

## 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 23, 2016

Susan Fradenburg Smith Moore Leatherwood 300 N. Greene Street Greensboro NC 27401

No Review

Record #:

2036

Facility Name:

Hillcrest Raleigh at Crabtree Valley

FID #:

923281

Business Name:

Hillcrest Raleigh at Crabtree Valley, LLC

Project Description:

Decertification of 44 Medicaid beds

County:

Wake

Dear Ms. Fradenburg:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency) received your letter of August 10, 2016 regarding the above referenced proposal. Based on the CON law in effect on the date of this response to your request, the proposal described in your correspondence is not governed by, and therefore, does not currently require a certificate of need. However, please note that if the CON law is subsequently amended such that the above referenced proposal would require a certificate of need, this determination does not authorize you to proceed to develop the above referenced proposal when the new law becomes effective.

However, you need to contact the Agency's Nursing Home Licensure and Certification Section 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 in your correspondence. 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 this office. 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.

Please contact this office if you have any questions. Also, in all future correspondence you should reference the Facility ID # (FID) if the facility is licensed.

Sincerely,

Michael J. McKillip

Project Analyst

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Martha J. Frisone

Assistant Chief, Certificate of Need

cc:

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

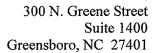
Healthcare Planning and Certificate of Need Section

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

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23





August 10, 2016

Via E-Mail and Federal Express
Martha Frisone, Assistant Chief
N.C. Department of Health and Human Services
Division of Health Service Regulation
Certificate of Need Section
809 Ruggles Drive
Raleigh, N.C. 27603



RE: Exempt from Review/Hillcrest Raleigh at Crabtree LLC d/b/a Hillcrest Raleigh at Crabtree Valley located in Raleigh, North Carolina/decertification of 44 Medicaid beds

### Dear Martha:

We represent Hillcrest Raleigh at Crabtree Valley ("HRC"). HRC will be submitting documentation to Edna Knight with the Nursing Home Licensure and Certification pertaining to a decertification of 44 Medicaid beds effective 10/1/2016. Pursuant to our discussion with Ms. Knight, and at her request, we are also submitting this exempt from review notice.

HRC operates a 134 bed skilled nursing facility at 3830 Blue Ridge Road, Raleigh, NC, Facility I.D. #923281, License #NH0428. HRC currently has 94 beds that are Medicaid certified. HRC proposes to decertify 44 of the 94 Medicaid beds, leaving 50 Medicaid beds at the facility. There is no change in the current total bed count.

HRC purchased this facility in July of 2015. Prior to the purchase of the facility it received a notice of exemption finding from the CON. See Exhibit 1. The CON for this facility was originally issued in 1986 to Blue Ridge Nursing Home for 98 intermediate care beds and 40 skilled nursing beds. See Exhibit 2. Based on our review of earlier statutory language and the State Medical Facilities Plans, it appears that between 1991 and 1992 the SMFP stopped breaking up nursing facility beds by SNF/ICF designations, counting all the beds simply as "Nursing Facility" beds. See Exhibit 3, 1991 and 1992 SMFP excerpts. Pursuant to the change in the statutory language, as recognized by the SMFP, Blue Ridge nursing home, (now HRC) would be deemed approved for 138 nursing facility beds. There is no reference in the CON condition for this project regarding the number of beds that must be Medicaid certified. We have been unable to locate any additional CON's being issued for this property since 1986.

HRC currently has 48 Medicaid residents. HRC will be able to continue to serve the existing Medicaid residents, even after the 44 beds are decertified. HRC remains in material compliance with the CON issued in 1986 and the decision to decertify 44 Medicaid beds is not

Martha Frisone, Assistant Chief August 10, 2016 Page 2

governed by and does not require a certificate of need. We would appreciate it if you would, at your earliest convenience, provide us with a letter recognizing that the proposed action is exempt from certificate of need review.

If you have any questions or need any additional information from us, please do not hesitate to call.

Sincerely,

SMITH MOORE LEATHERWOOD LLP

Susan M. Fradenburg by Course a. Hangu witho

Enc.

