 1997 (1998 concurrent instructions can be found in subsection C.) The starting and ending times for each procedure represent the periods during which anesthesia time is counted. Assume that none of the procedures were cataract or iridectomy anesthesia.

Procedure A begins at 8:00 a.m. and lasts until 8:20 a.m.

Procedure B begins at 8:10 a.m. and lasts until 8:45 a.m.

Procedure C begins at 8:30 a.m. and lasts until 9:15 a.m.

Procedure D begins at 9:00 a.m. and lasts until 12:00 noon.

Procedure E begins at 9:10 a.m. and lasts until 9:55 a.m.

Procedure	Number of Concurrent Medically Directed Procedures	Base Unit Reduction Percentage
A	2	10%
В	2	10%
С	3	25%
D	3	25%
Е	. 3	25%

From 8:00 a.m. to 8:20 a.m., the length of procedure A, the anesthesiologist medically directed two concurrent procedures, A and B.

From 8:10 a.m. to 8:45 a.m., the length of procedure B, the anesthesiologist medically directed two concurrent procedures. From 8:10 to 8:20 a.m., the anesthesiologist medically directed procedures A and B. From 8:20 to 8:30 a.m., the anesthesiologist medically directed only procedure B. From 8:30 to 8:45 a.m., the anesthesiologist medically directed procedures B and C. Thus, during procedure B, the anesthesiologist medically directed, at most, two concurrent procedures.

From 8:30 a.m. to 9:15 a.m., the length of procedure C, the anesthesiologist medically directed three concurrent procedures. From 8:30 to 8:45 a.m., the anesthesiologist medically directed procedures B and C. From 8:45 to 9:00 a.m., the anesthesiologist medically directed procedure C. From 9:00 to 9:10 a.m., the anesthesiologist medically directed procedures C and D. From 9:10 to 9:15 a.m., the anesthesiologist medically directed procedures C, D and E. Thus, during procedure C, the anesthesiologist medically directed, at most, three concurrent procedures.

The same analysis shows that during procedure D or E, the anesthesiologist medically directed, at most, three concurrent procedures.

K. Anesthesia Claims Modifiers

Physicians report the appropriate anesthesia modifier to denote whether the service was personally performed, medically directed, or medically supervised.

Specific anesthesia modifiers include:

- AA Anesthesia Services performed personally by the anesthesiologist;
- **AD** Medical Supervision by a physician; more than 4 concurrent anesthesia procedures;
- **G8** Monitored anesthesia care (MAC) for deep complex complicated, or markedly invasive surgical procedures;
- **G9** Monitored anesthesia care for patient who has a history of severe cardio-pulmonary condition;
- **QK** Medical direction of two, three or four concurrent anesthesia procedures involving qualified individuals;
- QS Monitored anesthesia care service;
- QX CRNA service; with medical direction by a physician;
- **QY** Medical direction of one certified registered nurse anesthetist by an anesthesiologist;
- QZ CRNA service: without medical direction by a physician; and
- GC these services have been performed by a resident under the direction of a teaching physician.

The GC modifier is reported by the teaching physician to indicate he/she rendered the service in compliance with the teaching physician requirements in §100.1.2. One of the payment modifiers must be used in conjunction with the GC modifier.

The QS modifier is for informational purposes. Providers must report actual anesthesia time on the claim.

The A/B MAC (B) must determine payment for anesthesia in accordance with these instructions. They must be able to determine the uniform base unit that is assigned to the anesthesia code and apply the appropriate reduction where the anesthesia procedure is medically directed. They must also be able to determine the number of anesthesia time units from actual anesthesia time reported on the claim. The A/B MAC (B) must multiply allowable units by the anesthesia-specific conversion factor used to determine fee schedule payment for the payment area.

L. Anesthesia and Medical/Surgical Service Provided by the Same Physician

Anesthesia services range in complexity. The continuum of anesthesia services, from least intense to most intense in complexity is as follows: local or topical anesthesia, moderate (conscious) sedation, regional anesthesia and general anesthesia. Prior to 2006, Medicare did not recognize separate payment if the same physician provided the medical or surgical procedure and the anesthesia needed for the procedure.

Moderate sedation is a drug induced depression of consciousness during which the patient responds purposefully to verbal commands, either alone or accompanied by light tactile stimulation. Moderate sedation does not include minimal sedation, deep sedation or monitored anesthesia care. In 2006, the CPT added new codes 99143 to 99150 for moderate or conscious sedation. The moderate (conscious) sedation codes are A/B MAC (B) priced under the Medicare physician fee schedule.

The CPT codes 99143 to 99145 describe moderate sedation provided by the same physician performing the diagnostic or therapeutic service that the sedation supports, requiring the presence of an independent trained observer to assist in the monitoring of the patient's level of consciousness and physiological status. The physician can bill the conscious sedation codes 99143 to 99145 as long as the procedure with it is billed is not listed in Appendix G of CPT. CPT codes 99148 to 99150 describe moderate sedation provided by a physician other than the health care professional performing the diagnostic or therapeutic service that the sedation supports.

The CPT includes Appendix G, Summary of CPT Codes That Include Moderate (Conscious) Sedation. This appendix lists those procedures for which moderate (conscious) sedation is an inherent part of the procedure itself. CPT coding guidelines instruct practices not to report CPT codes 99143 to 99145 in conjunction with codes listed in Appendix G. The National Correct Coding Initiative has established edits that bundle CPT codes 99143 and 99144 into the procedures listed in Appendix G.

In the unusual event when a second physician other than the health care professional performing the diagnostic or therapeutic services provides moderate sedation in the facility setting for the procedures listed in Appendix G, the second physician can bill 99148 to 99150. The term, facility, includes those places of service listed in Chapter 23 Addendum -- field 29. However, when these services are performed by the second physician in the nonfacility setting, CPT codes 99148 to 99150 are not to be reported.

If the anesthesiologist or CRNA provides anesthesia for diagnostic or therapeutic nerve blocks or injections and a different provider performs the block or injection, then the anesthesiologist or CRNA may report the anesthesia service using CPT code 01991. The service must meet the criteria for monitored anesthesia care. If the anesthesiologist or CRNA provides both the anesthesia service and the block or injection, then the anesthesiologist or CRNA may report the anesthesia service using the conscious sedation code and the injection or block. However, the anesthesia service must meet the requirements for conscious sedation and if a lower level complexity anesthesia service is provided, then the conscious sedation code should not be reported.

If the physician performing the medical or surgical procedure also provides a level of anesthesia lower in intensity than moderate or conscious sedation, such as a local or topical anesthesia, then the conscious sedation code should not be reported and no payment should be allowed by the A/B MAC (B). There is no CPT code for the performance of local anesthesia and as payment for this service is considered in the payment for the underlying medical or surgical service.

60 - Payment for Pathology Services (Rev. 2714, Issued: 05-24-13, Effective: 07-01-12 Implementation: 06-25, 13)

A. Payment for Professional Component (PC) Services

Payment may be made under the physician fee schedule for the professional component of physician laboratory or physician pathology services furnished to hospital inpatients or outpatients by hospital physicians or by independent laboratories, if they qualify as the re-assignee for the physician service.

B. Payment for Technical Component (TC) Services

1. General Rule

Payment is not made under the physician fee schedule for TC services furnished in institutional settings where the TC service is bundled into the facility payment, e.g., hospital inpatient and outpatient settings. Payment is made under the physician fee schedule for TC services furnished in institutional settings where the TC service is not bundled into the facility payment, e.g., an ambulatory surgery center (ASC). Payment may be made under the physician fee schedule for the TC of physician pathology services furnished by an independent laboratory, or a hospital if it is acting

Attachment F

42CFR 415.110 Medically Directed Anesthesia Services

42 CFR 415.110

- § 415.110 Conditions for payment: Medically directed anesthesia services.
- (a) General payment rule. Medicare pays for the physician's medical direction of anesthesia services for one service or two through four concurrent anesthesia services furnished after December 31, 1998, only if each of the services meets the condition in § 415.102(a) and the following additional conditions:
 - (1) For each patient, the physician --
 - (i) Performs a pre-anesthetic examination and evaluation;
 - (ii) Prescribes the anesthesia plan;
- (iii) Personally participates in the most demanding aspects of the anesthesia plan including, if applicable, induction and emergence;
- (iv) Ensures that any procedures in the anesthesia plan that he or she does not perform are performed by a qualified individual as defined in operating instructions;
 - (v) Monitors the course of anesthesia administration at frequent intervals;
- (vi) Remains physically present and available for immediate diagnosis and treatment of emergencies; and
 - (vii) Provides indicated post-anesthesia care.
- (2) The physician directs no more than four anesthesia services concurrently and does not perform any other services while he or she is directing the single or concurrent services so that one or more of the conditions in paragraph (a)(1) of this section are not violated.
- (3) If the physician personally performs the anesthesia service, the payment rules in § 414.46(c) of this chapter apply (Physician personally performs the anesthesia procedure).
- (b) Medical documentation. The physician alone inclusively documents in the patient's medical record that the conditions set forth in paragraph (a)(1) of this section have been satisfied, specifically documenting that he or she performed the pre-anesthetic exam and evaluation, provided the indicated post-anesthesia care, and was present during the most demanding procedures, including induction and emergence where applicable.

Attachment G

Additional Letters of Support: Patients

May 5, 2016

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Dear Ms. Frisone: I have lived in (1). My name is County for years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely. Signature Address

Community support letter for Valleygate Dental Surgical Center's Certificate of Need

applications to develop dental specialty surgical centers in Cumberland and Wake Counties

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties

Dear Ms. Frisone:

My name is <u>Dawn Kennecly</u>. I have lived in <u>Omber land</u> County for <u>3</u> years, I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.

Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives.

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X X	Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service.
Addit	ional Comments:
l sinc grant	terely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and its approval as quickly as possible.

Signature

Signature

Signature

Dawn Kennecky

Print Name

Address 612 Bellingham Way

20	

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re:	Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties
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Since	That told Sealer

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Dear Ms. Frisone: My name is _______ I have lived in _______ County for 34 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. D' Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely Signature

Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties

, 2016
Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699
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Signature

Sincerely.

Print Name

11 ay 10, 2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties
Dear Ms. Frisone:
My name is Like County I have lived in Cumberland County for 13 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.
Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives.
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Additional Comments:
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Sincerely, Leilani Willi S.
Signature Print Name
Address

__, 2016

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is N. Nilla Noola's I have lived in County for Solvears. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

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Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

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Signature

Print Name

Address 1009 / 12005 - Gave G. Hyre Mus, 1 C 28348

Community support letter for Valleygate Dental Surgical Center's Certificate of Need

OS 09,2016

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is ______. I have lived in County for ______ years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

May, 2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Community support letter for Valleygate Dental Surgical Center's Certificate of Need Re: applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Weria Darutt I have lived in Cumberland County for 4 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely, Coreria A. Barnett
Print Name Signature

Address 550 Scarhorough St Apt A Fayetteville NC 28301

may 9th , 2016

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Travis Moleu. I have lived in Cumzumal County for 8 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely.

Address 316 Abbottswood Dr Fayetherille NL 28301

Community support letter for Valleygate Dental Surgical Center's Certificate of Need

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

applications to develop dental specialty surgical centers in Cumberland and Wake Counties
My name is 1/25/55/6. I have lived in County for years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.
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Additional Comments:
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Sincerely.
Ma Staddig Winston Nastassia Winston Signature Print Name
Address / / D HOW 18 OV.

Community support letter for Valleygate Dental Surgical Center's Certificate of Need

May 9 g, 2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties

Dear Ms. Frisone:

My name is Skerkora Braneri have lived in Combar la County for 20 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.

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Additio	onal Comments:
I since grant i	erely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and ts approval as quickly as possible.
Sincer	ely,

Address 201 wooddell Dr. Fay. NC 26301

5 9,2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re:	Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties
Dear M	s. Frisone:
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Sincer Signat	Level Callan Carlon Print Name
Addre	ss 1225 Capall Glure Rd. Mutaquille NC 28318

<u>5</u> 9,2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Community support letter for Valleygate Dental Surgical Center's Certificate of Need Re: applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Can Will I have lived in County for 31 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sinderely.

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Certificate of Need Section
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NC Department of Health and Human Services
2704 Mail Service Center
Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties

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Fayetteville and Garner are both good locations for this service.

Additional Comments:

I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

Signature

Rowland McLucus

Print Name

Address

717 Old Wilmington Rd

Fay, N(28301

<u>5</u> 9,2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

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Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Raleigh, North Carolina 27699 Community support letter for Valleygate Dental Surgical Center's Certificate of Need Re: applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Junia Colum I have lived in Sampson County for Syears. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely.

