



North Carolina Department of Health and Human Services
Division of Health Service Regulation

Pat McCrory
Governor

Aldona Z. Wos, M.D.
Ambassador (Ret.)
Secretary DHHS

Drexdal Pratt
Division Director

August 5, 2015

Barbara L. Freedy
Certificate of Need
Novant Health, Inc.
2085 Frontis Plaza Drive
Winston-Salem, North Carolina 27103

Exempt from Review – Replacement Equipment

Record #: 1661
Facility Name: Novant Health Presbyterian Medical Center (NHPMC)
FID #: 943501
Business Name: Novant Health, Inc.
Business #: 1341
Project Description: Replace cardiac catheterization lab located in NHPMC's Cath Lab Room #1
County: Mecklenburg

Dear Ms. Freedy:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency), determined that based on your letter of July 9, 2015, the above referenced proposal is exempt from certificate of need review in accordance with G.S 131E-184(a)(7). Therefore, you may proceed to replace the existing Philips Medical Integris H3000, located in Cath Lab Room #1 of NHPMC's main campus in Charlotte, with a comparable cardiac catheterization lab. This determination is based on your representations that the existing unit will be removed from North Carolina and will not be used again in the State without first obtaining a certificate of need.

In addition, in your letter of July 9, 2015, you requested confirmation that locating the replacement equipment at Novant Health Matthews Medical Center (NHMMC) in Matthews was not a "new institutional health service" which would require a certificate of need. This constitutes a request for material compliance and is addressed by the Agency in separate correspondence.

Moreover, you need to contact the Agency's Construction and Acute and Home Care Licensure and Certification Sections to determine if they have any requirements for development of the proposed project.

Healthcare Planning and Certificate of Need Section

www.ncdhhs.gov

Telephone: 919-855-3873 • Fax: 919-715-4413

Location: Edgerton Building • 809 Ruggles Drive • Raleigh, NC 27603

Mailing Address: 2704 Mail Service Center • Raleigh, NC 27699-2704

An Equal Opportunity/ Affirmative Action Employer




It should be noted that the Agency's position is based solely on the facts represented by you and that any change in facts as represented would require further consideration by this office and a separate determination. If you have any questions concerning this matter, please feel free to contact this office.

Sincerely,



Gloria C. Hale
Project Analyst



Martha J. Frisone,
Assistant Chief, Certificate of Need

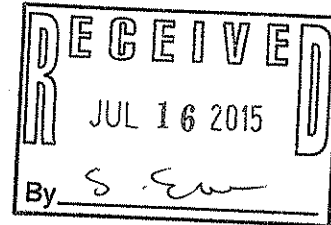
cc: Construction Section, DHSR
Acute and Home Care Licensure and Certification Section, DHSR
Assistant Chief, Healthcare Planning

Novant Health

2085 Frontis Plaza Drive
Winston-Salem, NC 27103**VIA HAND DELIVERY**

July 9, 2015

Ms. Martha J. Frisone, Assistant Chief
Healthcare Planning and Certificate of Need Section
North Carolina Department of Health and Human Services
Division of Health Service Regulation
809 Ruggles Drive
Raleigh, North Carolina 27603



Re: Replacement Equipment Exemption and Relocation Request for Novant Health
Presbyterian Medical Center's Cardiac Catheterization Lab #1/Mecklenburg
County/HSA III

Dear Ms. Frisone:

Pursuant to N.C. Gen. Stat. § 131E-184(a)(7), this letter serves as prior written notice to the CON Section of Novant Health Presbyterian Medical Center's (NHPMC) plan (the Project) to replace an existing, operational cardiac catheterization lab (the Existing Cath Lab) located in NHPMC Cath Lab Room #1 in Charlotte and relocate it to Novant Health Presbyterian Matthews Medical Center (NHMMC) in Matthews, North Carolina. Both hospitals are owned by Novant Health, Inc. and are located in Mecklenburg County. Separate correspondence has been submitted to the CON Section explaining why the transfer of the equipment from NHPMC to NHMMC is not governed by the CON Law.¹

The Existing Cath Lab is a Philips Integris H3000 model that was purchased as new equipment in 1996. The replacement unit (the Replacement Cath Lab) is a new Siemens Artis One model. See **Attachment E**, which compares the Existing Cath Lab with the Replacement Cath Lab. The total cost of the Project is **\$922,524**. See **Attachment C**, which is a signed capital cost sheet. This amount includes all costs essential to acquiring the Replacement Cath Lab and making it operational. See **Attachment A** for the Replacement Cath Lab vendor quote from Siemens Medical Solutions, reflecting a cost of \$647,235 for the Replacement Cath Lab itself. The expenses for on-site training on the Replacement Cath Lab for the NHMMC cardiac catheterization staff are covered by the vendor as indicated on pages 4, 5, and 7 of the vendor quote in **Attachment A**. Also included as movable equipment related to the purchase of the Replacement Cath Lab and

¹ As the CON Section is aware, NHMMC presently uses equipment owned by a third party to provide diagnostic and interventional cardiac catheterization. This Project is intended to take the place of the third party contract when that contract expires later this year during the first week of December 2015. NHMMC does not intend to use both the Replacement Cath Lab and the third party's cardiac catheterization lab.

included in **Attachments A and C** are a balloon pump (\$62,376.13), a GE MacLab workstation (\$60,430), an injector (\$29,766.60), and supply room carts (\$13,297.73). First Call Parts of Salem, Virginia will remove the Existing Cath Lab from NHPMC for a cost of \$3,000 (see **Attachments B and C**) and will ensure that the Existing Cath Lab will not be returned to North Carolina without appropriate CON approval. As outlined in the architect's letter (**Attachment D**), the construction costs are \$75,518 and architectural and engineering costs are \$12,000.² These costs, as well as Project contingency, permitting and IT fees, are also included in **Attachment C**. The Project costs do not include sales, property or excise taxes since NHPMC and NHMMC are non-profit, tax-exempt organizations that are not subject to these taxes.

This Project meets the definition of "replacement equipment" found at N.C. Gen. Stat. § 131E-176(22a). The sole purpose of this Project is to replace comparable medical equipment currently in use. The Existing Cath Lab will remain in use until the Replacement Cath Lab is installed, and then the Existing Cath Lab will be disposed of pursuant to **Attachment B**. Thus, this Project does not increase the inventory of existing and approved cardiac catheterization labs in Mecklenburg County. The total cost of the Project, \$922,524, is well below the \$2 million threshold in N.C. Gen. Stat. § 131E-176(22a).

This Project also meets the requirements of 10A NCAC 14C.0303. As set forth above, all activities essential to acquiring and making operational the Replacement Cath Lab have been included in the Project cost of \$922,524. See 10A NCAC 14C.0303(b). The Existing and Replacement Cath Labs are "comparable medical equipment" pursuant to 10A NCAC 14C.0303(c) because they are functionally similar and are used for the same diagnostic or treatment purposes. Further, the Project meets the requirements of 10A NCAC 14C.0303(d)(1)-(3) because :

1. The Replacement Cath Lab has the same technology as the equipment currently in use, although it does possess expanded capabilities due to technological improvements;
2. The Replacement Cath Lab is functionally similar and is used for the same diagnostic or treatment purposes as the equipment currently in use (see **Exhibit E**) and is not used to provide a new health service; and
3. The acquisition of the Replacement Cath Lab will not result in more than a 10% increase in patient charges or per procedure operating expenses within the first twelve months after the Replacement Cath Lab is acquired.

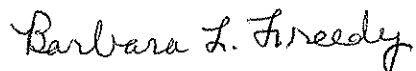
None of the exclusions set forth in 10A NCAC 14C.0303(e)(1)-(5) applies to this Project. See **Attachment E**.

In conclusion, based on the information described above, please confirm in writing that this Project is exempt from CON review.

² Please note that the Replacement Cath Lab will be installed directly at NHMMC; it will not be installed first at NHPMC and then moved, as this would require additional and unnecessary expense. As explained in the architect's letter (**Attachment E**), certain renovations will need to take place in the NHMMC cardiac catheterization lab to accommodate the Replacement Cath Lab.

Due to lead times associated with ordering the Replacement Cath Lab, we would appreciate your earliest consideration of this request. If you have any questions, please feel free to contact me. Thank you for your time and consideration.