### Exhibit 1



# 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

March 5, 2015

Susan M. Fradenburg Smith, Moore, Leatherwood, LLP 300 N. Greene Street, Suite 1400 Greensboro NC 27401

Exempt from Review - Acquisition of Facility

Facility:

Crabtree Valley Rehab Center

Type of Facility:

**Nursing Facility** 

Acquisition by:

Hillcrest Raleigh at Crabtree

County:

Wake

FID #:

923281

Dear Ms. Fradenburg:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency) determined that based on your letter of February 20, 2015, the above referenced proposal is exempt from certificate of need review in accordance with G.S 131E-184(a)(8). Therefore, Hillcrest Raleigh at Crabtree may proceed to acquire the above referenced health service facility without first obtaining a certificate of need. However, you need to contact the Agency's Nursing Home Licensure and Certification Section to obtain instructions for changing ownership of the existing facility. Note that pursuant to G.S. 131E-181(b): "A recipient of a certificate of need, or any person who may subsequently acquire, in any mamer whatsoever permitted by law, the service for which that certificate of need was issued, is required to materially comply with the representations made in its application for that certificate of need."

It should be noted that this 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 Agency and a separate determination. If you have any questions concerning this matter, please feel free to contact this office.

Sincerely.

Michael J. McKillip

Project Analyst

Martha J. Frisone,/

Assistant Chief, Certificate of Need

cc:

Nursing Home Licensure and Certification Section, DHSR

Assistant Chief, Healthcare Planning

Healthenre Planning and Certificate of Need Section

www.nedhhs.gov

Telephone: 9.19-855-3873 • Fax: 919-733-8139 Location: Edgerton Building • 809 Ruggles Drive • Raleigh, NC 27603 Mailing Address: 2704 Mail Service Center • Raleigh, NC 27699-2704

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cent. file

State Of

# orth Carolina Bepartment Of Human Resources con 4212

Division Of Facility Services Certificate Of Need

roject ide	entification Number	-86 ' '	Effective Date	August 29,	1986
ssued to:	Rachel A. Brantley				
30000 100	4809 North Boulevard				
	Raleigh, North Carolina	27604	······		

The North Carolina Department of Human Resources, pursuant to the North Carolina Health Planning and Resource Development Act of 1978, G.S. § 131-175, et seq., as amended and recodified, G.S. §131 E-175, et seq., hereby finds and certifies that the new institutional health service proposed by the person listed above is consistent with, or as conditioned is consistent with the plans, standards, and criteria prescribed by the Act and the rules and regulations promulgated thereunder. The findings of the Department are attached hereto and incorporated by

This Certificate affords the person listed above the opportunity to proceed with development of the proposed new institutional health service in a manner consistent with the plans, standards, and criteria prescribed by the Act and the rules and regulations promulgated thereunder. This Certificate includes and is limited to:

SCOPE:

See Reverse Side

CONDITIONS:

See Reverse Side

PHYSICAL LOCATION: Blue Ridge Nursing Center will be constructed on property located adjacent to the existing Glenwood Hills Nursing Home on Blue Ridge

Road in Raleigh, N. C. MAXIMUM CAPITAL EXPENDITURE:

\$2,375,000

TIMETABLE Completion of final drawings & specification - October, 1986

Contract Award - October, 1986

50% Completion of Construction - April, 1987

Completion of Construction - September, 1987

Occupancy/Offering of Service - October, 1987 FIRST PROGRESS REPORT DUE: April 30, 1987

This Certificate is limited to the person listed above and is not transferable or assignable. This Certificate may be withdrawn as provided in G.S. \$131 E-189, and the rules and regulations promulgated thereunder.

issuance of this Certificate does not supplant provisions or requirements embodied in codes, ordinances, statutes other than G.S. \$191E-175, et seq., rules regulations or guidelines administered or enforced by municipal, state or federal agencies or the agent thereof.

> Chief, Certificate of Need Section Division of Facility Services

DFS-8001 (Rev. 3/85)

### SCOPE:

Replace and Relocate 30 ICF beds presently located at Glerwood Hills Nursing Home and 108 ICF beds presently located at Knollwood Manor Nursing Home to a combined 138 bed facility with 40 skilled nursing beds and 98 intermediate care beds. At the conclusion of this project the existing Glerwood Hills Nursing Home and the existing Knollwood Manor Nursing Home will no longer operate as health care facilities without subsequent Certificate of Need review.