Loop Rd Chinton Nc 28328

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

realeigh, North Caronna 27099
Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties
Dear Ms. Frisone:
My name is Nikkild LOGAN. I have lived in <u>Cumberland</u> County for <u>22</u> years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.
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Additional Comments:
I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.
Sincerely, Mikkita Logan Signature Print Name
I THE NAME
Address 6030 concho Court fayetteville, nc 28303

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Community support letter for Valleygate Dental Surgical Center's Certificate of Need Re: applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Jaylox yn Galla lived in Competion County for years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely Signature

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Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

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letter	me is Tomasas Our I have lived in Cumberland County for 7 years. I am writing this to express support for Valleygate's Certificate of Need applications to establish licensed dental al centers in Cumberland County and Wake Counties.
comm retain	e Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved unities in Eastern North Carolina, and has advocated for regulatory and other changes that help dentists, particularly pediatric dentists in our communities. My family is pleased with the care and pproach to helping families to understand how to maintain their teeth so they last the rest of their
cumbe	ou are probably aware, having dental surgery is stressful, particularly for children. It is also become to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need ation will be far more comfortable than a hospital, and will reduce the long delays.
X	Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service.
Additi	onal Comments:
	erely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and ts approval as quickly as possible.
Sincer	ely,
Signat	Tamara Davis ure Print Name
Addre	ss HADY Crosshill St Fostoure No 283/2

may 10, 2016

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Stormy Harmon I have lived in Combertand County for 17 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: moch tor I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely

Community support letter for Valleygate Dental Surgical Center's Certificate of Need

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Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation

NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699 Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: OU (O I have lived in Cumper as letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely,

, 2016
Ms. Martha Frisone, Assistant Chief
Certificate of Need Section
Division of Health Services Regulation
NC Department of Health and Human Services
2704 Mail Service Center
Raleigh, North Carolina 27699
Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties
Dear Ms. Frisone:
My name is I have lived in County for years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.
Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help

lives.

Additional Comments:

grant its approval as quickly as possible.

retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their

As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need

I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and

Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of

application will be far more comfortable than a hospital, and will reduce the long delays.

Need to establish a dental ambulatory surgical facility in Fayetteville.

Fayetteville and Garner are both good locations for this service.

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is United in Sampson County for 20 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Yuritzi Sanchez Address 10689 Garland Huy Clinton 28328

Community support letter for Valleygate Dental Surgical Center's Certificate of Need

May 5th 2016

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is September and have lived in Sampson County for 3 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. e M. Hnderton

Community support letter for Valleygate Dental Surgical Center's Certificate of Need

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Community support letter for Valleygate Dental Surgical Center's Certificate of Need Re:

applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is TO 1800 LEAR I have lived in Company for 12 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Favetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

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Certifica Division NC Dep 2704 Ma	tha Frisone, Assistant Chief te of Need Section of Health Services Regulation artment of Health and Human Services ail Service Center North Carolina 27699
	Community support letter for Valley applications to develop dental special

	h, North Carolina 27699
Re:	Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties
Dear M	1s. Frisone:
letter t	ne is <u>Shericker</u> . I have lived in <u>Newto</u> County for <u>2</u> years. I am writing this o express support for Valleygate's Certificate of Need applications to establish licensed dental centers in Cumberland County and Wake Counties.
commu retain o	e Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved unities in Eastern North Carolina, and has advocated for regulatory and other changes that help dentists, particularly pediatric dentists in our communities. My family is pleased with the care and opproach to helping families to understand how to maintain their teeth so they last the rest of their
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Additio	onal Comments:
	rely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and is approval as quickly as possible.
Sincere	≽ly,
Signatu	Unicla Montgomen Shenicka Montgomeny Print Name
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Maej 10, 2016

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Cynthia Neal. I have lived in Chrober and County for 12 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely, thia Neal

Community support letter for Valleygate Dental Surgical Center's Certificate of Need

May 10, 2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Community support letter for Valleygate Dental Surgical Center's Certificate of Need Re: applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Distribution. I have lived in Country for Z8 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely, Dor Murphy Print Name Address 2349 Irdian Check Rd

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Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation

NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699 Community support letter for Valleygate Dental Surgical Center's Certificate of Need Re: applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is MS D Melun. I have lived in Cumberland County for 30 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely,

,	2016	

Address

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Raleigh, North Carolina 27699 Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Heatus. I have lived in Cumberland County for 5 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. 17 Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Y Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely. Signature

May 10, 2016

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Dear Ms. Frisone: I have lived in letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties

May 13, 2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: Hiercimorales Robeson County for 9 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely Kamon Gutierrez morales

Print Name

Address 153 Sellers Dr. Lumberton NC 28358 Mey 13, 2016

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Yolly. I have lived in Koke County for years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely,

Community support letter for Valleygate Dental Surgical Center's Certificate of Need

May 1, 2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Community support letter for Valleygate Dental Surgical Center's Certificate of Need Re: applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Felicitus Murmurhave lived in Robert County for Vears. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

May 13, 2016

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Dear Ms. Frisone: My name is O County for years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Favetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Signature
Address 511 W. ARMfield St

SP NC 28384

Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation

NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699 Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is John Bron I have lived in Robeson County for U years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely,

May 13, 2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Sheree Blanding I have lived in Bladen County for Leyears. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely.

Drive Clarkton N.c 28433

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Belindo. I have lived in Robeson County for 39 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely, Belinka K. Locklean Print Name

May 13, 2016

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is New ONG. I have lived in Pobeson County for Byears. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Henora Haywood Print Name Day Rd. Pem prote NX 28372

Community support letter for Valleygate Dental Surgical Center's Certificate of Need

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Mary Locklear I have lived in Kobeson County for Sears. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and

Sincerely,

grant its approval as quickly as possible.

May 12, 2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Jessica Gawinski I have lived in Robeson County for 14 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

May 12,2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Oliva Rutherland I have lived in Robeson County for 29 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. ivia Rutherford <u>5</u> 12, 2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties
Dear Ms. Frisone:
My name is Clar Martine I have lived in Cumber and County for 28 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.
Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives.
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Fayetteville and Garner are both good locations for this service.
Additional Comments:
I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.
Sincerely. Emma Flowers Signature Print Name
Address 7265 Pebblebrook Dri Fay N.C. 283/4

<u>05</u> 12,2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Community support letter for Valleygate Dental Surgical Center's Certificate of Need Re: applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: ada (and I have lived in Robesan County for 27 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

5 12,2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

applications to develop dental specialty surgical centers in Cumberland and Wake Counties
Dear Ms. Frisone:
My name is Ebony Oxothave lived in Som County for Sovears. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.
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Additional Comments:
I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.
Sincerely, And
Signature Print Name
Address 140 Rainbow in Roslboro, NC 2838 2

May 1, 2016

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is It any Bull'. I have lived in Some County for 18 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely

Community support letter for Valleygate Dental Surgical Center's Certificate of Need

My 10, 2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties

Dear Ms. Frisone:

My name is Drittory I have lived in Curricature County for 10 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.

Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives.

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$ \overline{\mathbf{v}} $.	Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of
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V	Fayetteville and Garner are both good locations for this service.

Additional Comments:

I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

Sincerely,

Signature

Address

Drint Name

1

<u>5</u> <u>10</u>, 2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Address 4174 March Olive Hwy Newton Grove, NC 28366

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties

Dear Ms. Frisone:

My name is <u>Shokola L. Williams</u>. I have lived in <u>Sampson</u> County for <u>28</u> years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.

Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives.

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Additio	onal Comments:	
	rely urge the state of North Carolina to exa	mine the strong merits of Vallegate's proposal, and
Sincere	ely, Lalo L. Williams	Shakala I_ Williams
Signatu	ıre	Print Name

5 1,2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Myny Harling. I have lived in County for 15 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely,

may 11,2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Raleigh, North Carolina 27699 Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Kinu Shaw. I have lived in Currbarted County for 40 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Favetteville. Fayetteville and Garner are both good locations for this service. Additional Comments:

I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

Sincerely.

Signature

Print Name

Address 5728 NESSEE St. Fay NC 28314

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties

Dear Ms. Frisone:

My name is Alicon Martin I have lived in Country for 2 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland Country and Wake Counties.

Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives.

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Additi	onal Comments:
 	

l sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

Sincerely,

Claim Martin

Signature

Address 1407 Letter Ave Fayetteville, NC

28304

	, 2016
Certifi Divisio NC De 2704 N	artha Frisone, Assistant Chief cate of Need Section on of Health Services Regulation epartment of Health and Human Services Mail Service Center h, North Carolina 27699
Re:	Community support letter for Valleygate Dental S applications to develop dental specialty surgical ce

Re:	Community on worth letter for Vallagranta Devited Co. 1. C. 10 1 C. 10 1 C.
	Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Cour
Dear N	As. Frisone:
letter 1	me is Talisa S. Ruta. I have lived in Sutland County for 15 years. I am writing to express support for Valleygate's Certificate of Need applications to establish licensed deal centers in Cumberland County and Wake Counties.
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l since grant i	erely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, its approval as quickly as possible. Talisa Singletani
I since	erely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, its approval as quickly as possible.

Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699
Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties
Dear Ms. Frisone:
My name is Helen GOOVICh I have lived in Amberland County for 4 years. I am writing this etter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.
Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives.
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Additional Comments:
I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.
Sincerely, Helen Goodrich Print Name:
Address 1/08 Treetro Dr. Apt C Fayetleville NL 28311

Mary 12, 2016

Re:

Address

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

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Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties

May 10, 2016

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is KEVI TEVYY. I have lived in Cumberland county for 38 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: definitely a need for this! I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely, Signature Address 1061 Delancy Dr. Hope Mills, NC 28348

Community support letter for Valleygate Dental Surgical Center's Certificate of Need

may 4,2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Community support letter for Valleygate Dental Surgical Center's Certificate of Need Re: applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is _ Strain on ? I have lived in _ act while County for 15 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Address 1001 washington & lating No 28352

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Andreas. Green Robert County for 35 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

Address P.D. BOX 484 ROWLAND, NC 28383

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Reague Mwal I have lived in Roberton County for 24 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely. Reggic Man Blue Rd Porkton, NC 28371

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties

Dear Ms. Frisone:
My name is <u>Very Park</u> . I have lived in <u>Posson</u> County for <u>Dears</u> . I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.
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Additional Comments:
I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.
Sincerely, herrie Paige Kerrie Paige
Signature Print Name
Address 52 Ginger Ct. St. Pauls, NC 28384

Moy 5, 2016

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

applications to develop dental specialty surgical centers in Cumberland and Wake Counties	
Dear Ms. Frisone: My name is <u>Processon</u> County for <u>20</u> years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.	
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Sincerely, Percention Signature Signature Signature Print Name	Z
Address	

Community support letter for Valleygate Dental Surgical Center's Certificate of Need

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is <u>FLAGY WWX</u>. I have lived in <u>KODGON</u> County for <u>5</u> Gears. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Raleigh, North Carolina 27699 Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Dank Graham Both Trave lived in Roseson County for 20 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

Address 2727 Huggins Rd. Lumberton, N.C. 2836

Print Name

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties

Dear Ms. Frisone:
My name is Nagaly (2017) 46.74 have lived in Poeson County for Syears. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.
Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives.
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Sincerely, Makala Grand also
Signature Print Name
Signature Address 258 Comwood Ln. 51 Pauls N-C. 28384

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Brittany Jacob have lived in County for letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

Muy 5, 2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Muhall Holyl. I have lived in Robeson County for 3 Tyears. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: . I have lived in Kobeson County for years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely,

May 5th. 2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties

Dear Ms. Frisone:	
My name is USA DWUY. I have lived in letter to express support for Valleygate's Certifica surgical centers in Cumberland County and Wake Co	County for 51 years. I am writing this te of Need applications to establish licensed denta ounties.
Village Family Dental, a Valleygate affiliate, helped communities in Eastern North Carolina, and has advertain dentists, particularly pediatric dentists in our cutheir approach to helping families to understand how lives.	ocated for regulatory and other changes that help ommunities. My family is pleased with the care and
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Additional Comments:	
I sincerely urge the state of North Carolina to example grant its approval as quickly as possible.	mine the strong merits of Vallegate's proposal, and
Sincerely,	
Signature Signature	Print Name
Address 3502 Hay 711 Lito	N NC 28358

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: County for 48 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely. Signature

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

2704 Mail Service Center Raleigh, North Carolina 27699
Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties
Dear Ms. Frisone: My name in Scendio. I have lived in County for 20 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.
Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives.
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Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Community support letter for Valleygate Dental Surgical Center's Certificate of Need Re: applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: DCU. I have lived in Kobeson County for years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

Sincerely,

Address 4 Mill St Lumberton NC 28358

May 5th. 2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties

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Dear Ms. Frisone:
My name is Sa Dwey. I have lived in Doeson County for 51 years. I am writing thi letter to express support for Valleygate's Certificate of Need applications to establish licensed denta surgical centers in Cumberland County and Wake Counties.
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Additional Comments:
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Sincerely, his Lowers
Signature Print Name
Address 5502 HWW 711 Litan NC 28208

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh. North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties

Dear Ms. Frisone: My name is <u>Peague Mullel</u> have lived in <u>Robeson</u> County for <u>24</u> years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Gamer are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely, Blue Rd Porkton, NC 28371

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties

Dear Ms. Frisone:			
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Additional Comments:			
I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.			
Sincerely, Mayala Ganzales			
Signature Print Name Address 258 Comwood Ln. 51. Pauls N.C. 2838			

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties				
Dear Ms. Frisone:				
My name is Mchael Miss I have lived in Posson County for 48 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.				
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Additional Comments:				
I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.				
Sincerely, Michael Choris				
Signature Address 12494 NC HWY211 Red Springs N.C. 28377				

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Raleigh, North Carolina 27699 Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is KINK PCIEC. I have lived in Rosson County for Dears. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely, Signature St. Pauls, NC 28384

NUTUR Paige
Print Name

Address 52 Ginger Ct. St. Pauls, NC 28384

Ms. Martha Frisone. Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need

applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Andres Green I have lived in Robusch County for 35 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely.