Sincerely,



Barbara L. Freedy, Director
Certificate of Need
Novant Health, Inc.

cc: Lisa Griffin, Manager, CON, Novant Health, Inc.
Laura MacFadden, VP, Design & Construction, Novant Health, Inc.
Roland Bibeau, President, Novant Health Matthews Medical Center
Regina Hartung, VP, Cardiac Services, NH Presbyterian Medical Center

File: MMC Cath Lab REER Cover LetterFINAL 07 09 15.doc

Attachment A

SIEMENS

Siemens Medical Solutions USA, Inc.
51 Valley Stream Parkway, Malvern, PA 19355
Fax: (866) 309-6967

SIEMENS REPRESENTATIVE
Stuart Wadley - (919) 605-9227

Customer Number: 0000012492

Date: 4/23/2015

PRESBYTERIAN HOSPITAL MATTHEWS
1500 MATTHEW TOWNSHIP PARKWAY
MATTHEWS, NC 28106-3310

Siemens Medical Solutions USA, Inc. is pleased to submit the following quotation for the products and services described herein at the stated prices and terms, subject to your acceptance of the terms and conditions on the face and back hereof, and on any attachment hereto.

<u>Table of Contents</u>	<u>Page</u>
Artis one.....	3
ACUSON Freestyle ultrasound system.....	6
General Terms and Conditions.....	9
Warranty Information.....	16

Proposal valid until 6/07/2015

Cath Lab

Notes for Quote Nr 1-BILZNF:
Estimated Delivery Date: 9-10-15

Estimated delivery date is subject to change based upon factory lead times, acceptance date of this quote, customer site readiness, and other factors. A Siemens representative will contact you regarding the final delivery date.

This quote expires September 30, 2015. This date supersedes any other validity date indicated in the proposal.

This offer is only valid if firm, non-contingent orders for Quote#1-BILZNF and Quote#1-BKGQKP are simultaneously placed with Siemens.

Notes for Quote Nr 1-BKGQKP:
Estimated Delivery Date: 9-10-15

Estimated delivery date is subject to change based upon factory lead times, acceptance date of this quote, customer site readiness, and other factors. A Siemens representative will contact you regarding the final delivery date.

This quote expires September 30, 2015. This date supersedes any other validity date indicated in the proposal.

This offer is only valid if firm, non-contingent orders for Quote#1-BILZNF and Quote#1-BKGQKP are simultaneously placed with Siemens.

Accepted and Agreed to by:

Siemens Medical Solutions USA, Inc.

PRESBYTERIAN HOSPITAL MATTHEWS

By (sign): _____
Name: Stuart Wadley
Title: Account Executive

By (sign): _____
Name: _____
Title: _____

SIEMENS

Siemens Medical Solutions USA, Inc.
51 Valley Stream Parkway, Malvern, PA 19355
Fax: (866) 309-6967

SIEMENS REPRESENTATIVE
Stuart Wadley - (919) 605-9227

Date: _____

Date: _____

All pages of the signed proposal must be returned to Siemens to process the order - Thank you.

SIEMENS

Siemens Medical Solutions USA, Inc.
51 Valley Stream Parkway, Malvern, PA 19355
Fax: (866) 309-6967

SIEMENS REPRESENTATIVE
Stuart Waddey - (919) 605-9227

Quote Nr: 1-BILZNF Rev. 0

Terms of Payment: 00% Down, 80% Delivery, 20% Installation
Free On Board: Destination

Purchasing Agreement: NOVATION (UHC, VHA, Provista)

NOVATION (UHC, VHA, Provista) terms and conditions apply to Quote Nr 1-BILZNF

Artis one

All items listed below are included for this system:

Qty	Part No.	Item Description	Extended Price
1	14440516	Artis one BC Card Artis one cardiology is upgradeable with interventional radiology combination application Artis one is a system that leaves the beaten track and marks a new approach to interventional imaging. The system provides proven, state-of-the-art technology, such as the MEGALIX Cat Plus X-ray tube featuring a unique flat emitter. In addition it offers next-generation tools for uncompromised imaging, such as the optionally available CLEARstent Live to verify stent positioning in real time. Artis one features an integrated display of up to four external video sources, connection kits for one external video source is included as standard. Intelligent operation is enhanced by a configurable heads-up display, allowing you to interact with the system in a completely new, intuitive way. So you can keep your attention where you need it. And because the solution is so easy to understand and deploy, it will have a positive impact on your whole organization. Broaden your procedure mix and hit the sweet spot of your business. Meet a system that is designed differently. Artis one. Designed around you	\$488,707
1	14440559	21" color display (e.g. Sensis) One extra 21" display in the examination room, in an expanded display suspension system.	\$6,094
3	14440576	Display connection kit DVI cable to connect 3rd party systems in the control room, and showing their video on the 30" examination room display.	\$2,972
1	14434169	CLEARstent Live CLEARstent Live is a real-time stent enhancement tool and provides a stabilized view of the moving stent which is displayed on the Assist/Reference Monitor. CLEARstent Live allows real-time verification of stent positioning while moving the device. This enables the physician to precisely position the stent in relation to the anatomy of the heart and stents that already have been implanted. Contains both CLEARstent Live license and CLEARstent license. The CLEARstent imaging function allows an improved display of fine stent structures, i.e. the grid of inflated stents. CLEARstent is a post-processed stent enhancement and may be used also on previously acquired images. Using the CLEARstent function special reference images from any scene or fluoroscopy scene acquired natively will be generated. Composite images are created by averaging several frames of a scene and by considering the alignment of balloon markers. If an ECG signal is available, the heart phase will also be taken into account.	\$8,717
1	14440518	HeartSweep HeartSweep is rotational angiography with simultaneous rotation around two axes. This enables covering nearly every trajectory in a short time to display an entire vascular tree in all the standard angulations in a single acquisition.	\$18,692

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Qty	Part No.	Item Description	Extended Price
1	14440521	VOLCANO s5i Cable Kit Cable set for operating the Volcano s5i ultrasound system incl. s5iz and s5iu (CORE-System). This cable set will already be integrated into the Artis one table in the factory. It contains all cables for connecting the components at the patient table to the s5i imaging system in the control room.	\$3,868
1	14432947	Fluoro Loop Storage and review of dynamic fluoroscopic sequences (Fluoro Loop). This saves an additional acquisition and reduces dose. The maximum storable fluoroscopic time depends on the selected pulse rate, e.g. 34 s at 30 p/s, 68 s at 15 p/s.	\$8,267
1	14432948	Automap Automatic stand positioning depending on the selected reference image and automatic reference image selection depending on the stand positioning.	\$1,246
1	14432950	DICOM RIS-Modality Worklist Import of patient/examination data from an external RIS/HIS patient management system with DICOM MWL (Modality Worklist).	\$741
2	14432953	Lower body radiation protection For shielding the lower body against scattered radiation within the examiner's moving range. Specially designed for avoiding collisions with the tube during oblique projections, therefore especially suited for cardiology.	\$8,870
1	14440574	Mobil upper body rad. Prot. XL Larger shield to improve protection of the upper body against scattered radiation within the operating range of the examiner, e.g. during interventional procedures especially by performing radial access. Two scattered radiation protection blankets are included to cover the patient's body in order to increase the reduction rate of scattered radiation. A protection curtain at the screen is also included in order to reduce the scattered radiation and to close the gap between patient and shield. Radiation protection attached via a ceiling-mounted, mobile stand for protection against scattered radiation; incl. 4 m ceiling rail. Swivelable and rotatable around the fixed point, range of rotation 360°. Counter-balanced, height-adjustable support arm. Acrylic glass with Pb equivalent of 0.5 e.g. (w x h: 78 cm x 90 cm), with a special patient cut-out for interventional examinations.	\$18,447
1	14440418	Infusion bottle holder This infusion bottle holder can be mounted at the accessory rail of the patient table. It holds up to 4 infusion bottles. It includes an infusion bottle holder made of stainless steel with 4 retaining rings. Length: 84 - 138 cm (21.6" - 54.3") Weight: 1.3kg Product may not be used in conjunction with the Surgery Carbon Plate, one-piece.	\$280
1	14440565	Body Module Table insert with attached accessory rails for mounting control modules in the abdominal part of the patient positioning tabletop.	\$2,867
1	AXA_INITIAL_2 4	Initial onsite training 24 hrs Up to (24) hours of on-site clinical education training, scheduled consecutively (Monday - Friday) during standard business hours for a maximum of (4) imaging professionals. Training will cover agenda items on the ASRT approved checklist. Uptime Clinical Education phone support is provided during the warranty period for specified posted hours. This educational offering must be completed (12) months from install end date. If training is not completed within the applicable time period, Siemens obligation to provide the training will expire without refund.	\$6,300
1	AXA_FOLLOW UP_24	Follow-up training 24 hrs Up to (24) hours of follow-up on-site clinical education training, scheduled consecutively (Monday - Friday) during standard business hours for a maximum of (4) imaging professionals. Uptime Clinical Education phone support is provided during the warranty period for specified posted hours. This educational offering must be completed (12) months from install end date. If training is not completed within the applicable time period, Siemens obligation to provide the training will expire without refund.	\$6,300