### CONDITIONS:

- 1. The 138 beds will be licensed 40 SNF/98 ICF instead of 138 beds requested in application.
- 2. The proponent shall acknowledge acceptance of and compliance with the condition stated herein to the CON Section by 5:00 p.m. on August 28, 1986.

Condition #2 was met August 13, 1986.

State O

# North Carolina

# Pepartment Of Human Resources con 4113, Division Of Facility Services

# Certificate Of Need

Project Ide	entification Number <u>J-2666-86</u>	. Effective Date	August 29, 1986
Issued to:	Blue Ridge Nursing Home, Inc.	اد است	•
,504,604 (51	4809 North Boulevard	- · · · · · · · · · · · · · · · · · · ·	•
	Raleigh, North Carolina 27604		, -

The North Carolina Department of Human Resources, pursuant to the North Carolina Health Planning and Resource Development Act of 1978, G.S. § 131-175, et seq., as amended and recodified, G.S. §131E-175, et seq., hereby finds and certifies that the new institutional health service proposed by the person listed above is consistent with, or as conditioned is consistent with the plans, standards, and criteria prescribed by the Act and the rules and regulations promulgated thereunder. The findings of the Department are attached hereto and incorporated by reference.

This Certificate affords the person listed above the opportunity to proceed with development of the proposed new institutional health service in a manner consistent with the plans, standards, and criteria prescribed by the Act and the rules and regulations promulgated thereunder. This Certificate includes and is limited to:

SCOPE:,

Operate 98 intermediate care beds and 40 skilled nursing beds in a facility constructed by Rachel A. Brantley (J-2667-86) which replaces beds presently located at Glenwood Hills Nursing Center and Knollwood Manor Nursing Center.

CONDITIONS:

See Reverse Side

PHYSICAL LOCATION: Blue Ridge Road adjacent to existing Glenwood Hills Nursing Center, Raleigh, N. C.

MAXIMUM CAPITAL EXPENDITURE: \$540,000 ... \$540,000 ...

TIMETABLE: Occupancy/Offering Service: October, 1987

FIRST PROGRESS REPORT DUE:

October 31, 1987

This Certificate is limited to the person listed above and is not transferable or assignable. This Certificate may be withdrawn as provided in G.S. \$1315-189, and the rules and regulations promulgated thereunder.

Issuance of this Certificate does not supplant provisions or requirements embodied in codes, ordinances, statutes other than G.S. §131E-175, et seq., rules regulations or guidelines administered or enforced by municipal, state or federal agencies or the agent thereof.

Chief, Certificate of Need Section

### CONDITIONS:

- 1. The 138 beds will be licensed 40 SNF and 98 ICF instead of 138 ICF beds requested in the application.
- 2. The proponent shall not exceed the Department of Human Resources, Division of Medical Assistance's patient care rates established for the Medicaid program, the Blue Cross/Blue Shield rates established for the Medicare program, or the per diem charges projected in the certificate of need application, including private pay rates, whichever is less for a period of at least two years following certification of the facility.

Additionally, the proponent shall submit the patient per diem charges for each source of patient payment to the CON Section on June 30th and December 31st of each of the two years following certification of the beds in the facility.

3. Further, the proponent shall acknowledge acceptance of and compliance with all conditions stated herein to the CON Section by 5:00 p.m. on August 28, 1986.

Condition #3 was met August 13, 1986.

# 1991 STATE MEDICAL FACILITIES PLAN

Effective January 1, 1991

Prepared by
State Health Planning
Division of Facility Services
NC Department of Human Resources

Under the direction of the North Carolina Health Coordinating Council

For information or copies, contact State Health Planning Division of Facility Services 701 Barbour Drive Raleigh, North Carolina 27603 (919) 733-4130

Table 8A. Inventory of Nursing Home Beds (March 31, 1990)