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

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Dane Ma Frisone:
My name is Portany Jacob have lived in County for years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.
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Sincerely, Print Name Signature Signature Rythany Jacobs Print Name
1185 Manda Raha Man Latal
Address 100 COPT POCKETS FACE Apr. Co
Lumberton NC 28358

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties

Dear Ms. Frisone:	
My name is Princy WWW. I have lived in Rock Conletter to express support for Valleygate's Certificate of Need appl surgical centers in Cumberland County and Wake Counties.	unty for Decars. I am writing this ications to establish licensed dental
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I sincerely urge the state of North Carolina to examine the strong grant its approval as quickly as possible.	merits of Vallegate's proposal, and
Sincerely, Hayy Charris Signature	Print Name
Address P. O. BOX 2297	
Lumberton, N.C 28359	-

mey 4,2016

Signature

Address 100 washington of lating No 28352

Ms. Martha Frisone. Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh. North Carolina 27699

Community support letter for Valleygate Dental Surgical Center's Certificate of Need Re: applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is State Description I have lived in Scient County for 15 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely,

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Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Community support letter for Valleygate Dental Surgical Center's Certificate of Need Re: applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Andrea. I have lived in Son County for 5 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely.

. 2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties

Dear Ms. Frisone: My name is Margaret Chavis have lived in Potosson County for 28 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

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Signature Print Name

Address 1921 Chason rd lumber Bridge NC 28357

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Kavandusmith I have lived in Robeson County for 10 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. la maxwell

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Reva Lockle Car. I have lived in Roberto County for 5 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

Rug S. daller Rens Locklear
Signature Print Name

Address U70lie dr. Pembroker NC 28372

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: County for years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. lumbertun NC 28358

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Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh. North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties

Dear Ms. Frisone:

My name is <u>Carolun Flores</u>. I have lived in <u>Cumberland</u> County for <u>3</u> years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.

Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives.

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Additional Comments:

NA

I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

Sincerely,

Carolyn Flores

Signature

Print Name

Address 3423 Charwater Dr. Fayetherlle, NC 28311

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties

Dear Ms. Frisone:

My name is Angle Wagner. I have lived in Country for 3 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland Country and Wake Counties.

Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives.

As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays.

Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville.

Fayetteville and Garner are both good locations for this service.

Addition	onal Comments:	C			
	rely urge the state of N s approval as quickly as		amine the strong	merits of Vallegate	e's proposal, and

Sincerely,

Signature Angela L. Wagner
Print Name

Address 2938 Lambruso Pl, Fayetter le, NC 28306

May 04, 2016

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: CHARLOR Clay to I have lived in A WARDEN LAW County for 14 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Favetteville. Favetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely Signature

Community support letter for Valleygate Dental Surgical Center's Certificate of Need

may ou , 2016

Signature

Address 10

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Community support letter for Valleygate Dental Surgical Center's Certificate of Need Re: applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is And Turbon. I have lived in County for W years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Gamer are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties

Dear Ms. Frisone:

Sincerely,

My name is Alicio Spencer. I have lived in Curbon County for 8 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.

Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives.

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Need to establish a dental ambulatory surgical facility in Fayetteville.

Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of

	Fayetteville and Garner are both good locations for this service.
Additio	onal Comments:
	e Come that VII lage Family Denstal is exceptional wive
I since grant i	content family a friends to then based on how they interact with children. An ambulatory sungical clinic would be a wonderful additionally urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and to the services is approval as quickly as possible. They alread provide.

Address 3104 Tetterbury Dr.
Foyetteville, N.C. 28306

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Dear Ms. Frisone: My name is Allew. I have lived in Hole County for O'years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincefely Arge P. Allen Print Name

Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties

Dear Ms. Frisone:

My name is Compost have lived in Country for \(\frac{1}{2}\) years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland Country and Wake Counties.

Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives.

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✓.	Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of	f
	Need to establish a dental ambulatory surgical facility in Fayetteville.	

Fayetteville and Garner are both good locations for this service.

Additional Comments:

Sincerely.

Being a mother of 5 children with the Convenience of having an attached dental Surgery Center would be a HUGE PLUS!! CONVENIENCE 15 EVERYTHING!! I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

Signature Print Name

Address Doch Dunbarton Rd.

(910)224.3659

may 5, 2016

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh. North Carolina 27699

applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Danny . I have lived in Country for years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely. lanny Mc Well Address 127 tree top de apt L 28311 Fayetteville NC

Community support letter for Valleygate Dental Surgical Center's Certificate of Need

May 4,2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties

Dear Ms. Frisone:

My name is Radial Vicate. I have lived in Authorit County for A years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.

Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives.

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Fayetteville and Garner are both good locations for this service.

Additional Comments:

I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

Sincerely,

Signature

Print Name

Address 5000 Cypess gland, Hope wills NC, 28348

May 04,2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

	Community support letter for Valleygate Dental Surgical Center's Certificate of Need pplications to develop dental specialty surgical centers in Cumberland and Wake Counties	
Dear Ms.	Frisone:	
My name is <u>land hards</u> . I have lived in <u>Sangare</u> County for <u>30</u> years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.		
Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives.		
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Addition	al Comments:	
I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.		
Sincerely	et L. Minis Janet L. Noms	
Address	2581 Norms Pel. Garland NC 28441	

May 6,2016

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Misty. I have lived in Cunty for 26 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely.

Community support letter for Valleygate Dental Surgical Center's Certificate of Need

May (p. 2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties

Dear Ms. Frisone: My name is Hisan kocks I have lived in County for 29 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Σ . Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. ĬŽ. Fayetteville and Garner are both good locations for this service. Additional Comments:

I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

Sincerely,

Signature

Print Name

Address 4098 Saplin Dr. Hope Mills N. 28348

MAY 6 , 2016

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is TARA HUNT. I have lived in RTSESON County for 10 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely.

Community support letter for Valleygate Dental Surgical Center's Certificate of Need

May 94. 2016

Re:

Sincerely.

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh. North Carolina 27699

applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Someoffer Fury. I have lived in County for 25 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children, It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

MAY 05,2016

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Dear Ms. Frisone: Thave lived in Robe San County for years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

Community support letter for Valleygate Dental Surgical Center's Certificate of Need

applications to develop dental specialty surgical centers in Cumberland and Wake Counties

May 4, 2016

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Justin Hardin I have lived in Cumberland County for 15 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely

MAY 9, 2016

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Mercry . I have lived in Bladen County for 36 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely, Address 233 Mytrs St. Tartlee / NC 28392

MAy 9, 2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Richard Housieu. I have lived in Cumberland County for 11 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. \mathbf{X} Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

Sincerely,

Signature

Print Name

Address S820 Will tower MD / tope M. US NZ 21348

, 2016
Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699
Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties
Dear Ms. Frisone:
My name is <u>Marcella Dinkins</u> . I have lived in <u>Cumberland</u> County for 13 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.
Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives.
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Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service.
Additional Comments:
I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.
Sincerely,
Marcetta Dinkins Signature Print Name
Address 5352 Old Railroad Way Hyamillo, Nr. 2734

5 6,2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is ItA LOCKULOV I have lived in Scotlandcounty for Wears. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. П Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely, Tia Locklear Print Name Laurinburg NC 28352 <u>5-6</u>,2016

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Swap for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. - Lyung Suwan Young

Print Name

-AMAR Ave Laurinburg NC 28352

may 6, 2016

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is <u>SUSTIM</u>. I have lived in <u>Currential</u> County for <u>71</u> years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. \Box Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. · 🔲 Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely, Signature

Address 4/15 Grandford Rd Fay NC 28396

, 2016
Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699
Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties
Dear Ms. Frisone:
My name is Debotch Basil have lived in County for 55 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.
Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives.
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Additional Comments:
I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.
Sincerely, Sincerely, Signature Signature Sincerely, Signature Signature
Address 6322 Bretton Woods Dr. Type MIIIS NC 28348

5 6,2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties

	Dear Ms. Frisone: My name is 15 Vero. I have lived in County for years. I am writing this
	letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.
	Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives.
\	As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays.
1	Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service.
	Additional Comments: Please make this happen!
	DO needea.
	I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.
	Sincerely, Kisting Veno Kristine Veno
	Signature / Print Name
	Address 3286 Jarmouth Dr.
	tayetterille, NC 28306

, 2016	
Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Ser 2704 Mail Service Center Raleigh, North Carolina 27699	vices

2016

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties

Dear Ms. Frisone:

My name is West Will. I have lived in Universal County for years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.

Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives.

As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays.

Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville.

Fayetteville and Garner are both good locations for this service.

I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

Sincerely,

Additional Comments:

Signature

Print Name

Address 4 265 long liv are

, 2016
Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699
Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties
Dear Ms. Frisone:
My name is <u>Duricle</u> . I have lived in <u>Counterland</u> County for <u>3</u> years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.
Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives.
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Fayetteville and Garner are both good locations for this service.
Additional Comments:
l sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.
Sincerely.

Signature

Address 5903 bady Way

Hope Nills, NC 20378

May 06, 2016

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

applications to develop dental specialty surgical centers in Cumberland and Wake Counties
Dear Ms. Frisone:
My name is Local Hill. I have lived in Hoke County for 40 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.
Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives.
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Additional Comments:
I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.
Sincerely, Let D. Hill Tober D. Hill
Signature Print Name Address 274 Chantily Ln. Raeford N.C. 28376
Address L'14 Chanlily Ln. Kaetal V.C. 28376

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699
Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties
Dear Ms. Frisone:
My name is Koko I have lived in Combo County for Wyears. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.
Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives.
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Additional Comments:
I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.
Sincerely, A any a force (Kay la Pare !)
Signature Print Name Address 3101 (A) He as Diff

<u>5</u> <u>6</u>,2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is noted in Shallown. I have lived in County for 9 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely,

May 09,2016

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Dear Ms. Frisone: My name is 5005 Motto-I have lived in County for 12 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. M Fayetteville and Garner are both good locations for this service. Additional Comments: DONC I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely. Signature

Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties

MAY 9, 2016

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is SR 1EWS. I have lived in SAMISON County for 15 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely,

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: Amantha. I have lived in <u>Robesocounty</u> for <u>26 years</u>. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. 4 Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely,

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Community support letter for Valleygate Dental Surgical Center's Certificate of Need Re: applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Derrick Mayor. I have lived in Robert County for 34 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: Minag I have lived in **ROSESON** County for 5 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely,

\O , 2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center

Raleigh, North Carolina 27699 Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Yuu Bagley I have lived in Robeson County for Syears. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely, Signature M. Basley Craig M. Basley
Print Name

Address 423 Grayce St. ST. Pauls, N.C. 28384

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Irray legate. I have lived in Roseon County for 42 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely, Tiffany beggett

Address 58 25 But fer Road Fairmont Nic, 28340

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation

NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699 Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Guadolupe. I have lived in Robest County for 20 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Community support letter for Valleygate Dental Surgical Center's Certificate of Need Re: applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: Pridgen. I have lived in Bladen County for 32 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Amie Tridgen
Print Name

5104 Elizabalhtour, NC 28337

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Myra Riveria. I have lived in Roberto County for 1 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely Myra Riveria Tobacao Rd Janua Nc 28369

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Community support letter for Valleygate Dental Surgical Center's Certificate of Need Re: applications to develop dental specialty surgical centers in Cumberland and Wake Counties

Dear Ms. Frisone: My name is Michael Whitney I have lived in Robeson County for 20 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely,

Michael Whitney

5 (0, 2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Community support letter for Valleygate Dental Surgical Center's Certificate of Need Re: applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is AU NUCSON I have lived in Umberload County for years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely.

5 /0,2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Community support letter for Valleygate Dental Surgical Center's Certificate of Need Re: applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is C(C) N(C) . I have lived in Lamberland County for 7 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely,

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re:	Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties
Dear	Ms. Frisone:
letter	ame is Example: Sinclas I have lived in Robesha County for 2 years. I am writing this to express support for Valleygate's Certificate of Need applications to establish licensed dental cal centers in Cumberland County and Wake Counties.
comm retain	ge Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved nunities in Eastern North Carolina, and has advocated for regulatory and other changes that help dentists, particularly pediatric dentists in our communities. My family is pleased with the care and approach to helping families to understand how to maintain their teeth so they last the rest of their
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Addi	tional Comments:
l sin-	cerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and its approval as quickly as possible.
()	erely, and herely Evander Sinclair Print Name
Add	ress PD BDX 924 St Paul MC 28384

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Address 2610 MINYON Lake Brive

Community support letter for Valleygate Dental Surgical Center's Certificate of Need Re: applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Elizabeth Stiles I have lived in Current County for 31 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely.