SIEMENS

Siemens Medical Solutions USA, Inc.
51 Valley Stream Parkway, Malvern, PA 19355
Fax: (866) 309-6967

SIEMENS REPRESENTATIVE
Stuart Waddey - (919) 605-9227

Qty	Part No.	Item Description	Extended Price
1	AXA_FOLLOW UP_12	Follow-up training 12 hrs Up to (12) hours of follow-up on-site clinical education training, scheduled consecutively (Monday - Friday) during standard business hours for a maximum of (4) imaging professionals. Uptime Clinical Education phone support is provided during the warranty period for specified posted hours. This educational offering must be completed (12) months from install end date. If training is not completed within the applicable time period, Siemens obligation to provide the training will expire without refund.	\$4,200
1	AXA_ARTS1M	Artis One Essential Class, w/Travel Tuition for (1) imaging professional to attend Siemens class at Siemens Training Center or designated training facility. The course is designed to provide the participant with an introduction to the Artis One system and new functions with the Artis One. Through the use of demonstrations, lectures, and hands-on labs experience using an Artis One system, participants will learn Artis One system principles and workflows of patient examinations. Additionally, participants have the opportunity to meet other users and share their experiences and solutions to various challenges of the IR, cath lab. This class includes lunch, economy airfare, and lodging for (1) imaging professional. All arrangements must be arranged through Siemens designated travel agency. This educational offering must be completed by the later of (12) months from purchase or install end date. If training is not completed within the applicable time period, Siemens obligation to provide the training will expire without refund.	\$4,500
2	NT60010835	Grey anti-fatigue floor mat for hospital	\$276
1	AXA_ADDL_RI GGING	Additional Rigging AXA \$3,045	\$3,045
1	AXA_RIG_ZEE SP_STD	Standard Rigging zee SP	\$13,500

SIEMENS

Siemens Medical Solutions USA, Inc.
51 Valley Stream Parkway, Malvern, PA 19355
Fax: (866) 309-6967

SIEMENS REPRESENTATIVE
Stuart Waddey - (919) 605-9227

Quote Nr: 1-BKGQKP Rev. 0

Terms of Payment: 00% Down, 80% Delivery, 20% Installation
Free On Board: Destination

Purchasing Agreement: NOVATION (UHC, VHA, Provista)

NOVATION (UHC, VHA, Provista) terms and conditions apply to Quote Nr 1-BKGQKP

ACUSON Freestyle ultrasound system

All items listed below are included for this system:

Qty	Part No.	Item Description	Extended Price
1	11002300	ACUSON Freestyle Mainframe The ACUSON Freestyle(tm) ultrasound system* is the world's first ultrasound system that operates with wireless transducers, a breakthrough in ultrasound imaging. The system features superior image quality and a new standard in ease of use in an ergonomic and portable design. Standard features include: - B-mode - Color flow mapping - Spatial compounding - Speckle reduction - Auto Image optimization - Supports wireless transducers - One (1) transducer cable adapter - Two (2) batteries for wireless transducers - DICOM Storage, Storage Commitment, Modality Worklist and Echo - DICOM networking: Ethernet (wired) and 802.11b/g (wireless) - Factory default and user customizable exam types - High resolution flat panel display - A/C and battery operation - Two (2) charger bays for wireless transducer batteries *Product pending shipment confirmation	\$18,810
1	11002400	Freestyle 3.5 Software The 3.5 Release for the ACUSON Freestyle(tm) ultrasound system continues the advancement of imaging performance and ease of use to meet the increasing clinical demands. The release features include needle visualization enhancement, advancement in image quality with new speckle filters and presets, enhanced user interface, mobile link application, and additional workflow improvements. These features are standard: *Needle Visualization Enhancement improves the visibility of in-plane and out-of-plane needles, especially at steeper angles, using the ACUSON Freestyle system's software algorithm using unique multi-beam spatial compounding and other optimization techniques, while maintaining excellent image quality of the anatomical target and surrounding structures. *Wireless Enterprise Authentication enables wireless connection to enterprise networks to send to PACS. This is based on qualified sites that meet certain network specifications. *ACUSON Freestyle(tm) mobile link app connects the system to a Microsoft(r) Window(r) device* to view, open, and share images from the patient study list, create patient study worklists and send them to the ACUSON Freestyle system to start new studies faster and easier with privacy and security protection. NOTE: Image viewing on the ACUSON Freestyle mobile link app is for informational purposes only, and is not intended for diagnostic use. *Windows 8.1 is required. Device is not included.	\$0
1	11002709	Freestyle 3.5 Lang Kit English English operating instructions for the ACUSON Freestyle(tm) ultrasound system.	\$0
1	11002331	Freestyle Cordset North America Custom power cordset for use with the ACUSON Freestyle(tm) ultrasound system in the North America. Product pending shipment confirmation.	\$0
1	11002303	C5-2 Transducer, Freestyle Curvilinear transducer 5-2 MHz. Includes one transducer battery. Product pending shipment confirmation.	\$8,978

SIEMENS

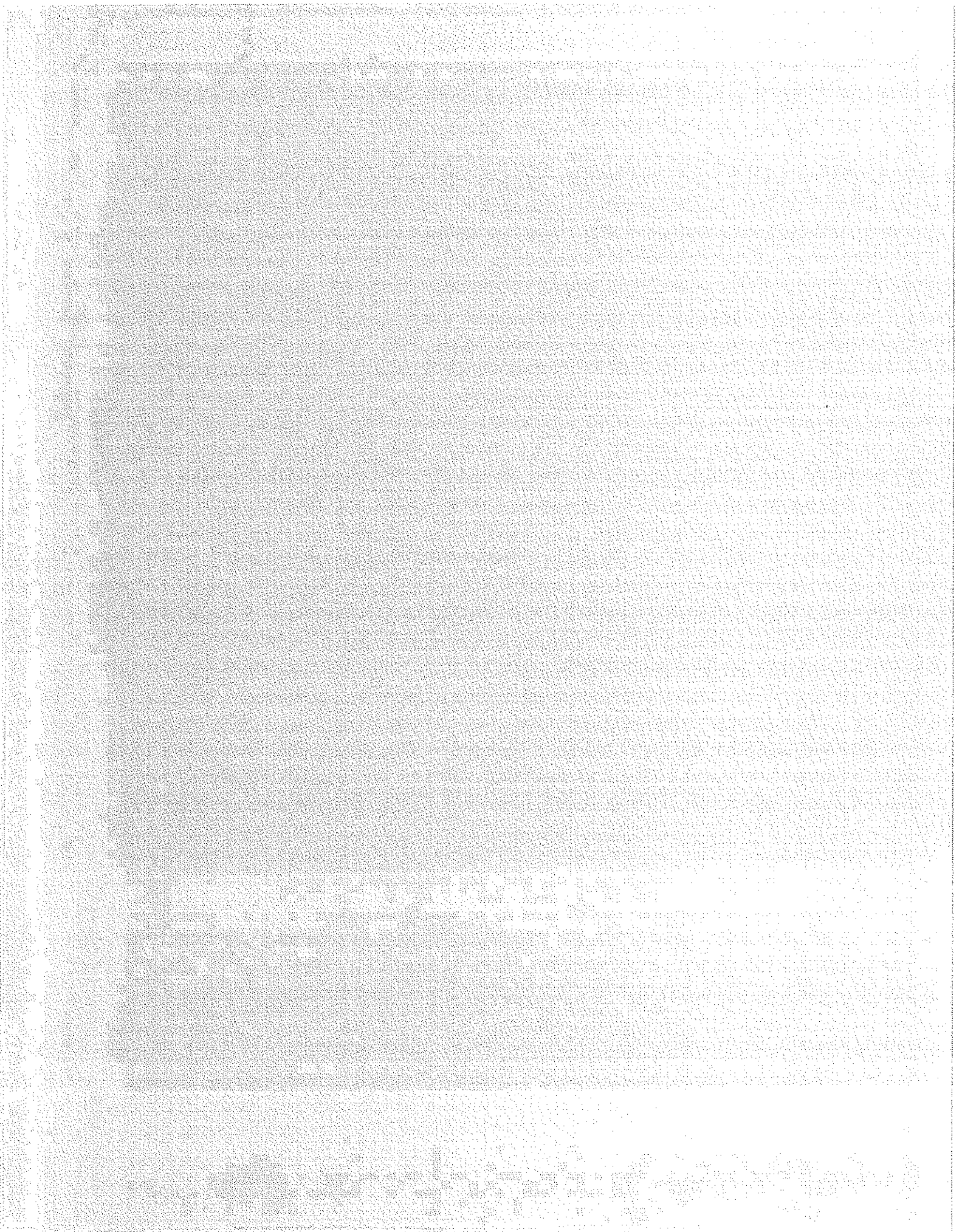
Siemens Medical Solutions USA, Inc.
51 Valley Stream Parkway, Malvern, PA 19355
Fax: (866) 309-6967

