

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

Roy Cooper Governor

Dempsey E. Benton Interim Secretary DHHS

Mark Payne, Director Health Service Regulation

January 23, 2017

Ruth C. Schwartz 12900 Foster, Suite 400 Overland Park, KS 66213

Exempt from Review - Acquisition of Facility

Record #:

2145

Facility Name:

Columbus County Home Health Agency

Type of Facility: Home Health

FID #:

943686

Acquisition by:

KAH Development 14, LLC

Business #:

2556

County:

Columbus

Dear Ms. Schwartz:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency) determined that based on your letter of January 19, 2017, the above referenced proposal is exempt from certificate of need review in accordance with N.C. Gen. Stat. §131E-184(a)(8). Therefore, KAH Development 14, LLC 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 Acute and Home Care Licensure and Certification Section to obtain instructions for changing ownership of the existing facility. Note that pursuant to N.C. Gen. Stat. §131E-181(b): "A recipient of a certificate of need, or any person who may subsequently acquire, in any manner 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

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

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

Sincerely,

Tanya S. Rupp Project Analyst Martha J. Frisone

Assistant Chief, Certificate of Need

cc:

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





January 19, 2017

Ms. Tanya Rupp, CON Project Analyst, Via Email Address: Tanya.Rupp@dhhs.nc.gov
Ms. Veronica Moore, Support Staff, Via Email Address: Veronica.Moore@dhhs.nc.gov
Division of Health Service Regulation
Healthcare Planning & Certificate-of-Need Section
North Carolina Department of Health & Human Services
809 Ruggles Drive, Edgerton Building
Raleigh, NC 27603

RE:

Transfer of Ownership Notice –
Columbus County Home Health Agency
706 North Thompson St.
Whiteville, NC 28472-3602
Facility ID: 943686

Facility ID: 943686 License #: HC0492

Dear Ms. Rupp:

Please accept this written request for a determination of exemption from certificate-of-need review in accordance with N.C.G.S. 131E-184(a)(8) for the acquisition of an existing health care facility providing home health care services.

Columbus County Home Health Agency owns and operates a state-licensed and Medicare-approved home health agency located at the above address. Through a limited asset purchase transaction, KAH Development 14, LLC, a Kindred Health Care subsidiary, ("Buyer") will assume ownership and file all applicable state license and Medicare certification change of ownership forms with the Department's Acute & Home Care Licensure & Certification Section.

Pending execution of an asset purchase agreement and receipt of the required regulatory approvals, the Buyer will continue operating the health care facility in Columbus County. The proposed transfer of ownership is expected to be completed on or around April 1, 2017.

Whereas the proposed transfer of ownership will not constitute the development of a new institutional health service or in any way materially affect the State Health Plan, I am respectfully requesting your office to issue an exemption from certificate-of-need based on the facts represented in this letter. Please forward your response to the undersigned at your earliest convenience via email or fax. Thanking you in advance for your time and assistance in this matter.

Best Regards,

Ruth C. Schwartz

Assistant Vice President, Licensing & Certification

Kindred at Home

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