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties

Dear Ms. Frisone:

My name is Ellected Shies. I have lived in Crember County for 37 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.

Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives.

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Additio	onal Comments:
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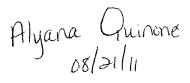
I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

Sincerely,

Signature

Print Name

Address 2610 Mirror Lake Brice Fage HEVILF, NC 28753



May 05, 2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties

Dear Ms. Frisone:
My name is Melisa Hams. I have lived in Lumberland. County for $\frac{1}{2}$ years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.
Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives.
As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays.
Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of
Need to establish a dental ambulatory surgical facility in Fayetteville.
Fayetteville and Garner are both good locations for this service.
Additional Comments:
l sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.
Sincerely,
Melise Claams Melisa Adams
Signature Print Name
Address SIE Shawshura Rd Towatto 11. 11 28311

5 , 2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Community support letter for Valleygate Dental Surgical Center's Certificate of Need Re: applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Michael loss. I have lived in Cumberland County for 35 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely, Address <u>Ce32 Devoe Ave Fayetteville, NC</u> 28314

<u>5</u> <u>5</u>,2016

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Chley Borey. I have lived in Cumberland County for 10 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of \square Need to establish a dental ambulatory surgical facility in Fayetteville. \square Fayetteville and Garner are both good locations for this service. Additional Comments:

Community support letter for Valleygate Dental Surgical Center's Certificate of Need

l sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

Sincerely,

Signature

4728 Flintcastle Rd

Print Name

NC 28314

May 17, 2016

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: _. I have lived in Kobeson County for 15 years. I am writing this My name is letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely,

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Jamilee Randes I have lived in Combedand County for / years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. V Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Address 327 Colinwood Drive Fayetteville, NC 28303

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is House bissett. I have lived in Hobeson County for 38 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is <u>Celso</u>. I have lived in <u>Sampson</u> County for <u>3</u> years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely, Celso Hernandez Fidel Celso Hernandez Fidel
Signature

Address 913 (Codar Point Rd Newton Grove, NC 28366)

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Sampson County for ___ years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely. Address 7 Ivey in Newton Grove, NC 28366

, 2016
Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699
Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties
Dear Ms. Frisone:
My name is Cricona. I have lived in County for years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.
Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives.
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Additional Comments:
I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.
Sincerely,
Crispina Cruz Signature Crispina Cruz Print Name
Signature Print Name Address 130 heagan in Autyville, No 28318

Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699
Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties
Dear Ms. Frisone:
My name is I have lived in County for years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.
Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives.
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Additional Comments:
I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.
Sincerely,
Signature Print Name Address 208 BIShop In Dunn NC 28334

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Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re:	Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties
Dear N	Ms. Frisone:
	me is William Beilliam. I have lived in Robert County for 16 years. I am writing this to express support for Valleygate's Certificate of Need applications to establish licensed dental al centers in Cumberland County and Wake Counties.
comm retain	e Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved unities in Eastern North Carolina, and has advocated for regulatory and other changes that help dentists, particularly pediatric dentists in our communities. My family is pleased with the care and pproach to helping families to understand how to maintain their teeth so they last the rest of their
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Ø	Fayetteville and Garner are both good locations for this service.
Additi	onal Comments:
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	rely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and its approval as quickly as possible.
Sincere	
Signati	ure Print Name
_	This wante
A ddwg	50 T // N // /Y/ ST

Cumberta, NC 28358

, 2016
Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699
Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties
Dear Ms. Frisone:
My name is Heather Staing I have lived in Cumberland County for 28 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.
Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives.
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Fayetteville and Garner are both good locations for this service.
Additional Comments:
<u>-</u>
I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.
Sincerely,
Heather Starling Print Name
Address 209 Michald Ed. Eastover NC 28312

May 13, 2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Raleigh, North Carolina 27699 Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Patricia Brown. I have lived in Cumberland County for 2 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. \mathbb{Z} Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Signature

Address 5337 Pringle way Hope Mills NC 28342

5 20_{,2016}

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Biarca Harold. I have lived in Hote County for 8 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Favetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. B-20-14 Address 123 Spacer Dr. Lauford, NC 28374

May 20, 2016

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Dear Ms. Frisone: My name is Anal. Malil. I have lived in Holce. County for 25 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Favetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely. Amal Marcin Address

Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

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Raleigh, North Carolina 27699 Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Rosel D. Hamnon S. I have lived in Hoke County for 25 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Robert D Hammon S JR
Print Name

5 20,2016

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: wall. I have lived in ScotlandCounty for 5 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: l sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely, 8 Mc Girts Bridge ad Laurinbur

To were	
4.	. 2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation 2704 Mail Service Center Raleigh, North Carolina 27699

NC Department of Health and Human Services Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is _______. I have lived in _______ County for _______ County for ________ vears. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely,

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Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699
Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties
Dear Ms. Frisone:
My name is Mondel Mondes I have lived in Dectord County for 15 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.
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I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.
Sincerely,
World Moran 5059 May 20, 2016 Signature Print Name
Address III 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

May 204, 2016

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Dear Ms. Frisone: My name is Nakia. I have lived in Hoke County for Ayears. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Nakia Ellison Print Name Address 200 Blue Rd Red Springs No

Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties

•
, 2016
Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699
Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties
Dear Ms. Frisone:
My name is <u>Kystel Kinlas</u> . I have lived in <u>Cambolas</u> ! County for <u>3</u> years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.
Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives.
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Additional Comments:
I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

Address 7531 Southquie Not Fay NC 283/4

Sincerely,

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699
Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties
Dear Ms. Frisone:
My name is ANO LUDWICK. I have lived in Cumber land County for years, I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.
Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives.
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Additional Comments:
I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

Address 136 Monteburg Rd. Fort Bragg NC 28307

Signature

Ana Ludwick Print Name

Signature

Address

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center

Raleigh, North Carolina 27699 Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Lara Houted . I have lived in Combenand County for 2 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. 凶 Fayetteville and Garner are both good locations for this service. Additional Comments: WAS PROVIDED SOR MY family IN TEXAS COULD DEFINITELY P. Hictive DOND : THIS CHEEN I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely, Print Name

MILLMANN RD FOXETTEVILLE NC 28304

<u>5</u> <u>110</u>, 2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Community support letter for Valleygate Dental Surgical Center's Certificate of Need Re: applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Journal Month of I have lived in County for I years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and Address 1008 Mohawk Ave, Fayetheville Nx 28303

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Community support letter for Valleygate Dental Surgical Center's Certificate of Need Re: applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Little All I have lived in Samps County for 19 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. \Box . Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

5 17,2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re:	Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties
Dear N	As. Frisone:
My na letter i surgica	me is 10 SM Tals M. I have lived in Amber and County for Dyears. I am writing this co express support for Valleygate's Certificate of Need applications to establish licensed dental centers in Cumberland County and Wake Counties.
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Additi	onal Comments:
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Addre	O Double 101 and 10 and 10 Print Name

3 17,2016

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: Ke I have lived in worth and County for bears. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Raleigh, North Carolina 27699 Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Amanda Know I have lived in Ounbila County for 20 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely, Signature Print Name

Address 200 (analyte) St. Stednian We 2739/

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties			
Dear Ms. Frisone:			
My name is Maraa Bulard I have lived in Robert County for Syears. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.			
Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives.			
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Additional Comments:			
I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.			
Sincerely, Signature Signature Print Name			
Address 600 bucket Ad lumbert on WC, 28362			

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

2704 Mail Service Center Raleigh, North Carolina 27699 Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Yama Drewlind have lived in Moseson County for 25 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

May 14, 2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is 1 Thomas. I have lived in Robert County for 10 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely, 5-16-2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties

Dear Ms. Frisone:	
My name is Down Lee. I have lived in Bladen County for Byears. I am writing letter to express support for Valleygate's Certificate of Need applications to establish licensed of surgical centers in Cumberland County and Wake Counties.	g this lental
Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserve communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care their approach to helping families to understand how to maintain their teeth so they last the rest of the lives.	and
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Additional Comments:	
I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal grant its approval as quickly as possible.	, and
Sincerely,	
John C Lee John Lee	
Signature Print Name	
Address 221 E -/M St Bladelala 12 K/C	

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

2704 Mail Service Center Raleigh, North Carolina 27699 Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Holle Thompsin. I have lived in Blatin County for Solvears. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

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Raleigh, North Carolina 27699 Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Dignila Walte. I have lived in Rosson County for 22 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and

Signature

Address 57 DOE TYAIL TO LUMBER NO 28358

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is And Salvedra I have lived in Robert County for years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely, Signature Print Name

Address SS6 Edge Grov Circle, St Pauls NC. 28384

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation

NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699 Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Diokes Vieded. I have lived in Robert County for years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely.

<u>5 /3</u>,2016

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Dear Ms. Frisone: My name is Laga Wester. I have lived in with the County for 40 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re:	Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties
Dear N	Ms. Frisone:
My na letter surgic	time is Cyrthia 10. I have lived in 308 Perby lane County for 2½ years. I am writing this to express support for Valleygate's Certificate of Need applications to establish licensed dental al centers in Cumberland County and Wake Counties.
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Additi	onal Comments:
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Addre	ss nos parby lane Hopemilla

May 13, 2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Abygale Enimal have lived in Cumberland County for 22 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments:

I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

Sincerely,

Signature J

Print Name

Address 6141 Bethany Dr. Stedman NC 28391

May 12,2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Community support letter for Valleygate Dental Surgical Center's Certificate of Need Re: applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is <u>Tanka Murphy</u> I have lived in <u>Cumberland</u> county for years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely, Address 807 Opal Court Fayetteville NC 23311

May 12, 2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Charles Tybbs. I have lived in Country for 13 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely. Signature

Print Name

Address 1405 Kershar Losp, Fayetteille, NC 28314

May 16, 2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties
Dear Ms. Frisone:
My name is MINN BLO. I have lived in Cumberland county for 10 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.
Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives.
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Additional Comments:
I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.
Sincerely,
Memorale Mima Reid
Print Name
Address 407 Silver Oaks Dr Faire Horallo No 28211

May 16, 2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Community support letter for Valleygate Dental Surgical Center's Certificate of Need Re: applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is <u>Dia Barry</u>. I have lived in <u>Holhe</u> County for <u>2</u> years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. \square Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. \mathbf{Z} Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

Sincerely,

Signature Pri
Address 704 white chapel Ln Rueford M 283/6

<u>5</u> <u>ILP</u>, 2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties

Dear Ms. Frisone:

My name is Kirnler by Smith I have lived in Chamberland County for ____ years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.

Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives.

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Additio	onal Comments:	
·		_

l sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

Sincerely,

Signature

Smith

Print Name

Address 350 Birch Field Ct. Apt 202 Tayetheralle MC 28306 16,2016

Re:

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Tryings, a Born I have lived in free the My name is I younge, a Be of I have lived in for County for 1 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and Sincerely.

May 14, 2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

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Address	\$9010 Barland Hwy

<u>5</u> <u>/6</u>, 2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Community support letter for Valleygate Dental Surgical Center's Certificate of Need Re: applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is William Homos. I have lived in Sometime County for & years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. |X|Fayetteville and Garner are both good locations for this service. Additional Comments: l sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

May 13, 2016

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Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Occiliated in House County for 8 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Olssie Lonan Print Name

May 13, 2016

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Print Name Address 186 MUHLEY Dr. Red Springs N. (, 2837)

<u>5</u> <u>13</u>,2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Raleigh, North Carolina 27699 Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Series Support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. P. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely, lerry Daubon Print Name

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May 13, 2016

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Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

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may 13,2016

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Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is <u>while some</u> I have lived in <u>Horne</u> County for 1.5 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. 日. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

<u>05</u> <u>13</u>,2016

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Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: male. I have lived in Hole County for 7 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Need to establish a dental ambulatory surgical facility in Favetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible.

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<u> 15 13</u>,2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties

Dear Ms. Frisone:

My name is <u>18551Cq Hunt</u>. I have lived in <u>Soffanci</u> County for <u>29</u> years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.