SIEMENS REPRESENTATIVE
Stuart Waddey - (919) 605-9227

Qty	Part No.	Item Description	Extended Price
1	11002301	L8-3 Transducer, Freestyle Linear wireless transducer 8-3 MHz. Includes one transducer battery. Product pending shipment confirmation.	\$8,978
1	USD_INITIAL_4	Initial onsite training 4 hrs -FMV \$1750 Up to (4) hours of on-site clinical education training, scheduled consecutively (Monday - Friday) during standard business hours for a maximum of (4) imaging professionals. Uptime Clinical Education phone support is provided during the warranty period for specified posted hours. This educational offering must be completed (12) months from install end date. If training is not completed within the applicable time period, Siemens obligation to provide the training will expire without refund.	\$0
1	11002306	Freestyle GCX Roll Stand ACUSON Freestyle(tm) ultrasound system GCX roll stand allows for easy maneuverability and ergonomic positioning. Quick-release, tilt-adjustable system mount and storage baskets. Product pending shipment confirmation.	\$2,006
1	11002307	Freestyle Keyboard USB keyboard designed for medical environments. Easy-to-clean and disinfect. Product pending shipment confirmation.	\$576

Cath hab

Contract Total: \$647,235



Maquet Medical Systems, USA
 45 Barbour Pond Drive
 Wayne, NJ 07470
 Telephone (800) 777-4222

Date: 5/1/2015

To: Presbyterian Hospital - Matthews 1500 Matthews Township Pkwy Matthews NC 28105	Telephone: (704) 3846500 Quote Number: BPRE-9W3L46-2
Affiliation:	Sales Representative: William Pryse

Contact: Marty Haynes	Phone: (336) 277-0260
Title:	Fax:
Department:	

Item	Qty	P/N	Description	List Price	Tot List	Net Price	Tot Net
1	1	D998-00-0800-53	CARDIOSAVE Hybrid and one (1) year warranty Product includes CARDIOSAVE Blood Pressure Transducer Adapter Cable CARDIOSAVE ECG Trunk Cable - 5 lead - AAMI CARDIOSAVE ESIS Lead Wires 50" - 5 Lead (Op Rm) - AAMI Helium - 3 refillable tanks, 104L External Signal Cable CARDIOSAVE Hybrid Operators Manual - disc CARDIOSAVE Non-Locking Male Luer Plug Helium Cylinder Washer Thermal Recorder Chart Paper Starter Pack Fiber Optic Cleaning Swabs (qty 5) Fiber Optic Connector Cleaner CARDIOSAVE Plastic Weather Cover (for off cart configuration)				
2	1	D998-00-0803	Cardiosave Trainer				
3	1	USSV.CDSVPOSE.W	CRDSVE - MCare SILVR Pin - POSEW				
4	1	24/7 REMOTE SUPPORT	Available 24/7 Remote Support via Win-IABP				
5	1	EDUCATION	Initial Clinical Education on IABP				
6	1	CLINICAL SUPPORT	24 Hour Clinical Support				

Balloon Pump	TOTAL NET w/o OPTIONS \$62,376.13	TOTAL NET w/OPTIONS \$62,376.13
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THE UNIVERSITY OF CHICAGO PRESS



GE Healthcare

Date: 05-12-2015
Quote #: PR9-C42326
Version #: 6

Novant Health Matthews Medical Center
1500 Matthews Township Pkwy
Matthews NC 28105-4656

Attn: Heather Mathew
1500 Matthews Township Pkwy Matthews
NC 28105-4656

Date: 05-12-2015

Quote Summary Heading

Qty	Description	Ext Sell Price
1	Cath - MacLab 6.8 to 6.9.6 Upgrade IT XT XTi 695	\$46,830.00
1	Clients/NW - Qty 2 INW NETWORKING 695	\$13,600.00
	Quote Summary: Total Quote Net Selling Price	\$60,430.00

workstation

Summary Note



GE Healthcare

Date: 05-12-2015
Quote #: PR9-C42326
Version #: 6

Novant Health Matthews Medical Center Attn: Heather Mathew
1500 Matthews Township Pkwy 1500 Matthews Township Pkwy
Matthews NC 28105-4656 Matthews
NC 28105-4656

Customer Number :
Quotation Expiration Date: 06-30-2015

This Agreement (as defined below) is by and between the Customer and the GE Healthcare business ("GE Healthcare"), each as identified herein. "Agreement" is defined as this Quotation and the terms and conditions set forth in either (i) the Governing Agreement identified below or (ii) if no Governing Agreement is identified, the following documents:

- 1) This Quotation that identifies the Product offerings purchased or licensed by Customer;
- 2) The following documents, as applicable, if attached to this Quotation: (i) GE Healthcare Warranties; (ii) GE Healthcare Additional Terms and Conditions; (iii) GE Healthcare Product Terms and Conditions; and (iv) GE Healthcare General Terms and Conditions.

In the event of conflict among the foregoing items, the order of precedence is as listed above.

This Quotation is subject to withdrawal by GE Healthcare at any time before acceptance. Customer accepts by signing and returning this Quotation or by otherwise providing evidence of acceptance satisfactory to GE Healthcare. Upon acceptance, this Quotation and the related terms and conditions listed above (or the Governing Agreement, if any) shall constitute the complete and final agreement of the parties relating to the Products identified in this Quotation.

No agreement or understanding, oral or written, in any way purporting to modify this Agreement, whether contained in Customer's purchase order or shipping release forms, or elsewhere, shall be binding unless hereafter agreed to in writing by authorized representatives of both parties.

By signing below, each party certifies that it has not made any handwritten modifications.

Governing Agreement:	Novation
Terms of Delivery:	FOB Destination
Billing Terms:	80% on Delivery/ 20% on Acceptance or First Patient Use
Payment Terms:	NET 30
Total Quote Net Selling Price:	\$60,430.00

INDICATE FORM OF PAYMENT:

If "GE HFS Loan" or "GE HFS Lease" is NOT selected at the time of signature, then you may NOT elect to seek financing with GE Healthcare Financial Services (GE HFS) to fund this arrangement after shipment.

- Cash/Third Party Loan
- GE HFS Lease
- GE HFS Loan
- Third Party Lease (please identify financing company) _____

By signing below, each party certifies that it has not made any handwritten modifications. Manual changes or mark-ups on this Agreement (except signatures in the signature blocks and an indication in the form of payment section below) will be void.

Each party has caused this agreement to be executed by its duly authorized representative as of the date set forth below.

