

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

Pat McCrory Governor Richard O. Brajer Secretary DHHS

Mark Payne, Director Health Service Regulation

August 19, 2016

Elizabeth Kirkman CHS Management Company 2709 Water Ridge Parkway, Suite 200 Charlotte, North Carolina 28217

Exempt from Review

Record #:

2033

Facility Name:

Carolinas Rehabilitation

FID #:

943092

Business Name:

The Charlotte-Mecklenburg Hospital Authority

Business #:

1770

Project Description:

Renovate C-unit and related space

County:

Mecklenburg

Dear Ms. Kirkman:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency), determined that based on your letter of August 15, 2016, the above referenced proposal is exempt from certificate of need review in accordance with G.S 131E-184(g). Therefore, you may proceed to offer, develop or establish the above referenced project without a certificate of need.

However, 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.

It should be noted that this determination is binding only for the facts represented by you. Consequently, if changes are made in the project or in the facts provided in your correspondence referenced above, a new determination as to whether a certificate of need is required would need to be made by the Agency. Changes in a project include, but are not limited to: (1) increases in the capital cost; (2) acquisition of medical equipment not included in the original cost estimate; (3) modifications in the design of the project; (4) change in location; and (5) any increase in the number of square feet to be constructed.



Healthcare Planning and Certificate of Need Section

Mailing Address: 2704 Mail Service Center • Raleigh, NC 27699-2704 An Equal Opportunity/ Affirmative Action Employer Ms. Elizabeth Kirkman August 19, 2016 Page 2

If you have any questions concerning this matter, please feel free to contact this office.

Sincerely,

Gloria C. Hale Project Analyst

Martha J. Frisond

Assistant Chief Certificate of Need

cc:

Construction Section, DHSR

Acute and Home Care Licensure and Certification Section, DHSR Paige Bennett, Assistant Chief, Healthcare Planning, DHSR



Carolinas HealthCare System

August 15, 2016

Ms. Martha Frisone, Assistant Chief Healthcare Planning and Certificate of Need Section Division of Health Service Regulation 809 Ruggles Drive Raleigh, NC 27603



RE: Request for Exemption from Review to Renovate Carolinas Rehabilitation C-unit and related space at The Charlotte-Mecklenburg Hospital Authority d/b/a Carolinas Rehabilitation

Dear Ms. Frisone:

I am writing to inform you of The Charlotte-Mecklenburg Hospital Authority d/b/a Carolinas Rehabilitation's (CR) plan to renovate its C-unit and related space.

Pursuant to N.C.G.S. 131E-184(g), "[t]he Department shall exempt from certificate of need review any capital expenditure that exceeds the two million dollar (\$2,000,000) threshold set forth in G.S. 131E-176(16)b. if any of the following conditions are met:

- (1) The sole purpose of the capital expenditure is to renovate, replace on the same site, or expand the entirety or a portion of an existing health service facility that is located on the main campus.
- (2) The capital expenditure does not result in (i) a change in bed capacity as defined in G.S. 131E-176(5) or (ii) the addition of a health service facility or any other new institutional health service other than that allowed in G.S. 131E-176(16)b.
- (3) The licensed health service facility proposing to incur the capital expenditure shall provide written notice to the Department along with support documentation to demonstrate that it meets the exemption criteria of this subsection."

N.C.G.S. 131E-176(14n) states "'Main campus' means all of the following for the purposes of G.S. 131E-184(f) and (g) only:

- a. The site of the main building from which a licensed health service facility provides clinical patient services and exercises financial and administrative control over the entire facility, including the buildings and grounds adjacent to that main building.
- b. Other areas and structures that are not strictly contiguous to the main building but are located within 250 yards of the main building."

CR's C-unit renovation project meets each of the applicable conditions set forth above. The estimated total capital cost of the project exceeds \$2,000,000 (see Exhibit 1 for a capital cost worksheet and a certified construction cost estimate). The proposed project involves the renovation of an existing health service facility located at 1100 Blythe Boulevard, Charlotte, NC 28203, which is the site from which CR provides clinical patient services and exercises financial and administrative control over the entire facility (see Exhibit 2). CR's administrator's office is located on the first floor of the main building. Please see a copy of CR's license in Exhibit 3.

