

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

Pat McCrory Governor Richard O. Brajer Secretary DHHS

Mark Payne Assistant Secretary for Audit and Health Service Regulation

January 21, 2016

Jazett Shivers 704 WH Smith Boulevard Greenville, NC 27834

No Review

Record #:

1837

Facility Name:

Carolina Digestive Diseases, PA

FID #:

080081

Project Description:

Change in ownership interest

County:

Pitt

Dear Ms. Shivers:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency) received your letter of January 15, 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 Acute and Home Care 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.



Ms. Shivers January 21, 2016 Page 2

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,

Jane Rhoe-Jones
Project Analyst

Martha J. Frisone,

Assistant Chief, Certificate of Need

cc:

Acute and Home Care Licensure and Certification Section, DHSR



Fax Cover Sheet

1 //1 =====) == / 1/4	- P118 [14]
To: Jane Rhoe- Jones Fax: 919	-715-4413

From: Jarett Shivers Date: 1/15/16

RE: Change of Dunoronip _ Pages: # 1 to follow cover

Notes: No Review letter

Please see the following letter of no

review.

Hard copy to follow in the mail

Please Expedite!



Note: The information contained in this facsimile may be privileged and confidential and protected from disclosure. This information is intended only for the use of the individual of entity named above. The authorized recipient of this information is prohibited from disclosing this information to any other party and is required to destroy the information after its stated need has been fulfilled, unless otherwise required by state law. If the reader of this facsimile is not the intended recipient, you are hereby notified that any reading, dissemination, distribution, copying, or other use of this facsimile in error, please notify the sender immediately by telephone at (252) 758-8181 and destroy this facsimile. Thank you.

HTPAA Document 14
Revised 06/21/2010

Received by
20 2016
Healthcare Planning



Phillip J. Goldstein MD . Stefan P. Marcyard

January 15, 2016

RE: Letter of No Review for Change of Ownership

Carolina Digestive Diseases, PA

CON TD #Q-7770-06

We are requesting a change of ownership for our endoscopy center, as named above. Dr. Stefan Marcuard has been the owner of the center, but he has sold his share of the practice to his partner physician on staff, Dr. Phillip Goldstein, effective January 1, 2016.

There will be no change at all in our day to day operations of our facility. We have only 2 operating endoscopy rooms, as per our original CON, and there have been no equipment additions. The only change that has occurred is the name of the owner, who is now Dr. Phillip Goldstein.

Please respond with confirmation that this is in fact a no review. We would like to have this request expedited as well

Thank you for your time and assistance in this matter,

Jazet Shivers, Administrator Carolina Digestive Diseases, PA