CUSTOMER _____

Authorized Customer Signature _____ Date _____

Print Name _____ Print Title _____

Purchase Order Number (if applicable) _____

GE HEALTHCARE
Sarah Thomas _____ 05-12-2015
Signature _____ Date _____

Product Sales Specialist
Email: Sarah.Thomas@ge.com
Office: +1 262 347 9347
Mobile: 262-347-9347



GE Healthcare

Date:	05-12-2015
Quote #:	PR9-C42326
Version #:	6

Total Quote Selling Price	\$60,430.00
Trade-In and Other Credits	\$0.00

Total Quote Net Selling Price	\$60,430.00

To Accept this Quotation

Please sign and return this Quotation together with your Purchase Order To:

Sarah Thomas
 Office: +1 262 347 9347
 Mobile: 262-347-9347
 Email: Sarah.Thomas@ge.com

Payment Instructions

Please Remit Payment for invoices associated with this quotation to:

GE Healthcare
 P.O. Box 96483
 Chicago, IL 60693

To Accept This Quotation

- Please sign the quote and any included attachments (where requested).
- If requested, please indicate your form of payment.
- If you include the purchase order, please make sure it references the following information
 - The correct Quote number and version number above
 - The correct Remit To information as indicated in "Payment Instructions" above
 - The correct SHIP TO site name and address
 - The correct BILL TO site name and address
 - The correct Total Quote Net Selling Price as indicated above



GE Healthcare

Date: 05-12-2015
Quote #: PR9-C42326
Version #: 6

05-12-2015

This product offering is made per the terms and conditions of Novation/GE Healthcare GPO Agreement # XR11023 (CV) and CE0351 (CARD).

For access to the applicable Novation Agreement and Contract Summary, please login to the Novation Marketplace website. If you require assistance or are experiencing issues please contact one of the following for support:

Novation Customer Service (888) 7-NOVATE NOVCustomerService@novationco.com

Web Site Technical Support (800) 327-8116 NovationTechSupport@novationco.com



GE Healthcare

Date: 05-12-2015
Quote #: PR9-C42326
Version #: 6

Item No.	Qty	Catalog No.	Description
	1		Cath - MacLab 6.8 to 6.9.6 Upgrade IT XT XTI 695
1	1	P1009RM	6.9.6 UPGRADE - Z600 HW Version 6.9.6 Upgrade for Existing version 6.9.5 Mac-Lab, CardioLab and ComboLab Z600 Acquisition and GE Client Workstations. Includes Microsoft Windows 7 Ultimate 32 Bit for Embedded Systems Operating System software, Microsoft Office 2010 Professional Plus productivity Software. Systems must be upgraded to version 6.9.5 prior to installation of this software. After hours installation sold separately.
2	1	P1009LG	MAC-LAB 6.9.5 IT UPGRADE FROM 6.8.X IT MAC-LAB 6.9.5 IT UPGRADE FROM 6.8.X IT Includes option activators, media and service manual. Language kit sold separately.
3	1	P1008CK	IEB 110V US Integrated Electronics Box ComboLab (110V IEB) Provides mangement of recording and distribution of video display signals. Includes uninterruptible power supply (UPS) and isolation safety transformer
4	1	P1009EO	Two 20" LCD Monitors Two 20" LCD Flat Panel monitors
5	1	P1003EM	MACLAB ENG LANG KEYBOARD MACLAB ENG LANG KEYBOARD
6	1	P1009RU	6.9.6 ENGLISH LANGUAGE KIT - US Version 6.9.6 English Language Kit. The English Language Kit provides only Quick Reference Guides and Security Guide. All other manuals are available for download only.
7	1	W0004CD	DMS EXP ML IT OR CL IT Tuition for one student to attend one three-day class for Mac-Lab, CardioLab, or DMS at the GE Healthcare Institute in Waukesha, WI. Tuition includes local ground transportation, Hotel, and Meals (Breakfast and Lunch). Airfare included. Training expires 12 months from date of go-live of equipment or purchase whichever is the latest..
8	2	W0002CD	TWO DAYS ON SITE TRAINING



GE Healthcare

Date: 05-12-2015
Quote #: PR9-C42326
Version #: 6

Item No.	Qty	Catalog No.	Description
			Two full days (1 day = 8 hours) of on-site applications training for Mac-Lab, CardioLab, ComboLab, DMS conducted by a GE Applications Specialist, to be used Monday - Friday. Training expires 12 months from go-live of equipment or purchase, whichever is the latest. Training days must be used consecutively.
9	1	W0009CD	<p>INVASIVE PRJ MGMT SVCS</p> <p>Invasive Project Management Service expires 12 months from date of purchase. Project Management provides GEHC professional project management services targeting the successful implementation of GEHC Invasive Cardiology Systems. Managers oversee the implementation process ranging from order review, equipment delivery coordination, installation, training, and final system acceptance.</p> <p>As the GEHC single point of contact for our customers, the Cardiology Project Manager works with hospital's clinical and IT staff to communicate project timelines and administrate project execution. Providing system consultation, managers will track and direct resolution of implementation issues.</p>
10	1	2016376-091	<p>INSTL-AFTER HOURS MAC-LAB/CARDIOLAB/COMBOLAB</p> <p>INSTL-AFTER HOURS MAC-LAB/CARDIOLAB/COMBOLAB</p>



GE Healthcare

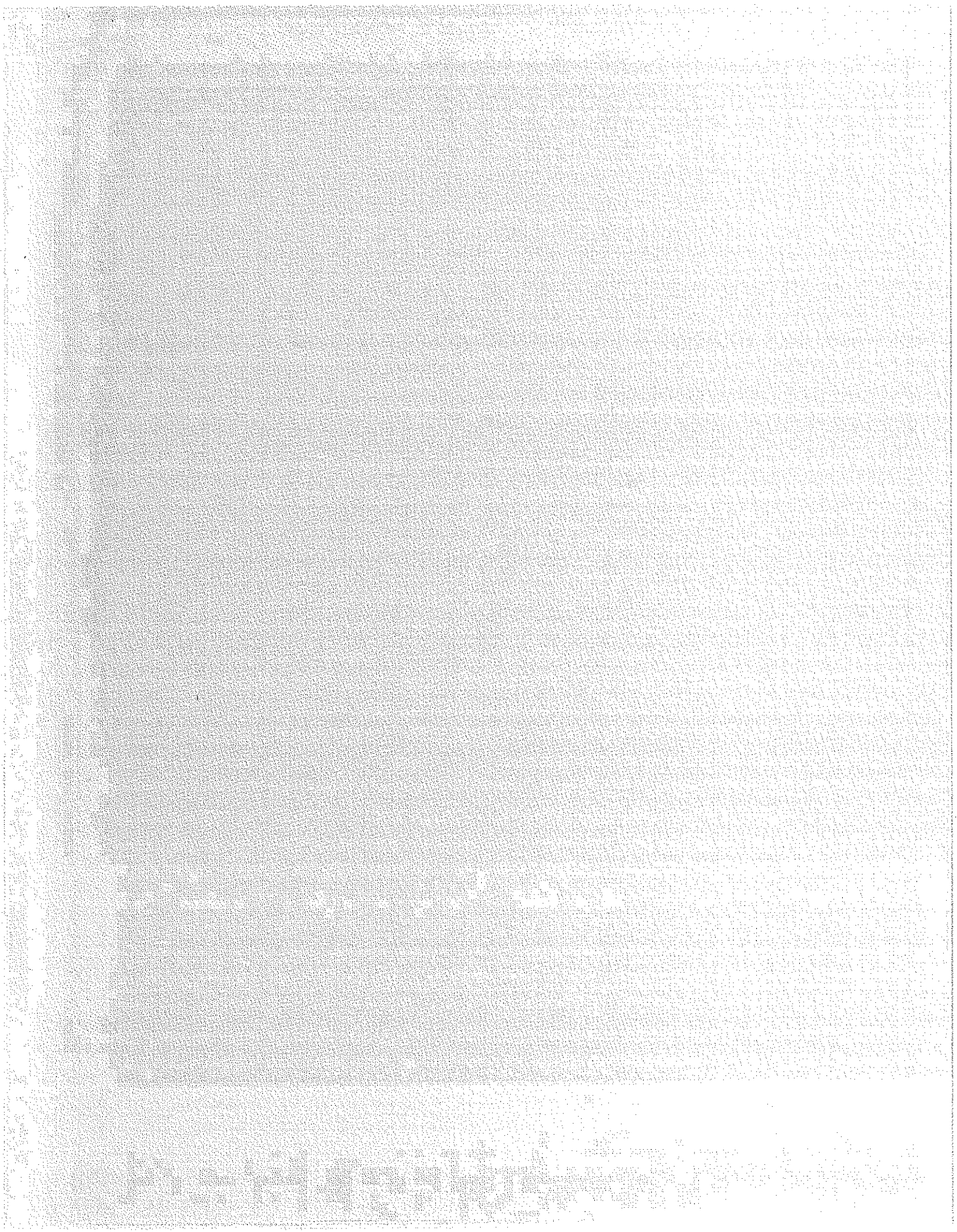
Date: 05-12-2015
Quote #: PR9-C42326
Version #: 6