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	rely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and a sapproval as quickly as possible.
Sincere	ely,
	Jessica Hunt Trint Name
Signate	Print Name

May 24, 2016

Re:

Ms. Martha Frisone, Assistant Chief
Certificate of Need Section
Division of Health Services Regulation
NC Department of Health and Human Services
2704 Mail Service Center
Raleigh, North Carolina 27699

applications to develop dental specialty surgical centers in Cumberland and Wake Counties Dear Ms. Frisone: My name is Horon. I have lived in Robeson County for 10 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties. Village Family Dental, a Valleygate affiliate, helped to build the dental care workforce in underserved communities in Eastern North Carolina, and has advocated for regulatory and other changes that help retain dentists, particularly pediatric dentists in our communities. My family is pleased with the care and their approach to helping families to understand how to maintain their teeth so they last the rest of their lives. As you are probably aware, having dental surgery is stressful, particularly for children. It is also cumbersome to arrange in North Carolina. What Valleygate is proposing in its Certificate of Need application will be far more comfortable than a hospital, and will reduce the long delays. Eastern and Central North Carolina will be better off if Valleygate is awarded a Certificate of Ш Need to establish a dental ambulatory surgical facility in Fayetteville. Fayetteville and Garner are both good locations for this service. Additional Comments: I sincerely urge the state of North Carolina to examine the strong merits of Vallegate's proposal, and grant its approval as quickly as possible. Sincerely, Signature

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Sincerely,

Print Name

May 24, 2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties

Dear Ms. Frisone:

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Sincerely,

Signature

Erika Badzinski

Print Name

Address 4131 Willowgate Drive

Fayetteville, NC 28312

<u>5</u> 2U, 2016

Ms. Martha Frisone, Assistant Chief Certificate of Need Section Division of Health Services Regulation NC Department of Health and Human Services 2704 Mail Service Center Raleigh, North Carolina 27699

Re: Community support letter for Valleygate Dental Surgical Center's Certificate of Need applications to develop dental specialty surgical centers in Cumberland and Wake Counties

Dear Ms. Frisone:
My name is Layoh Austral have lived in Robert County for 10 years. I am writing this letter to express support for Valleygate's Certificate of Need applications to establish licensed dental surgical centers in Cumberland County and Wake Counties.
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Attachment H

Additional Letters of Support: Community and Dentists

April 27, 2016

Ms. Martha Friscone Assistant Chief, CON Healthcare Planning and Certificate of Need Section Division of Health Service Regulation 2714 Mail Service Center Raleigh, NC 27699-2714

Dear Ms. Friscone,

Please accept this letter as notice of my desire to rescind the letter of support for Surgery Center for Dental Professionals in Greenville included in their certificate of need application on April 15th, 2016. The electronic document format used by Surgical Center, though helpful for some, is too easy to sign unintentionally. I signed it before realizing this was not the same group or proposal that I intended to support.

On April 13, 2016, I provided my letter of support to Valleygate Dental Surgery Centers of Fayetteville, who will provide a center in my area. As previously noted, my patients come from Cumberland, Scotland, Robeson, and Moore Counties. My support remains strong for this proposal.

Please contact me at (910) 693-3729 if you would like to discuss this memo further.

Sincerely,

Jose Cangas, DDS

Dental Derby



North Carolina Department of Health and Human Services Division of Medical Assistance

Pat McCrory Governor Richard O. Brajer Secretary

Dave Richard Deputy Secretary for Medical Assistance

May 11, 2016

Ms. Martha Frisone, Assistant Chief Healthcare Planning and Certificate of Need Section North Carolina Division of Facilities Services 809 Ruggles Drive Raleigh, NC 27603

Re: Valleygate Dental Surgery Centers, 2016 CON Applications for Demonstration Dental Ambulatory Surgical Centers

Dear Ms. Frisone:

As Dental Officer for the North Carolina Division of Medical Assistance (DMA), I would like to express my support for the Certificate of Need (CON) demonstration project applications for freestanding dental specific ambulatory surgical centers (ASC) in the Garner, Fayetteville, Charlotte and Triad regions.

I am familiar with the leadership team of the applicants, Valleygate Dental Surgical Centers. They are active participants in the NC Medicaid and Health Choice dental programs, and long term advocates for DMA's beneficiaries. The dental professionals at Knowles, Smith & Associates, LLP are enrolled Medicaid providers in good standing and have provided quality dental care, including surgical and pediatric care, to disadvantaged Medicaid/CHIP beneficiaries for decades. My past interaction with the leadership team at Valleygate gives me confidence that they will follow through on their commitment to improving the health status of underserved patients throughout North Carolina in this CON demonstration initiative.

Valleygate representatives met with the DMA leadership team to discuss development of four freestanding dental-only surgical centers. I am aware that their proposed centers will be designed around the needs of pediatric and special needs adults, who face barriers to accessing timely dental care in this state. DMA strongly supports development of these facilities. Our agency believes that the initiative should help us achieve cost predictability and stabilization in the Medicaid budget, as well as improve access for our beneficiaries.

Valleygate's dedication to high quality care is exemplified by their plans to adhere to state and federal regulations governing ambulatory surgery centers, their commitment to adhere to NC Board of Dental Examiners' requirements, and their plans to meet third-party accreditation rules. DMA believes that this project will promote cost effective approaches, expand access to health care services for the medically

www.ncdhhs.gov
Tel 919-855-4100 * Fax 919-733-6608
Location: 1985 Umstead Drive * Kirby Building * Raleigh, NC 27603
Mailing Address: 2501 Mail Service Center * Raleigh, NC 27699-2501
An Equal Opportunity / Affirmative Action Employer

underserved, and encourage quality health care services and increase availability of certified ambulatory surgical facilities equipped to render deep sedation/anesthesia services for dental surgical care. I wish to convey my enthusiastic support and that of my DMA colleagues for this project. I believe that the Valleygate Dental Surgical Center applications merit careful consideration. Their leadership has worked with the Division on problems of access in underserved areas and has consistently delivered quality in all of its endeavors.

Please contact me should you have any questions or concerns regarding this letter of support.

Sincerely,

Mark W. Casey DOS, MPH
Mark W, Casey, DDS. MPH

DMA Dental Officer



North Carolina Community Health Center Association

4917 Waters Edge Drive, Suite 165, Raleigh, NC 27606-2459 (919) 469-5701 Fax: (919) 469-1263 www.ncchca.org

May 5, 2016

Ms. Martha Frisone, Assistant Chief Health Planning and Certificate of Need Section North Carolina Division of Facilities Services 701 Barbour Dr. Raleigh, NC 27603

Re: Valleygate Dental Surgical Centers

CON Application for the Dental Surgery Demonstration Ambulatory Surgical Center

May 1, 2016 and July 1, 2016 Review Periods

Dear Ms. Frisone:

The North Carolina Community Health Center Association (NCCHCA) would like to express its support for the CON Application submitted by Valleygate Dental Surgical Centers (hereafter Valleygate) for freestanding dental only ambulatory surgical centers in the Raleigh, Fayetteville, Charlotte and Triad regions of the State. NCCHCA serves as the collective voice for North Carolina's 39 Federally Qualified Health Centers (FQHCs) and Look-alikes (LAs). FQHCs provide a patient-governed, patient-centered health care home that integrates high quality medical, dental, behavioral health, pharmacy, and enabling services without regard to a person's ability to pay. Federally Qualified Health Centers (aka Community Health Centers) are geographically dispersed across 74 counties and operate nearly 200 clinical sites. In 2014, North Carolina's FQHCs served nearly 457,000 patients. Nearly 50% of these patients are uninsured for medical and dental care. Our dentists routinely experience difficulty referring patients in need of dental procedures which require sedation or general anesthesia.

Representatives of Valleygate met with NCCHCA to discuss the development of a freestanding dental only surgical centers across the State to improve access to dental surgical care for residents of North Carolina, including the needs of the Medicaid and uninsured population with whom we work. We strongly support the development of these facilities.

Valleygate's commitment to high quality care is exemplified by credentialing dentists using the centers and providing Board Certified Anesthesiologists and Certified Registered Nurse Anesthetists in the operatory during procedures. Their model promotes cost-effectiveness and expands access to the medically underserved. They have committed to ensuring that patients without medical and dental homes are referred into Community Health Centers for on-going care.

Please convey my enthusiastic support for the Valleygate proposal to the Certificate of Need Section at the North Carolina Division of Health Services Regulation.

Sincerely,

E. Benjamin Money

CEO and President

North Carolina Community Health Center Association



May 25, 2016

Ms. Martha Frisone, Assistant Chief Healthcare Planning and Certificate of Need Section Division of Health Service Regulation 2704 Mail Service Center Raleigh, NC 27699-2704

Dear Ms. Frisone:

School of Dental Medicine

Ledyard E. Ross Hall 1851 MacGregor Downs Road Mail Stop 701 East Carolina University Greenville, NC 27834-4354

252-737-7000 office 252-737-7049 fax www.ecu.edu/dental

On behalf of East Carolina University (ECU) School of Dental Medicine, I am offering strong support for the Division of Health Services Regulation to develop four dental-only ambulatory surgical centers in North Carolina. I understand that one will be located in Eastern North Carolina. The ECU School of Dental Medicine has Community Service Learning Centers in Robeson and Harnett Counties as part of our mission to provide care in rural and underserved areas of North Carolina. A dental-only surgical center could have tremendous value to the area's vulnerable populations, as well as to the School's mission. We are particularly concerned about vulnerable populations, like children and adults who have developmental disabilities, many of whom require extensive restorative and/or oral surgery procedures. Similarly, adults and children with anxiety or behavioral issues who require moderate or deep sedation as part of their overall dental treatment would also benefit from such a center.

From a dental education standpoint, I appreciate how a local ambulatory surgical center could provide both predoctoral students and Advanced Education in General Dentistry Residents with rich community-based clinical learning experiences. The centers present an opportunity for them to work with properly credentialed faculty in providing care to unique at-risk patients under moderate sedation and general anesthesia. We feel with such experience, they will be more likely to pursue sedation credentialing after graduation and/or treat vulnerable and complex patients under sedation when they are in practice. The ECU School of Dental Medicine plans to start enrollment for our Advanced Specialty Education Program in Pediatric Dentistry in late summer 2016. As our programs grow, it will be important to have locations around the state where graduates can practice.

Representatives of Valleygate and other centers have described to us their plans to compete for the privilege of starting ambulatory surgical centers. The ECU School of Dental Medicine would like to work with any approved centers to provide educational experiences for our residents and students, as well as care for our patients.

In summary, we believe there is a significant and growing need for the demonstration centers and are very supportive of your office issuing a Certificate of Need.

Sincerely,

D. Gregory Chadwick, DDS, MS

Mhadwik

Dean

Attachment I

POMS and ADA Information on Anesthesia

Anesthesia

Several methods of anesthesia are available. The method of anesthesia that is chosen for or by a patient depends upon the nature of the surgical procedure and the patient's level of apprehension. The following table illustrates the choices of anesthesia, a description of the anesthetic technique, and the usual indications for that technique.

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Office Based Intravenous Anesthesia with Local Anesthetic*

Hospital or Surgery Center Based General Anesthesia

Description of Technique

The patient remains totally conscious throughout the procedure. A local anesthetic (e.g. lidocaine) is administered in the area where the surgery is to be performed. Local anesthetic is used in conjunction with the other methods of anesthesia in all oral surgery procedures.

A mixture of nitrous oxide (laughing gas) and oxygen is administered through a nasal breathing apparatus. The patient remains conscious in a relaxed condition. Nitrous oxide has a sedative and analgesic (paincontrolling) effect.

Medications are administered through an intravenous line (I.V.). The patient falls asleep and is completely unaware of the procedure being performed. Medications most commonly used are Fentanyl (oplate), Versed (benzodiazepine), Ketamine, and Diprivan. Supplemental oxygen is delivered through a nasal breathing apparatus and the patient's vital signs are closely monitored.

A patient is admitted to a hospital or surgery center where anesthesia is administered by an anesthesiologist.

Usual Indications

Simple oral surgery procedures such as minor soft tissue procedures and basic tooth extractions. Patients may elect to have wisdom teeth removed with local anesthetic.

Simple oral surgery procedures to more involved procedures such as removal of wisdom teeth and placement of dental implants.

Intravenous anesthesia includes I.V. sedation and general anesthesia for all types of oral surgery. A patient may choose intravenous anesthesia for simple procedures depending on their level of anxiety. Most people having their wisdom teeth removed or having a dental implant placed will choose intravenous anesthesia. General anesthesia and/or I.V. sedation may be necessary if local anesthesia fails to anesthetize the surgical site which often occurs in the presence of infection.

Indicated for patients undergoing extensive procedures such as face and jaw reconstruction and TMJ surgery. Also indicated for patients with medical conditions such as heart disease or lung disease who require general anesthesia.

*To administer general anesthesia in the office, an oral surgeon must have completed at least three months of hospital based anesthesia training. Qualified applicants will then undergo an in office evaluation by a state dental board appointed examiner. The examiner observes an actual surgical procedure during which general anesthesia is administered to the patient. The examiner also inspects all monitoring devices and emergency equipment and tests the doctor and the surgical staff on anesthesia related emergencies. If the examiner reports successful completion of the evaluation process, the state dental board will issue the doctor a license to perform general anesthesia. The license is renewable every two years if the doctor maintains the required

amount of continuing education units related to anesthesia.

Again, when it comes to anesthesia, our first priority is the patient's comfort and safety. If you have any concerns regarding the type of anesthesia that will be administered during your oral surgery procedure, please do not hesitate to discuss your concerns with your doctor at the time of your consultation.

Intravenous Sedation ("Twilight Sedation")

Oral and Maxillofacial Surgery offices offer their patients the option of Intravenous Sedation or Dental Intravenous Anesthesia or to some it is referred to as "Twilight Sedation" for their dental treatment. Intravenous Sedation or "twilight sleep" helps you to be comfortable and calm when undergoing dental procedures. Your treatment can be completed under intravenous sedation. Intravenous sedation or "IV sedation" (twilight sedation) is designed to better enable you to undergo your dental procedures while you are very relaxed; it will enable you to tolerate as well as not remember those procedures that may be very uncomfortable for you. IV sedation will essentially help alleviate the anxiety associated with your treatment. You may not always be asleep but you will be comfortable, calm and relaxed, drifting in and out of sleep – a "twilight sleep".