The project consists of renovation only and does not involve a change in bed capacity as defined in G.S. 131E-176(5) or the addition of a health service facility or a new institutional health service. The project will not increase the number of operating rooms or gastrointestinal rooms. The project will not result in the acquisition of major medical equipment or the offering of health services not currently provided.

The project involves the renovation of space on the 2^{nd} floor of CR. All of the space is associated with CR.

2nd Floor Renovations

Rehabilitation services are located on the 1st and 2nd floor of CR. CR is one of the largest rehabilitation providers in the nation. CR offers a variety of condition-specific programs designed to speed recovery and regain the highest level of functioning; including brain injury, concussion, spinal cord injury and stroke. CR also offers a variety of services focused on treating virtually any type of condition requiring rehabilitation; including physical therapy, occupational therapy, speech therapy, wheelchair seating clinic, pediatric rehabilitation and audiologic rehabilitation, among others. The 2nd floor renovations will enhance the physical space and services of the unit.

CR C-unit currently includes 14 licensed rehabilitation beds as highlighted in blue on the Level 02-Existing Plan drawings in Exhibit 4. Once the proposed project is complete, C-unit will house 16 licensed beds. One licensed bed will be relocated from A-unit, room 2113 and a second licensed bed will be relocated from B-unit, room 2301. The total number of licensed beds at Carolinas Rehabilitation (70) will not change as a result of this project.

<u>Summary</u>

Based on the above facts, the project is exempt from certificate of need review. We are requesting that you confirm in writing that CR's C-unit renovation is exempt from certificate of need review and that we may proceed as planned with this project.

Sincerely,

Elizabeth Kirkman Assistant Vice President

CHS Management Company

Attachments

cc: Robert Larrison, President/Carolinas Rehabilitation

PROPOSED TOTAL CAPITAL COST OF PROJECT

Proje			CR FL1 C-NUR	SING UNIT RENO	NIE ROBERT LINE LAND LAND LAND LAND LAND LAND LAND LAND	
Provi	Provider/Company:		Carolinas Health	Care System		
A. S	Site Costs					
		Full purchase price				
	(1)	Acres	Price ner Acre	ф		
	(2)	Closing costs	Trice her Acre			
		Site Inspection ar	od Survey			. , , , , , , , , , , , , , , , , , , ,
			bsoil investigation			
			te Preparation Costs			
	151	Soil Borings	20010			
		Clearing-Earth	nwork			
		Fine Grade for	r Slab		·	
		Roads-Paving				••••
		Concrete Side	walks			
		Water and Sev	wer			
		Footing Excav	vation			
		Footing Backf	511			
		Termite Treats	ment			
		Other (Specify	v)			
		Sub-Total Site	Preparation Costs			No.
	(6)	Other (Specify)				
	(7)	Sub-Total Site C	losts			
B. Co	Const	ruction Contract				
	(8)	Cost of Materials				
		General Requi	irements			
		Concrete/Mase	onarv			
		Woods/Doors	& Windows/Finishes			
		Thermal & Mo	oisture Protection			
		Equipment/Sn	ecialty Items			<u> </u>
		Mechanical/El	lectrical			
		Other (Specify	<i>(</i>)			
		Sub-total Cost of	Materials			
	(9)	Cost of Labor				
ŧ	(10)	Other (Specify)				
((11)	Sub-Total Const	ruction Contract			\$2,300,000
C. N	Tisce	llaneous Proiect (Costs			
((12)	Building Purchase	e			
((13)	Fixed Equipment	Purchase/Lease			\$341.000
((14)	Movable Equipme	ent Purchase/Lease			\$82,00
((15)	Furniture				\$180.00
((16)	Landscaning				
((17)	Consultant Fees				
		Architect and	Engineering Fees		\$247,0	000
		Legal Fees				
	٠.	Market Analys	sis			
		Other (Specify	<i>/</i>)			
		Other (Abatem	nent)			
		Sub-Total Consul	tant Fees			\$247.000
((18)		e.g., Bond, Loan, etc.)			
) Interest During Construction				
		Other (Contingency)				\$300,000
		Sub-Total Miscellaneous				\$1.150.000
		2) Total Capital Cost of Project (Sum A-C above)				\$3,450,000