Item No.	Qty	Catalog No.	Description
	1		Clients/NW - Qty 2 INW NETWORKING 695
11	2	P1009RH	UPG 8000 8200 8400-695 WS UPGRADE FROM XW8000 XW8200 8400 REVIEW TO V6.9.5 GE CLIENT WORKSTATION Includes: MLCL Client Workstation, service install manual, application and migration media
12	2	P1009RM	6.9.6 UPGRADE - Z600 HW Version 6.9.6 Upgrade for Existing version 6.9.5 Mac-Lab, CardioLab and ComboLab Z600 Acquisition and GE Client Workstations. Includes Microsoft Windows 7 Ultimate 32 Bit for Embedded Systems Operating System software, Microsoft Office 2010 Professional Plus productivity Software. Systems must be upgraded to version 6.9.5 prior to installation of this software. After hours installation sold separately.

Quote Summary:

Total Quote Net Selling Price **\$60,430.00**

(Quoted prices do not reflect state and local taxes if applicable. Total Net Selling Price Includes Trade In allowance, if applicable.)



Bayer HealthCare



Quotation

Quote To:
PRESBYTERIAN HOSPITAL
MATTHEWS
1500 Matthews Township Pkwy
MATTHEWS NC 28105-4656
USA

Bayer HealthCare LLC

Quotation number: 0020015200
Customer number: 0000172354
Date: 04/16/2015
Page: 1

Valid from: 04/16/2015 to 09/16/2015

Attn: Marty Haines, Cath Lab

Trey Karn
Professional Sales Consultant
864-415-2397
trey.karn@bayer.com

Artis One - CATH Lab

Injector Quote

We deliver according to the following terms and conditions:

Currency: USD

Terms of payment: 30 d. w/o discount of inv. net
Terms of delivery: Carriage paid FOB DESTINATION

Item	Part No	Qty
1	59941325 ART700 PEDL MARK 7 ARTERION, PEDESTAL, SYSTEM	1PCE
2	59898551 ART 700 PJ150 ASSY, PRESS. JACKET, 150ML, MARK 7 ARTERION	1PCE

If pricing and terms of this order are based upon your current Group Purchasing Organization (GPO) affiliation, any change to your current affiliation may require a new quote or updated terms and pricing.

When applicable, State and Local taxes will be calculated on the order. If you are exempt from taxes, contact customer support at 1(800)633-7231. Thank you for your order!

Bayer HealthCare



Quotation

<i>Item</i>	<i>Part No</i>	<i>Qty</i>
3	84138363 ART 700 VFL VARIABLEFLOW,MARK 7 ARTERION	1PCE
4	59942968 INS ART 700-P INSTALL MARK 7 ARTERION PEDESTAL	1PCE
5	83917911 VIRTUALCARE	

Sub Total 29,766.60

Injector

Total 29,766.60

NOTE: If using signed quote as a purchase order please complete the following information:

Print Name: _____

Signature: _____

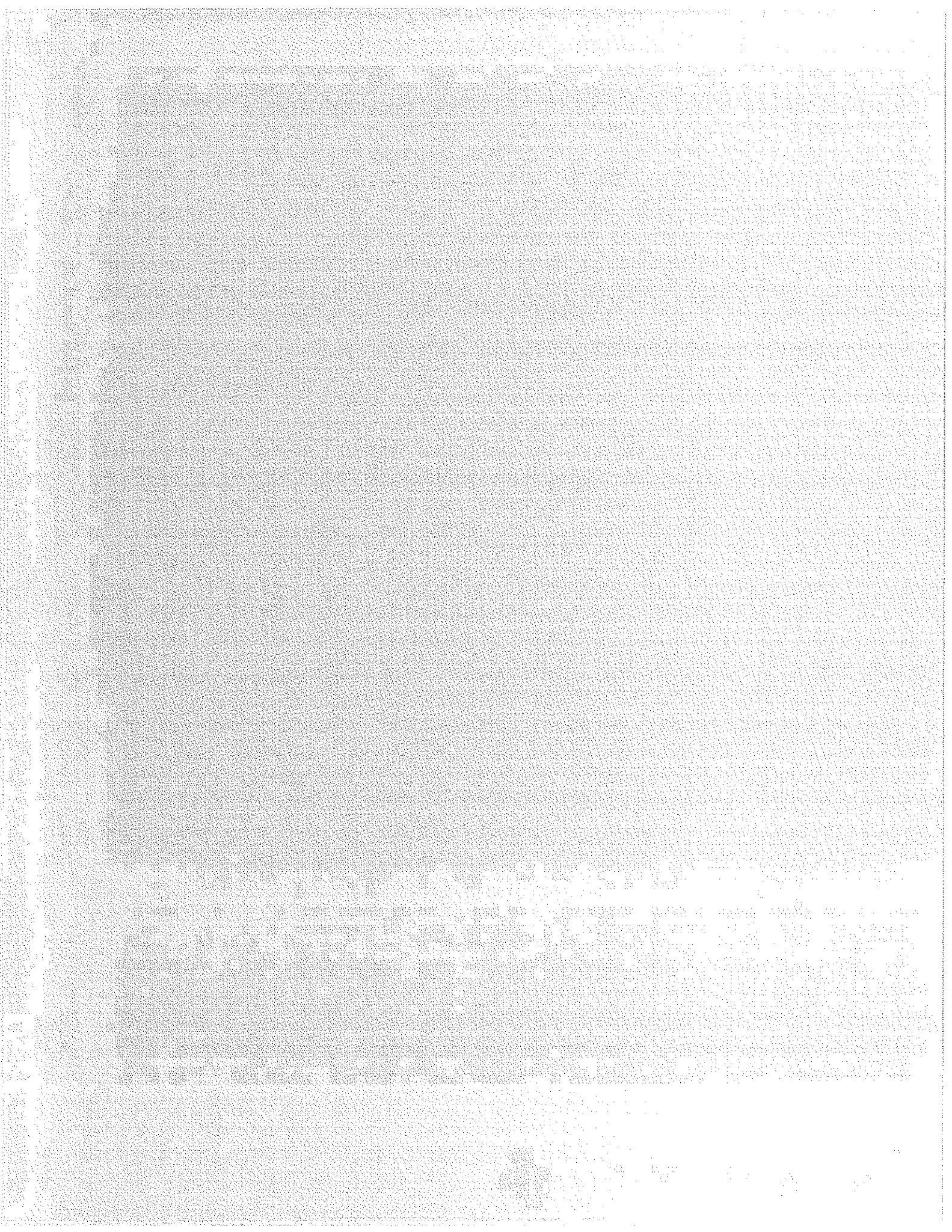
Title: _____

PO #: _____

Phone #: _____

If pricing and terms of this order are based upon your current Group Purchasing Organization (GPO) affiliation, any change to your current affiliation may require a new quote or updated terms and pricing.

When applicable, State and Local taxes will be calculated on the order. If you are exempt from taxes, contact customer support at 1(800)633-7231. Thank you for your order!





WorkCenters Quotation - H 423-0415-Nov-79125-R3

InterMetro Industries Corporation
651 North Washington Street
Wilkes-Barre, PA 18705
Office : 570-825-2741
Fax : 800-638-9263

For: Novant Health, Inc #26320
PO Box 25686
Winston-Salem, NC 271145686

Quote Date: 7/11/2015
Expiration Date: 9/29/2015
Weight: 1618.20
Cubic Ft: 336.51
Total US \$: \$13,297.73

ATTN: Heather Mathew

Product Assembly, Installation, Sinks and Plumbing Fixtures are not included unless specifically itemized in this Quotation.

STARSYS is a build to order Product. The following guidelines apply:

Pricing - All prices are guaranteed firm up to 60 days unless specified under special contract. Any necessary price increase will not exceed 10% if delivery is taken within six months of the quotation date.