If you choose the option of intravenous sedation your IV sedation/anesthesia is administered and monitored by your Oral Surgeon therefore eliminating the costly expense of having your treatment carried out in an operating room or same day surgical facility.

How is the IV Sedation Administered?

A thin needle will be introduced into a vein in your arm or hand. The needle will be attached to an intravenous tube through which medication will be given to help you relax and feel comfortable. At times a patient's vein may not be maintainable, in these situations the medications will be administered and the needle retrieved – both scenarios will achieve the same desired level of conscious sedation. Once again some patients may be asleep while others will slip in and out of sleep. Some patients with medical conditions and/or on specific drug regimens may only be lightly sedated and may not sleep at all.

The goal of IV sedation is to use as little medication as possible to get the treatment completed. It is very safe, much safer than oral sedation. With IV sedation a constant "drip" is maintained via the intravenous tube. At any time an antidote can be administered to reverse the effects of the medications if necessary. Along with IV sedation there are also other different "levels" of sedation available to you in our office. There is nitrous oxide analgesia.

Sedation Dentistry for the Elderly

As we age, our oral health becomes more important than ever. Periodontal disease can lead to bone and tooth loss, which affects nearly every part of our daily lives. To lead full and active lives, we need our teeth and gums. They allow us enjoy food, support speech and good conversation, and facilitate digestion. Your Oral Surgeon is dedicated to treating elderly patients with care and commitment to comfort and health.

Elderly patients as a group tend to avoid dental visits for a variety of reasons, including: more pressing medical concerns, anxiety about treatment, the hardship of transportation, or fixed incomes. Once their oral health has reached an unmanageable point, fear and embarrassment further keep these patients away from the dentist.

For elderly patients embarrassed or fearful of their current oral state, sedation dentistry provides the opportunity for your Oral Surgeon to treat these conditions while the patient remains relaxed and unaware until "awaking" to an improved oral state!

Sedation Dentistry for the Disabled

It may be especially difficult for people with disabilities to obtain access to proper dental care. They must find a dentist who is skilled and compassionate, and who can provide services for which some dentists may not be qualified. Your Oral Surgeon provides the expertise, state-of-the-art-equipment, and dedication to assisting special-needs patients necessary to ensuring great oral care for our patients.

Disabled patients may face added challenges in maintaining their oral health. Their disability may make it difficult to brush or floss regularly; they may also suffer a severe gag reflux, or dry mouth as a result of medication. Your Oral Surgeon meets these challenges with sedation dentistry for the disabled. He/she is skilled in anesthesia for special-needs patients, and can ease the fear associated with out-of-control oral hygiene with one visit.

Sedation Dentistry for the Fearful

Dental phobia is a real, often overwhelming reality for thousands of people. Negative previous dental

experiences, fear of needles or drills, and severe gag refluxes are just some of the reasons people feel extreme anxiety when thinking about visiting the dentist.

If you suffer from dental phobia- fear no more! Your Oral Surgeon is committed to understanding the very real nature of your fears. Not only will our staff treat you with delicacy and care, but IV sedation will allow you to experience dentistry in a whole new way. While engaging in a pleasant sleeplike experience, your Oral Surgeon will be hard at work making sure you "wake up" with the results you desire.

Nitrous Oxide (Laughing Gas)

Nitrous Oxide is a sweet smelling, non irritating, colorless gas which you can breathe. Nitrous Oxide has been the primary means of sedation in dentistry for many years. Nitrous oxide is safe, the patient receives 50-70% oxygen with no less than 30% nitrous oxide. Patients are able to breathe on their own and remain in control of all bodily functions. The patient may experience mild amnesia and may fall asleep not remembering all of what happened during their appointment.

There are many advantages to using Nitrous Oxide

- . The depth of sedation can be altered at any time to increase or decrease sedation.
- There is no after effect such as a "hangover"
- Inhalation sedation is safe with no side effects on your heart and lungs, etc.
- Inhalation sedation is very effective in minimizing gagging.
- It works rapidly as it reaches the brain within 20 seconds. In as few as 2-3 minutes its relaxation and pain killing properties develop.

Reasons to not use Nitrous Oxide

Though there are no major contraindications to using nitrous oxide, you may not want to use it if you have emphysema, exotic chest problems, M.S., a cold or other difficulties with breathing. You may want to ask your dentist for a "5 minute trial" to see how you feel with this type of sedation method before proceeding.

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I. INTRODUCTION II. DEFINITIONS

Guidelines for the Use of Sedation and General Anesthesia by Dentists

The administration of local anesthesia, sedation and general anesthesia is an integral part of dental practice. The American Dental Association is committed to the safe and effective use of these modalities by appropriately educated and trained dentists. The purpose of these guidelines is to assist dentists in the delivery of safe and effective sedation and anesthesia.

Dentists providing sedation and anesthesia in compliance with their state rules and/or regulations prior to adoption of this document are not subject to *Section III, Educational Requirements*.

Methods of Anxiety and Pain Control

analgesia — the diminution or elimination of pain.

conscious sedation¹ — a minimally depressed level of consciousness that retains the patient's ability to independently and continuously maintain an airway and respond appropriately to physical stimulation or verbal command and that is produced by a pharmacological or non-pharmacological method or a combination thereof.

In accord with this particular definition, the drugs and/or techniques used should carry a margin of safety wide enough to render unintended loss of consciousness unlikely. Further, patients whose only response is reflex withdrawal from repeated painful stimuli would not be considered to be in a state of conscious sedation.

combination inhalation-enteral conscious sedation (combined conscious sedation) — conscious sedation using inhalation and enteral agents.

When the intent is anxiolysis only, and the appropriate dosage of agents is administered, then the definition of enteral and/or combination inhalation–enteral conscious sedation (combined conscious sedation) does not apply.

local anesthesia — the elimination of sensation, especially pain, in one part of the body by the topical application or regional injection of a drug.

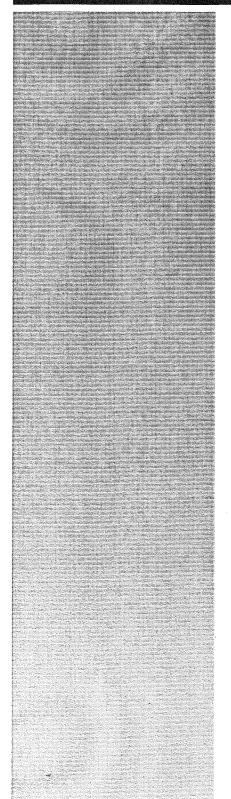
Note: Although the use of local anesthetics is the foundation of pain control in dentistry and has a long record of safety, dentists must be aware of the maximum, safe dosage limits for each patient. Large doses of local anesthetics in themselves may result in central nervous system depression, especially in combination with sedative agents.

minimal sedation — a minimally depressed level of consciousness, produced by a pharmacological method, that retains the patient's ability to independently and continuously maintain an airway and respond normally to tactile stimulation and verbal command. Although cognitive function and coordination may be modestly impaired, ventilatory and cardiovascular functions are unaffected.²

- 1 Parenteral conscious sedation may be achieved with the administration of a single agent or by the administration of more than one agent.
- 2 Portions excerpted from Continuum of Depth of Sedation: Definition of General Anesthesia and Levels of Sedation/Analgesia, 2004, of the American Society of Anesthesiologists (ASA). A copy of the full text can be obtained from ASA, 520 N. Northwest Highway, Park Ridge, IL 60068–2573.

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Note: In accord with this particular definition, the drug(s) and/or techniques used should carry a margin of safety wide enough never to render unintended loss of consciousness. Further, patients whose only response is reflex withdrawal from repeated painful stimuli would not be considered to be in a state of minimal sedation.

When the intent is minimal sedation for adults, the appropriate initial dosing of a single enteral drug is no more than the maximum recommended dose (MRD) of a drug that can be prescribed for unmonitored home use.

The use of preoperative sedatives for children (aged 12 and under) prior to arrival in the dental office, except in extraordinary situations, must be avoided due to the risk of unobserved respiratory obstruction during transport by untrained individuals.

Children (aged 12 and under) can become moderately sedated despite the intended level of minimal sedation; should this occur, the guidelines for moderate sedation apply.

For children 12 years of age and under, the American Dental Association supports the use of the American Academy of Pediatrics/American Academy of Pediatric Dentistry Guidelines for Monitoring and Management of Pediatric Patients During and After Sedation for Diagnostic and Therapeutic Procedures.

Nitrous oxide/oxygen may be used in combination with a single enteral drug in minimal sedation.

Nitrous oxide/oxygen when used in combination with sedative agent(s) may produce minimal, moderate, deep sedation or general anesthesia.

The following definitions apply to administration of minimal sedation:

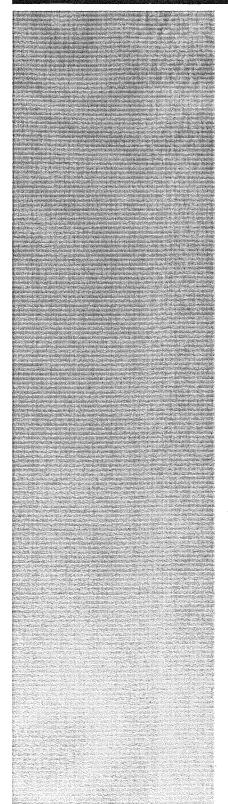
maximum recommended (MRD) — maximum FDA-recommended dose of a drug, as printed in FDA-approved labeling for unmonitored home use.

incremental dosing — administration of multiple doses of a drug until a desired effect is reached, but not to exceed the maximum recommended dose (MRD).

supplemental dosing — during minimal sedation, supplemental dosing is a single additional dose of the initial dose of the initial drug that may be necessary for prolonged procedures. The supplemental dose should not exceed one-half of the initial dose and should not be administered until the dentist has determined the clinical half-life of the initial dosing has passed. The total aggregate dose must not exceed 1.5x the MRD on the day of treatment.

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moderate sedation — a drug-induced depression of consciousness during which patients respond *purposefully* to verbal commands, either alone or accompanied by light tactile stimulation. No interventions are required to maintain a patent airway, and spontaneous ventilation is adequate. Cardiovascular function is usually maintained.³

Note: In accord with this particular definition, the drugs and/or techniques used should carry a margin of safety wide enough to render unintended loss of consciousness unlikely. Repeated dosing of an agent before the effects of previous dosing can be fully appreciated may result in a greater alteration of the state of consciousness than is the intent of the dentist. Further, a patient whose only response is reflex withdrawal from a painful stimulus is not considered to be in a state of moderate sedation.

The following definition applies to the administration of moderate or greater sedation:

titration — administration of incremental doses of a drug until a desired effect is reached. Knowledge of each drug's time of onset, peak response and duration of action is essential to avoid over sedation. Although the concept of titration of a drug to effect is critical for patient safety, when the intent is moderate sedation one must know whether the previous dose has taken full effect before administering an additional drug increment.

deep sedation — a drug-induced depression of consciousness during which patients cannot be easily aroused but respond purposefully following repeated or painful stimulation. The ability to independently maintain ventilatory function may be impaired. Patients may require assistance in maintaining a patent airway, and spontaneous ventilation may be inadequate. Cardiovascular function is usually maintained.³

general anesthesia — a drug-induced loss of consciousness during which patients are not arousable, even by painful stimulation. The ability to independently maintain ventilatory function is often impaired. Patients often require assistance in maintaining a patent airway, and positive pressure ventilation may be required because of depressed spontaneous ventilation or drug-induced depression of neuromuscular function. Cardiovascular function may be impaired.

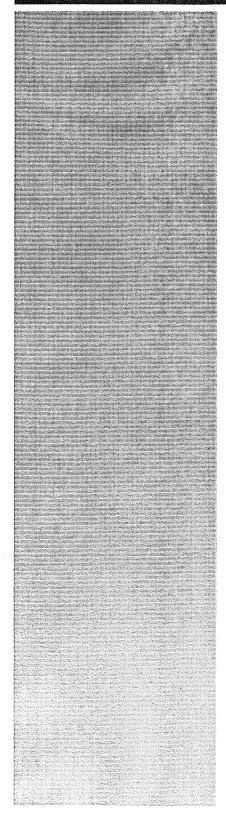
Because sedation and general anesthesia are a continuum, it is not always possible to predict how an individual patient will respond. Hence, practitioners intending to produce a given level of sedation should be able to diagnose and manage the physiologic consequences (rescue) for patients whose level of sedation becomes deeper than initially intended.³

For all levels of sedation, the practitioner must have the training, skills, drugs and equipment to identify and manage such an occurrence until either assistance arrives (emergency medical service) or the patient returns to the intended level of sedation without airway or cardiovascular complications.

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3 Excerpted from Continuum of Depth of Sedation: Definition of General Anesthesia and Levels of Sedation/ Analgesia, 2004, of the American Society of Anesthesiologists (ASA). A copy of the full text can be obtained from ASA, 520 N. Northwest Highway, Park Ridge, IL 60068-2573.