PROPOSED TOTAL CAPITAL COST OF PROJECT

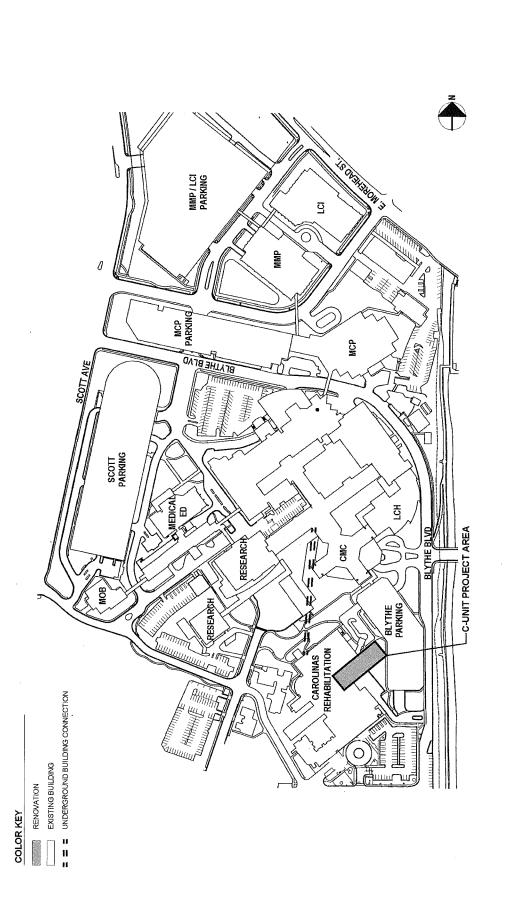
Project Name:

Provider/Company:

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

Richard D. Mack AIA NCARB NC License No. 5628

(Signature of Licensed Architect or Engineer)



CR C-UNIT RENOVATION



Carolinas HealthCare System

CMC SITE PLAN

12 AUGUST 2016

State of Aurth Carolina Aenartment of Kealth and Kuman Services Department of Health and Human Services Division of Health Service Regulation

Effective January 01, 2016, this license is issued to

The Charlotte-Mecklenburg Hospital Authority

to operate a hospital known as Carolinas Rehabilitation

located in Charlotte, North Carolina, Mecklenburg County.

This license is issued subject to the statutes of the State of North Carolina, is not transferable and shall remain in effect until amended by the issuing agency.

> Facility ID: 943092

License Number: H0071-C

Bed Capacity: 70 Rehabilitation 70,

Dedicated Inpatient Surgical Operating Rooms:

Dedicated Ambulatory Surgical Operating Rooms:

Shared Surgical Operating Rooms:

Dedicated Endoscopy Rooms:

Authorized by:

