

## DEPARTMENT OF HEALTH AND HUMAN SERVICES DIVISION OF HEALTH SERVICE REGULATION

ROY COOPER GOVERNOR MANDY COHEN, MD, MPH SECRETARY

> MARK PAYNE DIRECTOR

May 31, 2017

Tracey C. Cosby 115 Perimeter Center Place NE, Suite 600 Atlanta, GA 30346

No Review

Record #:

2282

Facility Name:

Gateway Health and Rehabilitation

FID #:

923160

**Business Name:** 

Gateway HealthCare, LLC

Business #:

2657

Project Description:

Delicense 18 existing adult care home beds and convert nursing facility

semi-private rooms to private rooms with no change in the number of

licensed nursing facility beds (100)

County:

Caldwell

Dear Ms. Cosby:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency) received your letter of May 22, 2017 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 Adult Care Home Licensure and Nursing Home 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 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

## HEALTHCARE PLANNING AND CERTIFICATE OF NEED SECTION

WWW.NCDHHS.GOV TELEPHONE 919-855-3873

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

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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,

Julie Halatek

Project Analyst

Chi Halath

Martha J. Frisone

Chief, Healthcare Planning and Certificate of Need

cc:

Nursing Home Licensure and Certification Section, DHSR

Adult Care Licensure Section, DHSR

Paige Bennett, Assistant Chief, Healthcare Planning, DHSR

May 22, 2017

## **VIA FEDERAL EXPRESS**

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



Re:

Gateway Rehabilitation and Healthcare - Caldwell County

**Exemption from Review** 

Dear Ms. Frisone:

I am writing on behalf of Gateway HealthCare, LLC d/b/a Gateway Rehabilitation and Healthcare ("Gateway"), located at 2030 Harper Avenue, NW, Lenoir, NC 28645-4953, which is licensed for 100 skilled nursing ("SNF") beds and 18 adult care home ("ACH") beds.

Gateway wishes to delicense its 18 ACH beds, reducing its total licensed capacity from 118 beds to 100 skilling nursing facility beds. This change will allow Gateway the space to convert its semi-private SNF beds to private SNF beds ("Conversion"). The Conversion does not involve the development of a new institutional health service or an acquisition, and is expected to involve an expenditure of approximately \$100,000. We understand the Conversion is not an activity requiring a CON or CON review and does not require any additional filings with your office.

We respectfully request a letter of exemption from North Carolina's Certificate of Need section for the proposed change in licensed beds, detailed above.

Thank you for your attention to this matter. If you have any questions, please do not hesitate to contact me at (770) 730-1103 or tracey.c.cosby@consulatehc.com.

Sincerely,

Tracey C. Cosby

**VP Regulatory Support Services** 

cc:

Luther Fritts, NHA Beverly Speroff Qwonthafia C. Jones Jessica Tobin Grozine

Grant Johnson