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Routes of Administration

enteral — any technique of administration in which the agent is absorbed through the gastrointestinal (GI) tract or oral mucosa [i.e., oral, rectal, sublingual].

parenteral — a technique of administration in which the drug bypasses the gastrointestinal (GI) tract [i.e., intramuscular (IM), intravenous (IV), intranasal (IN), submucosal (SM), subcutaneous (SC), intraosseous (IO)].

transdermal — a technique of administration in which the drug is administered by patch or iontophoresis through skin.

transmucosal — a technique of administration in which the drug is administered across mucosa such as intranasal, sublingual, or rectal.

inhalation — a technique of administration in which a gaseous or volatile agent is introduced into the lungs and whose primary effect is due to absorption through the gas/blood interface.

Terms

qualified dentist — meets the educational requirements for the appropriate level of sedation in accordance with Section III of these *Guidelines*, or a dentist providing sedation and anesthesia in compliance with their state rules and/or regulations prior to adoption of this document.

must/shall — indicates an imperative need and/or duty; an essential or indispensable item; mandatory.

should — indicates the recommended manner to obtain the standard; highly desirable.

may — indicates freedom or liberty to follow a reasonable alternative.

continual — repeated regularly and frequently in a steady succession.

continuous — prolonged without any interruption at any time.

time-oriented anesthesia record — documentation at appropriate time intervals of drugs, doses and physiologic data obtained during patient monitoring.

immediately available — on site in the facility and available for immediate use.

American Society of Anesthesiologists (ASA) Patient Physical Status Classification⁴

ASA I — A normal healthy patient.

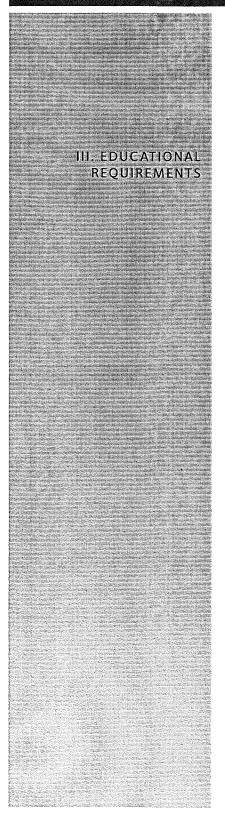
ASA II — A patient with mild systemic disease.

ASA III — A patient with severe systemic disease.

ASA IV — A patient with severe systemic disease that is a constant threat to life.

ASA V — A moribund patient who is not expected to survive without the operation.

4 ASA Physical Status Classification System is reprinted with permission of the American Society of Anesthesiologists, 520 N. Northwest Highway, Park Ridge, IL 60068–2573.



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ASA VI — A declared brain-dead patient whose organs are being removed for donor purposes.

E — Emergency operation of any variety (used to modify one of the above classifications, i.e., ASA III-E).

A. Minimal Sedation

- 1. To administer minimal sedation the dentist must have successfully completed:
 - a. Training to the level of competency in minimal sedation consistent with that prescribed in the ADA *Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students*, or a comprehensive training program in moderate sedation that satisfies the requirements described in the *Moderate Sedation* section of the *ADA Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students* at the time training was commenced,

or

 b. An advanced education program accredited by the ADA Commission on Dental Accreditation that affords comprehensive and appropriate training necessary to administer and manage minimal sedation commensurate with these guidelines;

and

- c. A current certification in Basic Life Support for Healthcare Providers.
- Administration of minimal sedation by another qualified dentist or independently
 practicing qualified anesthesia healthcare provider requires the operating dentist
 and his/her clinical staff to maintain current certification in Basic Life Support for
 Healthcare Providers.

B. Moderate Sedation

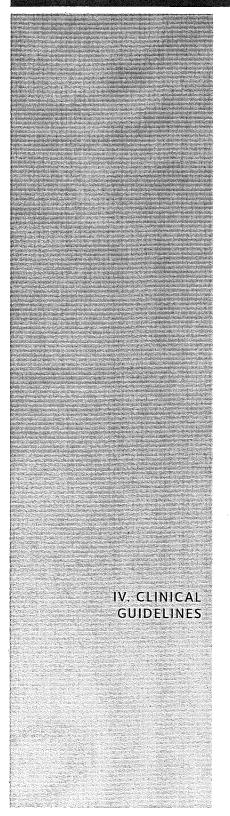
- 1. To administer moderate sedation, the dentist must have successfully completed:
 - a. A comprehensive training program in moderate sedation that satisfies the requirements described in the Moderate Sedation section of the ADA Guidelines for Teaching Pain Control and Sedation to Dentists and Dental Students at the time training was commenced,

or

 An advanced education program accredited by the ADA Commission on Dental Accreditation that affords comprehensive and appropriate training necessary to administer and manage moderate sedation commensurate with these guidelines;

and

c. 1) A current certification in Basic Life Support for Healthcare Providers and 2) Either current certification in Advanced Cardiac Life Support (ACLS) or completion of an appropriate dental sedation/anesthesia emergency management course on the same recertification cycle that is required for ACLS.



2. Administration of moderate sedation by another qualified dentist or independently practicing qualified anesthesia healthcare provider requires the operating dentist and his/her clinical staff to maintain current certification in Basic Life Support for Healthcare Providers.

C. Deep Sedation or General Anesthesia

- 1. To administer deep sedation or general anesthesia, the dentist must have completed:
 - a. An advanced education program accredited by the ADA Commission on Dental Accreditation that affords comprehensive and appropriate training necessary to administer and manage deep sedation or general anesthesia, commensurate with Part IV.C of these guidelines;

and

- b. 1) A current certification in Basic Life Support for Healthcare Providers and
 2) Either current certification in Advanced Cardiac Life Support (ACLS) or completion of an appropriate dental sedation/anesthesia emergency management course on the same re-certification cycle that is required for ACLS.
- Administration of deep sedation or general anesthesia by another qualified dentist
 or independently practicing qualified anesthesia healthcare provider requires the
 operating dentist and his/her clinical staff to maintain current certification in Basic
 Life Support (BLS) Course for the Healthcare Provider.

For all levels of sedation and anesthesia, dentists, who are currently providing sedation and anesthesia in compliance with their state rules and/or regulations prior to adoption of this document, are not subject to these educational requirements. However, all dentists providing sedation and general anesthesia in their offices or the offices of other dentists should comply with the Clinical Guidelines in this document.

A. Minimal sedation

1. Patient Evaluation

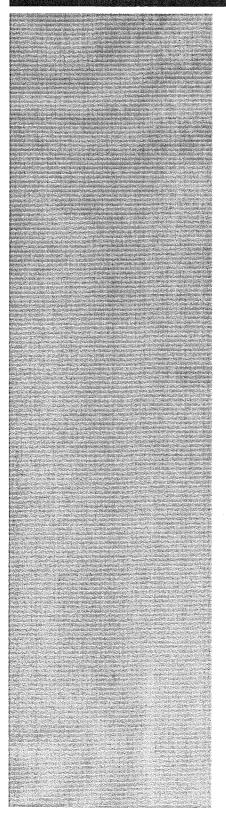
Patients considered for minimal sedation must be suitably evaluated prior to the start of any sedative procedure. In healthy or medically stable individuals (ASA I, II) this may consist of a review of their current medical history and medication use. However, patients with significant medical considerations (ASA III, IV) may require consultation with their primary care physician or consulting medical specialist.

2. Pre-Operative Preparation

- The patient, parent, guardian or care giver must be advised regarding the procedure associated with the delivery of any sedative agents and informed consent for the proposed sedation must be obtained.
- Determination of adequate oxygen supply and equipment necessary to deliver oxygen under positive pressure must be completed.
- Baseline vital signs must be obtained unless the patient's behavior prohibits such determination.

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- · A focused physical evaluation must be performed as deemed appropriate.
- Preoperative dietary restrictions must be considered based on the sedative technique prescribed.
- Pre-operative verbal and written instructions must be given to the patient, parent, escort, guardian or care giver.
- 3. Personnel and Equipment Requirements

Personnel:

 At least one additional person trained in Basic Life Support for Healthcare Providers must be present in addition to the dentist.

Equipment:

- A positive-pressure oxygen delivery system suitable for the patient being treated must be immediately available.
- When inhalation equipment is used, it must have a fail-safe system that is appropriately checked and calibrated. The equipment must also have either (1) a functioning device that prohibits the delivery of less than 30% oxygen or (2) an appropriately calibrated and functioning in-line oxygen analyzer with audible alarm.
- An appropriate scavenging system must be available if gases other than oxygen or air are used.
- 4. Monitoring and Documentation

Monitoring: A dentist, or at the dentist's direction, an appropriately trained individual, must remain in the operatory during active dental treatment to monitor the patient continuously until the patient meets the criteria for discharge to the recovery area. The appropriately trained individual must be familiar with monitoring techniques and equipment. Monitoring must include:

· Oxygenation:

- · Color of mucosa, skin or blood must be evaluated continually.
- Oxygen saturation by pulse oximetry may be clinically useful and should be considered.

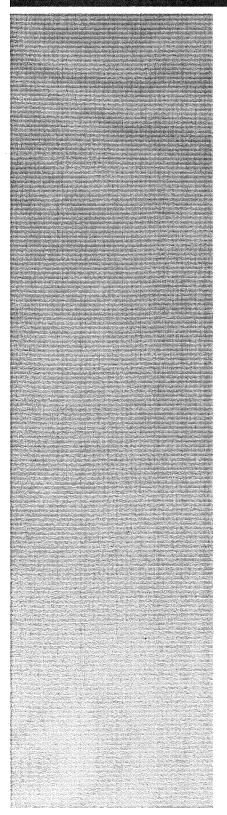
· Ventilation:

- The dentist and/or appropriately trained individual must observe chest excursions continually.
- The dentist and/or appropriately trained individual must verify respirations continually.

· Circulation:

• Blood pressure and heart rate should be evaluated pre-operatively, post-operatively and intraoperatively as necessary (unless the patient is unable to tolerate such monitoring).

Documentation: An appropriate sedative record must be maintained, including the names of all drugs administered, including local anesthetics, dosages, and monitored physiological parameters.



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5. Recovery and Discharge

- Oxygen and suction equipment must be immediately available if a separate recovery area is utilized.
- The qualified dentist or appropriately trained clinical staff must monitor the patient during recovery until the patient is ready for discharge by the dentist.
- The qualified dentist must determine and document that level of consciousness, oxygenation, ventilation and circulation are satisfactory prior to discharge.
- Post-operative verbal and written instructions must be given to the patient, parent, escort, guardian or care giver.

6. Emergency Management

- If a patient enters a deeper level of sedation than the dentist is qualified to provide, the dentist must stop the dental procedure until the patient returns to the intended level of sedation.
- The qualified dentist is responsible for the sedative management, adequacy of the facility and staff, diagnosis and treatment of emergencies related to the administration of minimal sedation and providing the equipment and protocols for patient rescue.

7. Management of Children

For children 12 years of age and under, the American Dental Association supports the use of the American Academy of Pediatrics/American Academy of Pediatric Dentistry Guidelines for Monitoring and Management of Pediatric Patients During and After Sedation for Diagnostic and Therapeutic Procedures.

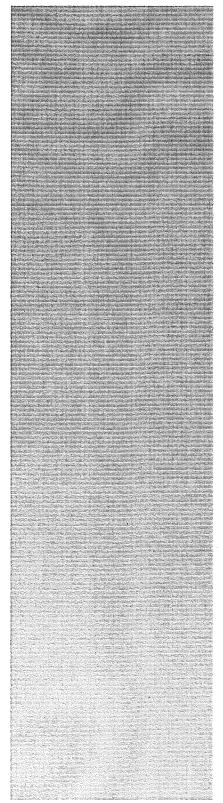
B. Moderate Sedation

1. Patient Evaluation

Patients considered for moderate sedation must be suitably evaluated prior to the start of any sedative procedure. In healthy or medically stable individuals (ASA I, II) this should consist of at least a review of their current medical history and medication use. However, patients with significant medical considerations (e.g., ASA III, IV) may require consultation with their primary care physician or consulting medical specialist.

2. Pre-operative Preparation

- The patient, parent, guardian or care giver must be advised regarding the procedure associated with the delivery of any sedative agents and informed consent for the proposed sedation must be obtained.
- Determination of adequate oxygen supply and equipment necessary to deliver oxygen under positive pressure must be completed.
- Baseline vital signs must be obtained unless the patient's behavior prohibits such determination.
- · A focused physical evaluation must be performed as deemed appropriate.
- Preoperative dietary restrictions must be considered based on the sedative technique prescribed.



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- Pre-operative verbal or written instructions must be given to the patient, parent, escort, guardian or care giver.
- 3. Personnel and Equipment Requirements

Personnel:

 At least one additional person trained in Basic Life Support for Healthcare Providers must be present in addition to the dentist.