Secretary, N.C. Department of Nealth and **Human Services**



Director, Division of Health Service Regulation

EXISTING BUILDING PROPOSED WORK

COLOR KEY

CR C-UNIT RENOVATION

04 AUGUST 2016

Carolinas HealthCare System

-EVEL 02 OVERALL PLAN

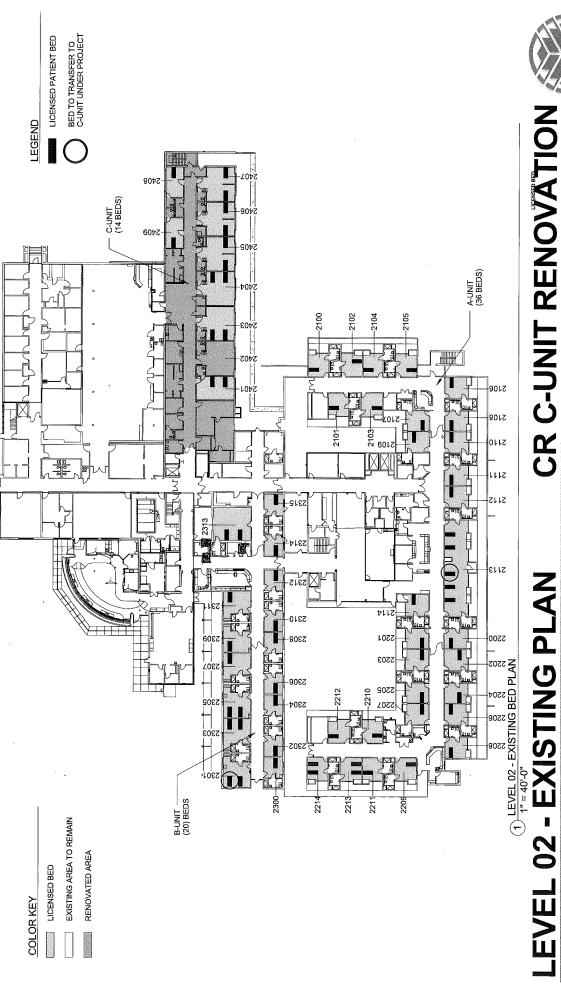
EXISTING BUILDING PROPOSED WORK COLOR KEY

CR C-UNIT RENOVATION

12 AUGUST 2016

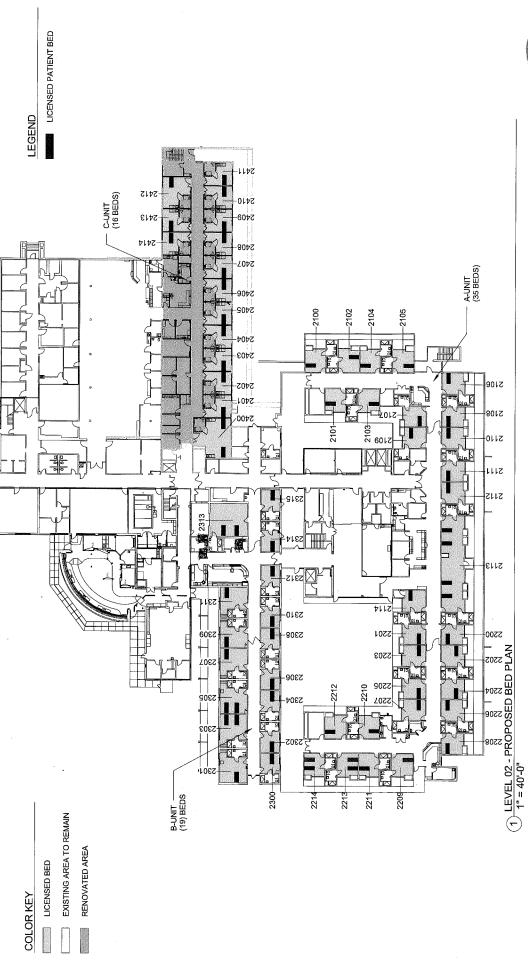
Carolinas HealthCare System

LEVEL 02 OVERALL PLAN



12 AUGUST 2016

Carolinas HealthCare System



Carolinas HealthCare System

LEVEL 02-PROPOSED BED PLAN CR C-UNIT RENOVATION

12 AUGUST 2016

Room Name ROOM NAME AND NUMBER DESIGNATION EXISTING TO REMAIN NEW CONSTRUCTION EXISTING DOOR NEW DOOR Ct.INICAL SUPE. ROOM **EXISTING BUILDING** erec: PROPOSED WORK LICENSED BED COLOR KEY ENEC CLST

NEW FLOOR PLAN LEGEND

CR C-UNIT RENOVATION LEVEL 02 PROPOSED PLAN

Carolinas HealthCare System

12 AUGUST 2016