Order Change/Cancellation Policy -

All order change requests must be made through customer service. Changes/cancellations requested within 7 workdays of a scheduled ship date that will impact order production, will incur, at a minimum, a 20% Change/Cancellation Fee, up to the full order value, depending on the percentage of the order completed. Customer service will relay percentage of order completed along with the Change/Cancellation Fee amount. Prior to InterMetro accepting a change, a revised purchase order (included associated fee) is required

Return Policy -

- Starsys units, components, countertops, assembled Open Starsys, Special order of cut posts, made to order dollies, cart covers, Designer Color product, and custom items are non-returnable. (All amounts in U.S. currency).
- Accessories are returnable at the discretion of InterMetro.
- A Return Merchandise Authorization (RMA) must be obtained through InterMetro's customer service department prior to returning the product.
- All returns will be coordinated by InterMetro and return freight costs will be charged back. • All returns must be in original packaging, unused and in saleable condition.
- All returns must be made within 45 days of invoice date. • Minimum return value is \$200.00 net.
- There will be a 15% Restocking Fee (\$50 minimum) based on items credited after an inspection is performed on the product at the Wilkes-Barre, PA distribution facility.

Lead Time -

Orders for Standard Starsys products ship within 4-6 weeks after receipt of Purchase Order & Signed Drawings. Custom Starsys product lead-time is typically greater than 6 weeks and is acknowledged at time of order.

Shipping -

All Starsys Orders (except Canadian orders) ship FOB: Wilkes-Barre, PA - InterMetro Industries utilizes air-ride carriers exclusively when shipping the Starsys product system domestically. In the case of customer arranged freight, the use of air-ride carriers is strongly recommended. InterMetro Industries is not responsible for freight damage incurred on customer arranged transportation. Canadian orders ship FOB: Missasauga, Ontario

Please Note - Pricing, descriptions, specifications, drawings, and all other information provided within this document are considered Confidential and intended for use solely by the designated party.

CUSTOMER APPROVED, SIGNED DRAWINGS ARE REQUIRED TO PROCESS A PURCHASE ORDER.

Qty	Part #	Description	Net Price	Extended	Lead Time
		Matthews -Cath Lab Supply Room Dwg# H 423-0415-Nov-79125-R3-OPTION 3			
		Starsys Tall Doublewide Mobile Tambour Door Units with Catheter Storage Modules and Polymer Shelves			

Territory Manager : 423 - Shaun Thomas

Quotation Prepared By: Emer Presas

WorkCenters Quotation: H 423-0415-Nov-79125-R3

Qty	Part #	Description	Net Price	Extended	Lead Time
2	SXRD83CM2P-TD	Dwg# C-148118	\$1,929.06	\$3,858.12	ATO
4	SXRCATH	Qty: 2 MBL TL DBL FLDP TMB DR BOTH	\$292.11	\$1,168.44	ATO
8	SXRPOLY	CATHETER STOR ASSY	\$44.94	\$359.52	ATO
		POLY SHELF SGL WD		\$5,386.08	
		Subtotal			
		Starsys Tall Triplewide Mobile Units with Wire Shelves & Dividers			
		Dwg# C-148120			
2	SXRTMEXBASE	Qty: 2 TRL WD MOB EXT BASE KIT	\$491.40	\$982.80	ATO
2	SXRTTALLTOP	TRL TOP KIT	\$239.40	\$478.80	ATO
2	SXRTEP67	67" TRL WD ENCLOSURE KIT	\$607.74	\$1,215.48	ATO
2	SXRQS64-4	64" SLTD PST INS KIT W/O PKG	\$80.64	\$161.28	ATO
10	SXRDWQ	FIXED DBL WD SHELF	\$54.39	\$543.90	ATO
		Tail Unit Left Bay			
2	SXRQS64-4	64" SLTD PST INS KIT W/O PKG	\$80.64	\$161.28	ATO
10	SXRDWQ	FIXED SGL WD SHELF	\$39.69	\$396.90	PTO
		Tail Unit Right Bay			
2	SXRQS64-4	64" SLTD PST INS KIT W/O PKG	\$80.64	\$161.28	ATO
10	SXRSWQ	FIXED SGL WD SHELF	\$39.69	\$396.90	PTO
		Accessories			
50	SXRSLFDIV8	8" WIRE SHF DIV	\$16.38	\$819.00	ATO
		Subtotal		\$4,759.44	
		Starsys Tall Singlewide Mobile Unit with (2) Catheter slides at the very top and (3) poly shelves at the bottom.			
		Dwg# H 423-0415-Nov-79125-R3-SW			
		Qty: 1			
1	SXRSMEXBASE	SGL MOB EXTENDED BASE KIT	\$295.26	\$295.26	ATO
1	SXRSTOP	SGL TOP KIT	\$158.76	\$158.76	ATO
1	SXRSEP67	67" SGL WD ENCLOSURE KIT	\$368.13	\$368.13	ATO
1	SXREHAN	EXT HANDLE ASSY	\$67.83	\$67.83	ATO
1	SXR67INPNL	67" INR PN/DRW STOP KIT	\$146.37	\$146.37	ATO
1	SXRDP-BL	PULL HDL DWR SLATE BLUE	\$1.89	\$1.89	ATO
3	SXRPOLY	POLY SHELF SGL WD	\$44.94	\$134.82	ATO
1	SXRDRB66L1BC	DR 66" CLR LH90 LK	\$274.05	\$274.05	ATO
1	SXRCATH-SHF	CATHETER SHELF ASSY	\$57.96	\$57.96	ATO
2	SXRCATHSLD	CATHETER STOR SLIDE	\$78.54	\$157.08	ATO
		Subtotal		\$1,662.15	
		Assembly Charges			
1	ASSEMBLY	ASSEMBLY / INSTALLATION CHARGE	\$1,490.06	\$1,490.06	
		Subtotal		\$1,490.06	

WorkCenters Quotation: H 423-0415-Nov-79125-R3

Qty	Part #	Description	Net Price	Extended	Lead Time
		Pricing & 90-Day Quote Expiration as per Concession # ST4230630 01KT			

Sub Total : \$13,297.73

GRAND TOTAL -----> \$13,297.73

Attachment B

FIRST CALL PARTS
 1351 Southside Drive
 Salem, VA 24153
 tel: 800.782.0003 fax: 540.375.6602



SALES QUOTE	
SQ-139440	4/24/2015



Customer	Contact	Ship To
Novant Health, Inc. Lynn Bridges Attn: Accounts Payable CEMP 1578 Roger Dale Carter Drive KANNAPOLIS NC 28081 UNITED STATES	Novant Health, Inc. Marty Haynes Asset Manager CEMP 1578 Roger Dale Carter Drive KANNAPOLIS NC 28081 Tel: (336)277-0260	

Account	Terms	Due Date	Account Rep	Schedule Date
10124	NET 30	5/24/2015	Timothy Smith	4/24/2015
Quotation	PO #	Reference	Ship VIA	Page Printed
SQ-139440				1 4/24/2015 1:17:14PM

L Item	Description	Qty	Price	UM	Discount	Amount
1MISC	De-installation and disposal of a Philips H3000	1	\$3,000.00	EA		\$3,000.00

<p>All parts are sold on an exchange basis unless otherwise specified at the time of sale. Please return your core exchange with a valid return material authorization form to prevent additional billing.</p> <p>Thank you for your purchase. Make checks payable to "First Call Parts, Inc." and remit to: 1351 Southside Drive Salem, VA 24153 (800) 782-0003</p> <p>No returns are permitted without a valid return material authorization number.</p>	Tax Details: EXEMPT \$0.000	Taxable	\$0.00
		Total Tax	\$0.00
		Exempt	\$3,000.00
		Total	\$3,000.00
		Balance	\$3,000.00

Attachment C

PROPOSED CAPITAL COSTS

Project Name: Relocate & Replace PMC Cath Lab #1 to MMC Cath Lab

July 6, 2015

Proponent: NH Matthews Medical Center

A. Site Costs

(1)	Full purchase price of land			\$	-
	Acres _____ Price per Acre			\$	-
(2)	Closing Costs			\$	-
(3)	Site Inspection and Survey			\$	-
(4)	Legal fees and subsoil investigation			\$	-
(5)	Site Preparation Costs	\$	-		
	Soil Borings	\$	-		
	Clearing Earthwork	\$	-		
	Fine Grade For Slab	\$	-		
	Roads Paving	\$	-		
	Concrete Sidewalks	\$	-		
	Water and Sewer	\$	-		
	Footing Excavation	\$	-		
	Footing Backfill	\$	-		
	Termite Treatment	\$	-		
	Sub-Total Site Preparation Costs			\$	-
(6)	Other (specify)			\$	-
(7)	Sub-Total Site Costs			\$	-