Equipment:

- A positive-pressure oxygen delivery system suitable for the patient being treated must be immediately available.
- When inhalation equipment is used, it must have a fail-safe system that is appropriately checked and calibrated. The equipment must also have either

 (1) a functioning device that prohibits the delivery of less than 30% oxygen or (2) an appropriately calibrated and functioning in-line oxygen analyzer with audible alarm.
- An appropriate scavenging system must be available if gases other than oxygen or air are used.
- The equipment necessary to establish intravenous access must be available.
- 4. Monitoring and Documentation

Monitoring: A qualified dentist administering moderate sedation must remain in the operatory room to monitor the patient continuously until the patient meets the criteria for recovery. When active treatment concludes and the patient recovers to a minimally sedated level a qualified auxiliary may be directed by the dentist to remain with the patient and continue to monitor them as explained in the guidelines until they are discharged from the facility. The dentist must not leave the facility until the patient meets the criteria for discharge and is discharged from the facility. Monitoring must include:

· Consciousness:

 Level of consciousness (e.g., responsiveness to verbal command) must be continually assessed.

· Oxygenation:

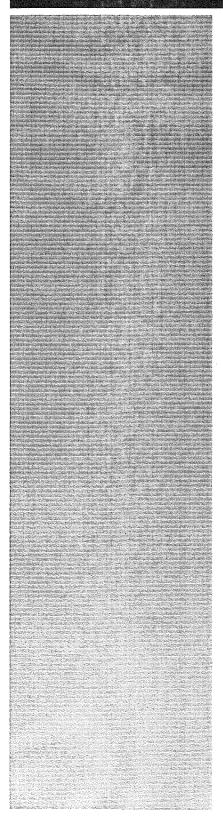
- · Color of mucosa, skin or blood must be evaluated continually.
- · Oxygen saturation must be evaluated by pulse oximetry continuously.

· Ventilation:

- The dentist must observe chest excursions continually.
- The dentist must monitor ventilation. This can be accomplished by auscultation
 of breath sounds, monitoring end-tidal CO₂ or by verbal communication with
 the patient.

· Circulation:

 The dentist must continually evaluate blood pressure and heart rate (unless the patient is unable to tolerate and this is noted in the time-oriented anesthesia record).



 Continuous ECG monitoring of patients with significant cardiovascular disease should be considered.

Documentation:

- Appropriate time-oriented anesthetic record must be maintained, including
 the names of all drugs, dosages and their administration times, including local
 anesthetics, dosages and monitored physiological parameters. (See Additional
 Sources of Information for sample of a time-oriented anesthetic record).
- Pulse oximetry, heart rate, respiratory rate, blood pressure and level of consciousness must be recorded continually.

5. Recovery and Discharge

- Oxygen and suction equipment must be immediately available if a separate recovery area is utilized.
- The qualified dentist or appropriately trained clinical staff must continually monitor the patient's blood pressure, heart rate, oxygenation and level of consciousness.
- The qualified dentist must determine and document that level of consciousness; oxygenation, ventilation and circulation are satisfactory for discharge.
- Post-operative verbal and written instructions must be given to the patient, parent, escort, quardian or care giver.
- If a pharmacological reversal agent is administered before discharge criteria have been met, the patient must be monitored for a longer period than usual before discharge, since re-sedation may occur once the effects of the reversal agent have waned.

6. Emergency Management

- If a patient enters a deeper level of sedation than the dentist is qualified to provide, the dentist must stop the dental procedure until the patient returns to the intended level of sedation.
- The qualified dentist is responsible for the sedative management, adequacy of the facility and staff, diagnosis and treatment of emergencies related to the administration of moderate sedation and providing the equipment, drugs and protocol for patient rescue.

7. Management of Children

For children 12 years of age and under, the American Dental Association supports the use of the American Academy of Pediatrics/American Academy of Pediatric Dentistry *Guidelines for Monitoring and Management of Pediatric Patients During and After Sedation for Diagnostic and Therapeutic Procedures*.

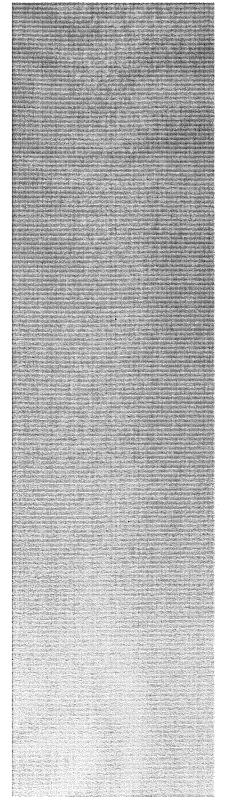
C. Deep Sedation or General Anesthesia

1. Patient Evaluation

Patients considered for deep sedation or general anesthesia must be suitably evaluated prior to the start of any sedative procedure. In healthy or medically stable individuals (ASA I, II) this must consist of at least a review of their current medical history and medication use and NPO status. However, patients with significant medical

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considerations (e.g., ASA III, IV) may require consultation with their primary care physician or consulting medical specialist.

2. Pre-operative Preparation

- The patient, parent, guardian or care giver must be advised regarding the procedure associated with the delivery of any sedative or anesthetic agents and informed consent for the proposed sedation/anesthesia must be obtained.
- Determination of adequate oxygen supply and equipment necessary to deliver oxygen under positive pressure must be completed.
- Baseline vital signs must be obtained unless the patient's behavior prohibits such determination.
- · A focused physical evaluation must be performed as deemed appropriate.
- Preoperative dietary restrictions must be considered based on the sedative/ anesthetic technique prescribed.
- Pre-operative verbal and written instructions must be given to the patient, parent, escort, guardian or care giver.
- An intravenous line, which is secured throughout the procedure, must be established except as provided in *Part IV. C.6. Pediatric and Special Needs Patients*.
- 3. Personnel and Equipment Requirements

Personnel: A minimum of three (3) individuals must be present.

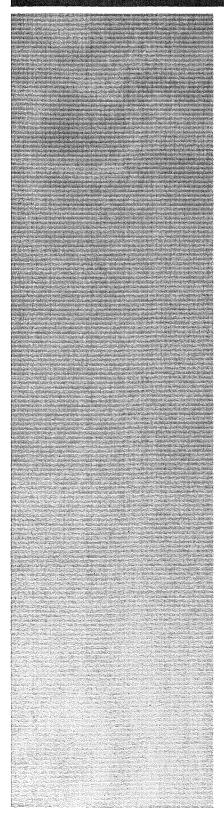
- A dentist qualified in accordance with *Part III. C.* of these *Guidelines* to administer the deep sedation or general anesthesia.
- Two additional individuals who have current certification of successfully completing a Basic Life Support (BLS) Course for the Healthcare Provider.
- When the same individual administering the deep sedation or general anesthesia is performing the dental procedure, one of the additional appropriately trained team members must be designated for patient monitoring.

Equipment:

- A positive-pressure oxygen delivery system suitable for the patient being treated must be immediately available.
- When inhalation equipment is used, it must have a fail-safe system that is appropriately checked and calibrated. The equipment must also have either (1) a functioning device that prohibits the delivery of less than 30% oxygen or (2) an appropriately calibrated and functioning in-line oxygen analyzer with audible alarm.
- An appropriate scavenging system must be available if gases other than oxygen or air are used.
- The equipment necessary to establish intravenous access must be available.
- Equipment and drugs necessary to provide advanced airway management, and advanced cardiac life support must be immediately available.
- If volatile anesthetic agents are utilized, a capnograph must be utilized and an inspired agent analysis monitor should be considered.
- Resuscitation medications and an appropriate defibrillator must be immediately available.

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4. Monitoring and Documentation

Monitoring: A qualified dentist administering deep sedation or general anesthesia must remain in the operatory room to monitor the patient continuously until the patient meets the criteria for recovery. The dentist must not leave the facility until the patient meets the criteria for discharge and is discharged from the facility. Monitoring must include:

· Oxygenation:

- · Color of mucosa, skin or blood must be continually evaluated.
- · Oxygenation saturation must be evaluated continuously by pulse oximetry.

· Ventilation:

- Intubated patient: end-tidal CO₂ must be continuously monitored and evaluated.
- Non-intubated patient: Breath sounds via auscultation and/or end-tidal CO₂
 must be continually monitored and evaluated.
- Respiration rate must be continually monitored and evaluated.

· Circulation:

- The dentist must continuously evaluate heart rate and rhythm via ECG throughout the procedure, as well as pulse rate via pulse oximetry.
- The dentist must continually evaluate blood pressure.

· Temperature:

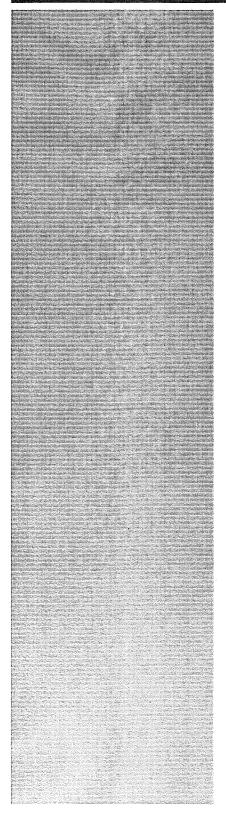
- A device capable of measuring body temperature must be readily available during the administration of deep sedation or general anesthesia.
- The equipment to continuously monitor body temperature should be available and must be performed whenever triggering agents associated with malignant hyperthermia are administered.

Documentation:

- Appropriate time-oriented anesthetic record must be maintained, including the names of all drugs, dosages and their administration times, including local anesthetics and monitored physiological parameters. (See Additional Sources of Information for sample of a time-oriented anesthetic record)
- Pulse oximetry and end-tidal CO₂ measurements (if taken), heart rate, respiratory rate and blood pressure must be recorded continually.

5. Recovery and Discharge

- Oxygen and suction equipment must be immediately available if a separate recovery area is utilized.
- The dentist or clinical staff must continually monitor the patient's blood pressure, heart rate, oxygenation and level of consciousness.
- The dentist must determine and document that level of consciousness; oxygenation, ventilation and circulation are satisfactory for discharge.
- Post-operative verbal and written instructions must be given to the patient, parent, escort, guardian or care giver.



6. Pediatric Patients and Those with Special Needs

Because many dental patients undergoing deep sedation or general anesthesia are mentally and/or physically challenged, it is not always possible to have a comprehensive physical examination or appropriate laboratory tests prior to administering care. When these situations occur, the dentist responsible for administering the deep sedation or general anesthesia should document the reasons preventing the recommended preoperative management.

In selected circumstances, deep sedation or general anesthesia may be utilized without establishing an indwelling intravenous line. These selected circumstances may include very brief procedures or periods of time, which, for example, may occur in some pediatric patients; or the establishment of intravenous access after deep sedation or general anesthesia has been induced because of poor patient cooperation.

7. Emergency Management

The qualified dentist is responsible for sedative/anesthetic management, adequacy of the facility and staff, diagnosis and treatment of emergencies related to the administration of deep sedation or general anesthesia and providing the equipment, drugs and protocols for patient rescue.

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V. ADDITIONAL SOURCES OF INFORMATION

American Dental Association. Example of a time oriented anesthesia record at ADA.org.

American Academy of Pediatric Dentistry (AAPD). Monitoring and Management of Pediatric Patients During and After Sedation for Diagnostic and Therapeutic Procedures: An Update. Developed through a collaborative effort between the American Academy of Pediatrics and the AAPD. Available at www.aapd.org/policies.

American Academy of Periodontology (AAP). Guidelines: In-Office Use of Conscious Sedation in Periodontics. Available at www.perio.org/resources-products/posppr3-1.html. The AAP rescinded this policy in 2008.

American Association of Oral and Maxillofacial Surgeons (AAOMS). *Parameters and Pathways: Clinical Practice Guidelines for Oral and Maxillofacial Surgery (AAOMS ParPath o1) Anesthesia in Outpatient Facilities.* Contact AAOMS at 847.678.6200 or visit www.aaoms.org/index.php.

American Association of Oral and Maxillofacial Surgeons (AAOMS). *Office Anesthesia Evaluation Manual 7th Edition*. Contact AAOMS at 847.678.6200 or visit www.aaoms.org/index.php.

American Society of Anesthesiologists (ASA). Practice Guidelines for Preoperative Fasting and the Use of Pharmacological Agents to Reduce the Risk of Pulmonary Aspiration: Application to Healthy Patients Undergoing Elective Procedures. Available at https://ecommerce.asahq.org/p-178-practice-guidelines-for-preoperative-fasting.aspx.

American Society of Anesthesiologists (ASA). *Practice Guidelines for Sedation and Analgesia by Non-Anesthesiologists*. Available at www.asahq.org/publicationsAnd-Services/practiceparam.htm#sedation. The ASA has other anesthesia resources that might be of interest to dentists. For more information, go to www.asahq.org/publicationsAndServices/sgstoc.htm.

Commission on Dental Accreditation (CODA). Accreditation Standards for Predoctoral and Advanced Dental Education Programs. Available at ADA.org/115.aspx.

National Institute for Occupational Safety and Health (NIOSH). *Controlling Exposures to Nitrous Oxide During Anesthetic Administration* (NIOSH Alert: 1994 Publication No. 94-100). Available at www.cdc.gov/niosh/docs/94-100/.

Dionne, Raymond A.; Yagiela, John A., et al. Balancing efficacy and safety in the use of oral sedation in dental outpatients. *JADA* 2006;137(4):502-13. ADA members can access this article online at jada.ada.org/cgi/content/full/137/4/502.

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