COUNTY	FACILITY NAME	SKILLED	BEDS ·	TOTAL
~				
Rowan	Autumn Care of Salisbury	30	47	77
	Brian Center Nursing Care/Salisbury	116	69	185
	JoLene's Nursing Home, Inc.	41	17	58
1	Lutheran Nursing Homes, Inc.	60.	25	85
	Meridian Nursing Center - Salisbury	50	50	100
	Spencer Nursing Home	30	40	70
	Big Elm Nursing Center	30	.47	77
				,
Rutherford	Haven in the Hills, Inc.		22	22
	Rutherford County Convales. Ctr.	50		50
·	The Woodlands	108	42	150
	Edgewood Nursing Center	30	30	. 60
Sampson	Mary Gran Nursing Center	120	62	182
Scotland	Century Care of Laurinburg, Inc.		74	74
	Scotia Village	.20		20
0	D. M. L.	60	60	120
Stanly	Britthaven of Piedmont	54	22	76
	Lutheran Nursing Homes, Inc. Stanly Manor	30	30	60
	Starily Marior			
Stokes	Guardian Care of Walnut Cove	60	30	90
Olukos				
Surry	Guardian Care of Elkin	50	50	100
,	Surry Community Nursing Center	60	60	120
			·	``
Swain	Mountain View Manor Nursing Center	41	79	120
			;	
Transylvania	Brian Center Health & Retirement/			
	Brevard	106	41	147
Ţ				
Union	Autumn Care of Marshville	40	40	80
	Guardian Care of Monroe	33	114	147
,				
Vance	Guardian Care of Henderson		80	80
	Pine Haven Convalescent Center of			E 0
	Henderson, Inc.		52	52
	-		0.0	420
Wake	Blue Ridge Manor	40	98	138
	Brian Center Nursing Care/Raleigh	84	41	125
	Britthaven of Raleigh	94	26	120

Table 8A. Inventory of Nursing Home Beds (March 31, 1990)

		<u> </u>	1	
COUNTY	FACILITY NAME	SKILLED	BEDS INTERMEDIATE	TOTAL
Wake	Ina r b Man in it of the			
(Continued)	Dan E. & Mary Louise Stewart Health Center of Springmoor Life &			
	Retirement Community	48	48	96
	Guardian Care of Zebulon	60		60
	Hillhaven Convalescent Center	116	58	174
	Hillhaven Sunnybrook Convales. Ctr.	51	75	126
	Kinton Nursing Home Inc.  Mayview Convalescent Center	100	49	49
	mayview Convaiescent Center	139		139
Warren	Warren Hills, A Personal Care and			
	Nursing Facility	48	52	100
  Washington	Distribution Number Contra		,	
Washington	Plumblee Nursing Center	23	41	64
Watauga	Glenstone Health Care	50	54	104
Wayne	Britthaven of Goldsboro	111	53	164
	Guardian Care of Goldsboro	49	33	49
	Medical Park Nursing Center	75	75	150
Wilkes	Delthouse of Millions			
AAIIKEZ	Britthaven of Wilkesboro, Inc. Vespers Nursing Home	98	58	156
	vespers registing notite	66	54	120
Wilson	Wilson Convalescent Center, Inc.	46		4.6
	NC Special Care Center *	109	99	208
	Westwood Manor Nursing Center	60	50	110
Yadkin	Yadkin Nursing Care Center	63	84	147
	3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3		04	14/
Yancey	Yancey Nursing Center	60	60	120
	TOTAL	13,114	13,357	26,471

\* Not included in county inventory.

# 1992 STATE MEDICAL FACILITIES PLAN

Effective January 1, 1992

Prepared by Medical Facilities Planning Section Division of Facility Services NC Department of Human Resources

Under the direction of the North Carolina Health Coordinating Council

For information or copies, contact Medical Facilities Planning Section Division of Facility Services P. O. Box 29530 Raleigh, North Carolina 27626-0530 (919) 733-4130

Table 8A: Inventory of Nursing Home and Hospital Long-Term Care Beds (May 7, 1991)