B. Construction Contract

(8)	Cost of Materials				
	General Requirements	\$	12,237.00		
	Concrete/Masonry	\$	-		
	Woods/Doors & Windows/Finishes	\$	26,070.00		
	Thermal & Moisture Protection	\$	-		
	Equipment/Specialty Items	\$	5,833.00		
	Mechanical/Electrical	\$	22,575.00		
	Other	\$	-		
	Sub-Total Cost of Materials			\$	66,715.00
(9)	Cost of Labor GC Labor			\$	8,803.00
(10)	Other - Permitting and Fees			\$	-
(11)	Sub-Total Construction Contract			\$	75,518.00

C. Miscellaneous Project Costs

(12)	Building Purchase			\$	-
(13)	Fixed Equipment Purchase			\$	647,235.00
	Other (Specify)			\$	-
(14)	Movable Equipment Purchase (\$62,376+60,430+29,767+13,298)			\$	165,871.00
(15)	Removal & Disposal of PMC Cath Lab #1			\$	3,000.00
(16)	Landscaping			\$	-
(17)	Consult Fees				
	Architect and Engineering Fees	\$	12,000.00		
	Market Analysis	\$	-		
	Other - (Specify)	\$	-		
	Sub-Total Consultant Fees			\$	12,000.00
(18)	Financing Costs (e.g. Bond Loan, etc)			\$	-
(19)	Interest During Construction			\$	-
(20)	Other Project Contingency			\$	13,500.00
	Other Permitting and Fees			\$	4,400.00
	Other Information Technology			\$	1,000.00
(21)	Sub-Total Miscellaneous			\$	847,006.00
(22)	Total Capital Cost of Project (Sum A-C above)			\$	922,524.00

*NOTE: Ballon Pump / \$62,376 + Work Station / \$60,430
 + Injector / \$29,767 + Work Center / \$13,298. See Attachments A + B.

Attachment D

Ec,a
Architecture, PC

June 25, 2015

Lisa Griffin
Manager, Certificate-of-Need/Business Planning
Novant Health, Charlotte, NC

Re: Presbyterian Hospital Matthews, Cath Lab Renovation

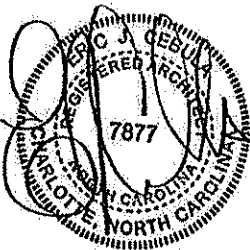
Dear Mr. Smith:

Ec,a Architecture has reviewed the proposal submitted by Revels Contracting Services, Inc. for the remedial construction of a 709 square foot Cath Lab renovation in the existing Presbyterian Hospital building in Matthews, North Carolina.

It is our opinion, that the scope of the work is adequate to complete the project as discussed and outlined by this proposal. Furthermore, the construction estimate of \$75,518 is reasonable, for the proposed scope of work for the project, when compared to other similar projects in North Carolina. The construction is estimated at \$75,518 and \$12,000 for A&E drawings for a total cost of \$87,518.

If you should have any questions regarding this project, please do not hesitate to contact me. Thank you.

Sincerely,



Eric Cebula, AIA

Ec,a Architecture, PC
Eric J. Cebula, AIA PO Box 30183 Charlotte, NC 28230
704.849.6748 (tel) 800.652.0689 (fax) 704.906.6752 (cell) eca-cebula@carolina.rr.com

Attachment E

Replacement and Relocation of Presbyterian Medical Center's Cath Lab #1 to Matthews Medical Center	EXISTING EQUIPMENT (PMC Cath Lab #1)	REPLACEMENT EQUIPMENT (MMC)
Type of Equipment (List Each Component)	Cath Lab	Cath Lab
Manufacturer of Equipment	Philips Medical	Siemens
Tesla Rating for MRIs	n/a	n/a
Model Number	Integris H3000	Artis One
Serial Number	30890370000411	n/a
Provider's Method of Identifying Equipment	Internal Asset Number	Internal Asset Number
Specify if Mobile or Fixed	Fixed	Fixed
Mobile Trailer Serial Number/VIN #	n/a	n/a
Mobile Tractor Serial Number/VIN #	n/a	n/a
Date of Acquisition of Each Component	1996	TBD
Does Provider Hold Title to Equipment of Have a Capital Lease?	Own	Own
Specify if Equipment Was/Is New or Used When Acquired	New	New
Total Capital Cost of Project (Including Construction, etc.) <Use Attached Form>	\$1,135,115	\$922,524
Total Cost of Equipment (CT Scanner)	\$885,115	\$647,235
Fair Market Value of Equipment	0	\$647,235
Net Purchase Price of Equipment	n/a	\$647,235
Locations Where Operated	PMC Cath Lab #1	MMC Cath Lab
Number Days In Use/To be Used in N.C. Per Year	365	365
Percent of Change in Patient Charges (by Procedure)	None	None
Percent of Change in Per Procedure Operating Expenses (by Procedure)	None	None
Type of Procedures Currently Performed on Existing Equipment	Cardiac Catheterization	n/a
Type of Procedures New Equipment is Capable of Performing	n/a	Cardiac Catheterization

Nelson Mullins

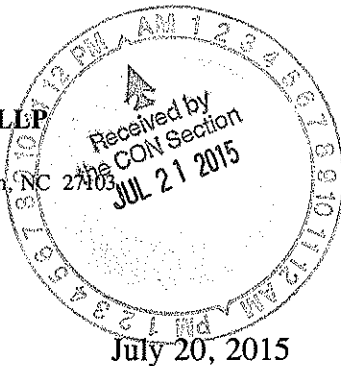
Nelson Mullins Riley & Scarborough LLP

Attorneys and Counselors at Law

380 Knollwood Street / Suite 530 / Winston-Salem, NC 27103

Tel: 336.774.3300 Fax: 336.774.3372

www.nelsonmullins.com



Denise M. Gunter

Tel: 336.774.3322

Fax: 336.774.3372

denise.gunter@nelsonmullins.com

Hand Delivered

Martha J. Frisone, Assistant Chief
North Carolina Department of Health and Human Services
Division of Health Service Regulation
Healthcare Planning and Certificate of Need Section
809 Ruggles Drive
Raleigh, North Carolina 27603

Re: Signed Capital Cost Sheet for Novant Health Matthews Medical Center
Replacement Cath Lab/Mecklenburg County/HSA III

Dear Martha:

Last Thursday, July 16, 2015, Novant Health Matthews Medical Center filed a replacement equipment exemption request to replace a Philips Integris cardiac cath lab with a Siemens Artis One cardiac cath lab. **Attachment C** to that letter is a capital cost sheet. We inadvertently omitted the signature page from the capital cost sheet. The original signature page is enclosed with this letter. We apologize for any inconvenience.

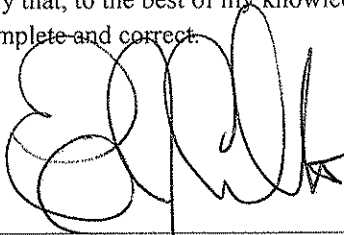
Thank you for your time and attention.

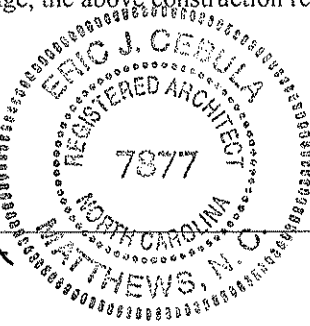
Sincerely,

Denise M. Gunter

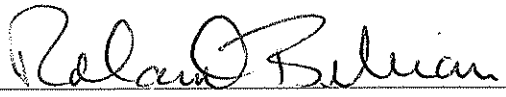
Enclosure

I certify that, to the best of my knowledge, the above construction related costs of the proposed project named above are complete and correct.


ERIC J. CEBULA
Signature of Licensed Architect



I assure to the best of my knowledge, the above capital costs for the proposed project area complete and correct and that it is my intent to carry out the proposed project as described.


Roland Belian
Proponent –Signature of Officer

President / COO NHMMC
Title of Officer