County	Enailly, N	inventory of Long-Term Nursing Care Beds*								TOTA
County	Facility Name	1 '		Lic. Beds Total		CON Apved/ Available		TOTAL	EXCLU	
	-	in N.H.	in Hos	p. j Lic	censed	Lic. Pendin	in SMFP	AVAILABL	SIONS	INVENTO
Wake	Bbel Health Care		•							
,	Blue Ridge Manor	13		0		5		, 6	- }	
	Brian Center Nursing Care/Raleigh	12		0	138			13		1:
	Britthaven of Raleigh .	12		0	120			12	_ <del></del>	1:
	Cary HealthCare Center		0	0	. 0	121		18	<del>- N</del>	11
	Dan E. & Mary Louise Stewart		·					16.	-	1:
	Health Center of Springmoor			1						
	Life & Retirement Community	13		0	135			. 135	13	5
	Glenaire			0	0	2 (		20		
•	Guardian Care of Zebulon Hillhaven Convalescent Center	6		0	6.0	.0.		6.0		6
. '	Hillhaven Sunnybrook Convales, Ctr.	17			174	0		174		
	Kinton Nursing Home	12		0	126	0		126		
'	Mayview Convalescent Center	13:		0	139	0	<u> </u>	49	<del>-</del>	<u> </u>
	Quality Link/Gamer	, , ,		<u> </u>	138	120	· · ·	139		<del>}}</del>
	Rex Healthcare Services			-	0	120		120	-	17
	Southern Wake Hospital				1.6			120	<b>1</b>	<u> </u>
·	Wellington Health Care Group, Ltd.	C		0	0	8 0		80	4	<del>}</del>
TOTALS	•	1066	1	6	1082	588	70	1740	-	II
Warren										
	Warron Hills, A Personal Care and Muraing Facility									
TOTALS	Accessing Pacing	100		AND DESCRIPTION OF	100	0		100		10
		•			108	0	2.0	120	0	12
Washington	Plumblee Nursing Center	. 64		.]	6.4	0	-			_
	Powell-Roberson .	0	<del></del>		0	30		64 30	0	6
TOTALS		6 4			64	3 0	10	104		3 (
									30	
Vateuga	Slowing Hock Hospital		7.2		7.2	0		72	0	•
TOTALS	Girnatone Heatth Care	104	0		104	0		104	0	10
		104	7.2		376	0	0	176	<b>*********</b>	77
Vayne	Britthaven of Goldsboro	164					1			
_	Cherry Hospital**	8	66**	<del> </del>	66**	0		164	0	164
	Guardian Care of Goldsboro	4 9	0	<b> </b>	49	- 8		66** 4 9	0	
·	Medical Park Nursing Center	150	0		150	ō		150	0	150
· '.	Nurse Care	60	Đ		6.0	0		6 0	0	6 (
TOTAL	O'Berry Center**	. 0	34**		34**	0		34**	0	0
TOTALS		423	0		423	0	0	423	٥	423
/likes	Bowman-Richardson Hith, Care									
	Britingen of Wilkesborg	156	0		•	6.1		61	0	6 1
	Emerant Health Care of Wilkes	0		***	156	6 8 1		156	0	156
	Vespers Nursing Home	120	Ø		128	0		120	0	61
	Wilkes General Hospital	0	0		٥	10		10	10	120
TOTALS		276	0		275	132	0	408	1.01	398
	D-1 0									
	Brian Center Health & Ret./Wilson NC Special Care Center**	9 9	0		8.9	0		9 9	0	9 9
	Triangle East Healthcare	208**		2	08**	0		208**	0	. 0
	Westwood Manor Nursing Center	110	0	<del></del>	0	50		60	0	60
	Wilson Convalescent Center	46			110	0		110	0	110
TOTALS		255	0	. :	255	50	0	315	0	46
								913	U	315
~~~~~~~ <del>~</del>	foots Memorial Hospital	0	4		4	0			all	9
	fædkin Nursing Gare Center	147	0			0.		147	ō.	147
TOTALS		147	•		& 8J 🔉	0	0	151	4	1.47
ncev Y	Janaar Mussing Conta-		_							
TOTALS	ancey Nursing Center	120	- 0	**********	20	0		120	0	120
		120	0 -		20	0	0	120	0	120
				*******					, 	
G	HAND TOTALS	28,550	1,489	30,0	20	6,450	1,644	38,133		35.743

Designation of "Skilled" and "intermediate" nursing no longer given.

<sup>\*\*</sup> State Psychiatric Hospitals and Mental Retardation Centers are not counted in the County and State Totals.